

Perceived accreditation benefits, participation and organizational commitment in hospital accreditation performance

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ABSTRACT

Good perceptions on accreditation have an important role to play in achieving five-star accreditation and continuous implementation of accreditation. In the pre-survey, we found that the problem, a low perceived accreditation benefits, participation, and organizational commitment, as well as employees' performance of the accreditation process that did not meet the target. The purpose of this study was to analyze the impact of the perceived benefits of accreditation on the performance of employees in the accreditation process. The research method used was a causal analysis study with a cross-sectional quantitative approach and a path analysis hypothesis test. The sample was taken by means of an objective sampling of X mother & children hospital (*Rumah Sakit Ibu dan Anak/RSIA*) health personnel. The results found that the perception of the benefits of accreditation had a positive and significant effect through mediation of participation and commitment to performance. The impact of the perceived benefits of accreditation, participation and organizational commitment on employee performance is 46.9%. This research implies for hospital management to optimize the performance of the accreditation process by increasing the perception of the benefits of accreditation through training, sharing, assessment, award and monitoring and evaluation involving all employees.

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1. INTRODUCTION

Hospital is a health service institution that plays an important role in improving communities' quality of life. Quality of service and patient safety are the main principles to carry out hospitals function. Process of improving quality and patient safety should be continuous and always comply with global developments. Therefore, Indonesia establishes a comprehensive accreditation standard to be performed equally in every hospita [1].

Hospital accreditation is a compulsory program that is carried out on a periodic basis for at least four years in accordance with the Law of the Republic of Indonesia No 44 of 2009 and Regulation of the Minister of Health No 12 of 2020. Accreditation acts to ensure service quality, patient safety, community care and professionalism improvement [2]. Accreditation standards are not as simple as they seem. The sustained and continuous process of implementing accreditation standards is very important to create hospital services that show high quality and patient safety. The implementation of appropriate accreditation standards has great benefits for hospitals, especially in involving patients and families as partners in the treatment process, which can increase public trust [3].

Accreditation is a formal process conducted by a non-profit institution to review and assess health care organizations compliance with a set of predetermined service standards [4]. Indonesia has accredited hospitals since 1998, which have been run by the Hospital Accreditation Commission (*Komisi Akreditasi Rumah Sakit/KARS*). The accreditation process in Indonesia is carried out through a three-day field survey that evaluates all hospital documentation, implementation, and real-time activities quality assessment [1]. A continuous practice of service that complies on accreditation standard is a goal that needs to be achieved by involving all hospital employees to achieve better quality of care and patient safety.

The relation between perceptions of accreditation, participation and commitment has an important role to play in the continuity of the implementation of accreditation and employees' performance in improving quality health services. The results of previous studies show the impact of the perceived benefits of accreditation on the performance of employees mediated by participation and organizational commitment [5]–[8]. Other research findings also show a partially significant effect between participation, organizational commitment and perceptions in correlations to employee performance [9]–[13]. This study describes the perceived benefits of all aspects of health personnel at hospitals and evaluates the effect of perceptions, participation, and commitment levels on hospital accreditation performance directly and partially.

This research was conducted at the X mother & children hospital (*Rumah Sakit Ibu dan Anak /RSIA*), in South Jakarta, Indonesia. The hospital has never achieved five stars/*paripurna* accredited since its founding in 2009. When this study was conducted, the third accreditation that RSIA X gone through in 2019 only achieved the middle level (three stars/*madya*) of accreditation. The most recent accreditation results showed a value below 82.5 in several standards, with 40% input on facilities and documentation emphasize by surveyors. Based on interviews with the RSIA X Accreditation Team leader, low evidence of implementation evaluation and consistency of implementation has been exacerbated by employees' bad perception of accreditation which might contributed to the final accreditation results that shows a low quality of service and patient safety culture.

Preliminary observations with questions on the effect of accreditation on service quality, performance and development showed that 40% of employees thought that accreditation had no effect on service quality, 50% of employees thought accreditation had no effect on self-development, while 50% of employees stated accreditation was an aggravation. Accreditation participation at RSIA X through a preliminary study found that 70% of employees did not engage in the improvements that accreditation provides, 60% of employees did not participate in the process and 80% of employees did not have any ideas in the accreditation process. Though, in general, it gives a picture of low participation.

The provisional description of the organizational commitment in the RSIA X accreditation process shows that 70% prefer not to be included in the hospital accreditation process, that 60% of employees were not happy to work in the hospital during the accreditation process, that 70% of employees did not carry out the accreditation tasks in accordance with that framework and that they could generally work in the hospital during the accreditation process. These preliminary observations are done by interview personally with employees mostly work in hospital services and carried out before this study introduced. The aim of this study was to analyze the impact of perceived benefits of accreditation on the performance of employees in the accreditation process with organizational participation and commitment as mediation. The results of the study were expected to provide recommendations that could be taken to increase the achievement of accreditation for the sake of maintaining quality of service and patient safety especially in RSIA X.

2. LITERATURE REVIEW

Performance is a work accomplishment that is assessed by comparing the work to the standard set [14]. A good employee's performance is a requirement in every organization to achieve an organizational goal. This performance is not only based on their outcome on organizational goals but also organizational process such as accreditation.

Several factors influence performance, namely individual factors consisting of skills and expertise, background and demographics, psychological factors consisting of perceptions, attitudes, personality, learning and motivation, as well as organizational factors consisting of leadership and appreciation, convey the influence of intrinsic and external factors. Some of them are cognitive and psychological factors in the performance of employees as well as in the extrinsic factors of leadership, promotion, rewards, and facilities [15]. The performance in accreditation process and its impact on hospital services quality continues to be investigated and has mixed results. Research has shown that hospital accreditation positively impacts patient quality and satisfaction, based on nurses' views on this matter [7]. Contractively, other research shows insignificant correlation between accreditation performance and its implementation. Also, hospital employees with diverse educational backgrounds have differing opinions regarding the value of achieving accreditation [16].

Perceived benefits are defined as the extent to which someone believes that using a particular system of instruction will improve their performance [17]. A system with a high perceived benefit that individuals believe can provide a favorable result. Previous study has shown that the perceived benefits of accreditation have a positive impact on the accreditation performance. Same perceived benefits of hospital accreditation tend to make employees routinely work with accreditation as their standard [5]. Study shows that perception of the benefits of accreditation has a positive influence on accreditation performance through participation and commitment in the accreditation process in primary health facilities [18]. Accreditation benefits have an impact on management quality of 81%, service quality of 68% and employee participation of 38% where participation as mediator [6].

Participation is a holistic emotional and mental participation that can inspire an individual to achieve shared goals and unified decision-making. Employees' active participation and contribution is dependent on their control and autonomy because they are willingly involved. Thus, they will become more motivated, loyal, productive, and satisfied with their work [19].

Participation shows a significant impact on the employees' performance and organizational commitment. This is indicated by the characteristics of employees with a high level of participation, which will feel more motivated, have a high level of commitment and concern also feel satisfied with their work [20]. There are three situations that could increase the participation of a person in their work. These conditions are a sense of value for a job, a sense of safety at work without negative consequences for self-image, status, and career, as well as a sense of personal, emotional, and cognitive physical fitness [21].

The impact of participation on employee's accreditation performance is explained by previous research [7] which shows that employee participation has a significant positive effect on accreditation performance. This study also showed that nurses' perceptions of the accreditation process had an impact on their participation. Other study evidently shows a strong relationship between employee perceived benefits of accreditation, participation, satisfaction, organizational commitment, and performance at a hospital in Surakarta, Indonesia [10].

Organizational commitment also found as important mediators in achieving great performance. Theory by Allen and Meyer defined organizational commitment as a psychological construct that impacts individual decision to participate in organization based on their relationship towards organization. Factors that influence commitment are personal characteristics, career and job description also work experience. Employees with a high level of commitment will be more loyal and committed to organization and show a willingness to work harder to achieve organizational objectives [22], [23].

Previous study shows that organizational commitment positively impacts on managerial accreditation performance in South Korea with employee satisfaction as their other variable. Other study also shows that perceived benefits of accreditation will influence organizational commitment which in results affecting their quality of service [11], [12]. The link between the perception of benefits, participation, organizational commitment, and employee performance in accreditation process is something worth reviewing. Thus, the relationship between them is tested and shown by the research model as shown in Figure 1.

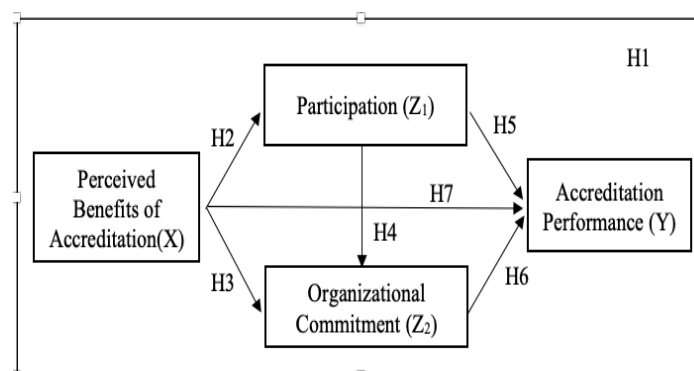


Figure 1. Research model

Based on the research model described above, it can be concluded that the hypotheses tested in this study were as follows:

- H1: The perception of the benefits of accreditation had an impact on the performance mediated by participation and organizational commitment.
 H2: Employee participation was affected by the perception of the benefits of accreditation.

H3: The perceived benefits of accreditation had an impact on organizational commitment.

H4: Participation affects the commitment of the organization.

H5: Participation had an impact on performance.

H6: Organizational commitment had an impact on performance.

H7: The perception of the benefits of accreditation had a direct effect on the performance of employees.

3. RESEARCH METHOD

This research was quantitative research with an associative descriptive approach to causality. Questionnaires were distributed at RSIA X, South Jakarta from December 20, 2020 to January 4, 2021 in a cross-sectional study design. The population is health personnel at the hospital with a non-probability sampling technique used as method of sampling. Some of the inclusion criteria of the respondents were health workers at RSIA X who worked during the preparation and accreditation process in 2019 and were willing to become respondents, while the exclusion criteria for the respondents were non-health workers, health workers who did not work during the accreditation process in 2019 due to leave/permit/disease and involved in joint operation with RSIA X. After the inclusion and exclusion criteria, there were 228 population based on the criteria, the questionnaires were distributed to 150 health workers with 115 questionnaires that were complete and valid so that 115 respondents were taken in the study.

Respondents were asked to fill out positive statement questionnaires with 5 Likert scale answers that were strongly agree, agree, not really agree, disagree, and strongly disagree. Questionnaire are developed based on variables dimension according to factors that influenced performance according to Dessler [14], Gibson [19] for participation, Allen and Meyer [22] for organizational commitment. In measuring perceived benefits authors elaborate a questionnaire by Rana and Tyagi [24] to describe individual views to the extent of meeting their and organizational needs. All questions are made related to accreditation process. In addition, there are data measurements of the characteristics of respondents, such as gender, age, length of work and profession (Appendix 1). Data analysis then performed using path analysis with the help of SPSS-Amos 26 software.

4. RESULTS AND DISCUSSION

4.1. Characteristics of respondents

Respondents' demographic data in this study were measured based on gender, age, working experience, education background, and profession as shown in Table 1. Based on the above data, it can be concluded that most of the respondents are females with an age range of 21-40 years because most of the RSIA X employees are in a productive age range. The working experience of the RSIA X respondents who answered the questionnaire was that of employees over 3 years of experiences who were dominated by midwives and nurses and physicians with the most recent higher education, namely D3 (diploma), S1 (bachelor) and S2 (master's degree).

Table 1. Characteristics of respondents

	Characteristics	Number (of people)	Percentage (%)
Gender	Male	15	13%
	Female	100	87%
Age range	21-30 years old	45	39.1%
	31-40 years old	45	39.1%
	41-50 years old	20	17.4%
	≥51 years old	5	4.3%
Working experience	0-1 year	5	4.3%
	1-3 years old	26	22.6%
	>3years	84	73%
Education background	D3	60	52.2%
	S1	11	9.6%
	S1 profession	21	18.3%
	S2	21	18.3%
	Other	2	1.7%
Profession	Doctor/Dentist/Specialist/Specialist dentist	31	27%
	Midwives	22	19.1%
	Nurse	34	29.6%
	Pharmacist/Pharmaceutical technical personnel	6	5.2%
	Nutritionist/Dietitian	1	0.9%
	Medical laboratory experts	6	5.2%
	Technician (Radiographer/Medical Record/Physiotherapist/Nurse anesthetist)	7	6.1%
	Management	6	5.2%
	Other	2	1.7%

Respondents' answers were measured to give a brief image about their perceptions on the variable tested. Three-box method is used to index their answers with range; low (23-53.7), moderate (53.8-84.5) and high (84.6-115). Based on this analysis we found that all variables have high index but near the low baseline (86.4-95.4) as shown in Table 2.

Table 2. Variable categories index

No	Variable	Index	Behaviour
1	Performance(Y)	86.4 (High)	Great performance on accreditation process
2	Perceived benefits (X)	95.4 (High)	Healthcare professionals have good perceptions on accreditation
3	Participation (Z1)	88.5 (High)	Full support for accreditation
4	Organizational commitment (Z2)	86.8 (High)	High dedication for accreditation process

4.2. Hypothesis analysis

The analysis was conducted to evaluate relationships between all existing variables. There are six relationships analyzed which showed significant influence between variables, but one path is significant. The influence magnitude of the variables studied was tested with the coefficient of determination (R^2 value). It was found that the R^2 value of the performance variable which was influenced by perception, participation and organizational commitment was 46.9% as shown in Table 3.

Table 3. Test results

Influence		Value	p-value	Note
Participation	← Benefit perception	0.51	*** (significant)	H2 Accepted
Organizational commitment	← Benefit perception	0.23	*** (significant)	H3 Accepted
Organizational commitment	← Participation	0.30	*** (significant)	H4 Accepted
Performance	← Organizational commitment	0.80	*** (significant)	H5 Accepted
Performance	← Participation	0.30	0.002 (significant)	H6 Accepted
Performance	← Benefit perception	-0.09	0.319 (insignificant)	H7 Rejected
Participation, organizational commitment, performance	← Benefit perception	0.000	*** (significant)	R^2 0.46

The study also analyzes participation and organizational commitment as intervening variables for mediating the impact of perceived benefits of accreditation to performance. Variable considered as intervening variable if the direct effect to be greater than the indirect effect in the intervening testing. This analysis showed that the direct effect of benefits on performance was -0.083 or in other words, was slightly negative, which was smaller than the indirect effect of 0.408 as presented Table 4. This demonstrates that participation and organizational commitment is a mediator on employee perceived benefits of accreditation in improving their performance. The diagram of the path analysis is shown Figure 2.

Table 4. Intervening testing

	Standardized direct effects	Standardized indirect effects
Participation	0.506	0
Organizational commitment	0.296	0.203
Performance	-0.083	0.408

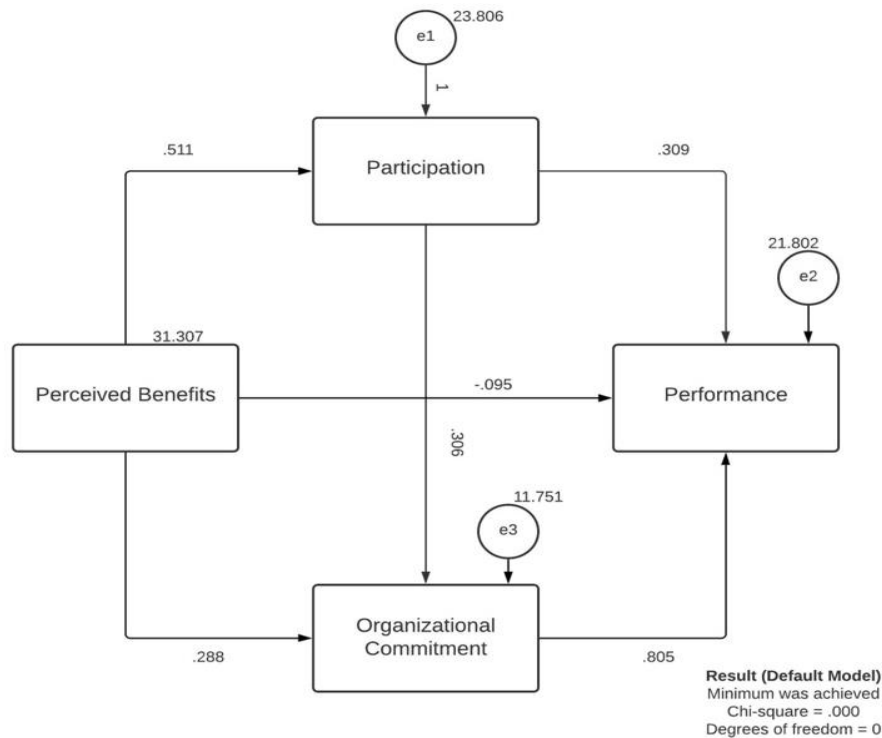


Figure 2. Path diagram

5. DISCUSSION

5.1. Perceived benefits of accreditation had an impact on the performance mediated by participation and organizational commitment

This study shows that employees' perceived benefits of accreditation have a direct effect on their accreditation and organizational participation and commitment. The claim is that if health workers understand that accreditation is important, the quality of their work through this accreditation will also be improved. The analysis of the results from the survey at RSIA X shows a good perception of benefits combined with good performance. All the variables are in a good category, but several performance indicators for RSIA X still need improvement such as enthusiasm level, problem solving, and understanding of accreditation standards. Performance theory explains many variables affect performance including individual, organizational, and psychological factors. Perception, participation, and commitment are vital components of psychological factors [15]. Another study [18] showed that employees' perceptions of the benefits of accreditation will be positive because they will be supportive, dedicated, and respectful of the accreditation process. Furthermore, a study in Indonesia showed that increased perceived benefits of accreditation affected three areas: employee satisfaction, organizational commitment, and performance [10].

5.2. Employee participation was affected by the perceived benefits of accreditation

The second hypothesis analysis obtained significant and positive results indicating that perceived benefits of accreditation and employee participation had a positive influence. If healthcare professionals sensed that accreditation was a benefit to them, then their likelihood of participating in the accreditation process would go up. In this study, it was found that the characteristics of respondents in RSIA X had high perceptions of benefits and participation, but there are some areas for participation improvement such as active participation and their sense of priorities regarding the work of accreditation. Participation is basically a person's mental and emotional engagement to drive them to contribute [19]. Several studies have shown that employees' perceptions of hospital accreditation could significantly affect the decisions they make regarding their hospital's accreditation status [5]. A literature review uncovered 17 studies related to the benefits of accreditation. This report demonstrates that there are untapped perceived benefits of accreditation that differ among the professions of nurses and doctors which can influence their participation in accreditation [25]. Our study took a large population of healthcare professionals, not limited to nurses and doctors but in general all healthcare professionals that showed high level of perception and participation in the accreditation process.

5.3. Perceived benefits of accreditation had an impact on organizational commitment

In this study, it was found that perceived benefits of accreditation had a positive effect on organizational commitment and the third hypothesis was indeed supported. This means that if healthcare professionals believed that accreditation has a positive output, then the commitment they put into their work would also increase. The RSIA X respondent's assessment of organizational commitment and perceived benefits showed a high level. These results indicated that healthcare professionals comprehend the benefits of accreditation thus their dedication to the process will also increase. Several dimensions of organizational commitment that could be an improvement were continuous commitment, which means that the commitment of employees to stay in the organization are low and the risk to stop working in the process are big. Organization commitment can be described as a strong feeling one has to remain a member of that organization and strive according to that organization's set of principles [26]. Perception plays a role in one's personal characteristics which in turn influences organizational commitment. One study found that accreditation had a significant positive effect on organizational commitment [11]. Study by [27] showed that benefits are viewed as having a positive relationship to intentions to remain in the organization.

5.4. Participation affects the commitment of the organization

The fourth hypothesis proved to be significant, positive, and robust between employee participation and organizational commitment. The hypothesis entails that if healthcare professionals participate in accreditation, their dedication will increase. The high levels of support and dedication among the respondents describes employees who are generally good but who need to improve to remain in the accreditation organization and to participate in giving opinions. The effect of participation in accreditation showed a high standard compliance, adherence to guidelines and sustained changed [8]. Research assessing these two variables in hospital settings was tested in Taiwan which examined nurses to assess their participation and commitment and was shown to have a positive impact with a high incidence of 16% [28].

5.5. Participation had an impact on accreditation performance

The fifth hypothesis test showed the positive and significant impact of participation on the performance of employees. This could be interpreted as meaning that, if healthcare professionals provided support for the accreditation process, their performance would immediately be good. In this study, respondents were generally found to have good supportive behavior and performance. Responsibilities and initiatives of employees are several dimensions of performance that still need improvement. This result corresponds to the theory put forward by Robbins and Coultie [15]. It states that factors that affect performance, such as the support people receive, will influence their results. The results of this study are consistent with previous research, where it was found that the impact of accreditation on the quality of service was influenced by the participation of employees in nurses undergoing accreditation [7]. This phenomenon may arise because someone who participates directly in the accreditation process will increase their performance [29].

5.6. Organizational commitment had an impact on performance

The results of this study indicated that organizational commitment was significant, and the result is positive thereby supporting the sixth hypothesis. The coefficient value of 0.805 found in the path diagram demonstrates the strong relationship between organizational commitment and performance. This hypothesis suggests that if the healthcare professionals are dedicated to the accreditation process, they will perform up to the standard.

Results from the study support the theory that performance is influenced in part by intrinsic factors which include commitment [14]. Previous study [13] illustrates the positive effect of a company's organizational commitment on its workforce's work performance in Indonesia. Moreover, a qualitative study of hospital service delivery in Denmark revealed how employee commitment influences hospital service quality [9]. The influence of work-life balance will positively affect employee performance within any given process including accreditation as stated in a study of South Korean research [12].

5.7. The perception of the benefits of accreditation had a direct effect on the performance of employees

The seventh hypothesis in this study suggested that the effect of perceived benefits of accreditation on employee performance did not have a significant effect. It implies that the views of health-worker performance do not directly reflect their performance to patient care. The descriptive characteristics of respondents with high levels of perceptions and performance do not necessarily have a positive correlation to one another. The high levels of the two variables in the study might be induced by the influence of the intervening variables. This demonstrates that people beliefs have no relation with work results if not accompanied by participation and dedication. In fact, performance theory postulated by Robbins and Coultie

[15] states that perception is not the only factor that affects performance because it must be accompanied by ability, motivation, and knowledge. In contrary, previous research in Saudi Arabia had different outcomes. It was found that perceptions of accreditation by healthcare professionals have a positive influence on the implementation of accreditation in hospitals. The direct effect of the perceived benefits of accreditation affects performance directly, with a significance value of 0.001. However, participation in the study is an indicator of performance [5].

6. CONCLUSION

This study found that the perceived benefits of accreditation, employee participation and organizational commitment have an impact on performance simultaneously. Perceptions of accreditation benefits, participation and commitment have a significant impact on accreditation performance. In addition, it was found that the perceived benefits of accreditation had no direct effect on the performance of employees in the accreditation process. So the improvement in the performance of accreditation could only be achieved if there was support and dedication that mediated the views of health workers on the usefulness of accreditation. This research implies for hospital management to optimize the performance of the accreditation process. It can be achieved by increasing the perception of the benefits of accreditation through training, sharing, assessment, award and monitoring and evaluation involving all employees.

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Appendix 1.

Questions in all scales are rated on five-point likert scale (1, strongly disagree; 5, strongly agree)

Perceived benefits of accreditation

Fullfillment of organizatonal needs

- (1) Accreditation provides continues change with benefit the hospital
- (2) Accreditation ensure equal responsibilities to all employees

- (3) Accreditation improves working environment due to systematic and organized work process
- (4) Accreditation gives reliable strategy in hospital transformation
- (5) Accreditation provides insight and implementation about patient safety plan and policies
- (6) Accreditation ensures hospital facilities and infrastructure are in good condition
- (7) Accreditation ensures that competent employees are working on the appropriate job
- (8) Accreditation allows hospital to better use internal sources (financial, people, time and equipment)

Fulfillment of employee needs

- (9) Accreditation ensures appropriate mechanism for recognizing and rewarding good performance
- (10) Accreditation ensures a mechanism for employee health needs
- (11) Accreditation gives employees to work with reasonable freedom
- (12) Accreditation improves information integration among all employees

Participation

Active participation

- (1) I contribute to make documents in accreditation process
- (2) I contribute in documents socialization in accreditation process
- (3) I made support others to contribute in accreditation process
- (4) I actively give opinion during accreditation process
- (5) I feel that my opinion during accreditation process have an impact in service quality

The importance of participation

- (6) I understand accreditation provides an important changes for the hospital
- (7) I believe 5-star accreditation will have a good impact on myself
- (8) Accreditation is a tool to prove individual ability to work

Shows work as priority

- (9) I finished my accreditation task to the specified time period
- (10) I have been taught about accreditation at the hospital i work for
- (11) I make accreditation work as my priority
- (12) I Always attend accreditation process meetings
- (13) I am excited to attend accreditation process and preparation meetings

Organizational commitment

- (1) I am willing to work harder than expected for 5-star accreditation
- (2) I feel the problems occur in accreditation are also my problems
- (3) I am proud if my hospital got 5-star accreditation
- (4) I am proud to tell people that i am part of the accreditation team
- (5) I want to stay in accreditation process because of the rewards
- (6) I am aware that accreditation is a must
- (7) I feel responsible for accreditation process even though i am not involved
- (8) I always want to contribute to accreditation process while i am still working
- (9) I believe accreditation process has a good impact on my credibility

Accreditation performance

- (1) I am able to stick to the specified time to complete accreditation work
- (2) I am able to meet the target of required accreditation documents set up for me
- (3) I able to fulfill the accreditation work faster than expected
- (4) I can fulfill the expected accreditation documents according to standard
- (5) I understand how accreditation performed and the requirements based on the standard
- (6) I am willing to cooperate with other in accreditation process
- (7) I am able to work with other teams during the accreditation process
- (8) I am willing and able to share my knowledge regarding accreditation process with other groups
- (9) I make concrete contribution
- (10) I am able to complete accreditation work independently
- (11) I am passionate in completing accreditation workd
- (12) I am able to carry out duties form the head of accreditation
- (13) I provide ideas along accreditation process
- (14) I can solve problems that emerge during accreditation