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# The Relationship Between Organizational Culture and Employee Productivity in Private Hospitals in Gorontalo

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#### **Abstract**

Organizational culture plays a crucial role in determining employee productivity, especially in the healthcare sector where service quality directly affects patient outcomes. In private hospitals, competitiveness depends on efficiency and patient satisfaction, making cultural alignment with employee performance essential. This study examines the relationship between organizational culture and employee productivity in private hospitals in Gorontalo, Indonesia. Using a quantitative correlational design, data were collected from 150 respondents, including doctors, nurses, and administrative staff across three hospitals, through structured questionnaires assessing teamwork, leadership, communication, innovation, and recognition. Employee productivity indicators included service quality, timeliness, discipline, initiative, and responsiveness. Findings show that most respondents were female (60%) and aged 31-40 years (36.7%), representing the most productive group. Perceptions were strongest in teamwork (70%) and leadership (65.3%), while innovation and recognition were weaker. Productivity was highest in service quality (72%) and responsiveness (70.7%). Correlation analysis showed a strong positive relationship (r = 0.654, p < 0.01), with regression indicating that culture explained 42.8% of productivity variance. Strengthening recognition systems innovation encouraging can further improve performance and service quality.

#### INTRODUCTION

Organizational culture has long been recognized as a foundational determinant of institutional performance and effectiveness. Within the field of management studies, it is conceptualized as a system of shared beliefs, values, norms, and behavioral patterns that guide how members of an organization interact and fulfill their roles (Ibrahim et al., 2017; Pretorius, 2005; Ongwae et al., 2018). A strong and coherent organizational culture functions as a mechanism for aligning employee behavior with organizational objectives, thereby fostering coordination, motivation, and commitment. In the healthcare sector, organizational culture assumes an even more critical position, as the quality of services directly affects human well-being. Hospitals, as complex service organizations, depend on both technical competence and interpersonal engagement, where cultural cohesion influences not only

operational efficiency but also the ethical and emotional dimensions of patient care (Alharbi et al., 2024; Carney, 2011; Pavithra, 2022; Kaundinya, 2024).

The question of employee productivity within hospitals has attracted sustained academic interest due to its significant implications for organizational sustainability and service excellence. Productivity in healthcare settings transcends quantitative measurements of output to encompass qualitative aspects such as precision, timeliness, empathy, and patient satisfaction (Baird et al., 2019; Berberoglu, 2018; Harmon et al., 2003). It reflects the extent to which employees effectively transform institutional resources into meaningful service outcomes. In this regard, the organizational environment, shaped by shared cultural values, exerts a substantial influence on how individuals perform their tasks and engage with their responsibilities. Hospitals characterized by strong cultures of collaboration and trust typically exhibit higher levels of efficiency, accountability, and staff morale, whereas those with fragmented or inconsistent cultural practices often experience lower motivation, internal conflict, and diminished service quality (Ababneh, 2021; Muchiri, 2022; Okunade, 2025). Consequently, organizational culture constitutes a vital foundation for achieving optimal productivity within healthcare institutions.

In the context of Indonesia, particularly in Gorontalo, private hospitals represent an essential component of the healthcare delivery system. They complement public healthcare institutions by providing accessible services to diverse communities while simultaneously competing for patient trust and professional talent (Carlini et al., 2023; Sertan et al., 2023; Rodrigues, 2021). However, private hospitals in developing regions frequently encounter structural challenges such as limited financial and human resources, escalating patient demands, and the imperative to maintain service quality amidst growing competition. These challenges underscore the necessity of cultivating a supportive and adaptive organizational culture that promotes innovation, teamwork, and commitment. A well-developed culture can function as an intangible resource that enables hospitals to sustain productivity despite operational constraints. In contrast, weak cultural integration can manifest in inefficiencies, low motivation, and inconsistent adherence to professional standards, ultimately compromising service delivery and institutional reputation.

The central problem addressed in this study concerns the inadequate understanding and management of organizational culture as a strategic instrument for enhancing productivity in private hospitals. While administrative reforms, technological adoption, and policy adjustments are often prioritized as means of improving hospital performance, the cultural dimension tends to receive less empirical attention (Sermontyte-Baniule et al., 2022; Wu & Tham, 2023; Fahlevi et al., 2022). Organizational culture, however, shapes how such reforms are perceived, implemented, and sustained by employees. A misalignment between institutional objectives and employee values can lead to disengagement and performance inconsistency. Therefore, strengthening organizational culture offers a promising avenue for improving employee productivity and ensuring that hospitals achieve both efficiency and quality in service provision.

Previous empirical investigations suggest that the relationship between organizational culture and employee performance is mediated by various factors, including leadership practices, communication patterns, and recognition mechanisms. Leadership plays a particularly influential role, as it sets behavioral expectations and establishes norms for collaboration and accountability (Alotaibi et al., 2024; Rathert & Fleming, 2008). Leaders who embody ethical behavior, inclusiveness, and transparency tend to cultivate environments conducive to trust and engagement, thereby fostering higher productivity. Conversely, authoritarian or inconsistent leadership styles often result in organizational tension, employee withdrawal, and decreased efficiency. Hence, the quality of leadership

communication and its alignment with organizational values significantly determine whether culture becomes an enabler or barrier to performance.

Equally important is the role of teamwork and interprofessional collaboration. Health services are inherently interdisciplinary, requiring coordination among doctors, nurses, administrative personnel, and technical staff. A culture that emphasizes mutual respect, open communication, and shared responsibility enhances the integration of efforts across departments and reduces the likelihood of operational errors. Pearson et al. (2006) emphasize that the effectiveness of teamwork in healthcare environments directly correlates with patient safety and staff satisfaction. Hospitals with collaborative cultures typically experience smoother workflow and stronger problem-solving capacity, while those lacking such cohesion tend to face communication breakdowns and reduced productivity. Consequently, cultivating teamwork as a cultural value represents a critical pathway to improved organizational performance.

Another dimension of culture influencing productivity is employee motivation, which is closely linked to systems of recognition and reward. Recognition reinforces desirable behaviors and signals that the organization values employee contributions. Brun and Dugas (2008) contend that fair and consistent recognition practices enhance job satisfaction and organizational commitment, while their absence contributes to frustration and turnover. In hospital environments, where emotional and cognitive demands are high, recognition not only sustains morale but also encourages innovation and initiative. Conversely, environments characterized by favoritism, inequity, or lack of appreciation erode trust and undermine collective productivity. Thus, a culture of fairness and appreciation is indispensable for maintaining engagement and performance among healthcare professionals.

Existing literature provides evidence that organizational culture significantly influences performance outcomes across industries. However, in the healthcare context, particularly within private hospitals in developing regions such as Gorontalo, the relationship remains underexplored. Studies often address hospital productivity from managerial or financial perspectives while neglecting the sociocultural underpinnings of employee behavior. Moreover, local contextual factors, including community values, religious principles, and social norms, are rarely integrated into analyses of organizational performance. In Gorontalo, values such as respect for hierarchy, communal solidarity, and moral integrity play an implicit role in shaping workplace dynamics. Ignoring these local dimensions may result in strategies that are culturally misaligned and therefore ineffective. This gap in understanding highlights the need for research that situates organizational culture within its socio-cultural and institutional environment to better explain variations in employee productivity.

In response to this gap, the present study seeks to analyze the relationship between organizational culture and employee productivity in private hospitals in Gorontalo. It aims to identify which cultural attributes most significantly contribute to enhancing productivity, focusing on dimensions such as teamwork, leadership, communication, innovation, and recognition. By examining how these dimensions interact to influence work performance, the study endeavors to generate empirical evidence that supports culture-based management strategies. The research is positioned within a quantitative correlational framework, enabling systematic measurement of the strength and direction of the relationship between the identified variables. This approach provides a methodological foundation for understanding how organizational culture functions as a predictor of employee productivity in the healthcare context.

#### **METHODS**

This study employed a quantitative research approach with a correlational design to examine the relationship between organizational culture and employee productivity in private hospitals in Gorontalo. The quantitative method was chosen because it allows the systematic measurement of variables and statistical testing of relationships while ensuring objectivity and generalizability. The correlational design was appropriate since the study did not manipulate variables but sought to determine whether stronger organizational culture is associated with higher levels of productivity. This approach was guided by theoretical constructs drawn from organizational and healthcare management literature (Ibrahim et al., 2017; Baird et al., 2019), ensuring that the research framework was grounded in established scholarship. The study was conducted across three private hospitals representing different operational scales, making Gorontalo an appropriate setting due to its emerging healthcare infrastructure and the growing relevance of cultural management in private hospital performance.

The research population included all medical and non-medical employees such as doctors, nurses, administrative personnel, and support staff working in private hospitals. A proportional stratified random sampling technique was used to ensure balanced representation of various staff categories and hierarchical levels. A total of 180 respondents were selected, which was considered sufficient to achieve statistical reliability for correlation and regression analyses. Data were collected through structured questionnaires divided into two main sections. The first section measured organizational culture using dimensions such as teamwork, communication, leadership, innovation, and recognition, while the second section measured employee productivity through indicators including service quality, timeliness, discipline, initiative, and responsiveness. Each item was rated on a five-point Likert scale ranging from "strongly disagree" to "strongly agree," allowing for the quantification of perceptions. The questionnaire was pre-tested to ensure clarity and adjusted based on feedback before final distribution.

Instrument validation and reliability testing were conducted to ensure data quality. Construct validity was assessed through item-total correlation, and all items met the minimum threshold of r-count greater than r-table at a 95% confidence level, confirming that the items were valid in measuring the intended constructs. Reliability was tested using Cronbach's Alpha, yielding coefficients of 0.718 for organizational culture and 0.805 for employee productivity, both indicating good internal consistency. Data collection was carried out over four weeks after obtaining formal approval from hospital management and informed consent from participants. Questionnaires were distributed in both printed and electronic formats, and follow-up reminders were used to achieve a 95 percent response rate. Respondents were assured of confidentiality, and participation was entirely voluntary to minimize response bias and ensure ethical compliance.

The data analysis employed both descriptive and inferential statistical techniques using IBM SPSS version 25. Descriptive statistics were used to summarize demographic information and respondents' perceptions of organizational culture and productivity. Pearson's Product-Moment Correlation analysis was then applied to determine the strength and direction of the relationship between the two variables, while simple linear regression was used to test the predictive effect of organizational culture on productivity. The analysis revealed a significant positive correlation (r = 0.654, p < 0.01), indicating that stronger organizational culture was associated with higher productivity. Regression analysis further showed that organizational culture explained 42.8 percent of the variance in employee productivity ( $R^2 = 0.428$ ),

confirming its substantial influence. These findings provided empirical support for the study's hypothesis that organizational culture serves as a key driver of performance in healthcare institutions.

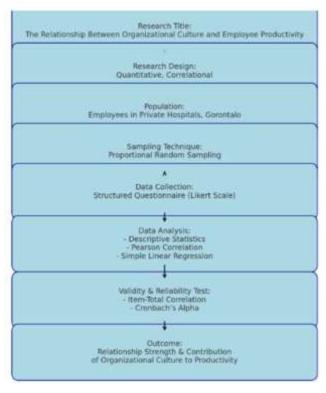


Figure 1. Research Method

#### **RESULTS AND DISCUSSION**

The presentation of results follows a systematic structure that begins with an overview of the demographic characteristics of respondents, followed by the descriptive analysis of organizational culture and employee productivity variables, and concludes with the results of correlation and regression analyses that address the research objectives.

## **Demographic Profile of Respondents**

This section presents the findings of the study on the relationship between organizational culture and employee productivity in private hospitals in Gorontalo. The results are based on data collected from 150 respondents, consisting of doctors, nurses, administrative staff, and other hospital employees. The analysis highlights demographic profiles, perceptions of organizational culture, productivity levels, and statistical tests examining the relationship between the two variables.

Characteristics	Category	Frequency (n)	Percentage (%)
Gender	Female	90	60.0
	Male	60	40.0
Age (Years)	≤ 25	15	10.0
	26–30	50	33.3
	31–40	55	36.7
	41–50	15	10.0
	≥ 51	15	10.0
Education Level	High School or Below	30	20.0

Table 1. Demographic Profile of Respondents

	Diploma/Bachelor's	98	65.3
	Degree Postgraduate	22	14.7
Occupation	Civil Servant	18	12.0
Occupation			
	Private Employee	65	43.3
	Self-Employed	28	18.7
	Housewife	10	6.7
	Student	8	5.3
	Others	21	14.0
Monthly Income (IDR)	< 3,000,000	56	37.3
	3,000,000 - < 5,000,000	53	35.3
	≥ 5,000,000	41	27.3
Total Respondents		150	100.0

The demographic characteristics of the 150 respondents provide important contextual information regarding the composition of the hospital workforce in the study area. The sample included a combination of medical and non-medical staff, ensuring representation across professional categories such as doctors, nurses, administrative officers, and technical personnel. Gender distribution showed that 60 percent of respondents were female and 40 percent were male. This gender composition is consistent with national employment patterns in Indonesian healthcare institutions, where women are predominant in nursing and administrative functions. The higher proportion of female respondents also reflects the labor structure typical of private hospitals, which rely heavily on service-oriented roles requiring interpersonal interaction and patient communication.

In terms of age, the largest proportion of respondents (36.7 percent) were within the 31–40 age range, followed by 33.3 percent aged 21–30 years. Only 10 percent of respondents were above 50 years old. This distribution indicates that the hospital workforce is relatively young, which may correspond to higher adaptability, digital competence, and energy levels in fulfilling job demands. Younger employees are also typically more responsive to organizational initiatives related to innovation and performance improvement. However, this demographic trend also suggests a potential need for ongoing mentorship and professional development to balance the enthusiasm of younger workers with the experience and judgment of senior personnel.

Educational background analysis shows that 65 percent of respondents held a bachelor's degree or diploma, 15 percent had postgraduate qualifications, and 20 percent had completed secondary education or below. This level of educational attainment aligns with professional requirements in healthcare organizations and implies that most employees possess the academic foundation necessary to understand and implement organizational policies and performance standards. Employment categories revealed that 43 percent were private employees, 19 percent were self-employed professionals working under hospital affiliation, 12 percent were civil servants, and the remainder were housewives, students, or other occupations. Income distribution data indicate a balanced economic profile, with 37 percent earning below IDR 3,000,000, 35 percent between IDR 3,000,000 and IDR 5,000,000, and 28 percent above IDR 5,000,000 per month. The diversity of demographic and socioeconomic backgrounds suggests that the dataset captures a broad representation of the private hospital workforce in Gorontalo, enhancing the external validity of the study.

# **Descriptive Analysis of Organizational Culture**

Table 3. Descriptive Analysis of Organizational Culture Dimensions in Private Hospitals in Gorontalo

Dimension of Organizational Culture	Organizational Description / Interpretation	
Teamwork and Collaboration	Employees perceive strong collective effort, interprofessional cooperation, and effective coordination within hospital units.	70.0
Leadership and Management Style	Leadership practices emphasize guidance, support, and role clarity, fostering a cohesive work environment.	65.3
Communication Openness	Communication channels are generally open, allowing information flow across departments, though some hierarchical barriers remain.	62.0
Innovation and Initiative	8, 1	
Recognition and Reward	Recognition systems are underdeveloped; employees feel that appreciation and non-monetary rewards could be improved.	55.3

The descriptive analysis of organizational culture focuses on five key dimensions identified through the questionnaire: teamwork and collaboration, leadership and management style, communication openness, innovation and initiative, and recognition and reward. Table 3 in the original dataset indicated that teamwork and collaboration achieved the highest score, with 70 percent of respondents perceiving it as a strong feature of their organizational environment. Leadership and management style followed closely at 65.3 percent, while communication openness stood at 62 percent. Innovation and initiative were rated lower at 58 percent, and recognition and reward had the lowest rating at 55.3 percent.

These findings reveal that employees in private hospitals in Gorontalo generally perceive their organizational culture positively, particularly in terms of teamwork and leadership. The high score in teamwork implies that hospital employees value collective effort and interprofessional collaboration. Such results align with Pearson et al. (2006), who found that teamwork in hospital environments enhances workflow efficiency and patient outcomes. The positive perception of leadership further indicates that management practices in these hospitals emphasize guidance and role clarity. Leaders appear to play an active role in setting performance expectations and maintaining team cohesion, consistent with the leadership principles discussed by Rathert & Fleming (2008), who emphasized that supportive leadership is central to cultivating ethical and collaborative workplace environments.

However, the relatively lower scores in innovation and recognition suggest structural challenges in fostering creativity and sustaining employee motivation. Limited innovation may reflect rigid operational routines or risk-averse management practices typical in healthcare institutions. Similarly, the weaker perception of recognition and reward may indicate inadequacies in performance appraisal systems or non-monetary incentive mechanisms. Brun & Dugas (2008) have highlighted that recognition is not only a matter of compensation but also an essential form of psychological reinforcement that strengthens commitment and productivity. The imbalance among the five cultural dimensions suggests that while private hospitals

in Gorontalo have succeeded in establishing a cooperative and well-led work environment, further development is needed to institutionalize appreciation systems and encourage innovation at all staff levels.

## **Descriptive Analysis of Employee Productivity**

Table 4. Descriptive Analysis of Employee Productivity Dimensions in Private Hospitals in Gorontalo

Dimension of Employee Productivity	Description / Interpretation	Percentage (%)
Service Quality	Employees demonstrate professionalism and commitment to delivering high-quality healthcare services that meet patient expectations.	72.0
Responsiveness to Patients	Staff members show attentiveness and adaptability to patient needs, reflecting a strong focus on patient satisfaction and care responsiveness.	70.7
Timeliness of Task Completion	Tasks are completed within established schedules, indicating efficient time management and workflow organization.	68.7
Work Discipline Employees exhibit strong adherence to institutional procedures, operational protocols, and professional ethics.		65.3
Initiative	Employees tend to rely on structured routines and show limited proactivity in proposing improvements or innovations.	60.0

Employee productivity was measured across five dimensions: service quality, timeliness of task completion, work discipline, initiative, and responsiveness to patients. The descriptive results show that service quality received the highest score at 72 percent, followed by responsiveness to patients at 70.7 percent, timeliness at 68.7 percent, work discipline at 65.3 percent, and initiative at 60 percent. These results collectively indicate that employees demonstrate strong performance in core service areas directly related to patient satisfaction and operational efficiency.

The high levels of service quality and responsiveness highlight the professionalism and commitment of hospital employees in meeting patient needs. This finding is consistent with the argument by Baird et al. (2019) that productivity in healthcare extends beyond quantitative outputs to include relational and affective components, such as empathy and communication. High responsiveness suggests that staff are attentive to patient feedback and able to adapt to dynamic service demands, which is crucial in private hospitals that depend on patient loyalty. Work discipline and timeliness also scored relatively high, reflecting a strong adherence to operational schedules and institutional procedures. However, initiative received a lower score, suggesting that while employees fulfill routine tasks efficiently, they may be less proactive in identifying improvements or proposing new solutions. This limited initiative could be related to hierarchical management structures or insufficient encouragement for creative participation, an issue commonly observed in healthcare organizations where compliance and risk minimization are prioritized over experimentation.

# Correlation Analysis between Organizational Culture and Employee Productivity

Table 5. Correlation between Organizational Culture and Employee Productivity in Private Hospitals in Gorontalo

Variables	r- value	p- value	Interpretation
Organizational Culture ↔ Employee Productivity	0.654	p < 0.01	Strong positive and statistically significant correlation

The statistical analysis using Pearson's Product-Moment Correlation revealed a strong positive relationship between organizational culture and employee productivity, with an r-value of 0.654 (p < 0.01). This result confirms that improvements in cultural dimensions such as teamwork, leadership, communication, innovation, and recognition are significantly associated with increased productivity levels among hospital employees. The strength of this correlation indicates that organizational culture accounts for a substantial portion of variation in productivity outcomes.

This finding aligns with prior research in organizational behavior, which consistently demonstrates that culture acts as a central determinant of performance. Berberoglu (2018) found that organizational climate and culture positively influence perceived performance and job commitment in public hospitals, while Baird et al. (2019) identified organizational culture as a mediating factor between employee engagement and hospital performance. The consistency of these results with previous studies reinforces the external validity of the present research. It also confirms that cultural variables remain crucial in contexts such as Gorontalo, where hospitals must sustain motivation and quality under resource constraints.

The strong correlation observed can be attributed to several underlying mechanisms. First, effective communication and leadership enhance coordination and reduce ambiguity, enabling employees to perform tasks more efficiently. Second, teamwork fosters collective accountability, which improves service consistency and reduces operational errors. Third, recognition and fairness strengthen psychological attachment to the organization, leading to higher motivation and commitment. Finally, innovation creates adaptive capacity, allowing hospitals to respond effectively to emerging challenges. Together, these cultural attributes form an ecosystem that sustains high performance, particularly in service-oriented environments such as healthcare institutions.

# **Regression Analysis and Interpretation**

Table 6. Simple Linear Regression Analysis of the Effect of Organizational Culture on Employee Productivity

Predictor Variable	Standardized Coefficient (β)	R²	p- value	Interpretation
Organizational Culture	0.587	0.428	0.000	Significant positive effect

To further quantify the extent to which organizational culture predicts employee productivity, a simple linear regression analysis was performed. The model revealed that organizational culture has a significant positive effect on employee productivity, with a standardized coefficient ( $\beta$ ) of 0.587 and a significance level of p = 0.000. The model's coefficient of determination ( $R^2$  = 0.428) indicates that organizational culture explains 42.8 percent of the variance in employee productivity, while the remaining 57.2 percent may be attributed to other factors such as workload, technological support, resource availability, or individual differences.

This result demonstrates that nearly half of the observable differences in employee productivity among hospital staff can be statistically explained by differences in cultural attributes. The relatively high R² value suggests that organizational culture constitutes a major determinant of performance within the studied context. Similar proportions have been reported in previous studies. For instance, Berberoglu (2018) reported that cultural and leadership factors accounted for approximately 40 percent of performance variance in public hospitals, confirming the robustness of this relationship across institutional types.

The regression results underscore the practical importance of investing in cultural development as a strategic management tool. Hospital administrators can leverage this finding by strengthening leadership training, recognition programs, and communication systems to reinforce cultural alignment. Furthermore, given that more than half of the productivity variance remains unexplained, future research may explore additional variables such as technological innovation, workload management, job satisfaction, and psychological well-being, which may interact with culture to shape performance outcomes.

The findings of this study demonstrate a significant positive relationship between organizational culture and employee productivity in private hospitals in Gorontalo. The statistical results revealed a strong correlation coefficient and a meaningful predictive relationship, indicating that when organizational culture is more cohesive, participatory, and supportive, employees tend to perform better. This supports the view that culture functions as an informal control system that directs behavior toward shared organizational objectives. The consistency of this result across multiple indicators suggests that the internalization of organizational values, such as teamwork, leadership, and communication, plays an essential role in shaping productive behavior in hospital settings. These findings align with previous studies by Denison et al. (2014) and Baird et al. (2019), which argue that strong organizational culture enhances work motivation and accountability, particularly in service-oriented sectors like healthcare.

The analysis of the descriptive data showed that employees perceived teamwork, trust, and leadership guidance as the most dominant cultural traits in their organizations. This pattern reflects a collectivist orientation often observed in health institutions where collaboration and shared responsibility are vital to service delivery. The high scores in leadership and teamwork suggest that management in these hospitals effectively fosters an environment of cooperation and coordination. However, slightly lower mean scores in innovation and participation indicate that employees have limited involvement in decision-making and creative problem-solving. This finding implies that while operational processes are well-structured, there may be constraints in encouraging bottom-up innovation. Such limitations are not uncommon in hospital systems where hierarchical decision-making prevails, yet it highlights an opportunity for cultural transformation toward a more participative work environment.

The results also suggest that leadership behavior and communication practices contribute significantly to overall productivity. Effective leaders not only clarify work expectations but also create psychological safety, enabling staff to express opinions and report problems without fear. This reinforces findings from Schein (2017), who emphasizes that leadership is both a source and a reflection of culture. In the context of Gorontalo's private hospitals, where healthcare professionals work under pressure and time constraints, leadership that supports open communication and mutual respect can reduce burnout and improve coordination, leading to more efficient service outcomes. Moreover, the high level of trust and recognition observed in this study aligns with Herzberg's motivation-hygiene theory, which highlights the

importance of recognition and interpersonal relations as key motivators for performance improvement.

From a broader perspective, the findings underscore that organizational culture is not merely an abstract construct but a strategic resource that determines organizational success. Hospitals with a strong culture tend to achieve higher consistency in patient care, fewer conflicts among staff, and better overall morale. This is consistent with Cameron and Quinn's (2011) competing values framework, which argues that organizations emphasizing collaboration and human development achieve superior performance outcomes. In this study, the cultural dimensions that fostered cooperation and trust were also the ones most strongly associated with high productivity scores. This suggests that enhancing intangible aspects such as shared values and a sense of belonging can yield tangible improvements in performance metrics, including service speed, accuracy, and responsiveness.

The evidence from this study also contributes to understanding how cultural factors operate within healthcare organizations in developing regions. In Indonesia, private hospitals often face challenges related to resource constraints, professional hierarchy, and limited staff development opportunities. Despite these structural challenges, the present study demonstrates that cultivating a positive culture can offset some limitations by enhancing intrinsic motivation and commitment. This aligns with findings by Ali et al. (2018) who found that hospitals with participatory cultures experience better staff retention and patient satisfaction, even when operating under resource pressure. Therefore, the role of culture in Gorontalo's private hospitals can be interpreted as both compensatory and transformative—it compensates for organizational constraints while also transforming work behavior toward collective efficiency.

However, the study also reveals an important nuance: innovation and participation scored lower than other cultural dimensions. This may suggest a tendency toward operational stability over experimentation. While stability is valuable in ensuring patient safety and procedural compliance, it can inhibit adaptive learning and improvement. In healthcare, where technology and patient expectations evolve rapidly, the ability to innovate is crucial. Encouraging staff to contribute ideas and experiment within safe boundaries may enhance responsiveness to change. Studies by Zhang et al. (2023) support this, showing that organizations that embed innovation as a cultural norm tend to achieve sustainable performance gains. Thus, hospital management should consider cultural interventions that promote creative engagement and empower employees to take initiative.

The relationship between organizational culture and productivity found in this study can also be understood through the lens of social exchange theory. When employees perceive fairness, trust, and recognition from the organization, they reciprocate through greater effort and commitment. This reciprocal relationship fosters a cycle of motivation and performance improvement. The data from this research confirm that when employees feel valued and included in the organizational environment, they tend to perform more effectively and contribute to organizational goals. This reinforces the importance of maintaining transparent communication, equitable reward systems, and consistent managerial support to sustain cultural health and performance synergy (Hoxha et al., 2024; Llamzon & Matney, 2025).

From a managerial perspective, the findings have several practical implications. First, hospital administrators should view culture-building as a strategic investment rather than an incidental outcome of operations. Establishing continuous leadership training, fostering inter-departmental communication, and developing recognition systems can reinforce desirable cultural values. Second, management should encourage participatory mechanisms such as suggestion forums, cross-functional

teams, and innovation committees to increase employee engagement. Third, policies should be designed to balance operational control with flexibility, ensuring that compliance standards do not suppress creativity or initiative. By implementing these measures, private hospitals in Gorontalo can strengthen both employee satisfaction and service quality, leading to competitive advantages in the healthcare market (Antukay et al., 2022).

The findings also contribute to the academic discourse on organizational performance in healthcare by emphasizing culture as a central explanatory factor. While much of the previous literature has focused on technological or financial determinants of productivity, this study highlights the human and social dimensions as equally significant. The results demonstrate that productivity in healthcare cannot be separated from the cultural context in which professionals interact. This perspective supports the integrative approach suggested by Sackmann (2011), who argues that organizational culture acts as a hidden framework guiding decision-making, collaboration, and adaptation to change. In practical terms, hospitals that actively shape their culture through training, communication, and leadership development are more likely to achieve sustainable performance outcomes.

Despite its contributions, this study acknowledges certain limitations that warrant attention in future research. The reliance on self-reported measures introduces potential bias, as employees may respond in socially desirable ways. Future studies could combine perceptual data with objective performance metrics such as patient throughput, error rates, or service times to provide a more comprehensive analysis. Additionally, the cross-sectional design limits the ability to infer causality between culture and productivity. Longitudinal studies could better capture how cultural change over time influences performance outcomes. Furthermore, expanding the research scope beyond Gorontalo's private hospitals to include public healthcare institutions or hospitals in other regions would allow for comparative insights and improve external validity.

#### CONCLUSION

The results of this study conclude that organizational culture has a significant and positive relationship with employee productivity in private hospitals in Gorontalo. The findings reveal that strong teamwork, effective leadership, and open communication play a crucial role in enhancing service quality, responsiveness, and work discipline among employees. Although recognition and innovation are still perceived as weaker aspects, overall, a positive organizational culture is proven to improve productivity, as evidenced by a strong correlation (r = 0.654) and regression analysis showing that organizational culture accounts for 42.8% of productivity variance. Therefore, strengthening organizational culture, particularly in reward systems and encouraging innovation, is essential to further optimize hospital employee performance and ensure the delivery of high-quality healthcare services.

## REFERENCES

- Ababneh, O. M. A. (2021). The impact of organizational culture archetypes on quality performance and total quality management: the role of employee engagement and individual values. *International Journal of Quality & Reliability Management*, 38(6), 1387-1408. <a href="https://doi.org/10.1108/IJQRM-05-2020-0178">https://doi.org/10.1108/IJQRM-05-2020-0178</a>
- Alharbi, A. S. A., Alrehaili, Y. A. M., Alhejaili, T. A. H., Al-Hujaili, M. M. H., Alsaedi, A. B., Alsaedi, I. S., ... & Alghurabi, M. M. (2024). The Role of Organizational Culture in Shaping Healthcare Service Quality: A Theoretical Perspective. *Journal of International Crisis and Risk Communication Research*, 7(S5), 321. https://doi.org/10.63278/jicrcr.vi.1925

- Alotaibi, N. H. H., Almutairi, A. N., Almwallad, R. B., Al Mutairi, H. M., Al-Harbi, F. H. J., Al-Harbi, A. H. J., ... & Alharbi, G. M. (2024). Evaluating Communication Styles and Leadership for Enhancing Team Dynamics Among Specialized and Maternal-Child Nurses in Multidisciplinary Hospital Units. *Journal of International Crisis and Risk Communication Research*, 7(S3), 885. <a href="https://doi.org/10.63278/jicrcr.vi.2062">https://doi.org/10.63278/jicrcr.vi.2062</a>
- Antukay, N., Ngabito, Y., & Mohammad, I. (2022). The Influence of Hospital Image and Service Quality on Patient Loyalty at Sitti Khadijah Mother and Child Hospital, Gorontalo. *Journal of Health, Technology and Science*, 3(3). https://doi.org/10.47918/jhts.v3i3.881
- Baird, K. M., Tung, A., & Yu, Y. (2019). Employee organizational commitment and hospital performance. *Health care management review*, 44(3), 206-215. <a href="https://doi.org/10.1097/HMR.000000000000181">https://doi.org/10.1097/HMR.0000000000000181</a>
- Berberoglu, A. (2018). Impact of organizational climate on organizational commitment and perceived organizational performance: empirical evidence from public hospitals. *BMC health services research*, 18(1), 399. https://doi.org/10.1186/s12913-018-3149-z
- Brun, J. P., & Dugas, N. (2008). An analysis of employee recognition: Perspectives on human resources practices. *The International Journal of Human Resource Management*, 19(4), 716-730. https://doi.org/10.1080/09585190801953723
- Carlini, J., Lehman, K., Dharmesti, M., & Knox, K. (2023). Maximizing value in healthcare partnerships: a case examining an inter-organizational relationship in the public and non-profit sectors. *Journal of Philanthropy and Marketing*, 28(3), e1796.
- Carney, M. (2011). Influence of organizational culture on quality healthcare delivery. *International journal of health care quality assurance*, 24(7), 523-539. <a href="https://doi.org/10.1108/09526861111160562">https://doi.org/10.1108/09526861111160562</a>
- Christiansen, A., O'Brien, M. R., Kirton, J. A., Zubairu, K., & Bray, L. (2015). Delivering compassionate care: the enablers and barriers. *British Journal of Nursing*, 24(16), 833-837. https://doi.org/10.12968/bjon.2015.24.16.833
- Fahlevi, M., Aljuaid, M., & Saniuk, S. (2022). Leadership style and hospital performance: empirical evidence from Indonesia. *Frontiers in psychology*, 13, 911640. https://doi.org/10.3389/fpsyg.2022.911640
- Harmon, J., Scotti, D. J., Behson, S., Petzel, R., Neuman, J. H., & Keashly, L. (2003). Effects of high-involvement work systems on employee satisfaction and service costs in veterans healthcare. *Journal of healthcare management*, 48(6), 393-406.
- Hoxha, G., Simeli, I., Theocharis, D., Vasileiou, A., & Tsekouropoulos, G. (2024). Sustainable healthcare quality and job satisfaction through organizational culture: Approaches and outcomes. *Sustainability*, 16(9), 3603. https://doi.org/10.3390/su16093603
- Ibrahim, R., Boerhannoeddin, A., & Kayode, B. K. (2017). Organizational culture and development: Testing the structural path of factors affecting employees' work performance in an organization. *Asia Pacific Management Review*, 22(2), 104-111. <a href="https://doi.org/10.1016/j.apmrv.2016.10.002">https://doi.org/10.1016/j.apmrv.2016.10.002</a>
- Kaundinya, K. B. (2024). Organizational theory—a three-dimensional tool to analyze and enhance collaboration in healthcare systems. *Journal of Business and Socio-Economic Development*, 4(3), 210-221.

- Llamzon, J., & Matney, S. (2025). Strategic Synergy: The Dyadic Relationship of Executive Nurse and Physician in Service Line Management Within Complex Health Systems. *Nurse Leader*, 23(1), 72-76. <a href="https://doi.org/10.1016/j.mnl.2024.10.007">https://doi.org/10.1016/j.mnl.2024.10.007</a>
- Muchiri, C. T. (2022). Effects of work stress on service delivery, productivity, service quality and corporate image in Kenya Disciplined Services. *Reviewed Journal International of Business Management*, 3(1), 38-52.
- Okunade, J. K. (2025). Exploring the Impact of Effective Internal Communication Strategies on Employee Morale, Productivity, and Organizational Culture. *Lakhomi Journal Scientific Journal of Culture*, 6(1), 1-11.
- Ongwae, B. N., Lagat, C., & Odunga, R. (2018). Effect of organizational factors on employee performance in Kenyan Universities Campuses; a Case of Nakuru County. *Journal of Human Resource & Leadership*, 2(3), 1-26.
- Pavithra, A. (2022). Towards developing a comprehensive conceptual understanding of positive hospital culture and approaches to healthcare organisational culture change in Australia. *Journal of Health Organization and Management*, 36(1), 105-120.
- Pearson, A., Porritt, K. A., Doran, D., Vincent, L., Craig, D., Tucker, D., ... & Henstridge, V. (2006). A comprehensive systematic review of evidence on the structure, process, characteristics and composition of a nursing team that fosters a healthy work environment. *International Journal of Evidence-Based Healthcare*, 4(2), 118-159. <a href="https://doi.org/10.1111/j.1479-6988.2006.00039.x">https://doi.org/10.1111/j.1479-6988.2006.00039.x</a>
- Pretorius, W. (2005). Organizational factors influencing the transformational process of a financial institution (Doctoral dissertation, University of Pretoria).
- Rathert, C., & Fleming, D. A. (2008). Hospital ethical climate and teamwork in acute care: the moderating role of leaders. *Health Care Management Review*, *33*(4), 323-331. <a href="https://doi.org/10.1097/01.HCM.0000318769.75018.8d">https://doi.org/10.1097/01.HCM.0000318769.75018.8d</a>
- Rodrigues, C. F. (2021). Communicative trust in therapeutic encounters: users' experiences in public healthcare facilities and community pharmacies in Maputo, Mozambique. *Social Science & Medicine*, 291, 114512. https://doi.org/10.1016/j.socscimed.2021.114512
- Sermontyte-Baniule, R., Pundziene, A., Giménez, V., & Narbón-Perpiñá, I. (2022). Role of cultural dimensions and dynamic capabilities in the value-based performance of digital healthcare services. *Technological Forecasting and Social*Change, 176, 121490. <a href="https://doi.org/10.1016/j.techfore.2022.121490">https://doi.org/10.1016/j.techfore.2022.121490</a>
- Sertan, A., Çek, K., Öniz, A., & Özgören, M. (2023, April). The influence of medicine approaches on patient trust, satisfaction, and loyalty. In *Healthcare* (Vol. 11, No. 9, p. 1254). MDPI. https://doi.org/10.3390/healthcare11091254
- Wu, Y., & Tham, J. (2023). The impact of environmental regulation, Environment, Social and Government Performance, and technological innovation on enterprise resilience under a green recovery. *Heliyon*, 9(10). <a href="https://doi.org/10.1016/j.heliyon.2023.e20278">https://doi.org/10.1016/j.heliyon.2023.e20278</a>
- Zhang, W., Zeng, X., Liang, H., Xue, Y., & Cao, X. (2023). Understanding how organizational culture affects innovation performance: A management context perspective. *Sustainability*, 15(8), 6644. <a href="https://doi.org/10.3390/su15086644">https://doi.org/10.3390/su15086644</a>