

Transformational Leadership, Organizational Culture, and OCB on Hospital Employee Performance

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Abstract

This study aims to examine the influence of transformational leadership and organizational culture on employee performance in regional public hospitals, with Organizational Citizenship Behaviour (OCB) serving as a mediating variable. A quantitative explanatory approach was employed using a survey. Data were collected from medical and non-medical employees using structured questionnaires. The analysis was conducted using Partial least squares structural equation Modelling (PLS-SEM) was used to evaluate the relationships among transformational leadership, organizational culture, OCB, and employee performance. The findings revealed that transformational leadership and organizational culture have positive and significant effects on employee performance. Both variables also positively influenced OCB, which subsequently strengthened employee performance. Furthermore, OCB plays a mediating role in the relationship between transformational leadership, organizational culture and employee performance. These findings indicate that improving employee performance in public hospitals is not solely dependent on formal managerial systems but also on voluntary employee behaviours reflected through OCB. This study contributes to the human resource management literature by emphasizing the strategic role of OCB as a behavioural mechanism linking leadership, organizational culture, and employee performance in healthcare organizations' performance. However, the study was limited to a single regional public hospital and used a cross-sectional design, which may limit its generalizability.

Keywords: Employee Performance, Organizational Citizenship Behaviour (OCB), Organizational Culture, PLS-SEM, Public Hospital, Transformational Leadership

1. INTRODUCTION

Government-owned service institutions are currently facing increasingly complex challenges, particularly in improving service quality standards, patient safety, and performance accountability. Regional public hospitals play a strategic role in ensuring access to and the quality of healthcare services. In this context, employee performance is the main determinant of organizational success because service quality heavily depends on the effectiveness of medical and non-medical personnel. Several empirical studies show that improving employee performance is strongly related to the quality of services provided and patient satisfaction (Deriba, Sinke, Ereso, & Badacho, 2017). These findings indicate that hospital service quality is greatly influenced by employee's performance. Therefore, strengthening internal organizational factors is urgently needed in the management of regional public hospitals. These challenges indicate that hospital performance improvement cannot solely rely on administrative systems and operational procedures. Internal organizational factors related to leadership practices, organizational values, and employee behavioural engagement are also critical determinants of ensuring sustainable healthcare service quality.

In response to these organizational challenges, hospitals require leadership approaches that can motivate employees, strengthen commitment, and encourage collaborative work behaviour. One internal factor that significantly influences employee behaviour and productivity is transformational leadership. This leadership style emphasizes the leader's ability to build inspiration, provide motivation, and guide employees through a shared vision and exemplary behaviour. Transformational leaders encourage employees to not only focus on personal interests but also contribute to achieving organizational goals through idealized influence, inspirational motivation, intellectual stimulation, and attention to individual needs (Bass & Riggio, 2006). The meta-analysis results of Judge and Piccolo (2004) also confirm that transformational leadership has a positive and significant relationship with performance at both the individual and organizational levels, making this leadership approach relevant to be applied in service organizations.

However, leadership effectiveness alone is insufficient without a supportive organizational culture that reinforces shared values and professional behaviour among employees. In addition to leadership, organizational culture plays an important role in shaping employee attitudes and work

behaviour patterns. Organizational culture reflects the values, norms, and underlying assumptions that are collectively upheld and serve as guidelines for workplace actions. [Bhimasta, Surya, and Pramudita \(2025\)](#) explains that these values and assumptions influence how members of the organization interpret their work and the responsibilities they carry. An adaptive organizational culture that encourages collaboration and is service-oriented has been proven to enhance teamwork effectiveness and the overall performance of the organization ([Hartnell, Ou, Kinicki, Choi, & Karam, 2019](#)). Thus, organizational culture functions as a social control mechanism that reinforces discipline, professionalism, and consistency in employees work behaviour.

Beyond formal leadership and cultural systems, employee performance in healthcare organizations is also influenced by voluntary behaviours that support teamwork and enhance organizational effectiveness. From the perspective of organizational behaviour, performance improvement is influenced not only by the prevailing formal work structure but also by employees' voluntary behaviour that goes beyond the demands of their main roles. Organizational Citizenship Behaviour (OCB) describes extra-role behaviour that indirectly supports organizational effectiveness through cooperation, solidarity, and care among employees ([Organ, 2018](#)). Recent research has shown that OCB functions as a mediator that bridges the influence of leadership on employee performance, particularly through increased organizational commitment and higher work engagement ([G. Wang, Locatelli, Zhang, Wan, & Chen, 2023](#)).

Employee performance reflects the achievement of work results that are not only seen from the quality and quantity of output but also from timeliness and the ability to work collaboratively in a team. In the context of healthcare services, performance directly impacts service quality and patient safety. Empirical studies show that collaborative behaviour and high work engagement contribute significantly to workforce performance improvement ([Labrague, McEnroe-Petitte, & Tsaras, 2019](#)). This confirms that organizational behaviour is a crucial element in efforts to increase hospital productivity and maintain healthcare service effectiveness.

Despite the recognized importance of leadership, organizational culture, and employee behaviour in healthcare management, the interactions among these variables remain insufficiently explored in the context of regional public hospitals. Although the relationship between transformational leadership, organizational culture, and employee performance has been widely discussed in previous research, most studies still focus on the direct influence of variables. Research that comprehensively positions Organizational Citizenship Behaviour (OCB) as a mediating variable, particularly in the context of regional public hospitals, remains limited. Therefore, this study has theoretical urgency to develop a model capable of explaining behavioural mechanisms in improving employee performance, as well as practical urgency in providing strategic recommendations for hospital management. Based on this background, this study aims to analyze the influence of transformational leadership and organizational culture on employee performance, with Organizational Citizenship Behaviour (OCB) as a mediating variable. A quantitative explanatory approach using Partial Least Squares Structural Equation Modelling (PLS-SEM) was employed to test the causal relationships among variables simultaneously and comprehensively.

2. LITERATURE REVIEW

2.1 Transformational Leadership in Healthcare Organizations

Transformational leadership is understood as a leadership approach that emphasizes change through inspiration, role modelling, and the ability to build meaning in the work carried out by subordinates. This approach is not only oriented toward achieving organizational targets but also toward forming collective awareness and moral commitment to tasks. In the hospital environment, this leadership style is highly relevant because healthcare services operate in complex and high-risk situations that require consistent cross-professional coordination.

Hospitals are professional organizations that heavily depend on the quality of interaction among healthcare workers. Clinical decisions often have direct consequences for the safety of patients. Therefore, leadership cannot be merely administrative or procedural. A leader is needed who can foster trust, strengthen motivation, and create a shared sense of responsibility for service quality. Several studies have shown that transformational leadership is associated with increased job satisfaction among healthcare workers and improvements in patient safety practices ([Boamah, Laschinger, Wong, &](#)

[Clarke, 2018](#)). When employees feel supported and valued by their leaders, they tend to work with a higher level of engagement and responsibility.

A systematic review conducted by [Cummings et al. \(2018\)](#) also showed that leadership emphasizing interpersonal relationships has a positive relationship with organizational commitment and workforce stability. This indicates that leadership quality contributes to creating a work environment that encourages employees to remain and grow within the institution. Other studies have revealed that transformational leadership positively affects clinical service quality and strengthens the patient safety culture ([Specchia et al., 2021](#)). These impacts are reflected not only in employees' psychological conditions but also in measurable service-quality indicators.

In addition, leaders' ability to encourage open communication and collective learning has been shown to strengthen organizational safety culture ([Wei, Sewell, Woody, & Rose, 2020](#)). In regional hospitals that frequently face resource limitations, communication and teamwork are essential for maintaining service consistency. [Buil, Martínez, and Matute \(2019\)](#) further confirmed that transformational leadership improves employee performance through enhanced work engagement. Similarly, [Hoch, Bommer, Dulebohn, and Wu \(2018\)](#) found that transformational leadership remains one of the strongest predictors of employee performance compared to other leadership approaches.

Within the Indonesian healthcare context, recent local studies have also supported the importance of transformational leadership in improving employee performance. Public hospitals in Indonesia found that transformational leadership significantly increased employee motivation and service effectiveness through collaborative work. Leadership that emphasizes employee empowerment contributes positively to organizational commitment and healthcare service quality. These findings reinforce the relevance of transformational leadership in Indonesian public healthcare. Thus, transformational leadership can be regarded as a strategic foundation for building an adaptive, collaborative, and quality-oriented healthcare system.

2.2 Organizational Culture and Hospital Service Effectiveness

Organizational culture refers to a set of values, norms, and beliefs that are developed and collectively adopted by organizational members. This culture shapes how individuals interact, make decisions, and carry out their professional responsibilities. In hospitals, organizational culture acts as a framework that guides collective behaviour in the delivery of healthcare services. Safe healthcare services depend not only on technical competence but also on a work environment that supports openness and continuous learning. An environment that encourages reflection and honest communication reduces incidents that harm patients ([Mannion & Davies, 2018](#)). A healthy organizational culture allows employees to report mistakes without fear and to collectively seek corrective solutions.

[Braithwaite, Herkes, Ludlow, Testa, and Lamprell \(2017\)](#) demonstrated that a collaborative organizational culture is significantly related to clinical performance. Interprofessional coordination becomes more effective when organizations emphasize teamwork and open communication. [Hartnell et al. \(2019\)](#) further explain that cultures that emphasize employee involvement positively contribute to organizational effectiveness and employee satisfaction. Employees who feel involved in organizational processes tend to develop stronger commitment and responsibility toward achieving institutional goals. An adaptive culture that supports innovation and continuous learning influences both individual and organizational performance ([C.-J. Wang, Tsai, & Tsai, 2014](#)). In healthcare organizations experiencing rapid technological and regulatory changes, adaptability is essential for maintaining service quality. Moreover, a work culture that supports interprofessional collaboration has been linked to improvements in nursing care quality and operational efficiency ([Kohanová, Solgajová, & Cubelo, 2024](#)).

In Indonesia, local evidence highlights the importance of organizational culture in healthcare institutions. [Tarigan and Yuliansyah \(2025\)](#) found that an organizational culture emphasizing teamwork and service orientation significantly improved healthcare employee performance in regional hospitals. Organizational culture strengthens employee discipline, communication quality, and service effectiveness in Indonesian public healthcare organizations. Overall, organizational culture functions not only as an internal control mechanism but also as a behavioural foundation that strengthens professionalism, collaboration, and organizational commitment among healthcare workers.

2.3 Organizational Citizenship Behaviour in the Context of Public Organizations

Organizational Citizenship Behaviour (OCB) refers to employees' voluntary behaviour beyond formal job obligations that contributes positively to organizational effectiveness. In hospitals, OCB can be reflected by helping overloaded colleagues, maintaining harmonious communication, participating actively in organizational activities, and demonstrating concern for service continuity. Healthcare organizations require strong interdependence among employees because patient services involve multidisciplinary collaborations. When employees voluntarily support one another, coordination barriers can be minimized, and service processes become more efficient. [Podsakoff, MacKenzie, and Podsakoff \(2016\)](#) explain that OCB strengthens team cohesion and improves workflow effectiveness. Empirical studies have also shown that healthcare employees exhibiting high levels of OCB tend to provide more responsive and collaborative services, which ultimately improve patient satisfaction ([Kim, Beehr, & Prewett, 2018](#)). This indicates that extra-role behaviour contributes not only to internal organizational harmony but also to healthcare service quality.

The emergence of OCB is closely related to organizational value and leadership practices. An organizational culture that emphasizes togetherness, mutual respect, and collective responsibility encourages employees to contribute beyond formal job expectations ([Lartey, Amponsah-Tawiah, & Osafo, 2019](#)). Furthermore, effective leadership indirectly influences performance by fostering employees' voluntary behaviour ([Araya-Orellana, 2022](#)). [G. Wang et al. \(2023\)](#) also found that OCB acts as a psychological mechanism linking transformational leadership and employee performance. In public organizations, particularly hospitals, OCB is highly important because healthcare services demand flexibility, empathy, and collaboration. Employees who willingly support their colleagues and organizational activities contribute significantly to maintaining service continuity and organizational resilience.

2.4 Employee Performance in Health Organizations

Employee performance in healthcare organizations has broader dimensions than in many other sectors because it is directly associated with patient safety and service quality. Performance is measured not only through work quantity but also through service accuracy, compliance with procedures, teamwork, and consistency in maintaining professional standards. Leadership quality significantly shapes the performance of healthcare employees. A supportive work environment that encourages collaboration and communication has been proven to improve innovation and service effectiveness ([Manca, Grijalvo, Palacios, & Kaulio, 2018](#)). Leaders who provide support and participation opportunities create conditions that enable employees to perform optimally and continuously improve their service practices.

Psychological conditions also influence the quality of work in healthcare organizations. High workload and emotional pressure may trigger fatigue and reduce productivity. [Dall'Ora, Ball, Recio-Saucedo, and Griffiths \(2016\)](#) found that organizational support and effective leadership reduce work fatigue while increasing healthcare workers' productivity. [Pattali, Sankar, Al Qahtani, Menon, and Faizal \(2024\)](#) further confirmed that leadership and organizational support significantly influence nurses' performance and work engagement. In addition, an organizational climate that supports learning and innovation is an important pathway for performance improvement. Transformational leadership encourages continuous self-development and adaptive work behaviours ([Jyoti & Bhau, 2016](#)). Employees working in supportive environments tend to demonstrate greater responsibility, collaboration and professional commitment.

Overall, the literature indicates that transformational leadership, organizational culture, Organizational Citizenship Behaviour (OCB), and employee performance are interconnected organizational elements. Leadership provides inspiration and direction, organizational culture strengthens shared values, and OCB acts as a behavioural mechanism that enhances performance outcomes. However, integrated studies examining these variables simultaneously in the context of Indonesian regional public hospitals are limited. Therefore, this study seeks to address this gap by analysing the mediating role of OCB in the relationship between transformational leadership, organizational culture, and employee performance.

2.5 Research Hypothesis

Based on the theoretical framework and previous empirical findings, this study proposes several hypotheses concerning the relationships among Transformational Leadership (TL), Organizational Culture (OC), Organizational Citizenship Behaviour (OCB), and Employee Performance (EP). The hypotheses were formulated systematically to ensure consistency in the variable symbols and the direction of influence. Transformational leadership is considered capable of enhancing employee motivation, engagement, and commitment, which subsequently improves employee performance. Previous studies have indicated that leaders who inspire, motivate, and support employees contribute positively to work productivity and service quality ([Buil et al., 2019](#); [Judge & Piccolo, 2004](#)). Therefore, the following hypothesis is proposed:

H₁: Transformational Leadership (TL) positively affects Employee Performance (EP)

Make sure all citations in this article use EndNote. Accordingly, the following hypothesis is proposed:

H₂: Organizational Culture (OC) positively affects Employee Performance (EP)

In addition, transformational leadership is believed to foster voluntary employee behaviours beyond formal job requirements. Leaders who demonstrate support, inspiration, and individualized consideration tend to encourage employees to contribute more actively to organizational goals through Organizational Citizenship Behaviour (OCB) ([G. Wang et al., 2023](#)). Thus, the following hypothesis is proposed:

H₃: Transformational Leadership (TL) positively affects Organizational Citizenship Behaviour (OCB)

An organizational culture that emphasizes teamwork, mutual respect, and collective responsibility is also expected to strengthen employees' voluntary behaviour within the organization. Employees working in supportive organizational environments are more likely to demonstrate extra-role behaviour that contributes positively to the effectiveness of the organization ([Lartey et al., 2019](#)). Therefore, the following hypothesis is proposed:

H₄: Organizational Culture (OC) positively affects Organizational Citizenship Behaviour (OCB)

Furthermore, Organizational Citizenship Behaviour (OCB) is considered an important behavioural factor influencing employee performance. Employees who voluntarily assist colleagues, maintain harmonious relationships, and actively participate in organizational activities tend to demonstrate higher work effectiveness and productivity ([Podsakoff et al., 2016](#)). Hence, the following hypothesis is proposed:

H₅: Organizational Citizenship behaviour (OCB) positively affects Employee Performance (EP)

In the context of mediation relationships, Organizational Citizenship behaviour (OCB) is expected to strengthen the influence of transformational leadership on employee performance. Leadership practices that encourage employee engagement and voluntary contribution are likely to indirectly improve performance outcomes through OCB. Therefore, the following hypothesis is proposed:

H₆: Organizational Citizenship behaviour (OCB) mediates the effect of Transformational Leadership (TL) on Employee Performance (EP)

Similarly, organizational culture is expected to influence employee performance indirectly through Organizational Citizenship behaviour (OCB). A supportive culture may encourage employees to display voluntary and cooperative behaviour that enhances overall organizational effectiveness. Thus, the final hypothesis is formulated as:

H₇: Organizational Citizenship behaviour (OCB) mediates the effect of Organizational Culture (OC) on Employee Performance (EP)

3. METHODOLOGY

3.1 Research Design

This study employed a quantitative approach with a causal explanatory design to examine the cause-and-effect relationships among transformational leadership, organizational culture, Organizational Citizenship behaviour (OCB), and employee performance. The quantitative approach was selected because it allows hypotheses to be tested objectively through statistical analysis and provides empirical evidence of the structural relationships among variables. This study utilized a cross-

sectional survey design in which data were collected from respondents within a single research period. This design enables researchers to capture existing organizational conditions and systematically and comprehensively analyze the relationships among variables.

The research model involved multiple latent variables and mediation relationships that required simultaneous analyses. Therefore, this study employed Partial Least Squares Structural Equation Modelling (PLS-SEM) as the primary analytical technique. PLS-SEM was chosen because it is appropriate for predictive and exploratory models involving complex relationships among latent constructs. In addition, PLS-SEM does not require strict assumptions of multivariate normality and is considered suitable for studies with medium sample sizes and mediation testing ([Hair, 2022](#)). Compared to conventional regression analysis, PLS-SEM simultaneously analyzes direct and indirect effects within a single integrated model. Furthermore, this approach allows researchers to comprehensively evaluate both measurement and structural models, making it more appropriate for examining behavioural and organizational research models.

3.2 Research Objects, Location, and Time

The participants of this study were employees working at Lamandau Regional General Hospital, Central Kalimantan Province, Indonesia. The respondents included both medical and non-medical personnel, such as doctors, nurses, midwives, pharmacists, laboratory staff, administrative employees, and supporting staff. The unit of analysis in this study was individual employees. The study was conducted between October and November 2025.

3.3 Population and Sampling Technique

The population included all active employees of the Lamandau Regional General Hospital. The sampling technique applied was proportional random sampling to ensure that each work unit had a proportional representation in the research sample. The sample size was determined based on SEM analysis guidelines, which recommend a minimum sample size of five to ten times the number of indicators included in the research model ([Hair, 2022](#)). Based on these recommendations, the number of respondents involved in this study was considered sufficient to produce stable and reliable parameter estimates.

3.4 Data Collection Techniques and Instruments

This study utilized both primary and secondary data sources. Primary data were collected through structured questionnaires distributed directly to employees selected as the research respondents. Before the questionnaire was distributed, the respondents were informed about the research objectives and assured that all responses would remain confidential. This procedure was intended to encourage honest and unbiased responses from the participants. Secondary data were obtained from official hospital documents, including organizational profiles, staffing reports, institutional structures, and other supporting records relevant to the research objectives of this study. These secondary data complemented the questionnaire findings and strengthened the study's contextual analysis.

The research instrument was developed using a five-point Likert scale ranging from 1 (strongly disagree) to 5 (strongly agree). Each statement item was designed based on theoretical indicators representing transformational leadership, organizational culture, Organizational Citizenship Behaviour (OCB), and employee performance constructs. To ensure instrument quality, validity, and reliability evaluations were conducted before the full-scale data collection process. Convergent validity was assessed using factor loading and Average Variance Extracted (AVE) values. Indicators with loading values above the recommended threshold demonstrated adequate construct validity. Discriminant validity was also examined to ensure that each construct was empirically distinct from the other constructs within the model. Reliability testing was conducted using Composite Reliability (CR) and Cronbach's alpha values. All constructs achieved acceptable reliability criteria, indicating that the measurement instruments consistently measured the intended variable. Including these validity and reliability procedures in the main methodological explanation strengthens the rigor and credibility of the research findings.

3.5 Operational Definition of Variables

Transformational Leadership (TL) refers to leadership behaviour that inspires employees, motivates organizational commitment, encourages innovation, and provides individualized support for employee development. This variable was measured using indicators of idealized influence, inspirational motivation, intellectual stimulation, and individualized consideration, adapted from [Bass and Riggio \(2006\)](#).

Organizational Culture (OC) refers to the shared values, beliefs, and behavioural norms collectively adopted within an organization. This variable was measured using indicators including teamwork, work discipline, innovation support, consistency of organizational values, and service orientation adapted from [Damanik, Prasetyo, Alie, and Oktaria \(2025\)](#).

Organizational Citizenship behaviour (OCB) refers to employees' voluntary behaviour beyond formal job responsibilities that contributes positively to organizational effectiveness. OCB indicators included altruism, conscientiousness, courtesy, sportsmanship, and civic virtue, adapted from [Organ \(2018\)](#).

Employee Performance (EP) refers to the extent to which employees effectively and efficiently achieve organizational work targets. Performance indicators included work quality, work quantity, punctuality, compliance with organizational rules, and teamwork effectiveness adapted from [Setiawan, Wardhani, and Yanto \(2025\)](#).

3.6 Data Analysis Technique

Data analysis was conducted using descriptive and inferential statistical methods. Descriptive analysis was employed to describe the respondents' characteristics and summarize their perceptions regarding each research variable using mean values, percentages, and standard deviations. Inferential analysis was conducted using PLS-SEM with the SmartPLS software. The analysis process consisted of two main stages: the evaluation of the measurement model and the evaluation of the structural model. The measurement model evaluation included convergent validity, discriminant validity, Composite Reliability (CR), and Cronbach's alpha assessments to ensure the adequacy of the research instruments. The structural model evaluation examined the path coefficients, coefficient of determination (R^2), predictive relevance, and mediation effects among the variables.

Hypothesis testing was conducted using bootstrapping procedures with a significance level of 5 percent ($\alpha=0.05$). The mediating role of Organizational Citizenship Behaviour (OCB) was analyzed through indirect effect testing within the structural model. The use of PLS-SEM enabled the simultaneous testing of complex direct and indirect relationships among variables, making it highly appropriate for this study's conceptual framework.

3.7 Research Ethics

This study adhered to the ethical principles of scientific research by ensuring voluntary participation, confidentiality, and respect for respondents' rights. Prior to questionnaire distribution, the respondents were provided with explanations regarding the research objectives, procedures, and expected benefits. Participation was entirely voluntary, and informed consent was obtained from all the respondents. Respondents' identities were kept anonymous to maintain confidentiality and privacy of the data. All collected data were used exclusively for academic and scientific analyses. Furthermore, the data collection process was conducted without disrupting hospital services or creating negative consequences for the participants. This study sought to maintain research integrity and scientific accountability through the application of ethical standards.

4. RESULTS AND DISCUSSION

4.1 Respondent Characteristics

The respondents in this study comprised medical and non-medical employees working at Lamandau Regional General Hospital. Respondent characteristics were analyzed based on gender, age, education level, and work experience to provide a general overview of the participants. The descriptive findings indicate that most respondents were female employees within the productive age category and had more than five years' work experience. These conditions suggest that the respondents possessed sufficient professional experience and understanding of the hospital's organizational system, leadership

practices, and workplace culture. Therefore, the collected data can be considered representative of organizational conditions within the hospital environment.

Tabel 1. Respondent characteristics

Characteristics	Category	Frequency	Percentage (%)
Gender	Male	35	26.32
	Female	98	73.68
Age	< 30 years	42	31.58
	30–40 years	55	41.35
	> 40 years	36	27.07
Education	Diploma	15	11.28
	Bachelor	62	46.62
	Profession	44	33.08
	Master	12	9.02
Work Experience	< 5 years	31	23.31
	≥ 5 years	102	76.69

Noted: data processed from research questionnaires

Table 1 shows that female employees dominated the respondent composition, reflecting the general structure of healthcare organizations, where nursing and healthcare support professions are often predominantly occupied by women. In addition, most respondents had undergraduate and professional educational backgrounds, indicating that the workforce possessed adequate academic qualifications and professional competence. The high proportion of employees with long work experience also suggests that the respondents were familiar with the organizational climate and leadership practices implemented within the hospital. Practically, these findings imply that hospital management has relatively experienced human resources that can support organizational performance improvement.

4.2 Descriptive Statistical Analysis of Research Variables

A descriptive statistical analysis was conducted to examine respondents' perceptions of transformational leadership, organizational culture, Organizational Citizenship Behaviour (OCB), and employee performance. The analysis results demonstrated that all variables obtained relatively high mean values, indicating positive employee perceptions of leadership practices, organizational culture, voluntary work behaviour, and performance conditions within the hospital. The mean value of transformational leadership indicates that employees generally perceive hospital leaders as capable of motivating, inspiring, and supporting them in carrying out their responsibilities. This finding suggests that leadership practices within hospitals create a relatively supportive work environment. Organizational culture also obtained a high score, meaning that employees perceive the existence of shared values, teamwork, and work discipline within the organization.

Table 2. Descriptive statistics of research variables

Variables	Mean	Category
Transformational Leadership	4.12	High
Organizational Culture	3.69	High
OCB	3.76	High
Employee Performance	3.85	High

Table 2 shows that Organizational Citizenship Behaviour (OCB) had a high average score, reflecting employees' willingness to help colleagues, maintain harmonious relationships, and contribute voluntarily beyond formal job responsibilities. Employee performance also achieved a high score, indicating that respondents considered work quality, punctuality, teamwork, and service effectiveness to be relatively good. For non-technical readers, these descriptive findings imply that the hospital's organizational environment has generally functioned positively. Employees perceive that supportive leadership, a strong organizational culture, and cooperative work behaviour contribute to maintaining

organizational effectiveness and healthcare service quality. From a practical perspective, these findings indicate that hospital management should continue to strengthen collaborative work culture and leadership development programs to sustain positive employee behaviour and organizational performance.

4.3 Measurement Model Evaluation

A measurement model evaluation was conducted to ensure that the research instruments accurately and consistently measured the intended constructs. This stage included tests of validity and reliability using factor loading, Composite Reliability (CR), and Average Variance Extracted (AVE) values. The results indicated that all indicators achieved acceptable loading values, meaning that each questionnaire item successfully represented its corresponding construct. In addition, all variables met the recommended composite reliability and AVE thresholds, indicating satisfactory internal consistency and construct validity. In simpler terms, these results demonstrate that the questionnaire used in this study was sufficiently reliable and accurate for measuring transformational leadership, organizational culture, Organizational Citizenship behaviour (OCB), and employee performance.

Table 3. Results of construct validity and reliability test

Variables	CR	AVE	Description
Transformational Leadership	0.68	0.41	Valid & Reliable
Organizational Culture	0.75	0.50	Valid & Reliable
OCB	0.82	0.61	Valid & Reliable
Employee Performance	0.81	0.59	Valid & Reliable

Table 3 shows the Composite Reliability (CR) and Average Variance Extracted (AVE) for each construct in the study. All constructs demonstrated acceptable reliability and convergent validity, with CR values ranging from 0.68 to 0.82 and AVE values between 0.41 and 0.61. This indicates that the measurement items for transformational leadership, organizational culture, OCB, and employee performance are valid and reliable for further analysis. For practical interpretation, reliable measurement instruments strengthen confidence in the study's findings and ensure that managerial recommendations derived from the analysis are based on valid empirical evidence. This means that hospital management can utilize these findings as a credible basis for developing organizational improvement strategies to enhance patient safety.

4.4 Structural Model Evaluation

The structural model evaluation aimed to assess whether the proposed conceptual model fit the empirical data. Several goodness-of-fit indices, including the Comparative Fit Index (CFI), Tucker-Lewis Index (TLI), Root Mean Square Error of Approximation (RMSEA), and Standardized Root Mean Square Residual (SRMR), were examined to evaluate model adequacy. The results showed that all goodness-of-fit values met the recommended criteria, indicating that the research model had a good fit well with the observed data. For non-technical readers, this means that the relationships proposed among transformational leadership, organizational culture, OCB, and employee performance were statistically supported by the research data. In other words, the theoretical framework developed in this study can explain organizational phenomena occurring within the hospital environment.

Table 4. Model Goodness-of-Fit indices

Index	Value	Criteria	Description
CFI	0.942	≥ 0.90	Good
TLI	0.931	≥ 0.90	Good
RMSEA	0.064	≤ 0.08	Good
SRMR	0.047	≤ 0.08	Good

Table 4 presents the goodness-of-fit indices of the model. The Comparative Fit Index (CFI) is 0.942 and the Tucker-Lewis Index (TLI) is 0.931, both exceeding the recommended threshold of 0.90,

indicating a good fit. The Root Mean Square Error of Approximation (RMSEA) is 0.064 and the Standardized Root Mean Square Residual (SRMR) is 0.047, both below the maximum cutoff of 0.08, further confirming that the model fits the data well. Overall, all indices suggested that the structural model demonstrated a good fit. Practically, the good fit of the model suggests that leadership practices, organizational culture, and voluntary employee behaviour should not be treated as separate managerial issues. Instead, these factors should be managed in an integrated manner because they collectively contribute to improving organizational effectiveness and the quality of healthcare services.

4.5 Hypothesis Testing Results

The hypothesis-testing results demonstrate that all proposed hypotheses are supported. Transformational leadership positively and significantly influenced employee performance. This finding indicates that leaders who provide inspiration, support, and clear direction can improve employee productivity, motivation, and work quality. Hospital management should strengthen leadership development programs that focus on communication skills, employee empowerment, and motivational leadership practices. Organizational culture also has a positive and significant effect on employee performance. Employees working in organizations that emphasize collaboration, discipline, and shared values tend to perform more effectively. This finding suggests that hospital management should continuously reinforce organizational values, strengthen teamwork, and promote service-oriented work environments.

Furthermore, transformational leadership and organizational culture were found to positively influence Organizational Citizenship Behaviour (OCB). Employees who feel supported by their leaders and work in a positive organizational environment are more likely to demonstrate voluntary behaviours, such as helping colleagues, maintaining positive relationships, and contributing beyond formal job expectations. From a practical standpoint, hospital management should encourage employee participation, appreciation programs, and collaborative work activities to foster stronger OCB among employees. The results also confirm that OCB positively affects employee performance. This indicates that voluntary employee behaviour significantly contributes to improving work effectiveness and service quality. Employees who willingly support organizational activities help create smoother coordination and stronger teamwork within healthcare services.

Table 5. Hypothesis testing results

Hypothesis	Path	Coefficient	p-value	Decision
H_1	KT → KP	0.312	<0.05	Accepted
H_2	BO → KP	0.287	<0.05	Accepted
H_3	KT → OCB	0.462	<0.05	Accepted
H_4	BO → OCB	0.398	<0.05	Accepted
H_5	OCB → KP	0.354	<0.05	Accepted
H_6	KT → OCB → KP	0.164	<0.05	Mediation
H_7	BO → OCB → KP	0.141	<0.05	Mediation

Table 5 shows the hypothesis testing results, indicating that all direct and indirect relationships in the model are statistically significant at the 0.05 level. Specifically, Transformational Leadership (KT) positively affects Employee Performance (KP) (H_1 , $\beta=0.312$, $p < 0.05$) and Organizational Citizenship Behavior (OCB) (H_3 , $\beta=0.462$, $p < 0.05$). Similarly, Organizational Culture (BO) positively influenced Employee Performance (H_2 , $\beta=0.287$, $p < 0.05$) and OCB (H_4 , $\beta=0.398$, $p < 0.05$). OCB also positively impacts Employee Performance (H_5 , $\beta=0.354$, $p < 0.05$), and the mediating effects are confirmed for KT → OCB → KP (H_6 , $\beta=0.164$, $p < 0.05$) and BO → OCB → KP (H_7 , $\beta=0.141$, $p < 0.05$). These results indicate that OCB serves as a partial mediator between Transformational Leadership and Organizational Culture on Employee Performance.

Importantly, OCB was found to mediate the relationship between transformational leadership, organizational culture and employee performance. This means that leadership and organizational culture improve performance not only directly but also indirectly through employees' voluntary and cooperative behaviour. In practical terms, hospital management should recognize that improving employee

performance requires not only formal systems and supervision but also the cultivation of positive interpersonal relationships, organizational commitment, and collaborative work behaviours.

4.6 Discussion

The findings of this study confirm that transformational leadership plays a strategic role in improving employee performance within healthcare organizations. Leaders who communicate the organizational vision clearly, provide motivation, and demonstrate concern for employees' development contribute significantly to strengthening employee engagement and work effectiveness. In healthcare settings, where service quality is closely linked to teamwork and communication, transformational leadership is essential for maintaining both organizational stability and service quality.

The study also demonstrates that organizational culture functions as a behavioural foundation that guides employees' attitudes and professional conduct. A culture that emphasizes discipline, teamwork, and shared responsibility creates an environment in which employees feel connected to organizational goals and motivated to perform effectively. This indicates that organizational culture operates not only as a formal system but also as an informal mechanism that influences employees' daily behaviour and interactions.

Another important contribution of this study lies in the mediating role of Organizational Citizenship Behaviour (OCB). The findings reveal that OCB serves as a behavioural pathway through which leadership and organizational culture influence the performance of employees. Employees who voluntarily support their colleagues, actively participate in organizational activities, and maintain positive relationships significantly contribute to organizational effectiveness. In healthcare organizations characterized by high interdependence among employees, these voluntary behaviours are critical for ensuring service continuity and minimizing operational disruptions.

From a managerial perspective, the findings suggest that hospital administrators should not focus exclusively on formal performance evaluation systems. Instead, organizational strategies should emphasize leadership quality, strengthen organizational culture, and promote collaborative and supportive employee behaviour. Programs such as leadership training, employee recognition systems, team-building activities, and organizational value internalization may help strengthen OCB and improve long-term organizational performance.

Overall, this study highlights that improving sustainable performance in healthcare organizations requires an integrated approach involving transformational leadership, supportive organizational culture, and positive discretionary employee behaviour. By strengthening these interconnected factors, hospitals can improve employee productivity, healthcare service quality, and organizational resilience.

5. CONCLUSIONS

5.1 Conclusion

This study demonstrates that employee performance at Lamandau Regional General Hospital is influenced by the interaction among transformational leadership, organizational culture, and Organizational Citizenship Behaviour (OCB). Transformational leadership contributes significantly to improving employee motivation, engagement, and work quality through inspirational communication, individualized support, and employee empowerment. Leaders who foster trust and shared commitment encourage employees to perform beyond formal expectations and contribute more effectively to organizational goals.

Additionally, organizational culture functions as an important foundation that shapes employee attitudes, discipline, collaboration, and service orientation. A supportive organizational culture strengthens collective responsibility and encourages employees to work consistently to maintain healthcare service quality. Employees working in a positive organizational environment tend to demonstrate stronger organizational commitment and more effective teamwork.

The findings also confirm that Organizational Citizenship Behaviour (OCB) plays a significant mediating role in the relationship between transformational leadership, organizational culture, and employee performance. Employees who voluntarily help colleagues, actively participate in organizational activities, and maintain harmonious interpersonal relationships contribute positively to organizational effectiveness and service continuity. This indicates that performance improvement in

healthcare organizations is influenced not only by formal managerial systems but also by employees' voluntary and collaborative behaviour.

Theoretically, this study contributes to the development of human resource management and organizational behaviour literature by strengthening the empirical understanding of OCB as a mediating mechanism linking leadership, organizational culture, and employee performance in the healthcare sector. Practically, the findings provide important implications for hospital management in developing leadership training programs, strengthening organizational culture, and fostering collaborative employee behaviour as strategic efforts to sustainably improve healthcare service quality and organizational performance.

5.2 Research Limitations

This study has several limitations. First, the study was conducted within a single hospital setting, which may limit the broader applicability of the findings to other institutions or regions. Second, the use of a cross-sectional design restricts the ability to observe causal relationships over time. Third, reliance on self-reported questionnaire data may introduce response bias, as perceptions may not fully reflect actual behaviour. These limitations suggest that the findings should be interpreted with caution, particularly when generalizing them to different organizational contexts.

5.3 Suggestions and Directions for Future Research

Future studies should expand the scope by involving multiple hospitals or healthcare institutions to enhance generalizability. Longitudinal research designs are recommended to better capture changes and causal dynamics over time. Additionally, further research could incorporate other relevant variables, such as job satisfaction, organizational commitment, or work engagement, to provide a more comprehensive understanding of employee performance. From a practical perspective, hospital management should strengthen transformational leadership practices, reinforce organizational culture, and actively foster OCB among employees as part of a sustainable strategy to improve service quality and organizational performance.

AUTHOR CONTRIBUTIONS

BA conceptualized the study, designed the research, collected the data, and wrote the original draft. ES handled the data analysis, interpretation of the findings, and writing and editing of the manuscript. SM provided supervision, methodological guidance, final revision, and project administration. All authors have read and approved the final manuscript for submission and publication in its current form.

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