



PSYCHOLOGICAL CAPITAL WITH INDIVIDUAL READINESS AS MEDIATOR TO CHAMPIONING BEHAVIOR IMPLEMENTATION ELECTRONIC MEDICAL RECORD

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Abstrak

The strategic plan of the ministry of health, especially in the hospital sector, which continues to be developed is electronic medical records. All hospitals in Indonesia must be prepared for the changes that will occur, including the individuals in them. Readiness for change is the key to the success of a change plan. Psychological capital is one of the factors that affect readiness for change. Siti Khodijah Muhammadiyah Hospital in Gurah Kediri has a strategic plan for the development of electronic medical records. This study is a cross-sectional quantitative study aimed at analyzing the effect of psychological capital on championing behavior with individual readiness for change as a mediator. Analysis using a structural equation model (SEM) with Lisrell software. The results showed that psychological capital was significant to individual readiness for change and championing behavior with significance values of 7.40 and 4.76, respectively. Individual readiness for significant changes to championing behavior with a significance value of 4.46. Individual readiness for change is proven to be a mediator of the relationship between psychological capital and championing behavior with the type of complementary mediation. With psychological capital owned by employees including the dimensions of self-confidence, optimism, resilience, and hope, it will support individual readiness for change and behavior that supports change.

Keywords : Championing Behavior, Electronic Medical Record, Psychological Capital, Readiness Of Change.

INTRODUCTION

The dynamism of the application of information technology in the health sector, especially in hospitals, which continues to be developed is electronic medical records. The strategic plan of the ministry of health contained in PMK Number 21 of 2020 (1) of which is targeted by 2024 all hospitals in Indonesia have implemented integrated electronic medical records and allow the exchange of online medical resumes between hospitals. The plan for implementing electronic medical records is also a strategic plan at RSM Siti Khodijah Gurah Kediri, so that individuals involved in the use of medical records must be prepared for the changes that will occur in the management of medical records. Individuals or employees who are ready to accept changes are expected to fight

for the success of the change plans planned by the hospital. Based on this, the researchers conducted a study aimed at analyzing the factors that influence individual readiness for behavior that supports the plan to change medical records from manual to electronic.

Change is something that will always happen in an organization. The main factor in achieving success in organizational change is the individual's readiness to change (2). Readiness for change is a comprehensive attitude that is influenced simultaneously by the content or content being changed, the process of how the change is implemented, the context in which the change is taking place, and the characteristics of the individuals involved in the change (3). The analysis carried out on readiness for change according to Holt and Vardaman, 2013 (4) is:



psychological factors, structural factors, and the level of analysis (ie individual and organizational).

Individual readiness to change is the extent to which employees are mentally, psychologically or physically ready to participate in organizational development activities (5). Research by Uyan et.al, (6) states that positive psychology has begun to be studied quite often in the organizational context in the last two decades, but so far there has been little discussion about the contribution of positive psychology to individual readiness during the organizational change process. This is also the background for researchers to examine the contribution of positive psychology to change readiness.

Research by Adlina et.al 2018 states that one of the factors that influence individual readiness to change is psychological capital (7). Positive psychological resources that make up the core construction of psychological capital are basically cognitive (8). Psychological capital is a state of individual positive psychological development consisting of self-efficacy, optimism, hope, and resilience (9). Another study conducted by Annisa et.al, to determine the effect of psychological capital on employee readiness to change with dimensions including: hope, optimism, self-efficacy and resilience also showed that there was a positive influence of psychological capital on employee readiness to change (10).

Readiness to change according to Rafferty & Minbashian (2019) can mediate the relationship between changing beliefs and positive emotions about change and behavior that supports change (11). The behavioral dimensions that support change consist of: compliance, cooperation, championing behavior. Championing behavior is the active and most effective behavior of behavior that supports change (12). This study only examines championing behavior because it is the most effective behavior that supports change. The purpose of the following research is to analyze the effect of psychological capital with individual readiness as a mediator on

championing behavior in the implementation of electronic medical records at RSM Siti Khodijah Gurah. The research concept framework is shown in Figure 1.

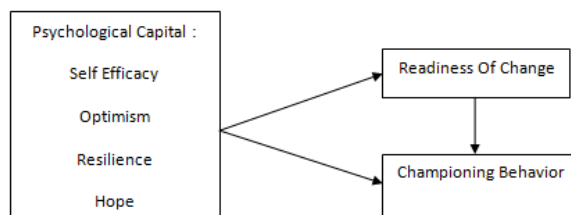


Figure 1. Research Conceptual Framework

Study Hypothesis

According to the background and framework of the research concept in Figure 1, the researcher makes the following research hypotheses:

1. The influence of psychological capital on individual readiness for change

Psychological capital affects the readiness for change according to several previous studies by Luthans et. al (9), Lizar et al (8), Widiarti and Baidun (13), Adlina et al. (7), Annisa et. al (10). which has been mentioned in the theoretical concept, but in previous studies it has not been stated whether there is a direct influence of psychological capital on readiness for change. In this research plan, the researcher takes the first hypothesis:

H1 : There is a direct effect of psychological capital on individual readiness for change.

2. The influence of psychological capital on championing behavior

Psychological capital has a positive significant effect on employee behavior (14). Previous research has stated that there is a significant influence of psychological capital on behavior, but it has not been stated whether there is a direct influence of psychological capital on certain behaviors. In this research plan, the researcher assumes that there is a direct influence of psychological capital on behavior that supports change (championing behavior) as the second hypothesis:

H2: There is a direct effect of psychological capital on championing behavior.



Table 1. Characteristic Of Research Respondents

Description	Amount	Percentage
Total Respondents	133	100%
Gender		
Man	32	24%
Woman	101	76%
Ages (years old)		
20-24	9	8%
25-29	45	34%
30-34	40	30%
35-39	18	13%
40-44	13	10%
45-49	5	3%
50-54	2	1%
55-59	1	1%
Profession		
Medical Specialist	12	9%
General Practitioner	8	6%
Dentist	2	2%
Intern Doctor	7	5%
Nurse	47	35%
Midwife	14	11%
Other Health Worker	22	17%
Admission staf	9	7%
Medical Record staf	4	3%
Financial department	3	2%
Information technology	2	1%
Cashier	3	2%
Level of Education		
S2	12	9%
S1	50	38%
D4	6	4%
D3	51	38%
SMA/SMK	14	11%
Years of service		
< 1 year	17	13%
1-5 years	50	38%
6-10 years	36	27%
> 10 years	30	22%

The statistical test in this study used the Structural Equation Model (SEM), with data processing using the Linear Structural Relationship (LISREL) software version 8.8 for windows and using SPSS version 18. SPSS was used for frequency analysis and descriptive analysis as well as calculating Cronbach alpha and correlation in the test. discriminant validity.

Evaluation of the level of suitability of the data with the model in the SEM analysis is carried out through several stages, namely the overall model fit, the measurement model fit, and the structural model fit. Before going through the analysis stage, the data normality test has been carried out, but the results of the ROC1, ROC2, ROC3 and ROC14 indicators have p-values for kurtosis and skewness <0.05 in the univariate normality test. Furthermore, continued data analysis according to the analysis stages with SEM with maximum likelihood and modification indices to get a good goodness of fit because the normality test value was not met.

1. Stages of All Model Fit (overall model fit)
This stage is the stage of testing the suitability of the model through a study of various

goodness of fit criteria, namely a measure that shows how well a particular model reproduces the covariance matrix between variable indicators (15). The model fit test phase is intended to test whether the proposed model has a fit with the sample data or not. For goodness of fit measurement Hair et al.(15) suggest looking at chi-square/df (χ^2/df), RMSEA, GFI, CFI, TLI (NNFI), NFI, IFI, AGFI.

Before getting a good enough model, the results of statistical tests using SEM using Lisrel in this study have been modified several times to get a fit model. The PS variable is because it uses dimensions, so the measurement is through the second order CFA.

From the results of the first CFA, it was found that half of the 10 goodness of fit index values were still not good. RMSEA value 0.14 > 0.08 (not good) and GFI 0.53 (not good) and AGFI value 0.47 (not good). Then modify the model by eliminating several times the ROC indicator which has a loading factor value of 0.5 and or an indicator with a loading factor < error including ROC4, ROC7, ROC9, ROC11, ROC12, ROC13, ROC16 and ROC10, ROC14, ROC 15 (the value of the loading factor < error). However, the GFI value was 0.56 (not good) and RMSEA 0.14 > 0.08 (not good). Next, modifications were made again with modification indices according to the suggestions that appeared in Lisrel's output. As a result, the RMSEA value is 0.07 (good fit) and the GFI value is 0.78 (marginal fit). The GFI value has increased compared to before but when modification indices are carried out again, the RMSEA and GFI values and other goodness of fit values remain. So no modifications are made.

2. Stages of the Fit of the Measurement Model (measurement model fit)

The stages of the suitability of the measurement model are to test the validity and test the reliability. Validity is the ability of observational variables to describe the construct, including: convergent validity and discriminant validity. Convergent validity states the commonality of observational

variables. Discriminant validity describes the differences between constructs, discriminant validity is to determine whether the observational variables explain their own constructs or explain other constructs. Convergent validity test criteria in this study is if the standard loading factor (SLF) 0.5 or T-value > 1.96 then it is declared valid. For reliability test, measurement of CR and VE was carried out. Reliable means reliable. Reliability is assessed based on Cronbach's Alpha by processing Cronbach's alpha values using SPSS software. Cronbach's alpha value 0.7 indicates high reliability or reliability of the variable (17). The CR value 0.7 and the VE value 0.5 indicate the fulfillment of the construct reliability test (18). The results of data analysis showed that all criteria for convergent validity and construct reliability were met.

3. Stages of Structural Model Fit

The structural model fit stage is carried out to test the hypothesis. The code used by PS is psychological capital, ROC is readiness of change, and CB is championing behavior. Figure 3 shows the structural model of the current research.

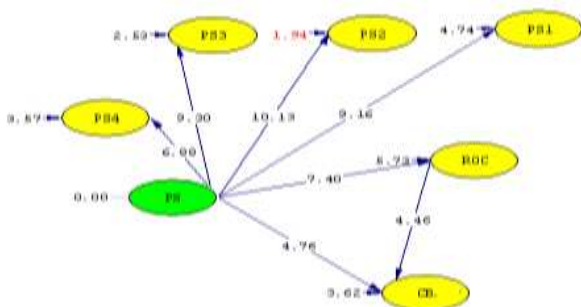


Figure 3. Structural Model (t-value)

Hypothesis Significance Test Results

Based on the structural model, it is known that the path coefficient of PS on ROC is 0.66 and the statistical value $t=7.40 > 1.64$, so the conclusion is that PS has a significant effect on ROC with a value of $R^2=0.43$. The value of R^2 serves to show how far each independent variable is able to explain the dependent variable (18). So it can be concluded that 43% of the variation of the

change readiness variable (ROC) can be influenced by psychological capital (PS) and 57% of the variation of the change readiness variable is influenced by other variables that are not observed. These results support the first hypothesis, namely that there is a direct effect of psychological capital on individual readiness for change.

It is known that the path coefficient value of PS to CB is 0.48 and the statistical value $t=4.76 > 1.64$, so the conclusion is that psychological capital (PS) is significant to behavior change (CB). The results of the current study support the second hypothesis, namely the direct influence of psychological capital on championing behavior.

It is known that the path coefficient value of ROC on CB (Championing Behavior) is 0.43 and the statistical value $t=4.46 > 1.64$, so the conclusion is that ROC has a significant effect on CB with a value of $R^2=0.69$. This supports the third hypothesis, namely the direct influence of individual readiness for change on championing behavior. PS and ROC significantly affect CB with a value of $R^2 = 0.69$ meaning that 69% of the variation of the CB variable is jointly affected by PS and ROC.

Mediation Test Results

Furthermore, testing the mediation hypothesis using the theory proposed by Zhao et.al (16) regarding the classification and type of mediation in Figure 2 that the determination of whether or not to support a variable as a mediator provided that the value $a =$ is the standard coefficient of the exogenous (independent) variable to the mediator variable, $b =$ is the standard coefficient of the mediator variable to the endogenous (dependent) variable, $c =$ is the standard coefficient of the exogenous variable directly to the endogenous without going through a mediator (direct effect), $axb =$ indirect effect.

It is known that the standard coefficient of PS to ROC $a=0.66$ is significant and the path coefficient of ROC to CB $b=0.43$ is also significant, so if a is multiplied by b or $axb = 0.28$, the value is significant. Furthermore, it is known that the standard



coefficient of PS to CB is $c = 0.48$, the value is significant. So, if you look at the concept of determining the significance of mediation by Zhao et.al (16), it is found that axb is significant and c is also significant, so the type of mediation is complementary mediation. The current study supports hypothesis 4, namely that there is an indirect effect of psychological capital on changing behavior (championing behavior) with individual readiness for change as a mediator.

Discussion

A. Analyzing the direct effect of psychological capital on individual readiness for changes in the implementation of electronic medical records at RSM Siti Khodijah Gurah.

Research on the direct influence of psychological capital on individual readiness for changes in the implementation of electronic medical records at RSM Siti Khodijah Gurah currently shows that psychological capital has a direct effect on readiness for change with a coefficient value of 0.66. That is, every increase in the value of psychological capital by 1, it will increase readiness for change by 0.66. The current results support previous studies by Luthans et.al (9), Lizar et.al (8), Widiarti & Baidun (13), Adlina et.al (7), Annisa et.al (10), which stated that psychological capital (psycap) has a positive and significant effect on change readiness.

The results of the current study support the hypothesis that there is a direct influence of psychological capital on the readiness to change the implementation of electronic medical records at Siti Khodijah Gurah Hospital. With confidence, optimism, resilience, and high expectations for success, employees will be ready with the planned change plans.

B. Analyzing the direct influence of psychological capital on championing behavior in the implementation of electronic medical records at RSM Siti Khodijah Gurah.

Research on the direct influence of psychological capital (psycap) on changing

behavior (championing behavior) from the implementation of manual medical records into electronic at RSM Siti Khodijah Gurah currently shows that psycap has a direct and significant effect on championing behavior. With a coefficient value of 0.48, it means that every increase in the psychological capital variable by 1 is expected to increase the championing behavior variable by 0.48. The higher the psychological capital value, the stronger the behavior to support change (championing behavior).

Research by Avey et.al (2011) states that psychological capital has a positive impact on employee attitudes, behavior, and performance. In line with this research in the current study, it was found that psychological capital had a significant direct effect on employee behavior to actively support change (championing behavior). Championing behavior is an active behavior of employees in solving problems and promoting the benefits of change to others (19). Championing behavior occurs when the person who is the target of change agrees internally with an action or decision, is enthusiastic about it, and shows persistent efforts for the success of the change plan (20).

Psychological capital in this study consists of four dimensions indicating that employees who have confidence, optimism, resilience and hope will directly behave to fight for and promote the change plans that have been planned by the organization. Because fighting for the success of changes that have been planned by the organization has proven to require: a person's belief in his ability to achieve success as well as the cognitive resources and actions needed to successfully carry out tasks in a certain context (self-efficacy), strong belief in the future. positive (optimism), persistent hope to succeed (hope), and resilience under adversity to persistently fight for the success of the change plan.

C. Analyzing the direct effect of individual readiness for change on the championing behavior of the implementation of



electronic medical records at RSM Siti Khodijah Gurah.

The results of the research on the direct effect of individual readiness for change on the changing behavior (championing behavior) of the implementation of manual medical records into electronic at RSM Siti Khodijah Gurah obtained results that support this hypothesis. With a coefficient value of 0.43, it means that every increase in the readiness variable changes by 1, it is expected that the championing behavior variable will increase by 0.43. The higher the value of individual readiness, the greater the behavior shown in supporting change (championing behavior).

The current study supports research by Islam et.al conducted on private organizations in Bangladesh that championing behavior is closely related to individual readiness for change (21). The results of the current study also support research by Rafferty & Minbashian (2019) which states that readiness for change has a significant effect on change supportive behavior with dimensions including championing behavior (11). Championing behavior is an active form of behavior that supports change so that it requires individual readiness for change. Championing behavior is positively correlated with employee readiness to change, employee desire to change, and vice versa negatively correlated with employee difficulty to change and cynical behavior towards change (21). The current research also supports research by Yulianingsih & Fahrurnisa (22) which states that there is a significant influence between individual readiness for change and behavior that supports change (championing behavior).

Based on the results of current research and previous research, when individuals are ready for change, they will promote and fight for the success of the change plan, try to overcome the resistance of colleagues, speak positively about change, be very enthusiastic about the change plan and ensure the success of the change plan. The more prepared individuals are, the more they will support the changes planned by the organization. Thus, it

is very important to prepare employees for the planned change.

D. Analyzing the indirect effect of psychological capital on championing behavior with individual readiness for change as a mediator.

Research on the indirect effect of psychological capital with individual readiness as a mediator for championing behavior in the implementation of manual medical records into electronic at RSM Siti Khodijah Gurah currently has significant results supporting this hypothesis. The search for previous research on the indirect effect of psychological capital with individual readiness as a mediator on championing behavior has not been widely carried out.

Referring to the mediation concept proposed by Zhao et.al (16), the type of relationship between psychological capital, readiness for change and championing behavior in this study is complementary mediation. Complementary mediation type is the type when the direct influence and indirect influence are both significant. Based on the concept in understanding the implications of mediation for theory building proposed by Zhao et.al (16), the type of complementary mediation shows that the theoretical framework is incomplete and it can be considered that the possibility of mediators is eliminated.

According to Choi (2011) employees will tend to seek more information to clarify their expectations, assumptions, and impressions about the entire change process (23). Hope is a dimension of psychological capital. Of course, with the process of change, one hopes that it will be for the better. The findings in the current study indicate that employees' interpretations of psychological capital that affect championing behavior (change behavior) are based on change readiness. Employees who have psychological capital with dimensions including: self-efficacy (self-confidence), optimism, resilience (resilience), and hope (hope) will be able to fight for and promote the change plans that have been determined by the organization



to succeed through individual readiness. That is, the psychological capital variable with individual readiness will be able to influence the championing behavior of employees at Siti Khodijah Gurah Hospital in changing the implementation of manual medical records to electronic.

CLOSING

Conclusion

Psychological capital and individual readiness for change both significantly affect championing behavior. The stronger the psychological capital and readiness for change, the greater the effort shown by employees to support change (championing behavior). Individual readiness for change has proven to be a mediator of the relationship between psychological capital and championing behavior with complementary mediation types, but it is necessary to strengthen the research concept framework for the mediation pathway.

Subsequent research can be carried out with a larger number of samples so that conclusions can be drawn better. Research can also be developed with better concepts for direct and mediation channels.

DAFTAR PUSTAKA

- [1] 2020 PRN 21 tahun. Peraturan Menteri Kesehatan Republik Indonesia Nomor 21 Tahun 2020 tentang Rencana Strategis Kementerian Kesehatan Tahun 2020-2024 [Internet]. Vol. 21. 2020. p. 1–9. Available from: [https://peraturan.bpk.go.id/Home/Download/144824/Permenkes Nomor 21 Tahun 2020.pdf](https://peraturan.bpk.go.id/Home/Download/144824/Permenkes%20Nomor%2021%20Tahun%202020.pdf)
- [2] Anggraini NP, Fajrianti F. Peran Psychological Capital dalam Hubungan Persepsi Dukungan Manajemen dan Kesiapan untuk Berubah. *J Psikol Teor dan Terap.* 2019;10(1):85.
- [3] Holt DT, Armenakis AA, Feild HS, Harris SG. Readiness for organizational change: The systematic development of a scale. *J Appl Behav Sci.* 2007;43(2):232–55.
- [4] Holt DT, Vardaman JM. Toward a Comprehensive Understanding of Readiness for Change: The Case for an Expanded Conceptualization. *J Chang Manag.* 2013;13(1):9–18.
- [5] Putra MA, Asmony T, Nurmawati S, Mataram U, Barat NT, Organisasi PD, et al. Pengaruh Perceived Organizational Support terhadap Individual Readiness for Change yang Dimediasi oleh Psychological Capital. 2021;10(1):28–42.
- [6] Uyan U. Promoting Readiness For Change: A Systematic Review Of Positive Psychology In Organizational. *J Adm Sci.* 2019;17(34):349–70.
- [7] Adlina F, Wiroko EP, Haywardhani FWT. Modal Psikologis dan Persepsi Dukungan Organisasi terhadap Kesiapan Individu untuk Berubah pada Pegawai PPPKP-KKP. *Psychopath J Ilm Psikol.* 2018;5(2):211–20.
- [8] Lizar AA, Mangundjaya WL., Rachmawan A. The Role of Psychological Capital and Psychological Empowerment on Individual Readiness for Change. *J Dev Areas.* 2015;49(5):343–52.
- [9] Luthans F, Avolio BJ, Avey JB, Norman SM. Positive psychological capital: Measurement and relationship with performance and satisfaction. *Pers Psychol.* 2007;60(3):541–72.
- [10] Annisa, Zulkarnain, Novliadi F. The Influence of Organizational Justice and Psychological Capital Toward Readiness for Change among Employees of PT . Perkebunan Nusantara IV Head Office Medan. *Int J Progress Sci Technol.* 2019;15(1):304–13.
- [11] Rafferty AE, Minbashian A. Cognitive beliefs and positive emotions about change: Relationships with employee change readiness and change-supportive behaviors. *Hum Relations [Internet].* 2019;72(10):1623–50. Available from: journals.sagepub.com/home/hum
- [12] Bouckenoghe D, M. Schwarz G, Minbashian A. Herscovitch and Meyer's



- Three-Component model of commitment to change: Meta-analytic findings. *Eur J Work Organ Psychol.* 2015;24(4):578–95.
- [13] Baidun DWA. PENGARUH MODAL PSIKOLOGIS, KOMITMEN ORGANISASI DAN PERUBAHAN HIMPSI DKI Jakarta UIN Syarif Hidayatullah Jakarta. *Journal, Tazkiya Vol, Psychol.* 2016;4(1):89–102.
- [14] Avey JB, Reichard R, Luthans F, H MK. Antecedents and Outcomes of Workplace Incivility. *Comput Complex [Internet].* 2011;2(1):1–9. Available from: <http://www.robots.ox.ac.uk/~vgg/rg/papers/efficientmatch.pdf>
- [15] Hair JF, black william c, Babin BJ, Anderson RE. *on Multivariate Data Analysis Joseph F. Hair Jr. William C. Black Seventh Edition.* 2014. 734 p.
- [16] Zhao X, Lynch JG, Chen Q. Reconsidering Baron and Kenny: Myths and truths about mediation analysis. *J Consum Res.* 2010;37(2):197–206.
- [17] Wardani R, Suhariadi F, Ratmawati D, Priyono S, Suhandiah S, Muliatie YE. How do transformational leadership, communication and supply chain management affect commitment to change through readiness for change? *Int J Supply Chain Manag [Internet].* 2020;9(3):591–7. Available from: <https://www.researchgate.net/publication/347487640%0AHow>
- [18] Sujarweni VW. *Panduan Mudah Olah Data Struktural Equation Modeling (SEM) dengan LISREL.* Yogyakarta: PUSTAKA BARU PRESS; 2018. 240 p.
- [19] Fugate M, Soenen G. Predictors and processes related to employees' change-related compliance and championing. *Pers Psychol.* 2018;71(1):109–32.
- [20] Mehboob F, Othman N. Promoting Behavioral Support for Change: A Conservation of Resources Theory Perspective. *SEISENSE J Manag.* 2020;3(6):1–13.
- [21] Islam MN, Furuoka F, Idris A. Employee championing behavior in the context of organizational change: a proposed framework for the business organizations in Bangladesh. *J Asia Bus Stud.* 2020;14(5):735–57.
- [22] Yulianingsih DI, Fachrunnisa O. Encouraging Behavior Support To Change: the Role of Individual Readiness To Change and Commitment To Change. *Int J Econ Bus Account Res.* 2020;4(02):270–82.
- [23] Choi M. Employees Attitudes Toward Organizational Change: A Literature Review. *Hum Resour Manage.* 2011;50(4):479–500.



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