

Building Shared Values in Hospitals through the TCR Concept of Relational Success



Elis Anita Farida¹, Amiartuti Kusmaningtyas², Tri Andjarwati³

¹Doctoral Program in Economics, Faculty of Economic and Business, 17 August University Surabaya, Indonesia

^{2,3}Lecturer at the Faculty of Economics and Business, 17 August 1945 University Surabaya, Indonesia

ABSTRACT: Hospitals are one of the health industries that are engaged in services that are very important to support a healthy standard of living for everyone to realize and ensure the health of every community who comes to get out of any health problems. Hospitals as a health facilities to provide health services to the community have a strategic role in accelerating the increase in the degree of public health. This study used a conceptual framework model that was proposed using the perspective of human relations theory and was intended as a novelty in this study to be tested on paramedics from hospitals. Namely as many as 16,968 personnel, both paramedical and non-paramedical staff. In this case, there is the influence of shared values, including trust and commitment. In this case, there are similarities between the beliefs between hospitals and medical personnel and the values that exist in the hospital's goals, it will cause medical personnel to have compatibility or chemistry with the duties, obligations and responsibilities given by the Hospital.

KEYWORDS: Hospital; Medical Personnel; Health Services

INTRODUCTION

Hospitals are one of the health industries that are engaged in services that are very important to support a healthy standard of living for everyone in order to realize and ensure the health of every community who comes to get out of any health problems. Hospitals as a health facility to provide health services to the community have a strategic role in accelerating the increase in the degree of public health. For this reason, hospitals are required to provide quality services in accordance with established standards and can be reached by all levels of society. The hospital is a health service institution for the community with its own characteristics that are influenced by the development of health science, technological progress, and the socio-economic life of the community while continuing to take concrete steps in improving health services of high quality and affordable by all levels of society in order to realize the highest degree of health and is actually based on existing service standards.

Hospitals as an organization engaged in services also have interests and obligations in improving and managing their resources, both in the form of facilities and infrastructure as well as human resources. In terms of human resources, hospitals are HR-intensive organizations, because of the many kinds of professions and the number of workers who carry out sub-sections of work in the hospital, starting from the managerial scope which oversees the management of everything that exists, including human resources, to the technical department that deals directly with the field or the patients. The resources in a hospital consist of health workers (including doctors, nurses, pharmacists, analysts, nutritionists, physiotherapists, radiographers, paramedic recorders) and non-health workers (finance, administration, personnel, security, and etc) (Putri, 2019).

One of the factors that affect the quality of service is the role of human resources (HR) as service actors. The attitude, ability and integrity of human resources in an organization or business affect the success of establishing relationships between companies, employees and customers (Kotler & Armstrong, 2008). The improvement and development of the quality of services carried out by human resources in the hospital is of course the key to achieving the desired goal (success) of the hospital as a health service provider. However, at this time there are also not a few who then unwittingly share the values that they do have put aside the social side and social humanism as external forces that they should accommodate to increase the value of health services provided to all patients.

So then, in this study, we examine more deeply about the shared values carried out by hospitals in achieving the desired goals (relation success) using the TCRC concept (Trust, Commitment, Relationship Learning, and Cooperation). Shared values that have been carried out so far have often defined values that are too narrow, which are only synonymous with short-term benefits,

Building Shared Values in Hospitals through the TCR Concept of Relational Success

so that they often sacrifice something broader and have a significant influence on long-term performance, especially as a provider of public health services. What should continue to be improved and pursued in various forms of performance practice in a hospital is not only thinking about how to get the realization of payments from patients or customers, but how to create social value in the external environment of the hospital as well as in the hospital's internal environment which includes owners, investors, leaders, and staff. So that at the next stage, all parties will be able to understand the will and conflict of interest of the 4 main components involved in the activity or process of managing the health service provider, starting from the leader or owner, customers, staff, and investors/financiers in this case. government or individuals. When all these things are done well, the Hospital as a legal entity organization engaged in health services can achieve its target as they set out in their vision and mission as a form of system success as well as material success. investors, leaders, and personnel. So that at the next stage, all parties will be able to understand the will and conflict of interest of the 4 main components involved in the activity or process of managing the health service provider, starting from the leader or owner, customers, staff, and investors/financiers in this case. government or individuals. When all these things are done well, the Hospital as a legal entity organization engaged in health services can achieve its target as they set out in their vision and mission as a form of system success as well as material success. So that at the next stage, all parties will be able to understand the will and conflict of interest of the 4 main components involved in the activity or process of managing the health service provider, starting from the leader or owner, customers, staff, and investors/financiers in this case. government or individuals. When all these things are done well, the Hospital as a legal entity organization engaged in health services can achieve its target as they set out in their vision and mission as a form of system success as well as material success. So that at the next stage, all parties will be able to understand the will and conflict of interest of the 4 main components involved in the activity or process of managing the health service provider, starting from the leader or owner, customers, staff, and investors/financiers in this case. government or individuals. When all these things are done well, the Hospital as a legal entity organization engaged in health services can achieve its target as they set out in their vision and mission as a form of system success as well as material success. So that at the next stage, all parties will be able to understand the will and conflict of interest of the 4 main components involved in the activity or process of managing the health service provider, starting from the leader or owner, customers, staff, and investors/financiers in this case. government or individuals. When all these things are done well, the Hospital as a legal entity organization engaged in health services can achieve its target as they set out in their vision and mission as a form of system success as well as material success.

Based on the observations and evaluations carried out by the parties as well as listening and media literacy about public opinion regarding the service and the existence of the Hospital; it seems that not all hospitals get good value from several parties, especially from the community as customers for the services they (hospitals) provide.

As an example; not a few patients who come to get good service so that they can overcome their health problems, in fact this goal cannot be pursued optimally by the existing medical personnel; even though they are back in good health, the patients still take bad stories as a negative rating for the hospital concerned. It can even be said that patients or customers who then return to using health services at the hospital are related to the reason not because the services provided and health needs are given well; but out of necessity sometimes because there is no other place to go. This means that there is a need for a complete understanding and learning related to the shared values that should be carried out by each of these hospitals.

RESEARCH METHODS

This study used a conceptual framework model that was proposed using the perspective of human relations theory and was intended as a novelty in this study to be tested on paramedics from hospitals. The reason for using paramedical personnel from hospitals was because paramedics have their own characteristics which were always influenced by developments in health science, technological advances, and were required to be able to provide good service to patients regardless of their own needs, especially during the COVID-19 pandemic such as now.

DISCUSSION

1. Hospital List

No	Nama Rumah Sakit	Jumlah Tenaga
1	Regional General Hospital Prof Dr Soekandar	59
2	Hospitals National Hospital	173
3	Undaan Eye Hospital	211
4	Sumberlagah General Hospital	266

Building Shared Values in Hospitals through the TCR Concept of Relational Success

5	Siti Khodijah General Hospital Muhammadiyah Branch throughout	326
6	Manyar Medical Center Hospitals	426
7	General Hospital Mitra Keluarga Waru	470
8	Siti Hajar Islamic Hospital	501
9	Siloam Hospitals Surabaya Hospitals	525
10	Ibn Sina Regional General Hospital	548
11	Premier Surabaya Hospital	559
12	PHC Hospitals (Primasatya Husada Citra)	566
13	Adi Husada Hospital Undaan	651
14	Husada Main Hospital	658
15	Dr Wahidin Sudiro Husodo General Hospital	759
16	Islamic Hospital Surabaya Jemursari	830
17	Regional General Hospital Dr Soegiri	836
18	Regional General Hospital Syarifah Ambami Rato Ebu	1,005
19	Hospital Dr. Mohamad Soewandhie	1,026
20	Muhammadiyah General Hospital Lamongan	1,321
21	Sidoarjo Regional General Hospital	1,558
22	RSUD Haji Surabaya	1,601
23	Catholic Hospital (RKZ) Surabaya	2,093
	Total	16,968

Source: Processed by Researchers 2021

Hospital selection is based on the reason that this type of hospital exists in almost all districts, according to the requirements that have been determined by the government. The selection of hospitals in the research area includes: Gresik, Bangkalan, Mojokerto, Surabaya, Sidoarjo, and Lamongan (GERBANG KERTASUSILA), so that 23 hospitals are sampled in this study with a total population of 23 hospitals. namely as many as 16,968 personnel, both paramedical and non-paramedical staff. Thus, in this research, it will be a relatively large number of respondents, and it is intended that the results of this study have a sufficiently strong level of evidence.

2. Shared Values Indicator in Hospitals through the TCRC Concept of Relational Success

The definition of Shared value used refers to the opinion (Chaurasia et al., 2020) that shared value is a form of active participation, interaction, and collaboration of all stakeholders in the exchange of ideas to develop a deeper understanding as an effort to solve problems that occur between members in an organization or in other ways. There are 3 indicators of Share Value used in this study as disclosed (Chaurasia et al., 2020) including the following.

- a. Indicator 1 (X.1): Interaction.
- b. Indicator 2 (X.2): Participation.
- c. Indicator 3 (X.3): Collaboration.

1) Trust (Z1)

The definition of trust used is based on the opinion of Mowen & Minor in Donni, (2017:116) that trust is all knowledge possessed by consumers and all conclusions made by consumers about objects, attributes and benefits. In addition, the opinion expressed by Rousseau et al Donni (2017:116). There are 5 indicators of trust (trust) used in this study as follows:

- a. Indicator 1 (Z1.1): Integrity.
- b. Indicator 2 (Z1.2): Competence.
- c. Indicator 3 (Z1.3): Consistency.
- d. Indicator 4 (Z1.4): Loyalty.
- e. Indicator 5 (Z1.5): Openness.

Based on the indicators of respondents, the Trust variable can be described in the table below:

Building Shared Values in Hospitals through the TCR Concept of Relational Success

Indicator	Answer Frequency					mean	Category
	1	2	3	4	5		
Z1.1	4	22	126	187	52	3.67	High
Z1.2	4	22	128	185	52	3.66	High
Z1.3	6	24	117	181	63	3.69	High
Z1.4	6	24	118	180	63	3.69	High
Z1.5	4	22	128	184	53	3.66	High
Z1.6	4	22	128	185	52	3.66	High
Z1.7	4	22	129	185	51	3.66	High
Z1.8	4	35	140	163	49	3.56	High
Z1.9	4	36	135	165	51	3.57	High
Z1.10	4	22	128	185	52	3.66	High
Overall average						3.65	High

Source: Researcher Data Processing, 2021

This shows that paramedics (nurses and midwives) agree that they have a willingness to save the organization. Based on all respondents' answers regarding the trust variable, the mean is 3.65. This shows that trust in paramedical personnel (nurses and midwives) from hospitals is included in the high category.

2) *commitment* (Z2)

The definition of commitment used in the study refers to the opinion of Luthans (2011) that organizational commitment is an attitude of employee loyalty and is a continuous process of how an employee expresses their concern for the success and goodness of the company. There are 3 indicators of commitment used in this study including the following.

- a. Indicator 1 (Z2.1): Power Safety
- b. Indicator 2 (Z2.2): Energy Loyalty
- c. Indicator 3 (Z2.3): Power pride

Description of Respondents' Answers Variable Commitment

Indicator	Answer Frequency					mean	Category
	1	2	3	4	5		
Z2.1	5	31	97	164	94	3.80	High
Z2.2	6	36	104	155	90	3.73	High
Z2.3	4	32	103	164	88	3.77	High
Z2.4	7	39	99	158	88	3.72	High
Z2.5	5	38	96	167	85	3.74	High
Z2.6	5	29	97	170	90	3.80	High
Overall average						3.76	High

Source: Researcher Data Processing, 2021

Based on all respondents' answers regarding the commitment variable, the mean is 3.76. This shows that the commitment to paramedical staff (nurses and midwives) from hospitals is included in the high category.

3) *Relationship Learning* (Z3)

Relationship Learning is the process of bringing together various tools and technologies to achieve the look, feel, and functionality of a Learning Relationship. This process combines learning modules and assessment features with other capabilities, namely a constituent relationship management (CRM) platform, solution success or multiple solutions combined into a single unit, and predictive analytics. There are 7 indicators of Relationship Learning used in this study including the following.

- a. Indicator 1 (Z3.1): Able to build vision and goals
- b. Indicator 2 (Z3.2): Communicate openly
- c. Indicator 3 (Z3.3): Able to resolve conflicts
- d. Indicator 4 (Z3.4): Have the right work method
- e. Indicator 5 (Z3.5): Able to lead
- f. Indicator 6 (Z3.6): Able to motivate individual development

Building Shared Values in Hospitals through the TCR Concept of Relational Success

g. Indicator 7 (Z3.7): Build good relations with other groups

Description of Respondents' Answers Relationship Learning Variables

Indicator	Answer Frequency					mean	Category
	1	2	3	4	5		
Z3.1	2	34	125	159	71	3.67	High
Z3.2	4	40	119	162	66	3.63	High
Z3.3	1	40	122	160	68	3.65	High
Z3.4	4	38	118	162	69	3.65	High
Z3.5	2	37	120	157	75	3.68	High
Z3.6	5	37	122	157	70	3.64	High
Z3.7	2	38	118	162	71	3.67	High
Z3.8	5	43	117	156	70	3.62	High
Z3.9	2	34	129	153	73	3.67	High
Z3.10	3	40	116	162	70	3.65	High
Z3.11	3	38	116	168	66	3.65	High
Z3.12	1	41	125	150	74	3.65	High
Z3.13	4	35	114	173	65	3.66	High
Z3.14	4	32	123	159	73	3.68	High
Overall average						3.66	High

Source: Researcher Data Processing, 2021

Based on all respondents' answers regarding the relationship learning variable, the mean is 3.66. This shows that the relationship learning of paramedical staff (nurses and midwives) from hospitals is included in the high category.

4) Cooperation (Z4)

The definition of Cooperation used in this study refers to the opinion of Smith et al., (1995) that Cooperation is a construct when it is used widely but has various definitions. Some experts define when as a process of interaction carried out by individuals, groups and organizations to obtain benefits. There are 7 Cooperation indicators used in this study including the following.

- a. Indicator 1 (Z4.1): Clear goals
- b. Indicator 2 (Z4.2): Be open and honest:
- c. Indicator 3 (Z4.3): Cooperative decision making,
- d. Indicator 4 (Z4.4): Atmosphere of trust,
- e. Indicator 5 (Z4.5): The sense of belonging between the workforce and the company
- f. Indicator 6 (Z4.6): Good listening skills.
- g. Indicator 7 (Z4.7): Participation of all members.

Description of Respondents' Answers Variable Cooperation

Indicator	Answer Frequency					mean	Category
	1	2	3	4	5		
Z4.1	1	33	124	162	71	3.69	High
Z4.2	1	42	119	161	68	3.65	High
Z4.3	1	34	126	161	69	3.67	High
Z4.4	3	42	118	161	67	3.63	High
Z4.5	0	37	137	159	58	3.61	High
Z4.6	2	36	132	154	67	3.63	High
Z4.7	0	41	120	166	64	3.65	High
Z4.8	3	31	121	163	73	3.70	High
Z4.9	1	42	111	170	67	3.66	High
Z4.10	1	32	126	159	73	3.69	High
Z4.11	2	41	114	164	70	3.66	High
Z4.12	1	43	104	174	69	3.68	High

Building Shared Values in Hospitals through the TCR Concept of Relational Success

Z4.13	1	34	124	171	61	3.66	High
Z4.14	0	41	115	162	73	3.68	High
Overall average						3.66	High

Source: Researcher Data Processing, 2021

Based on all respondents' answers regarding the cooperation variable, the mean is 3.66. This shows that the cooperation of paramedics (nurses and midwives) from hospitals is in the high category.

5) Relationship Success (Y)

Relational Success is a marketing strategy to understand customers better, companies can provide a higher level of customer service and develop deeper customer relationships. Relational Success aims to be able to build good and sustainable relationships. The use of relationships is not only used within the scope of business but is also used in a wider scope and in order to survive and struggle in the competition zone, a good relationship is needed between one party and another. There are 2 Relational Success indicators used in this study including the following.

- a. Indicator 1 (Y.1): Communication (communication)
- b. Indicator 2 (Y.2): Conflict handling (conflict handling)

Description of Respondents' Answers Relational Success Variables

Indicator	Answer Frequency					mean	Category
	1	2	3	4	5		
Y.1	9	40	126	155	61	3.56	High
Y.2	8	26	113	166	78	3.72	High
Y.3	7	35	127	159	63	3.60	High
Y.4	9	41	126	153	62	3.56	High
Y.5	8	27	114	164	78	3.71	High
Overall average						3.63	High

Source: Researcher Data Processing, 2021

Based on all respondents' answers regarding the relational success variable, the mean is 3.63. This shows that the relational success of paramedics (nurses and midwives) from hospitals is in the high category.

3. Concept Influence TCRC Against Relational Success in Hospitals

a. Trust

Based on research by (Mukherjee & Nath, 2007) explains that to achieve relational success it is necessary to have trust (belief) this can have a significant influence between shared values on trust. In addition, research conducted by (Kassim & Abdulla, 2006) concludes that there is a positive and significant effect between shared value and trust on internet banking users in Doha, Qatar.

Meanwhile, the research conducted by (Cote & Latham, 2015) is actually the opposite, which shows that there is no influence between shared value and trust. In this case, shared value can be interpreted as a value that can be believed together and can be considered as the main guideline for every company.

Based on the characteristics, shared values tend to be abstract or invisible from the outside and can be felt by insiders. However, shared values are very important because these values are the foundation of the culture in a company (Admadja, 2009:48). If the staff has confidence in the values that exist, the staff will carry out their duties in accordance with the values that exist in the hospital.

The existence of similar beliefs between hospitals and medical personnel with the values that exist in the hospital's goals will cause medical personnel to have a match or chemistry with the duties, obligations and responsibilities given by the hospital.

Thus, it will create a bond between paramedics and shared values in the hospital organization. The existence of a fabric of attachment to one another will encourage the emergence of trust (trust) of paramedics in achieving the goals of the hospital organization.

b. Commitment

Regarding the effect of shared value on commitment, the results of this study are in accordance with research conducted by (Mukherjee & Nath, 2007) which confirms that there is a very positive influence between share value and commitment. In

Building Shared Values in Hospitals through the TCR Concept of Relational Success

contrast to the research conducted by (Kassim & Abdulla, 2006) concluded the results of his research that there is a negative and significant relationship between shared values and commitment to internet banking users in Doha, Qatar.

However, it is inversely proportional to the results of research conducted by (Cote & Latham, 2015) which shows that there is no influence between share value and commitment. This research can produce different findings between share value and commitment. Shared values are shared values that exist in an organization that can be used as a basis for reference for all parties involved in an organization. If these shared values are in line with the values that exist in employees, it will have an impact and a good image in an organization.

Commitment in an organization becomes very important as explained by Dunnette and Hought (1998) that organizational commitment is a reflection of attitudes such as involvement in an organization, the object of the attitude in question is a whole in an organization not the role of special work characteristics.

The role and benefits in organizational membership is the absence of a desire to stop leaving or resigning from an organization. In addition, Dessler (2003) also explains that organizational commitment is to recognize organizational employees with organizational goals that can be used as a reference to achieve the company's goals.

In this case, there are three indicators to measure the extent of employee commitment to the existence of an organization:

- 1) Willingness of energy, the desire of employees to seek to achieve an interest that exists in an organization.
- 2) Loyalty of energy, energy has the desire to seek and maintain its membership in order to remain part of an organization.
- 3) Employee pride, this is one of the pride that exists in employees because they have become part of an organization.

In an organization the number of value drivers is quite potential and can be special. The essence of the existence of inter-organizational arrangements is to encourage trust and commitment as described by (Cooper & Slagmulder, 2004). An increase in transactions is the frequent interaction between companies and companies that occur at the level of individual transactions. Over time, the peak of this transaction is to build a history which of course leads to a relationship that can reach a continuum of success within an organization.

At a subtle and abstract level, it is the cause of the building of a foundation that guides the course of a transaction between companies. To identify a role and characteristics in intangible relationships in driving a value for an organization can offer an opportunity to transform an unobservable construct into a phenomenon that can be measured by monitoring causally related antecedents. (Cooper & Slagmulder, 2004).

c. The effect of trust on commitment

In addition to the influence of shared value with trust and share value with commitment, it can be investigated how the influence of trust on commitment. This can be proven by the results of hypothesis testing obtained from the results of the trust variable that affect commitment with a CR value of 2,620 and p-value of 0.000. So, H3 is accepted.

In line with the results of this study, it is in accordance with research conducted by (Mukherjee & Nath, 2007) and (Kim Yoo & Lee, 2012) it confirms that there is a significant positive influence both trust and commitment. In addition, research was conducted by (Kassim & Abdulla, 2006) concluded that there is a positive and significant relationship between trust and commitment to internet banking users in Doha, Qatar.

Research by (Xiao, et al, 2010) confirms that the existence of trust from all parties is very influential as well as individual trust (individual trust) and team trust (team trust) it can significantly affect the commitment relationship. In addition to research conducted by Xiao, et al.

Subsequent research conducted by (Hadjikhani et al., 2012) shows that there is an effect of trust in a commitment to group a sustainable business relationship in order to show a significant level of strength that is in line with the unsustainable business relationship group. Then the research was concluded by (Kar & Soch, 2013) and Cote & Latham (2015) who concluded that there was a significant influence between trust and commitment.

The existence of trust is very important as an indicator to foster positive relationships, especially in the service industry, which has been stated in many studies. Trust is a very important thing for a commitment or a promise and commitment can be applied if needed. There is a trust if there is a customer who believes that the service provider can be trusted and also has a high degree of integrity (Karsono: 2006).

As according to Morgan and Hunt (1994) in Xiao et al (2010) argues that trust is a trust in the current partner, while commitment is a desire to continue the relationship in the future and trust will help to continue the desire to maintain relationship commitments in the future. So that the level of trust will have an impact on the quality and quality of the commitment relationship.

Trust is often referred to as a strong predictor in developing a relationship. Based on a study conducted by (Kim, Yoo, & Lee, 2012) explained that the recovered customer trust in the dependability and reliability of the service provider has a positive effect on their intention to maintain a relationship with the service provider.

Building Shared Values in Hospitals through the TCR Concept of Relational Success

When referring to an organization that is engaged in health services, it shows that if service providers have provided adequate facilities and infrastructure to support the rights they get and to support employee performance in carrying out their duties and responsibilities, it will have a positive impact on their intention to maintain (commit to) the organization.

Therefore, in this case it can be concluded that employee trust after the restoration of facilities and infrastructure as well as attention to employee rights is very important and necessary in order to build and strengthen relationship commitments with health service providers.

d. The effect of trust on relationship learning

In addition, there is an influence between trust and relationship learning. Based on the hypothesis test, the results showed that the trust variable had an effect on relationship learning with a CR value of 4.631 and a p-value of 0.000. So, H4 is accepted. This is in line with research conducted by (Jiang & Chen, 2017) that organizational trust has a positive influence on organizational learning.

Looking at a company that is superior and victorious in the future is an organization that continues to strive to involve personnel from various levels and is able to continue to learn. Organizational Learning refers to organizations that exist in the surrounding environment and are able to bear to build internal and external knowledge and have adequate actions to have a good management control strategy.

In addition, this research was conducted by (Al-tarawneh & Al-Adaileh, 2021) which concludes that there is a significant relationship between trust and Relationship Learning. Other research results by (Arrow, 2014) it found a significant positive effect of organizational trust on organizational learning.

The characteristic of Organizational Learning is that there is a belief that the individual is a proactive form of self-improvement, trying to progress and learn by creating an open organizational climate and clear information flow. This condition will be able to obtain a continuous projection while still referring to an internal condition of the organization which will later refer to external conditions and demands outside the organization. In addition to the need for team learning, team learning is a process of surrendering and developing the capacity of a team in order to create results that members of the organization really want (Senge in Nunuk Adiarni, 1995: 235).

In addition to the effect of trust on relationship learning, Trust can also affect Cooperation. Based on the hypothesis test, the results obtained that the trust variable has an effect on cooperation with a CR value of 5.355 and a p-value of 0.000. So, H5 is accepted. Based on the results of the study as in accordance with the research conducted by (Xiao, et al, 2010) shows that there is a direct and indirect relationship between trust and cooperation performance.

Individual trust and team trust are significant on the relationship between cooperation performance. The direct influence of individual trust on the performance of cooperation is greater than the indirect effect of individual trust which is mediated by the relationship of commitment to the performance of cooperation. Meanwhile, the indirect effect of team trust on the performance of cooperation mediated by the commitment relationship is greater than the direct influence.

(Hadjikhani et al., 2012) also found that the strength of the influence of Trust on Cooperation on unsustainable business groups was two times higher than the influence on sustainable business groups of business relationships and significant at the same level. A high level of trust will result in significant cooperation to a much higher level than in a sustainable business relationship.

Another study was conducted by (Kim, Yoo, & Lee, 2012) which confirmed that there was a positive and significant influence between Trust on Cooperation. Research by (Cote & Latham, 2015) also concludes that there is a significant effect between Trust and Commitment. The influence of the existence of trust on the performance of cooperation can be reflected in three things including;

- 1) Trust in supply chain transactions is an important requirement for partners to obtain information.
- 2) Can increase a mutual trust from the various parties that will reduce the burden of business costs and allow to increase a business success and of course will increase a profitability.
- 3) The existence of mutual trust which is a sign that is also needed to establish long-term cooperation (Xiao et al, 2010).

These are the three key factors in order to maintain a continuity of partnership. In an organization, one of which is health services, there is a mutualistic relationship that can be based on a trust which can certainly help and maintain long-term relationships both within the middle and from the company.

If both parties have carried out the task of building a high level of trust, the focus will be on the performance of Cooperation and the resulting output will be able to increase mutual trust in an organization and a good cooperation will be created.

e. The Effect of Commitment on Relationship Learning

Based on the hypothesis test, it was found that the commitment variable had an effect on relationship learning with a CR value of 16.691 and a p-value of 0.000. So, H6 is accepted. The results of research conducted by (Ro et al., 2021) shows that there

Building Shared Values in Hospitals through the TCR Concept of Relational Success

is a relationship between commitment and relationship learning. In Relationship Learning or organizational learning, one of the triggers to be able to motivate individual development. Other research results by (Pool & Pool, 2007) shows a significant positive effect between organizational commitment to motivation.

In addition, Slater & Narver (1995) in Kraus & Ma, (2012) One of the goals of a strategic process is to advance, develop and communicate a strategy that can state the vision and targets within a company. In the process of identifying and being able to explain a company's strategic goals and targets which is the most important aspect of an organizational learning because it can involve an organization member in a strategic dialogue, in order to increase an understanding in personnel about tactics and strategies that can lead an organizational learning in a certain direction.

So that participatory strategic planning can provide organizational learning facilities so that it is able to build a vision and mission within an organization which is for management and personnel who can develop a common understanding in corporate strategy. As according to Dunnette & Hought (1998) which explains that "organizational commitment is a reflection of attitudes such as involvement in the organization, the object of the attitude in question is the whole organization, not the role of special work characteristics".

Meanwhile, according to Lincoln and Bashaw organizational commitment has three indicators including;

- 1) There is a will from the workforce, namely where there is a desire for energy to be able to strive to achieve interests in an organization.
- 2) There is commitment or loyalty from employees who wish to maintain and continue to be part of the organization.
- 3) Pride of energy, this is indicated by energy feeling proud to have been part of the organization he is participating in and feeling that the organization has become a part of his life (Sopiah, 2008).

The results of this study are in line with the existing phenomenon because it turns out that the results of this study indicate that the greatest influence is found in the influence of commitment to relationship learning. This means that the more committed a person is to what is his or her job, the more they will have a desire to learn to relate better to fellow co-workers and to relate to patients.

This attitude of employee loyalty will be an ongoing process of how an employee expresses their concern for the success and goodness of the company. So that organizational commitment is the attachment of energy to the organization.

f. The Effect of Commitment on Cooperation

Based on the hypothesis test, the results obtained that the commitment variable has an effect on cooperation with a CR value of 16,473 and a p-value of 0.000. So, H7 is accepted. The results of this study are in accordance with research by (Xiao, et al, 2010) which can show that there is an influence between Commitment to Cooperation. Another study by (Cote & Latham, 2015) which states that there is a significant influence between Commitment and Cooperation.

According to Hadjikhani, Lindh, & Thilenius, (2012) which shows that the existence of a sustainable and sustainable business group in displaying half the power in the influence of Commitment on Cooperation, this is the same as compared to an unsustainable group. Obviously, higher commitment in business relationships characterized by discontinuity leads to more cooperation than higher commitments in business relationships characterized by continuous character.

Research conducted by (Kim, Yoo, & Lee, 2012) can be concluded that there is a significant positive relationship between commitment to cooperation. However, the results of this study are different from research by (Sung & Kim, 2019) which can show that commitment does not have a significant effect on cooperation.

As Luthans (2011) can define organizational commitment as an attitude of employee loyalty and is an ongoing process of how an employee expresses their concern for the success and goodness of the company, organizational commitment is an employee's attachment to his organization.

The formation of organizational commitment is not formed just like that. There are many things that can be a forming factor in organizational commitment, one of the underlying factors can be seen from his personality. Because here personality is the basic foundation of organizational commitment. If the foundation is good it will produce a good commitment.

g. The Effect of Commitment on Relational Success

Based on the hypothesis test, it was found that the commitment variable had an effect on relational success with a CR value of 2.925 and a p-value of 0.003. So, H8 is accepted. The results of this study are in accordance with research by (Kristanto, 2015) shows that Commitment has an influence on Relational Success through handling conflicts within the organization. Relational Success Management aims to be able to build good and sustainable relationships.

In achieving the success of an organization depends on the commitment of employees in communication both interpersonal communication and cross-cultural communication. In addition, success is achieved when the organization can provide solutions to conflicts that occur both between individuals, groups, and organizations. According to Balay (2007) in

Building Shared Values in Hospitals through the TCR Concept of Relational Success

Kristanto, (2015) that the commitment of personnel should be something important in determining the conflict management to be adopted.

The climate of intense business competition requires organizational members to increase commitment at work, so that they are able to direct and develop their skills in managing conflict effectively. Predicting conflict management strategies through workforce commitment, arguing that increasing staff commitment will increase the other conflict management strategy and decrease the other conflict management strategy. Conflict is considered irrational and bad, and resolution emphasizes cooperation and shared goals.

Commitment occurs when employees have identified emotionally with the organization's ideas that are consistent with its values and aspirations. The relationship between the commitment of paramedics and conflict management strategies is based on the assumption of a unitarism perspective which states that the existence of an organization is very harmonious (perfect) and all conflicts are not needed.

The organization is perceived as an integrated and harmonious work team and family, where all members of the organization share common goals and emphasize mutually beneficial cooperation. This makes all members of the organization have a commitment to resolve conflicts that will occur (Kristanto, 2015).

The more they have commitment, the more successful the relational will be but the effect is very small, the more he should have a commitment to what is his duty, he should be able to create a good relationship or the relationship is successful, but in fact, according to the existing phenomenon, it turns out that paramedics are only committed to the hospital organization only, so they have the desire that if they have a commitment to the organization where they work, they have a sense of self-worth to get a reward.

In the relationship between paramedics and their patients, they are often unable to become the expected relationship, so there is an element of selfishness from each paramedic so that they get more value or rewards from the hospital. So the commitment here is their commitment to the hospital where they work where there is a tendency for their selfish nature to want to get a reward from the hospital.

However, when they are dealing with patients the tendency between them is not able to establish a good relationship. In this case there is an influence but it is relatively small, because there is an element of self-interest from. Their commitment to the organization of the hospital where they work, if it is selfish there is a sense of competition against co-workers.

h. The Effect of Relationship Learning on Relational Success

Based on the hypothesis test, it was found that the relationship learning variable had an effect on relational success with a CR value of 19.754 and a p-value of 0.000. So, H9 is accepted. The characteristics of learning organizations are the belief that individuals are proactive to increase self-interest, strive to progress and continue to learn by creating an open organizational climate and clear information flow.

This condition will result in a continuous process while still referring to the internal conditions of the organization which ultimately refers to external conditions and demands outside the organization. According to Senge in Nunuk Adiarni (1995: 235) "Team learning is a process of surrendering and developing the capacity of a team to create the results that members of the organization really want".

Organizational learning is a very important thing done by organizations in the face of global competition that makes changes so fast in the internal and external environment of the organization. This is what underlies any form of organization that is required to always adapt in the face of challenges and competition.

Thus, in overcoming this, organizations need a learning process to foster creativity and dynamic innovations. The ability of an organization to learn is a sustainable advantage (Marsick & Watkins, 2003). The role of leaders/employees in achieving organizational goals is highly dependent on how well they communicate.

The nursing unit manager demonstrates educational leadership such as guidance, encouragement, and information provided to improve staff workability and increase team effectiveness of the nursing unit through the communication process towards goal attainment with staff (Choi et al., 2018).

i. The Effect of Cooperation on Relational Success

Based on the hypothesis test, it was found that the relationship learning variable had an effect on relational success with a CR value of 26.177 and a p-value of 0.000. So, H10 is accepted.

Cooperation is a social construct that is used widely but has various definitions. Some experts define cooperation as an interaction process carried out by individuals, groups and organizations to obtain benefits (Smith, et al., 1995). Cooperation arises not only from the common goal of the members, but also because they work together because they are coordinated to achieve various goals. Furthermore, how the actions of each individual in the organization trying to achieve mutual benefits.

Building Shared Values in Hospitals through the TCR Concept of Relational Success

Su et al. (2008) in Oduro et al., (2020) found that cooperation can improve the quality of relationships which in turn improve company performance. Thus, drawing on social exchanges, the study argues that in the health sector, close long-term cooperative relationships between health care/employees and organizations have a higher probability of increasing responsibility for achieving organizational goals, which, in turn, can improve to Relational Success in the organization.

So the more the paramedics are willing to work with colleagues and patients, the more likely it is that there will be a successful relationship, which means a pleasant relationship between the two parties, a comfortable, satisfied relationship that is beneficial for both parties.

CONCLUSION

Shared value is a form of active participation, interaction and collaboration from all stakeholders in the exchange of ideas to develop a deeper understanding as an effort to solve problems that occur between members in an organization or in other matters. Based on the population of hospitals in Indonesia, it can be calculated a total of 16,968.

In this case, there is the influence of shared values which include trust and commitment, in this case there are similarities between the beliefs between hospitals and medical personnel and the values that exist in the hospital's goals, it will cause medical personnel to have compatibility or chemistry with the duties, obligations and responsibilities given by the Hospital.

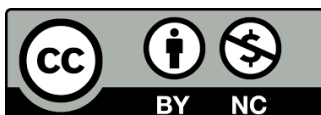
In addition, there is also the influence of the commitment of the staff to achieve the desired goals. The importance of the TRSC concept can be carried out after the restoration of facilities and infrastructure as well as attention to employee rights which are very important and necessary in order to build and strengthen commitment to relationships with health service providers.

REFERENCES

- 1) Al-tarawneh, A. I., & Al-Adaileh, R. (2021). The interplay among management support and factors influencing organizational learning: an applied study. *Journal of Workplace Learning*. <https://doi.org/10.1108/JWL-07-2020-0118>
- 2) Cote, J., & Latham, T. C. (2015). Trust and Commitment: Intangible Drivers of Interorganizational Performance. *Advances in Management Accounting*, 12(3), 293–325.
- 3) Choi, E. H., Kim, E., & Kim, P. B. (2018). Effects of the Educational Leadership of Nursing Unit Managers on Team Effectiveness: Mediating Effects of Organizational Communication. *Asian Nursing Research*, 12(2), 99–105. <https://doi.org/10.1016/j.anr.2018.03.001>
- 4) Chaurasia, S. S., Kaul, N., Yadav, B., & Shukla, D. (2020). Open innovation for sustainability through creating shared value-role of knowledge management system, openness and organizational structure. *Journal of Knowledge Management*, 24(10), 2491–2511. <https://doi.org/10.1108/JKM-04-2020-0319>
- 5) Colquitt, J. A., LePine, J. A., & Wesson, M. J. (2011). *Organizational Behavior: Improving Performance and Commitment in the Workplace*. New York: McGraw-Hill.
- 6) Jiang, Y., & Chen, W.-K. (2017). Effects of Organizational Trust on Organizational Learning and Creativity. *Journal of Mathematics Science and Technology Education*, 13(6), 2057–2068. <https://doi.org/10.12973/eurasia.2017.01213a>
- 7) Kaur, H., & Soch, H. (2013). Mediating roles of commitment and corporate image in the formation of customer loyalty. *Journal of Indian Business Research*, 5(1), 33–51. <https://doi.org/10.1108/17554191311303376>
- 8) Kim, T. T., Yoo, J. J., & Lee, G. (2012). Post-recovery customer relationships and customer partnerships in a restaurant setting. *International Journal of Contemporary Hospitality Management*, 24(3), 381–401. <https://doi.org/10.1108/09596111211217879>
- 9) Kraus, S., & Ma, M. (2012). The role of personnel commitment to strategy implementation and organisational learning within the relationship between strategic planning and company performance. *International Journal of Entrepreneurial Behaviour & Research*, 18(2), 159–178. <https://doi.org/10.1108/13552551211204201>
- 10) Kassim, N. M., & Abdulla, A. K. M. A. (2006). The influence of attraction on internet banking: an extension to the trust-relationship commitment model. *International Journal of Bank Marketing*, 24(6), 424–442. <https://doi.org/10.1108/02652320610701744>
- 11) Kristanto, H. (2015). Hubungan Antara Komitmen Organisasional dan Gaya Manajemen Konflik Tenaga Bank Milik Pemerintah Daerah Tingkat II di Provinsi DIY. *Jurnal Manajemen, Strategi Bisnis Dan Kewirausahaan*, 9(1), 1–14.
- 12) Moorman, C., Deshpande, R., & Zaltman, G. (2012). Factors Affecting Trust in Market Research Relationships. *Journal of Marketing*, 57, 81–101.
- 13) Morgan, R. M., & Hunt, S. D. (2010). The Commitment-Trust Theory of Relationship Marketing. *Journal of Marketing*, 58, 20–38.

Building Shared Values in Hospitals through the TCR Concept of Relational Success

- 14) Mukherjee, A., & Nath, P. (2007). Role of electronic trust in online retailing: A re-examination of the commitment-trust theory. *European Journal of Marketing*, 41(9), 1173–1202. <https://doi.org/10.1108/03090560710773390>
- 15) Marsick, V. J., & Watkins, K. E. (2003). Demonstrating the Value of an Organization's Learning Culture: The Dimensions of the Learning Organization Questionnaire. *Advances in Developing Human Resources*, 5(2), 132–151. <https://doi.org/10.1177/1523422303251341>
- 16) Oduro, S., Nyarku, K. M., & Gbadeyan, R. A. (2020). Supplier relationship management and organizational performance of hospitals in an emerging economy context A comparative study. *Journal of Modelling in Management*. <https://doi.org/10.1108/JM2-03-2019-0072>
- 17) Panahi, B. (2014). A study on the effect of organizational trust on learning organizations. *Management Science Letters*, 4, 2363–2370. <https://doi.org/10.5267/j.msl.2014.10.014>
- 18) Putri, S. S. (2019). 7P Dalam Manajemen SDM Rumah Sakit . Retrieved from Manajemen Rumah Sakit website: <https://manajemenrumahsakit.net/2019/10/7p-dalam-manajemen-sdm-rumah-sakit/>
- 19) Pool, S., & Pool, B. (2007). A management development model Measuring organizational commitment and its a learning organization. *Journal of Management Development*, 26(4), 353–369. <https://doi.org/10.1108/02621710710740101>
- 20) Ro, Y. J., Yoo, M., Koo, Y., & Song, J. H. (2021). The roles of learning orientation: structural determinants for improving knowledge sharing with committed and satisfied employees. *INDUSTRIAL AND COMMERCIAL TRAINING*, 53(1), 60–76. <https://doi.org/10.1108/ICT-10-2019-0094>
- 21) Xiao, Y., Zheng, X., Pan, W., & Xie, X. (2010). Trust, relationship commitment and cooperative performance: supply chain management. *Chinese Management Studies*, 4(3), 231–243. <https://doi.org/10.1108/17506141011074129>



There is an Open Access article, distributed under the term of the Creative Commons Attribution – Non Commercial 4.0 International (CC BY-NC 4.0) (<https://creativecommons.org/licenses/by-nc/4.0/>), which permits remixing, adapting and building upon the work for non-commercial use, provided the original work is properly cited.