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Research Articl

Organizational Culture and Leadership Affect Nurses' Use of EMR Through Work Motivation at Hospital X Tangerang

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Abstract: Electronic Medical Records (EMR) are a crucial component of hospital information systems that support the effectiveness, accuracy, and continuity of patient care. However, their implementation among nurses at Hospital X remains suboptimal due to barriers related to organizational culture, leadership, and individual motivation. This study aims to analyze the effect of organizational culture (X1) and transformational leadership (X2) on the implementation of EMR (Y) through work motivation (Z) as an intervening variable. The research applied an explanatory-causal design with a quantitative approach, using a cross-sectional survey method. Data were collected through questionnaires distributed to nurses and analyzed using Structural Equation Modeling—Partial Least Squares (SEM-PLS). The findings reveal that organizational culture and transformational leadership significantly influence EMR implementation both directly and indirectly through work motivation, with p-values less than 0.05. These results indicate that strong organizational values, collaborative culture, and transformational leadership that fosters motivation and innovation can improve nurses' willingness and effectiveness in utilizing EMR. The study concludes that enhancing organizational and leadership factors, along with maintaining high work motivation, is essential to ensure successful EMR adoption and optimize healthcare service quality in hospitals.

Keywords: Digital Transformation; Electronic Medical Records; Organizational Culture; Transformational Leadership; Work Motivation

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1. Introduction

Hospital Information System (HIS) or Hospital Management Information System (HMRS) can be defined as one of the technologies in the form of a large integrated system that supports comprehensive information management in hospitals, including patient, clinical, and financial management. (Yusof et al., 2008). One part of HIS is the Electronic Medical Record (EMR). Electronic Medical Records have an important role for health workers in recording, monitoring, and managing services provided to patients in hospitals. One of the obstacles in the use of EMR at Hospital X in Tangerang is that some health workers who are a little older do not understand how to use technology or computers. The organizational culture applied to an organization is very different and employees must adapt to the existing organizational culture. The organizational culture that is developed will affect employee performance. In general, this culture reflects values, norms, and behaviors that are understood and agreed upon by all members of the organization as basic rules in acting. Today's culture of nursing organizations at Hospital X is a commitment to high-quality service, dedication to patients, professional development, and collaboration between teams. In realization, collaboration between teams is still felt to be lacking. The role of leadership support and

governance has an effect on the development of EMR because leaders are the highest ranks in decision-making. The leadership style set by the leader has a significant influence on creating a positive work environment. Currently, a special team from nursing at Hospital X has not been foEMRd, so for the future development process, it is necessary to form an executive team in the planning of hospital information systems. Another problem in this regard is also the vision and mission of the leader in the electronic medical record implementation project. Leaders still consider that the implementation of electronic medical records is only an IT team project, so collaboration from the nursing team is still lacking

Currently, Hospital X already has an EMR. The existence of obstacles to the implementation of electronic medical records in nurses at Hospital X is influenced by several factors, namely organizational culture, transformational leadership, and work motivation. Based on a preliminary study conducted on 10 nurses at Hospital X through interview techniques, it was found that there are still obstacles to the implementation of electronic medical records. So the author is interested in conducting research on the influence of organizational culture, transformational leadership, and work motivation on the implementation of electronic medical records in nurses at Hospital X.

This study aims to analyze in depth the contribution of organizational culture, transformational leadership mediated by work motivation to the implementation of electronic medical records in nurses. Through the results of the questionnaire, an analysis will be carried out on the influence of these factors on the implementation of EMR. The significance of the research is seen from how strong the influence of organizational culture, transformational leadership is directly on the implementation of EMR, as well as mediated by work motivation. The results of the research are expected to not only make an academic contribution, but also serve as a practical reference for hospital management, and stakeholders in developing appropriate strategies for the implementation of electronic medical records.

2. Literature Review

Electronic Medical Records (EMR) Implementation in Healthcare

In recent years, the implementation of Electronic Medical Records (EMR) has become one of the main pillars in the digital transformation of healthcare services in hospitals. A systematic review study conducted by Woldemariam & Jimma (2023) shows that the use of EMR can improve service quality, reduce medical errors, and improve coordination between healthcare workers. However, the main challenges remain the lack of training, inadequate infrastructure, and weak management commitment to supporting implementation.

Ouheda et al. (2024) emphasize that knowledge and perceived ease of use are important determinants in the adoption of health information technology, while Arsyam et al. (2024) confirm that EMR has a significant impact on clinical efficiency, although cost and privacy issues remain major obstacles. Thus, the success of EMR implementation is not only determined by technical aspects, but also by organizational factors and user behavior.

Organizational Culture and Its Role in EMR Implementation

Organizational culture plays an important role in the success of digital transformation in hospitals. Denison (1990) defines organizational culture as a system of values, beliefs, and norms that govern interactions between members of an organization. The dimensions of

involvement, consistency, adaptability, and mission in Denison's theory have been shown to influence organizational performance and effectiveness.

Research by Tabibi et al. (2018) confirms that a development-oriented organizational culture has a positive influence on perceived usefulness in the acceptance of hospital information systems. Meanwhile, Wardani et al. (2024) and Lestari & Amalia (2023) found that organizational culture has a significant effect on individual readiness in the use of health information systems. These findings indicate that an adaptive and collaborative organizational culture is a key driver of successful health technology adoption.

In the context of this study, organizational culture is not only viewed as a structural foundation, but also as a psychosocial factor that shapes nurses' readiness and commitment to using EMR systems in hospitals.

Transformational Leadership and Digital Transformation

Transformational leadership is a leadership style that emphasizes inspiration, motivation, and the development of individual potential to achieve organizational goals. Bass (1990) explains that transformational leaders are able to create a shared vision and improve organizational performance through charismatic influence, inspirational motivation, intellectual stimulation, and individual attention.

Research by Alshahrani et al. (2024) shows that innovative behavior in healthcare organizations can be mediated by transformational leadership styles, although their direct influence on employee task performance is not always significant. These findings are in line with a study by Chirwa (2025), which confirms that transformative leadership styles can increase employees' intrinsic motivation through a supportive organizational culture.

In the context of hospitals, transformational leadership is crucial because it can motivate healthcare workers, especially nurses, to proactively and continuously embrace digital change.

Work Motivation as a Mediating Factor

Work motivation is a psychological variable that drives individuals to achieve organizational goals. Based on Self Determination Theory (SDT), motivation consists of aspects of autonomy, competence, and relatedness (Deci & Ryan, 2000). In health information systems, motivation plays an important role in encouraging effective technology adoption.

Jedwab et al. (2021) found that motivation, engagement, and well-being of nurses have a positive relationship with the success of EMR implementation. However, stress due to system changes can also be an inhibiting factor if organizational support is inadequate. In this study, work motivation is placed as an intervening variable that links organizational culture and transformational leadership to RME implementation, expanding the behavioral approach to information system adoption through the integration of SDT and UTAUT theories.

Research Gap

Most previous studies have focused on technical aspects or managerial units in EMR implementation. Research by Christine Verina (2025) presents a novelty by focusing on nurses as direct users of the RME system in Indonesian hospitals. The simultaneous approach between organizationa culture and transformational leadership, as well as the role of work motivation as a mediating variable, makes this research contribute theoretically and practically to the literature on health information systems.

Additionally, the integration of Self-Determination Theory (SDT) and the Unified Theory of Acceptance and Use of Technology (UTAUT) in the hospital context provides a new perspective in explaining the adoption behavior of technology-based systems by nursing staff in Indonesia.

3. Materials and Method

This research is explanatory causality research that aims to explain causal relationships (influences) and test hypotheses by using questionnaires as a data collection tool. This study aims to determine the influence of organizational culture (X1), transformational leadership (X2), through work motivation (Z) on the implementation of electronic medical records (Y) at Hospital X. Viewed from the perspective of the data collection method, this study is a cross-sectional survey is a data collection method (which is also one of the descriptive research methods) where information is collected only at a certain time. This research was carried out by collecting information data in the form of questionnaires obtained directly through respondents and then processed with statistical analysis in the form of Structural Equation Modeling - Partial Least Squares (SEM PLS).

4. Results and Discussion

Descriptive analysis of respondent characteristics, a percentage frequency distribution analysis was carried out for each category. The following is a descriptive analysis of the characteristics of the respondents, namely.

Table 1. Frequency Distribution of Respondents.

Table of Data

Character	Category	Total	(%)
Sex	Women	271	90,3
Sex	Men	29	9,7
Age	21 - 30 years old	100	33,4
Age	31 - 40 years old	116	38,7
Age	41 - 50 years old	55	18,1
Age	>50 years old	29	9,8
Education	D3 Keperawatan	123	41
Education	Ners	177	59

Based on table 1 above, it can be seen that most (90.3%) of the respondents are women, the most age is less than 40 years old (72.1%), most of the last education is Nurses (59%).

The outer model tests the relationship between an indicator (item) and the latent construct it represents. The evaluation of the outer model is carried out through validity and reliability tests. The convergent validity test aims to ensure that the indicator actually measures the construct in question. Meanwhile, the reliability test evaluates the internal consistency between indicators in one construct. The validity of the convergence is evaluated by looking at the loading factor value of each indicator against its construct.

The ideal criterion is the value of the loading factor \geq 0.70. In addition, the Average Variance Extracted (AVE) value is also used, where the construct is said to be convergently valid if the AVE \geq 0.50. The reliability of the construct is tested through two indicators: Composite Reliability (CR) and Cronbach's Alpha. Good CR and Alpha values are \geq 0.70, which indicates internal consistency between the indicators in the construct.

Table 2. Outer Loading Indicator. Table: Validity and Loading Factor

No	Variable	Instrument	Loading Factor	Value
1	Organizational	BO1	0.728	Valid
	Culture			
2	Organizational	BO2	0.894	Valid
	Culture			
3	Organizational	BO3	0.769	Valid
	Culture			
4	Organizational	BO4	0.769	Valid
	Culture			
5	Organizational	BO5	0.749	Valid
	Culture			
6	Organizational	BO6	0.739	Valid
	Culture			
7	Organizational	BO7	0.741	Valid
	Culture			
8	Organizational	BO8	0.734	Valid
	Culture			
9	Organizational	BO9	0.741	Valid
	Culture			
10	Organizational	BO10	0.724	Valid
	Culture			
11	Organizational	BO11	0.756	Valid
	Culture			
12	Organizational	BO12	0.754	Valid
	Culture			
13	Organizational	BO13	0.749	Valid
	Culture			
14	Organizational	BO14	0.749	Valid
	Culture			
15	Organizational	BO15	0.756	Valid
	Culture			
16	Transformational	KT1	0.788	Valid
	Leadership			
17	Transformational	KT2	0.742	Valid
	Leadership			
18	Transformational	KT3	0.738	Valid
	Leadership			
19	Transformational	КТ4	0.768	Valid
	Leadership			
20	Transformational	КТ5	0.753	Valid
	Leadership			
21	Transformational	KT6	0.756	Valid
	Leadership			
22	Transformational	КТ7	0.752	Valid
	Leadership			

23	Transformational	KT8	0.756	Valid
2.4	Leadership	IZTO	0.754	X7 1' 1
24	Transformational	KT9	0.754	Valid
	Leadership	* * * * * * * * * * * * * * * * * * *	^ == .	** ** 1
25	Transformational	KT10	0.756	Valid
	Leadership	***		
26	Transformational	KT11	0.877	Valid
	Leadership			
27	Transformational	KT12	0.877	Valid
	Leadership			
28	Work Motivation	MK1	0.877	Valid
29	Work Motivation	MK2	0.859	Valid
30	Work Motivation	MK3	0.759	Valid
31	Work Motivation	MK4	0.859	Valid
32	Work Motivation	MK5	0.869	Valid
33	Work Motivation	MK6	0.751	Valid
34	Work Motivation	MK7	0.801	Valid
35	Work Motivation	MK8	0.749	Valid
36	Work Motivation	MK9	0.849	Valid
37	Work Motivation	MK10	0.83	Valid
38	EMR	EMR1	0.877	Valid
	Implementation			
39	EMR	EMR2	0.859	Valid
	Implementation			
40	EMR	EMR3	0.741	Valid
	Implementation		*** **	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
41	EMR	EMR4	0.859	Valid
, .	Implementation		0.037	vand
42	EMR	EMR5	0.769	Valid
12	Implementation	LIVING	0.702	vand
43	EMR	EMR6	0.729	Valid
7.3	Implementation	LAVIKO	0.727	v and
44	EMR	EMR7	0.809	Valid
77	Implementation	Livile /	0.007	v and
45	EMR	EMR8	0.789	Valid
TJ	Implementation	LAVIIVO	0.709	v anu
46	EMR	EMR9	0.877	Valid
40		LEIVINE	0.0//	v anu
47	Implementation	EMD10	0.750	Valid
47	EMR	EMR10	0.759	Valid
	Implementation			

Table 3. AVE (Average Variance Extracted) Value.

Table of Average Variance Extracted (AVE)

Variabel	Average	Variance V	Value
	Extracted (A		
ВО	0.614	V	alid
KT	0.615	V	alid alid
MK	0.61	V	alid
EMR	0.59	V	alid

Table 4. Reliability Test.

Variable	Cronbach's Alpha	rho_A	Composite Reliability	Value
Organizational Culture	0.957	0.96	0.962	Reliable
Transformational Leadership	0.943	0.945	0.95	Reliable
Work Motivation	0.935	0.939	0.945	Reliable
EMR Implementation	0.963	0.965	0.966	Reliable

The results of the analysis showed that all indicators for the variables of Organizational Culture, Transformational Leadership, Work Motivation, and Implementation of Electronic Medical Records had a loading factor value > 0.70. The AVE value of each construct also exceeds 0.50. This proves that all indicators have successfully reflected their constructs validly. From the results of the reliability test, all variables, namely Organizational Culture, Transformational Leadership, Work Motivation, and Implementation of Electronic Medical Records, had Cronbach's Alpha and Composite Reliability values above 0.70. This proves that all variables are reliable.

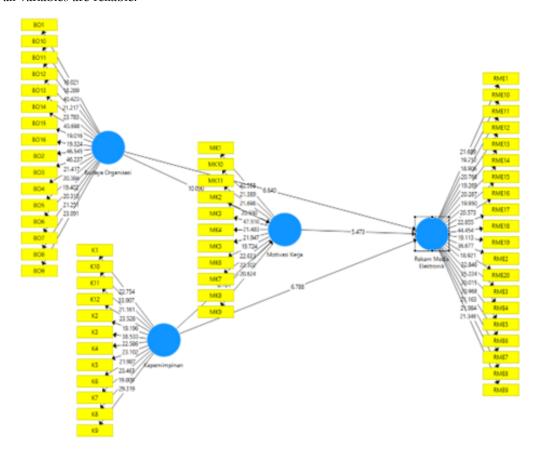


Figure 2. Model Bootsrapping Estimation Results.

The test was carried out by bootstrapping to see the significance of the relationship between the constructs with the criteria of t-statistical value ≥ 1.96 , and p-value ≤ 0.05 . This

shows that there is a significant effect of organizational culture, transformational leadership, and work motivation on the implementation of EMR.

Table 5. Results	of Simultaneous	Effect Hypothesis	(F Test)
Table J. Results	or omnunancous	Liteur I I v D O titusis) (1 1 (3)(/-

Variable	JK (SS)	df	RJK (MS)	F Hitung	P-Value
Regression	58.17	3	19.39	211.787	0.000
Residual	27.10	296	0.092		
Total	85.27	299			

The F value of 211,787 shows that simultaneously, the variables of Organizational Culture, Transformational Leadership, and Work Motivation have a very significant influence on the EMR Implementation variables. This result is strengthened by p value of 0.000 which is smaller than the significance level of 5%. So it can be concluded that there is a simultaneous influence between Organizational Culture, Transformational Leadership, and Work Motivation.

Table 6. Partial Direct Effect Hypothesis Test.

Tabel Hasil Analisis

Original Sample (O)	T Statistics	P Values	Notes
$BO \rightarrow EMR$	6.64	0.000	H2 accepted
$KT \rightarrow EMR$	6.788	0.000	H3 accepted
$\mathrm{BO} \to \mathrm{MK}$	10.09	0.000	H4 accepted
$KT \to MK$	8.781	0.000	H5 accepted
$MK \rightarrow EMR$	5.473	0.000	H6 accepted

The accepted criteria for a partial direct influence hypothesis are if P value <0.05, and T is calculated ≥ 1.96. The original value of the sample means the amount of influence exerted where the number >0 means that it has a positive influence while the number <0 means a negative influence. From the results of the partial direct influence hypothesis, all hypotheses of the significant influence of organizational culture on EMR implementation, transformational leadership on EMR implementation, organizational culture on work motivation, transformational leadership on work motivation, and work motivation on EMR implementation were accepted.

Table 7. Indirect Effect Hyphothesis Test.

Hypothesis Testing Results

Original Sample (O)	T Statistics (t)	P Value	Note
BO -> MK -> EMR	0.15	5.033	0.000
KT -> MK -> EMR	0.131	4.422	0.000

This test refers to a significance value of 5% (P-value <0.05). The condition used is if the P-value is <0.05. So that from the results of the indirect influence hypothesis test, it was

found that there was a significant influence of organizational culture and transformational leadership through work motivation mediation on the implementation of EMR.

5. Comparison

Simultaneous effect between organizational culture and transformational leadership through work motivation on the implementation of EMR

The simultaneous influence between organizational culture and transformational leadership, and work motivation can be on the implementation of EMR. This means that organizational culture, transformational leadership, and work motivation contribute to the implementation of EMR at Hospital X. Based on the three box method index, the average organizational culture index value is in the high category, which means that the organizational culture of nursing at Hospital X at Tangerang is quite good. The highest dimension of organizational culture is the mission dimension with the statement "Employee work behavior reflects the values and norms of the organization". While the lowest index is on the adaptability dimension with the statement "Organization responsive to customer or patient needs". This shows that the culture of the hospital organization is not strong enough in adjusting to the needs of patient services. Based on the average index value in the three box method index in the variable Transformational Leadership is located in the high category, which means that transformational leadership in nursing at Hospital X at Tangerang towards the implementation of EMR is fairly good. Leaders are considered capable provide motivation, work vision, and attention to the needs of individual subordinates. Transformational leaders are very effective in driving organizational readiness to face systemic change (Bass & Riggio, 2018). This is supported by the Individualized Consideration dimension with the statement "My leader makes time to listen to me personally", which has the highest index. While the lowest index is in the Intellectual Stimulation dimension with the statement "My leader welcomes new ideas even though they differ from his opinion." Which is in the medium category. This shows that the current leaders have not listened enough to the input from their team.

Based on the average index value in the three box method index on the work motivation variable is located in the high category, where nurses have an internal drive to provide the best service, complete tasks optimally, and actively contribute to the implementation of EMR is fairly good. In the context of system change, high work motivation plays a role as an intervening variable that bridges the gap between organizational culture and leadership with the success of technology implementation (Robbins & Judge, 2019). This is supported by the competency dimension with the statement "I am able to face challenges in the process of implementing electronic medical records", which has the highest index and is in the high category. While the lowest index is in the autonomy dimension with the statement "I feel that my boss gave me a choice" with a medium index. This shows that leaders in terms of EMR implementation do not give their teams many options.

Significant effect of organizational culture on EMR implementation

Based on the results of statistical tests, there is a significant influence between organizational culture on EMR implementation. This indicates that a supportive, change-open, and collaboration-based culture greatly influences the success of digital transformations such as EMR. From the results of the three box method index, the average index value of

organizational culture is in the high category, which means that the culture of organization in nursing at Hospital X at Tangerang is quite good. The highest dimension of organizational culture is the dimension with the statement "Employee work behavior reflects the values and norms of the organization". While the lowest index is on the adaptability dimension with the statement "Organization responsive to customer/patient needs". This shows that the hospital organizational culture is not strong enough to adjust to the needs of patient services.

An organizational culture that is open to innovation will encourage the adoption of health information technology. According to McGonigle and Mastrian (2022), the success of health information systems is highly dependent on the readiness of the organization's culture, including attitudes to change and willingness to learn new systems. This study is consistent with the findings of Fitriyani et al. (2020) who found that a culture that supports innovation is an important predictor in the success of e- health implementation. EMR demands changes in work patterns, cross-functional collaboration, and new skills. Without strong organizational culture support, digital initiatives like EMR can face resistance from users. Thus, strengthening digital work culture is an important foundation in change management.

Significant effect of transformational leadership on EMR implementation

Based on the results of statistical tests, there is a significant influence between organizational culture on EMR implementation. Leaders who provide clear direction, technical support, and motivation will facilitate the transition to an EMR system. The role of leaders is very important in facilitating system change, especially in the complex and regulatory health service sector

Based on the average index value in the three box method index in the variable Transformational Leadership is located in the high category, which means that transformational leadership in nursing at Hospital X at Tangerang towards the implementation of EMR is fairly good. Leaders are considered to be able to provide motivation, work vision, and attention to the individual needs of subordinates. Leader transformational changes are very effective in encouraging organizational readiness to face systemic change (Bass & Riggio, 2018). This is supported by the IndividualizedConsideration dimension with the statement "My leader makes time to listen to me personally", which has the highest index. Meanwhile, the lowest index was in the Intellectual Stimulation dimension with the statement "My leader welcomes new ideas even though they differ from his opinion." Those who are categorized as moderate. This shows that the current leaders have not listened enough to the input from their team.

According to Nugroho and Sari (2018), the success of the digitalization program in hospitals is greatly influenced by the support and involvement of leaders in the entire transformation process. Leaders not only provide strategic decisions, but also act as role models in the use of EMR systems. Furthermore, according to Yang et al. (2020), transformational leadership is very effective in increasing the acceptance of digital systems by building trust, providing training, and creating a work climate based on a shared vision.

Significant effect of organizational culture on work motivation

The results of the analysis show that organizational culture has a significant effect on work motivation. This means that the more positive the culture applied in the hospital, the higher the work motivation felt by nurses. Based on the results of the three box method index, the average index value of organizational culture is in the high category, which means that the

organizational culture of nursing at Hospital X at Tangerang is quite good. The highest dimension of organizational culture is the mission dimension with the statement "Employee work behavior reflects the values and norms of the organization". While the lowest index is on the adaptability dimension with the statement "Organization responsive to customer/patient needs". This shows that the organizational culture of the hospital is not strong enough to adjust to the needs of patient services. A good organizational culture creates a conducive work atmosphere, forms shared values, and provides a strong sense of belonging to institution. This kind of culture includes the support of superiors, close teamwork, and appreciation for individual contributions. This is in line with Schein and Schein (2017) who emphasized that organizational culture is a shared value system that influences employees' attitudes and work behaviors. In the healthcare sector, a strong organizational culture helps create professionalism, strengthen work ethic, and increase the desire to contribute to the achievement of hospital goals. Research by Al-Maamari and Al-Toubi (2021) also supports these findings, stating that organizational culture plays a major role in shaping positive work attitudes, especially in dynamic environments such as hospitals.

Significant effect of transformational leadership on work motivation

The results of the statistical test show that leadership has a significant effect on work motivation. Leadership that is inspiring, communicative, and cares about the welfare of subordinates encourages increased work motivation of nurses. Transformational leadership is able to encourage work ethic through four main dimensions: ideal influence, inspirational motivation, intellectual stimulation, and individual consideration (Bass & Riggio, 2018). Based on the average index value in the three box method index in the variable Transformational Leadership is located in the high category, which means that transformational leadership in nursing at Hospital X at Tangerang towards the implementation of EMR is fairly good. Leaders are considered to be able to provide motivation, work vision, and attention to the individual needs of subordinates. Transformational leaders are very effective in encouraging organizational readiness to face systemic change (Bass & Riggio, 2018). This is supported by the Individualized Consideration dimension with the statement "My leader makes time to listen to me personally", which has the highest index. Meanwhile, the lowest index was in the Intellectual Stimulation dimension with the statement "My leader welcomes new ideas even though they differ from his opinion." Those who are categorized as moderate. This shows that the current leaders have not listened enough to the input from their team.

Leaders who show commitment, build trust, and provide space for self- development will increase staff motivation in carrying out tasks. Research by Herlina and Handayani (2019) in an Indonesian hospital environment supports this, that transformational leadership styles contribute greatly to the formation of work motivation of nursing personnel. In the context of Mayapada Hospital, the role of the head of the room or nursing manager is very strategic to maintain morale, especially in the face of digital transformation and high workload.

Significant effect between work motivation on EMR implementation

Work Motivation has a significant direct influence on EMR implementation. This shows that motivated nurses have a higher readiness to adopt the EMR system optimally. Motivation is an internal factor that plays a role as a driver in accepting and using the new system. Based on the table above, it was found that the average index value of the Work Motivation variable is located in the high category, where nurses have an internal drive to

provide the best service, complete tasks optimally, and actively contribute to the implementation of EMR is fairly good. In the context of system change, high work motivation plays a role as an intervening variable that bridges the gap between organizational culture and leadership with the success of technology implementation (Robbins & Judge, 2019). This is supported by the competency dimension with the statement "I am able to face challenges in the process of implementing electronic medical records", which has the highest index and is in the high category. Meanwhile, the lowest index is in the autonomy dimension with the statement "I feel that my boss gave me a choice" and is in the medium category. This shows that leaders in terms of EMR implementation do not give their teams many options.

Nurses who feel that their work is meaningful, appreciated, and contributes to patient service will be more enthusiastic about participating in EMR training, and adapt more quickly. This is reinforced by Robbins & Judge (2019), who stated that motivation plays an important role in innovative behavior and involvement in organizational digitalization programs. In a study by Maulina et al. (2022), work motivation was found to be a significant predictor in the successful implementation of e-health systems, including EMR. Therefore, it is important for hospital management to continue to maintain and increase the motivation of nurses as part of a change management strategy

Significant influence of organizational culture through work motivation on the implementation of EMR

Work Motivation is proven to mediate the influence of Organizational Culture on the Implementation of EMR. This means that a positive culture not only affects EMR directly, but also through increased individual motivation. This mediation function indicates that the influence of organizational culture on the success of EMR implementation will be stronger if it is accompanied by increased work motivation. Based on the three box method index, the average index value of organizational culture is in the high category, which means that the organizational culture of nursing at Hospital X at Tangerang is quite good. The highest dimension of organizational culture is the dimension with the statement "Employee work behavior reflects the values and norms of the organization". While the lowest index is on the adaptability dimension with the statement "Organization responsive to customer or patient needs". This shows that the hospital organizational culture is not strong enough to adjust to the needs of patient services. Based on the average index value in the three-box method index on the work motivation variable is located in the high category, where nurses have an internal drive to provide the best service, complete tasks optimally, and actively contribute to the implementation of EMR is fairly good. In the context of system change, high work motivation plays a role as an intervening variable that bridges the gap between organizational culture and leadership with the success of technology implementation (Robbins & Judge, 2019).

This is supported by the competency dimension with the statement "I am able to face challenges in the process of implementing electronic medical records", which has the highest index and is in the high category. While the lowest index is in the autonomy dimension with the statement "I feel like my boss gave me a choice" with a medium index. This shows that leaders in terms of EMR implementation do not give their teams many options. Within the framework of the Theory of Planned Behavior theory, a positive attitude towards the organization will strengthen the intention to behave proactively, one of which is in using new technologies. Research by Herawati & Purwanto (2021) shows that in the healthcare sector,

work motivation mediates significantly the relationship between organizational environmental factors and the innovative behavior of medical staff. Therefore, organizational intervention needs to be directed not only at improving the system, but also at the psychological empowerment of the workforce

The significant influence of transformational leadership through work motivation on the implementation of EMR

Motivation also mediates the influence of leadership on the implementation of EMR. This shows that good leadership can increase the effectiveness of system implementation through increased work motivation of nurses. These findings confirm that leadership not only has a direct influence on technological change, but also through strengthening the psychological aspects of employees. Leaders who pay attention to individual needs and make room for personal development will foster intrinsic motivation, which ultimately increases engagement with the new system. Based on the average index value in the three box method index in the variable Transformational Leadership is located in the high category, which means that transformational leadership in nursing at Hospital X at Tangerang towards the implementation of EMR is fairly good. Leaders are considered to be able to provide motivation, work vision, and attention to the individual needs of subordinates. Transformational leaders are very effective in encouraging organizational readiness to face systemic change (Bass & Riggio, 2018). This is supported by the Individualized Consideration dimension with the statement "My leader makes time to listen to me personally", which has the highest index. Meanwhile, the lowest index was in the Intellectual Stimulation dimension with the statement "My leader welcomes new ideas even though they differ from his opinion." Who is in the category keep. This shows that the current leaders have not listened enough to the input from their team.

Based on the average index value in the three box method index on the work motivation variable is located in the high category, where nurses have an internal drive to provide the best service, complete tasks optimally, and actively contribute to the implementation of EMR is fairly good. In the context of system change, high work motivation plays a role as an intervening variable that bridges the gap between organizational culture and leadership with the success of technology implementation (Robbins & Judge, 2019). This is supported by the competency dimension with the statement "I am able to face challenges in the process of implementing electronic medical records", which has the highest index and is in the high category. While the lowest index is in the autonomy dimension with the statement "I feel that my boss gave me a choice" with a medium index. This shows that leaders in terms of EMR implementation do not give their teams many options.

A study by Al-Harthy et al. (2023) shows that motivation is an important bridge between leadership and the adoption of digital health technology. Thus, the strategy to improve the implementation of EMR must include the dimensions of leadership and motivation as a unit of the intervention system.

All relationship paths in the SEM model showed strong statistical significance, both direct and indirect influences. Organizational Culture and Leadership are proven to be the main pillars that shape Work Motivation and drive the success of EMR Implementation. The role of Work Motivation mediation is a major reinforcer in clarifying the path of indirect influence that has been often ignored in the digital transformation process in hospitals.

6. Conclusion

Discussion about the effect of organizational culture, transformational leadership, and work motivation as an intervening variable for the implementation of electronic medical records in nurses at Hospital X Tangerang. It can be concluded that the results of the SEM PLS test obtained a p value of < 0.000 less than <0.05 which shows the influence of organizational culture, transformational leadership, and work motivation as an intervening variable on the implementation of electronic medical records in nurses at Hospital X Tangerang City.

7. Suggestion

For Hospital

The hospital should develop programs to strengthen organizational values in employee development programs, training and development programs for room or work unit leaders so that they are able to apply transformational leadership styles, and motivation strengthening programs, such as awarding, career support, job recognition, and training based on staff needs.

For next researcher

The researcher can add other variables in the model, so that the independent variable can explain the dependent variables more strongly, and add the variants of the research population to better describe the phenomena and findings related to the research topic.

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Data Availability Statement: The data supporting the findings of this study are available from Hospital X Tangerang but restrictions apply to the availability of these data, which were used under license for the current study and are therefore not publicly available. Data are, however, available from the authors upon reasonable request and with permission of Hospital X Tangerang.

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