

Research Article

Analysis of the Effect of Changes in the Implementation of Electronic Medical Records on Organizational Commitment and Employee Performance Mediated by Job Satisfaction

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Abstract: The digital transformation through the implementation of Electronic Medical Records (EMR) is an important innovation in hospital information systems aimed at improving work efficiency, service quality, and administrative management. Nevertheless, the success of EMR implementation is strongly influenced by human factors, particularly job satisfaction and employees' emotional attachment to the organization. Understanding employees' responses to EMR-related changes is therefore essential to ensure successful organizational transformation in hospitals. This study employs a quantitative explanatory approach using Partial Least Squares–Structural Equation Modeling (PLS-SEM), supported by qualitative data obtained through interviews. The research population consists of all laboratory employees at Sultan Imanuddin Regional General Hospital (RSUD Sultan Imanuddin) Pangkalan Bun, selected using a purposive sampling technique. The research instruments were developed based on human resource management and health information system theories and include four main variables: changes in EMR implementation, job satisfaction, organizational commitment, and employee performance. The results indicate that changes in EMR implementation have a direct positive effect on job satisfaction and employee performance. Meanwhile, the influence of EMR on organizational commitment occurs indirectly through job satisfaction as a mediating variable, highlighting the central role of job satisfaction in linking digital transformation with organizational commitment. Furthermore, job satisfaction positively affects both organizational commitment and employee performance. These findings demonstrate that successful EMR implementation depends not only on technological aspects but also on human resource readiness, satisfaction, and commitment, which are key drivers of performance improvement and service quality in the digital era of hospital management.

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1. Introduction

The number and capacity of hospitals have increased significantly over the past two decades, in line with increasing public demand for high-quality healthcare services. This situation has driven competition among healthcare providers to improve efficiency and service quality through the use of information technology (Dlugacz, 2006). Digital transformation in healthcare systems has been on the global agenda since the early 2000s, as recommended by the World Health Organization (WHO), with Electronic Medical Records (EMR) as a key instrument for improving service quality, operational efficiency, and patient safety (WHO, 2006); (Ludwick & Doucette, 2009). In Indonesia, the government officially mandated the implementation of EMR through national regulations starting in 2020 as part of the health information system reform (Kementerian Kesehatan Republik Indonesia, 2022).

Although national policies regarding EMR implementation have been established, their implementation at the hospital level still faces various challenges. Ministry of Health data shows that by 2023, only around 30 percent of hospitals will have fully implemented EMR, with the main challenges being human resource readiness, system integration, and workflow adjustments (Kementerian Kesehatan Republik Indonesia, 2023). Previous studies have shown that the implementation of information technology in hospitals does not always have an automatic positive impact, often leading to resistance, increased workload, and decreased job satisfaction if not accompanied by effective change management (Ludwick & Doucette, 2009).

Most research on EMR in Indonesia to date has focused on outpatient, inpatient, and emergency department services, with an emphasis on user satisfaction and clinical service quality. Research specifically examining the impact of changes in EMR implementation on employee performance in laboratory units is still very limited. This is despite the fact that laboratory units are characterized by highly standardized work, a high risk of error, and a significant dependence on the accuracy and speed of information systems, given that approximately 60–70 percent of physicians' clinical decisions depend on laboratory test results (Plebani, 2017). The limitations of this study indicate an empirical gap regarding how changes to digital work systems affect job satisfaction, organizational commitment, and the performance of laboratory employees.

The urgency of this research is further strengthened in the context of Sultan Imanuddin Hospital, Pangkalan Bun, which began gradually implementing EMR in 2021, including in the laboratory area. Although internal hospital data from 2024 showed increased efficiency and a decrease in recording errors, the impact of EMR implementation has not been uniform across all service units. The transition from manual to digital systems not only changes work technology but also redesigns the entire work system, potentially impacting employee workload, job satisfaction, and organizational commitment. Therefore, this research is crucial in filling the gap in empirical studies regarding the impact of changes in EMR implementation on laboratory employee performance, considering the role of job satisfaction and organizational commitment in supporting the success of the hospital's digital transformation.

2. Literature Review

Implementation Changes RME (X)

An RME is an information system that records a patient's health condition, medical history, diagnostic test results, service cost details, and various other medical information (Hatton et al., 2012). The transition process for laboratory employees from a paper-based (conventional) medical record system to a digital system includes changes in work procedures, workload, time efficiency, ease of data access, and training in EMR usage (Rusdiana et al., 2024; Amin et al., 2021).

Organizational Commitment (Y1)

Allen & Meyer (1991) define organizational commitment as a psychological state that can lead an individual to take actions consistent with the goals of their organization. It is a characteristic of the relationship between organizational members and their organization and has implications for an individual's decision to continue membership in the organization, reflecting affective, ongoing, and normative commitment.

Laboratory Employee Performance (Y2)

According to Robbins & Judge (2017), laboratory employee performance refers to the work results achieved by laboratory employees in their units, both in quality and quantity, in accordance with their responsibilities to the organization/unit. This includes indicators of productivity, work quality, and reporting accuracy.

Job Satisfaction (Z1)

Luthans (2006), define job satisfaction as an individual's evaluation of their work and work environment, encompassing satisfaction with work, rewards, support, work relationships, and the promotion system. The conceptual framework and hypotheses that have been created are as follows:

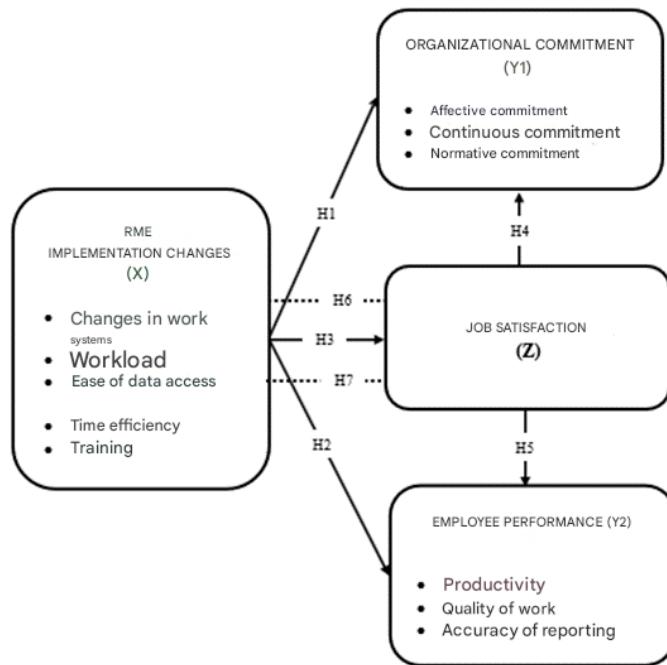


Figure 1. Conceptual Framework.

Research Hypothesis

Based on the theoretical foundation and previous research, the hypotheses in this study are formulated to test the relationships between the established variables. The research hypotheses are as follows:

- H1: Changes in the implementation of RME have a positive and significant effect on the organizational commitment of laboratory employees at Sultan Imanuddin General Hospital, Pangkalan Bun.
- H2: Changes in the implementation of RME have a positive and significant effect on the performance of laboratory employees at Sultan Imanuddin General Hospital, Pangkalan Bun.
- H3: Changes in the implementation of RME have a positive and significant effect on the job satisfaction of laboratory employees at Sultan Imanuddin General Hospital, Pangkalan Bun.
- H4: Job satisfaction has a positive and significant effect on the organizational commitment of laboratory employees at Sultan Imanuddin General Hospital, Pangkalan Bun.
- H5: Job satisfaction has a positive and significant effect on the performance of laboratory employees at Sultan Imanuddin General Hospital, Pangkalan Bun.
- H6: Job satisfaction mediates the effect of changes in the implementation of RME on the organizational commitment of laboratory employees at Sultan Imanuddin General Hospital, Pangkalan Bun.
- H7: Job satisfaction mediates the effect of changes in the implementation of RME on the organizational commitment of laboratory employees at Sultan Imanuddin General Hospital, Pangkalan Bun.

3. Research Method

This study employed a mixed methods approach, incorporating a quantitative, observational, and analytical approach. The quantitative design was cross-sectional, aiming to analyze the effect of changes in Electronic Medical Records (EMR) implementation on organizational commitment and employee performance, with job satisfaction as a mediating variable. The population and sample were all 30 laboratory employees at Sultan Imanuddin Hospital, Pangkalan Bun, selected using a total sampling technique. The independent variable included changes in EMR implementation, measured through five indicators: changes in work

systems, workload, time efficiency, ease of data access, and training. The dependent variable consisted of organizational commitment (affective, sustainable, and normative) and employee performance (productivity, work quality, and reporting accuracy), while the mediating variable was job satisfaction. All variables were measured using a closed-ended questionnaire with a Likert scale of 1–5 that had been tested for validity and reliability.

Quantitative data were analyzed using IBM SPSS Statistics 25 for descriptive statistics, and Structural Equation Modeling based on Partial Least Squares (SEM-PLS) with SmartPLS 4 software to test direct and indirect relationships between variables and their significance (Creswell & Creswell, 2023). Furthermore, a qualitative approach was conducted through in-depth semi-structured interviews with several key informants to explore experiences, perceptions, and contextual factors not captured by the questionnaire. Qualitative data were analyzed using thematic analysis, including data reduction, grouping themes, and interpreting meaning. The integration of quantitative and qualitative results was used to gain a comprehensive understanding of how and why changes in RME implementation affect job satisfaction, organizational commitment, and performance of laboratory employees.

4. Results and Discussion

Result

To obtain a general overview of the background of the respondents in this study, a demographic analysis was conducted, including age, gender, education, length of service, and training status. These characteristics were tested using a frequency distribution test on the 30 respondents who made up the study sample.

Table 1. Description of Age Characteristics.

No	Age	Amount	Percentage
1	20-25 tahun	1	3.3%
2	26-40 tahun	22	73.3%
3	41-45 tahun	3	10.0%
4	46-55 tahun	3	10.0%
5	56-65 tahun	1	3.3%
Amount		30	100%

Source: Processed primary data (2025)

The results of the description of the characteristics of respondents based on age obtained 1 person or 3.3 percent of respondents aged 20-25 years, 22 people or 73.3 percent of respondents aged 26-40 years, 3 people or 10.0 percent of respondents aged 41-45 years, 3 people or 10.0 percent of respondents aged 46-55 years, and 1 person or 3.3 percent of respondents aged 56-65 years. These results indicate that the majority of respondents observed were aged 26-40 years.

Table 2. Description of Gender Characteristics.

No	Gender	Amount	Percentage
1	Male	7	23.3%
2	Female	23	76.7%
Amount		30	100%

Source: Processed primary data (2025)

The results of the description of respondent characteristics based on gender revealed that 7 respondents, or 23.3 percent, were male and 23 respondents, or 76.7 percent, were female. These results indicate that the majority of respondents observed were female.

Table 3. Description of Educational Characteristics.

No	Highest Level of Education	Amount	Percentage
1	SMA	0	0.0%
2	D3	26	86.7%
3	S1	4	13.3%
4	S2	0	0.0%
Total		100	30

Source: Processed primary data (2025)

The results of the description of respondent characteristics based on education obtained 26 people or 86.7 percent of respondents who had a Diploma 3 education, and 4 people or 13.3 percent of respondents who had a Bachelor's degree. These results indicate that the majority of respondents observed had a Diploma 3 education.

Table 4. Description of Characteristics Length of Work.

No	Length of Work	Amount	Percentage
1	<1 Years	1	3.3%
2	2-10 Years	17	56.7%
3	>10 Years	12	40.0%
Amount		30	100%

Source: Processed primary data (2025)

The results of the description of the characteristics of respondents based on length of service obtained 1 person or 3.3 percent of respondents have worked at the company for <1 year, 17 people or 56.7 percent of respondents have worked at the company for 2-10 years, and 12 people or 40.0 percent of respondents have worked at the company for >10 years. These results indicate that the majority of respondents observed have worked at the company for 2-10 years.

Table 5. Description of Training Status Characteristics.

No	Training Status	Amount	Percentage
1	Yes	25	83.3%
2	No	5	16.7%
Amount		30	100%

Source: Processed primary data (2025)

The results of the description of respondent characteristics based on training status revealed that 25 people, or 83.3 percent, had participated in training, and 5 people, or 16.7 percent, had not. These results indicate that the majority of respondents observed had participated in training.

Quantitative Analysis

This study tested Partial Least Squares (PLS) analysis using SmartPLS version 4 software. According to Ghazali & Latan (2021), PLS analysis involves evaluating the measurement model (outer model) and structural model (inner model). In this study, hypothesis testing was conducted using PLS analysis techniques with the SmartPLS 4 program. The following is the PLS model scheme used in the analysis.

Table 6. Convergent Validity Test Results.

Variable	Indicator	Loading	Condition	Note.
RME Implementation Changes (X1)	Work System Changes	X1.1	0.923	>0.70
	Workload	X1.2	0.852	>0.70
	Time Efficiency	X1.3	0.847	>0.70
	Ease of Data Access	X1.4	0.860	>0.70
	Training	X1.5	0.856	>0.70
Job Satisfaction (Z)	Job Satisfaction	Z.1	0.870	>0.70
		Z.2	0.906	>0.70
		Z.3	0.902	>0.70
		Z.4	0.894	>0.70
		Z.5	0.838	>0.70
Organizational Commitment (Y1)	Affective commitment	Y1.1	0.819	>0.70
	Ongoing Commitment	Y1.2	0.913	>0.70
	Normative Commitment	Y1.3	0.802	>0.70
Employee performance (Y2)	Productivity	Y2.1	0.933	>0.70
	Work Quality	Y2.2	0.931	>0.70
	Reporting Accuracy	Y2.3	0.899	>0.70

Source: Processed primary data (2025)

The results of the convergent validity test of the variables of changes in RME implementation (X1), job satisfaction (Z), organizational commitment (Y1), and employee performance (Y2) show that all indicators have a factor loading value (outer loading) of more than 0.70, which indicates that these indicators provide a fairly strong contribution in explaining the variables they represent. High loading values reflect a strong correlation between the indicators and their dimensions.

Table 7. Discriminant Validity Test Results.

Variable	X1	Y1	Y2	Z	Ket.
X1	0.868				Accept
Y1	0.441	0.846			Accept
Y2	0.580	0.648	0.921		Accept
Z	0.463	0.692	0.639	0.882	Accept

Source: Processed primary data (2025)

The results of the discriminant validity test using the Fornell-Larcker Criterion obtained the square root of the AVE of each construct (marked with a bold value) is higher than its correlation with other constructs in the same row or column. Thus, it can be concluded that the discriminant validity of the model has been met, meaning that each construct in the model has a clear uniqueness and there is no overlapping problem between constructs. Another approach to assessing discriminant validity is to examine the square root of the Average Variance Extracted (AVE), where values above 0.5 are recommended (Ghozali et al., 2021). The AVE values obtained in this study are presented in the following table:

Table 8. Construct Validity Test Results.

Variable	Average Variance Extracted (AVE)	Condition	Note.
Changes in RME Implementation (X1)	0.753	>0.50	Accept
Organizational Commitment (Y1)	0.716	>0.50	Accept
Employee Performance (Y2)	0.849	>0.50	Accept
Job Satisfaction (Z)	0.778	>0.50	Accept

Source: Processed primary data (2025)

The results of the construct validity test of the variables of changes in RME implementation (X1), job satisfaction (Z), organizational commitment (Y1), and employee performance (Y2) showed that all constructs obtained AVE values of more than 0.50, which means that most of the indicator variance can be explained by the latent construct.

Table 9. Construct Reliability Test Results.

Variable	Cronbach's alpha	Composite reliability	Condition	Note.
Changes in RME Implementation (X1)	0.920	0.944	>0.70	Accept
Organizational Commitment (Y1)	0.803	0.844	>0.70	Accept
Employee Performance (Y2)	0.911	0.913	>0.70	Accept
Job Satisfaction (Z)	0.929	0.934	>0.70	Accept

Source: Processed primary data (2025)

The results of the reliability test show that all constructs, namely changes in RME implementation (X1), job satisfaction (Z), organizational commitment (Y1), and employee performance (Y2), have Cronbach's Alpha and Composite Reliability values above 0.70, which indicates good indicator consistency and internal reliability. Thus, all indicators and dimensions in the four variables have met the criteria of convergent validity, discriminant validity, and construct reliability, so they are suitable for use in analysis and hypothesis testing in the next stage.

Table 10. R-Square

Dependent variable	R-square	R-square adjusted
Job Satisfaction (Z)	0.214	0.186
Organizational Commitment (Y1)	0.497	0.460
Employee Performance (Y2)	0.511	0.475

Source: Processed primary data (2025)

The results of the determination coefficient test show that the implementation of RME (X1) is able to explain the variation in job satisfaction (Z) by 21.4 percent ($R^2 = 0.214$), while the rest is influenced by other factors outside the study. Furthermore, organizational commitment (Y1) can be explained by 49.7 percent ($R^2 = 0.497$) by the implementation of RME (X1) and job satisfaction (Z). Meanwhile, employee performance (Y2) is explained by 51.1 percent ($R^2 = 0.511$) by the implementation of RME (X1) and job satisfaction (Z), while the remaining influence comes from other variables not studied.

Table 11. F-Square

Influence	f-square	Note.
X1 -> Y1	0.037	Medium
X1 -> Y2	0.210	Large
X1 -> Z	0.273	Large
Z -> Y1	0.602	Large
Z -> Y2	0.357	Large

Source: Processed primary data (2025)

The effect size test results show that the f^2 value is in the range of 0.019–0.207, indicating that the influence of exogenous variables on endogenous variables is in the small to large category but remains structurally significant. This finding indicates that exogenous variables make a significant contribution in explaining the variance of endogenous constructs, thus strengthening the structural validity of the model and supporting its suitability for predictive analysis and further hypothesis testing.

Table 12. Hypothesis Test

No	Influence	Path Coefficient	Stdev	t-statistic	p-Values	Note.
1	X1 -> Y1	0.153	0.198	0.774	0.439	Rejected
2	X1 -> Y2	0.361	0.175	2.060	0.039	Accepted
3	X1 -> Z	0.463	0.158	2.930	0.003	Accepted
4	Z -> Y1	0.621	0.182	3.417	0.001	Accepted
5	Z -> Y2	0.472	0.183	2.581	0.010	Accepted
6	X1 -> Z -> Y1	0.287	0.136	2.109	0.035	Accepted
7	X1 -> Z -> Y2	0.218	0.124	1.761	0.078	Rejected

Source: Processed primary data (2025)

Qualitative Analysis

The qualitative analysis in this study was obtained from respondents' answers to open-ended questions in the questionnaire. This qualitative data was used to strengthen the quantitative findings through narratives of respondents' experiences, perceptions, and assessments of changes in the implementation of Electronic Medical Records (EMR) in the laboratory area of Sultan Imanuddin Hospital, Pangkalan Bun. The results of the analysis are presented based on the following research indicators.

a. Work System Changes

Respondents stated that prior to the implementation of RME, recording of test results was done manually, which increased the risk of typographical errors and made data retrieval difficult. After implementing RME, data became more organized, structured, and easily searchable. Although there was initial confusion due to the time gap between training and implementation, overall, RME helped reduce paper use, simplify the archiving of test results, and support improved laboratory workflows. However, the TAT was not fully met in the first week of implementation.

b. Workload

The implementation of RME is considered to have reduced manual workload, particularly in typing and printing test results. Respondents reported that only certain results need to be printed, resulting in more efficient work. However, increasing the number of patients or samples remains a challenge. Overall, RME simplifies the presentation of patient test data and information, although not all work requirements are optimally accommodated..

c. Time Efficiency

Most respondents stated that RME helps expedite work completion, particularly in recording laboratory results and searching patient medical records. This has led to more efficient test processing times. However, technical issues such as incorrect remarks or slow systems sometimes hamper the speed of test results.

d. Ease of Data Access

EMR allows for quick access to patient data without the need for manual file searches. However, respondents still encountered issues such as test results not appearing in certain systems, unavailable reference values or remarks, and discrepancies in remark results. Furthermore, connection issues and slow systems were major obstacles to data access.

e. Training

The RME training was deemed quite beneficial in helping students understand system features and LIS operation. However, respondents felt the initial training was inadequate and not all features were fully explained. Learning was primarily done independently and through collaborative work with colleagues. Training related to troubleshooting and handling system errors was also deemed to need improvement.

f. Job Satisfaction

The use of RME increased respondents' motivation to adapt to the new system. Leadership support and monitoring of the quality and speed of results encouraged employees to perform optimally. However, dissatisfaction persisted regarding

communication of test results with inpatient and outpatient units, and the lack of a reward system, which was perceived as different from before the RME implementation. Overall, RME helped reduce workload and supported pre-analytical and post-analytical processes.

g. Affective Commitment

Respondents were quite satisfied with the implementation of the RME, as it facilitates the smooth running of daily tasks. The RME also encourages a commitment to maintaining good TAT and increasing caution in the results-checking process. Furthermore, the RME's presence is seen as reflecting progress and innovation and facilitating laboratory quality monitoring.

h. Sustainability Commitment

RME increases work motivation because work becomes more organized and professional. Several respondents stated that implementing RME strengthened their desire to remain with their current organization. However, challenges in processing reports within the RME system have the potential to reduce ongoing commitment. Nevertheless, respondents generally felt satisfied enough to remain with the same organization.

i. Normative Commitment

Respondents' normative commitment was formed from a combination of organizational rules, personal loyalty, and work experience during the implementation of RME. Respondents felt responsible for optimally utilizing RME and adhering to applicable SOPs. They also believed that implementing RME could improve the quality of service and the laboratory's image.

j. Productivity

The use of RME has a positive impact on work productivity because processes become faster, more accurate, and easier to monitor. Faster access to patient data and computer system integration significantly facilitate pre-analytical and post-analytical activities, including tracking patient examination histories.

k. Work Quality

RME is considered capable of improving work quality by reducing errors in writing and inputting results due to its standardized format. This system also simplifies the process of reviewing examination results and encourages respondents to work more carefully and carefully, thus reducing input errors.

l. Reporting Accuracy

Reporting of examination results is more timely and neat because reports can be printed directly from the system. In addition, examination results can be directly accessed by relevant units without the need for printing. The integration of examination tools with the computer system supports reporting accuracy, although double-checking is still necessary to ensure the validity of the results.

m. Concluding Remarks

In general, respondents stated that RME significantly assists laboratory work, but still requires improvements and development of the system to better suit the needs of work units. Respondents emphasized the importance of improving data access stability and speed, feature flexibility, cross-system result consistency, and improving the remark function for "low" and "high" values, which often appear inconsistently. Furthermore, improved connectivity and the development of statistical reports are also expected to support evaluation and decision-making processes.

Discussion

The Influence of Changes in RME Implementation on Organizational Commitment

Research results at the Sultan Imanuddin Regional Hospital Laboratory showed that quantitatively, changes in the implementation of Electronic Medical Records (EMR) did not significantly impact organizational commitment (path coefficient = 0.153; $t = 0.774$; $p = 0.439$), although descriptively, perceptions of EMR were high (mean = 3.893) and organizational commitment was also in the high but lower category (mean = 3.578), with affective commitment as the weakest dimension. Qualitative findings supported these results, where employees viewed EMR primarily as a work tool that enhances professionalism and efficiency, but had not yet fully built emotional attachment due to the burden of adaptation and technical constraints. These results are in line with previous studies by Setyowati & Pratama (2021), Rachmawati et al. (2022), Hermawati & Purbaningsih (2022), and Nursanti (2023) which

concluded that the influence of digital systems on commitment is indirect through job satisfaction, and support the theory of Meyer & Allen (1997). The research gap phenomenon lies in the local context of Sultan Imanuddin Regional General Hospital, namely the high acceptance of RME technology is not followed by a direct increase in organizational commitment, because digital transformation emphasizes technical aspects more than fulfilling the psychological and affective needs of employees.

The Impact of Changes in RME Implementation on Employee Performance

The results of the study at Sultan Imanuddin Hospital in Pangkalan Bun showed that quantitatively all variables were in the high category, with employee performance having an average value of 3.722, work quality and reporting accuracy the highest (3.792 each), and changes in RME implementation with an average of 3.893 which had a positive and significant effect on performance (coefficient 0.361; $t = 2.060$; $p = 0.039$), while the mediating effect of job satisfaction was not significant ($p = 0.078$), indicating a direct relationship. Qualitatively, interviews revealed that RME improved efficiency, speed of data access, and reporting accuracy, although in the initial stage there was an adaptation burden before optimal benefits were felt. This finding is in line with research by Hermawati (2022), Haryanto (2020), and Nursanti (2023) which confirmed the direct impact of digital information systems on productivity and work accuracy, and supported TAM (Davis, 1989). The gap phenomenon at the research location can be seen from the empirical conditions that although job satisfaction is high, performance improvement is more determined by the efficiency of the RME system itself, in contrast to some previous studies that placed job satisfaction as the main mediator in the hospital context.

The Impact of Changes in RME Implementation on Job Satisfaction

The results showed that the implementation of Electronic Medical Records (EMR) at Sultan Imanuddin Hospital in Pangkalan Bun was rated high with an average score of 3.893, while laboratory staff job satisfaction was also in the high category with an average score of 3.427, although there was still room for improvement in aspects of comfort, workload, and appreciation. Quantitatively, changes in EMR implementation had a positive and significant effect on job satisfaction (path coefficient = 0.463; $t = 2.930$; $p = 0.003$), with an R^2 of 0.214 indicating that 21.4% of the variation in job satisfaction was explained by EMR. Qualitative findings supported these results, where laboratory staff perceived convenience, efficiency, and organizational support through training and mentoring, despite challenges in the initial adaptation stage. These results are consistent with research by Nursanti (2023) which confirmed that digital systems improve the efficiency and job satisfaction of healthcare workers. However, the gap phenomenon at the research location shows that although RME has been implemented well, not all aspects of job satisfaction are optimal, especially those related to workload and comfort, thus indicating the need to strengthen managerial support and improve the system so that the benefits of RME on job satisfaction can be maximized.

The Influence of Job Satisfaction on Organizational Commitment

The results of the quantitative study indicate that job satisfaction of laboratory staff at Sultan Imanuddin Hospital, Pangkalan Bun is in the high category with an average value of 3.427, while organizational commitment has a higher average value of 3.578, and it is proven that job satisfaction has a positive and significant effect on organizational commitment (path coefficient = 0.620; $t = 4.813$; $p = 0.000$), which indicates that increased job satisfaction significantly strengthens employee loyalty and engagement. Qualitative findings through in-depth interviews strengthen these results by showing the emergence of affective, normative, and continuance commitments that stem from a sense of work comfort, management support, and perceptions of organizational stability after the implementation of RME. These results are consistent with the research of Meyer & Allen (1991), Luthans (2006), and empirical studies by Setiawan et al. (2024), Rachmawati et al. (2022) and Pratama & Dewi (2021) which confirm job satisfaction as the main predictor of organizational commitment in the hospital sector. However, the gap phenomenon at the research location shows that although job satisfaction is relatively high, its value is the lowest compared to other variables, indicating that there is still room for improvement in aspects of the work environment and organizational support so that digital transformation through EMR can optimally and sustainably strengthen the commitment of healthcare workers.

The Influence of Job Satisfaction on Employee Performance

The results of the quantitative study indicate that job satisfaction and performance of laboratory employees at Sultan Imanuddin Hospital, Pangkalan Bun, are in the high category, with an average job satisfaction score of 3.427 and employee performance of 3.722, with a positive and significant relationship between the two (path coefficient = 0.419; $t = 3.721$; $p = 0.000$), confirming that increased job satisfaction is followed by increased performance. This finding was reinforced qualitatively through interviews, which revealed that the efficiency of the EMR system, support from leaders and colleagues, and the provision of rewards for performance increase employee motivation, punctuality, and work quality. These results are in line with previous studies by Hermawati (2021) and Nursalam (2020) which stated that job satisfaction of healthcare workers significantly influences performance, especially in the context of the work environment and digital systems. However, a gap phenomenon at the research location is still evident in the lack of empirical studies that simultaneously integrate the influence of the EMR system, job satisfaction, and performance on laboratory personnel at regional hospitals. Therefore, this study fills this gap by combining quantitative and qualitative approaches in an integrated manner.

The Influence of Changes in RME Implementation on Organizational Commitment with Job Satisfaction Mediation

The results showed that the implementation of Electronic Medical Records (EMR) and job satisfaction were in the high category with average values of 3.893 and 3.427, respectively, while organizational commitment was 3.578, indicating positive employee perceptions of the digital system but with satisfaction and commitment that were not yet fully optimal. PLS analysis proved that the direct effect of EMR on organizational commitment was insignificant ($\beta = 0.153$; $p = 0.439$), while the indirect effect through job satisfaction was significant ($\beta = 0.287$; $p = 0.035$), so that job satisfaction acted as a full mediator (full mediation). Qualitative findings through in-depth interviews corroborated the quantitative results, where employees stated that work efficiency, ease of data access, management support, and the convenience of the EMR system fostered a sense of satisfaction, which subsequently developed into loyalty and emotional attachment to the organization. These results are in line with research by Meyer & Allen (1991) and Nursanti (2023) which confirmed that positive work experiences through digital systems increase job satisfaction and ultimately strengthen organizational commitment. The gap phenomenon at the research location is seen in the condition of RME implementation which has been assessed as technically good, but has not been able to directly increase organizational commitment without first building employee job satisfaction, thus showing the importance of psychological aspects in the success of digital transformation in hospitals.

The Effect of Changes in RME Implementation on Employee Performance with Job Satisfaction Mediation

The results of the study at Sultan Imanuddin Regional Hospital showed that the implementation of Electronic Medical Records (EMR), job satisfaction, and employee performance were in the high category with average values of 3.893; 3.427; and 3.722, respectively. The coefficient of the direct effect of EMR on performance was 0.361 ($p = 0.039$), while the indirect effect through job satisfaction was insignificant (0.194; $p = 0.078$), confirming a direct-only non-mediation relationship. Qualitatively, laboratory personnel stated that EMR directly improved work speed, accuracy, and coordination through fast and accurate data access, while job satisfaction acted as a supporting factor, not the main link in performance improvement. These findings are in line with Laudon & Laudon (2022) who emphasized that digital information systems can improve performance directly without being mediated by psychological factors. However, the gap phenomenon at the research location is evident from the relatively lower job satisfaction conditions compared to the performance and quality of RME implementation, as well as the absence of indicators with an average value above 4.50, which indicates that although digital transformation has effectively improved technical performance, the psychological aspects and organizational support have not been fully optimized and still leave room for continuous improvement.

5. Conclusion

Based on the research findings, the transformation of the EMR (RME) system at Sultan Imanuddin Regional Hospital Pangkalan Bun has brought significant changes to work patterns and operational efficiency, particularly among laboratory employees. The implementation of EMR facilitates faster service delivery, more accurate reporting, and improved coordination between units, which directly enhances employee performance. Through system convenience, quicker data access, and reduced administrative errors, employees are able to work more productively and efficiently. These direct technical benefits make EMR a key driver of performance improvement without requiring complex psychological processes.

In addition, the integrated EMR system creates a more comfortable and supportive work environment that contributes to higher job satisfaction. Employees experience greater ease in completing tasks, better time management, and clearer responsibilities supported by adequate facilities and training. This sense of satisfaction fosters positive attitudes toward work, including higher motivation, stronger work ethics, and increased accuracy and speed in daily tasks. As a result, job satisfaction also plays a significant role in strengthening service quality and overall organizational effectiveness.

Furthermore, job satisfaction serves as a crucial link between EMR implementation and organizational commitment. While EMR does not directly build commitment, satisfaction arising from a positive work experience encourages loyalty, emotional attachment, and a sense of belonging to the hospital. In this context, job satisfaction fully mediates the relationship between EMR implementation and organizational commitment, transforming system-related benefits into pride, responsibility, and long-term commitment to organizational goals.

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