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The Effect of Competency and Workload on Services at Solok District Community Health Center with Organizational Citizenship Behavior (OCB) as an Intervening Variable

Barmitoni[1], Lusiana[2], Vicky Brama Kumbara[3]
[1,2,3]Putra Indonesia University "YPTK" Padang
E-mail: barmi_apotekerb@yahoo.co.id

This study aims to examine the influence of competence and workload on services at Solok Regency Community Health Centers (Puskesmas), with organizational citizenship behavior (OCB) as an intervening variable. Data collection methods included a survey and questionnaire distribution, with a sample of 90 respondents. The analysis method used was structural equation modeling using SmartPLS. The results showed a significant influence of competence on organizational citizenship behavior (OCB) at Solok Regency Community Health Centers. There was a significant influence of workload on organizational citizenship behavior (OCB) at Solok Regency Community Health Centers. There was a significant influence of competence on services at Solok Regency Community Health Centers. There was a significant influence of workload on services at Solok Regency Community Health Centers. There was a significant influence of organizational citizenship behavior (OCB) on services at Solok Regency Community Health Centers. Organizational citizenship behavior (OCB) mediated the influence of competence on services at Solok Regency Community Health Centers. Organizational citizenship behavior (OCB) mediated the influence of workload on services at Solok Regency Community Health Centers.
Keywords: Competence, Workload, Organizational Citizenship Behavior (OCB), Services

Corresponding Author:
Barmitoni
Putra Indonesia University "YPTK" Padang
barmi_apotekerb@yahoo.co.id

1. Introduction

Community health centers (Puskesmas) are the spearhead of first-level health services, playing a strategic role in improving public health. With the changing times and increasing demand for health services, Puskesmas continue to undergo transformation in terms of infrastructure, human resources, and the types of services provided. Puskesmas once offered only basic services such as general medical treatment, immunization, and maternal and child care. Puskesmas have evolved into health facilities capable of providing integrated and continuous promotive, preventive, curative, and rehabilitative services. Some Puskesmas are even equipped with inpatient services, laboratories, and simple emergency units (UGD). Puskesmas now implement quality management systems, accreditation, and service digitization through electronic medical records and online queuing applications, to improve efficiency and community satisfaction. Furthermore, active community involvement through the UKBM (Community-Based Health Efforts) program, such as Posyandu and Posbindu, is also a driving force in driving the success of health programs within the Puskesmas' work areas.

In an agency or organization, the role of human resources is crucial in determining the effectiveness of a company's operations. Competent and qualified human resources are essential for organizations, especially in the current era of globalization. In this era, all business organizations must be ready to adapt and strengthen themselves to compete and meet future challenges. Human resources, specifically employees, must always play an active and dominant role in every organizational activity because humans are the

planners, behaviorists, and determinants of the achievement of organizational goals. Effective workforce utilization is key to improving employee performance, so organizational policies are needed to motivate employees to work more productively in accordance with established plans.[1].

Organizational citizenship behavior (OCB) is an individual's character that encompasses not only the ability and willingness to perform core tasks but also extra tasks such as the willingness to collaborate with other employees, being helpful, providing advice, actively participating, and using their work time effectively. Employees are social beings who have empathy and sympathy for others in the work environment, to improve better social interactions. Organizational citizenship behavior (OCB) is a free individual behavior, which is not directly or explicitly related to the formal reward system and can increase the effectiveness of organizational functions.

Organizational citizenship behavior(OCB) is a beneficial form of extrarole behavior toward coworkers, particularly in the form of mutual assistance. From the definitions of experts, it can be concluded that OCB is an individual's extrarole behavior toward coworkers that can increase the effectiveness of organizational functions. Organizations generally believe that to achieve excellence, they must strive for the highest individual performance because, essentially, individual performance influences the performance of the team or work group and ultimately affects the overall performance of the organization.

Community health centers (Puskesmas) in Solok Regency are a vital part of the primary healthcare system, playing a direct role in maintaining and improving public health. In recent years, Puskesmas in Solok Regency have shown significant progress in terms of services, infrastructure, and management.

Solok Regency has a network of Community Health Centers (Puskesmas) spread across various sub-districts, reaching even remote and difficult-to-access areas. The Solok Regency Government, through the Health Office, consistently strives to improve service quality through the construction and renovation of physical facilities, the provision of medical equipment, and the enhancement of human resource capacity. Several Puskesmas have even achieved international health status.A health center with inpatient services and has successfully achieved accreditation according to national standards.

In addition to curative services, Community Health Centers (Puskesmas) in Solok Regency are also very active in promotive and preventive activities. Programs such as Integrated Health Posts (Posyandu), nutrition counseling, immunization, infectious disease control, and Maternal and Child Health (KIA) programs continue to be promoted. To address the challenges of modern public health, Community Health Centers (Puskesmas) have also begun integrating technology through the use of digital applications for public health services and data recording.Community health centers (Puskesmas) in Solok Regency are expected to serve not only as places for medical treatment but also as centers for education and community development towards healthy living. With a spirit of community-oriented service, Puskesmas continue to develop into a key pillar in realizing a healthy and independent Solok Regency. The number of patient visits at 19 Puskesmas in Solok Regency from 2022 to 2024 is as follows:

Table 1.1 Recapitulation of Visits on 19Solok Regency Health Center 2022-2024

No	Type of Service	Number of Patient Visits		
		2022	2023	2024
1.	BP General	3,840	3.110	4,231
2.	BP for the Elderly	1,323	1,432	743
3.	BP Gigi	1,003	906	765
4.	Emergency Room	708	987	876
5.	KIA	983	876	322
Total		7,857	7,311	6,937

Source:Solok Regency Health Center

From table 1.1 above, the number of general BP services in 2022 was 3,840 people, in 2023 it decreased to 3,110 people and in 2024 it increased to 4,231 people. In the type of BP services for the elderly in 2022, there were 1,323 people, in 2023 it increased to 1,432 people and in 2024 it decreased to 743 people. In the type of BP services for the dental in 2022, there were 1,003 people, in 2023 it decreased to 906 people and in 2024 it decreased to 765 people. In the type of emergency department services in 2022, there were 708 people, in 2023 it increased to 987 people and in 2024 it decreased to 876 people. In 2022, there were 983 people in the KIA service category, which decreased to 876 in 2023 and 322 in 2024. Overall, the number of visits in 2022 was7,857 people, dropping to 7,311 in 2023, and then to 6,937 in 2024. To assess service quality, see the number of complaints as follows:

Table 1.2 Recapitulation of Patient Complaints on 19Solok Regency Health Center 2022-2024

No	Year	Number of Patient Visits	Number of Complaints
1.	2022	7,857 people	532 people
2.	2023	7,311 people	645 people
3.	2024	6,937 people	443 people

Source:Solok Regency Health Center

Residents at the Solok Regency Community Health Center (Puskesmas) have complained about the difficulty of accessing general practitioners, especially at night or on weekends. This is because the Puskesmas only has one general practitioner, who also serves as the head of the Puskesmas. As a result, in some emergencies, such as childbirth or chest pain, residents are forced to be referred to hospitals farther away with poor road access.From this it can be concluded that the serviceSolok Regency Health Centernot optimal, allegedly caused by competence and workload through*organizational citizenship behavior*(OCB).

Competence is the ability to carry out or perform a job or task based on skills and knowledge and supported by the work attitude required by the job.[2]. Competence is an individual's ability to carry out a job correctly and have advantages based on matters relating to knowledge, skills and attitudes. Competence is a person's ability to produce at a satisfactory level in the workplace, including the person's ability to transfer and apply these skills and knowledge in new situations and increase agreed benefits. Competence also shows the characteristics of knowledge and skills possessed or needed by each individual that enable them to carry out their duties and responsibilities effectively and raise professional quality standards in their work.

Workload is a pressure that is a non-adaptable response, influenced by individual differences or psychological processes, namely a consequence of any external action (i.e., the environment, situations, and events that place a lot of psychological or physical demands) on others. Workload is the process of determining the number of hours a person works or is needed to complete a job in a certain time. Workload is a process or activity that must be completed immediately by a worker within a certain time period. If a worker is able to complete and adapt to a number of tasks given, then it does not become a workload. However, if the worker is not successful, then the tasks and activities become a workload. [3].

Based on the results of previous research conducted[4]which states that competence has a positive and significant influence on organizational citizenship behavior (OCB). The research conducted[5]Competence has a positive and significant influence on organizational citizenship behavior (OCB). And the research conducted[6]Competence has a positive and significant influence on organizational citizenship behavior (OCB). The research conducted[7]results of pearson correlation test show that there is a positive significant relationship between variables of Work Ability and Organizational Citizenship Behavior (OCB).

The results of the research conducted[8]which states that competence has a positive and significant influence on organizational citizenship behavior (OCB). The research conducted[9]which states that competence has a positive and significant influence on organizational citizenship behavior (OCB). The

research conducted[10]which states that competence has a positive and significant influence on organizational citizenship behavior (OCB). As well as research conducted[11]results of pearson correlation test show that there is personality affects negatively and significantly on organizational citizenship behavior (OCB).

2. Method

Structural Equation Modeling (SEM) Analysis

This study used the Structural Equation Modeling (SEM) analysis tool using the SmartPLS program. SmartPLS is a component-based approach for testing structural equation models, commonly called SEM. SmartPLS is based on the idea of having two iterative procedures that use least squares estimation for single and multi-component models. By applying these procedures, this algorithm aims to minimize the variance of all dependent variables, therefore the cause and direction between all variables need to be clearly defined. SmartPLS is divided into measurement models and structural models. SmartPLS is a powerful method because it is not based on many assumptions. Data does not have to be multivariate normal distribution (indicators with categorical, ordinal, interval, and ratio scales can be used in the same model). SmartPLS is also more efficient with algorithmic calculations that are capable of estimating larger and more complex models with hundreds of latent variables and thousands of indicators.[12].

Measurement Model Test (Outer Model)

In data analysis techniques using SmartPLS, there are three criteria for assessing the outer model: Convergent Validity, Discriminant Validity, and Composite Reliability. Convergent validity of a measurement model with reflective indicators is assessed based on the correlation between item scores or component scores estimated using SmartPLS software. An indicator is considered to have good reliability if it has a value above 0.7. We can see this figure by referring to the Outer Loading table in SmartPLS.[13].In this composite reliability test, there are two tables that must be observed: the values contained in the Composite Reliability table and Cronbach's Alpha, which must be greater than 0.7. For the Discriminant Validity test, it can be seen from the cross-loading value. The correlation value of the indicator to its construct must be greater than the correlation value between the indicator and other constructs. There is another way to test Discriminant Validity by comparing the root value of the Average Variance Extracted (AVE) for each construct with the correlation between the construct and other constructs.

1. *Measurement Model*or Validity
   The outer model assessment aims to assess the correlation between item or indicator scores and their construct scores, indicating the level of validity of a statement item. Outer model testing is conducted based on the results of a questionnaire trial conducted for all research variables. There are three criteria in the use of data analysis techniques to assess the outer model: Convergent Validity, Discriminant Validity, and Composite Reliability. In the development stage, a correlation of 0.50 to 0.6 is considered acceptable. In research, the limit for convergent validity is above 0.7.
2. *Reliability*
   Once the data validity level is known, the next step is to determine the level of data reliability or the level of reliability of each construct or variable. This assessment is done by looking atComposite reliability value and Crombach alpha value. A construct is said to be reliable if it provides a Crombach alpha value > 0.70.
3. R-square

Next, as explained previously, the inner model assessment will be evaluated through the R-Squared value, to assess the influence of certain exogenous latent constructs on endogenous latent constructs to see whether they have a substantive influence.

Path Coefficient and Hypothesis Testing

Testing the inner model or structural model is conducted to examine the relationship between variables, the significance value, and the R-square of the research model. Model assessment using PLS begins by examining the R-square for each dependent latent variable. Changes in the R-square value can be used to assess the influence of a particular independent latent variable on the dependent latent variable and whether it has a substantive effect.

3. Results And Disccusion

Research Description

Table 1. Calculation of Questionnaire Distribution Results

No.	Questionnaire	Amount	Percentage%
1	Distributed questionnaires	90	100
2	Unreturned questionnaires	0	0
3	Incorrectly filled out (defective or damaged) questionnaire	0	0
4	Questionnaires suitable for data processing	90	100

Source: Survey Results, 2026

Research Data Analysis

The data processing technique in this study uses the SEM method based on Partial Least Square (PLS) which requires two stages for the assessment of a research model: the outer model and the inner model. The outer model assessment aims to assess the correlation between item or indicator scores and their construct scores, which indicate the level of validity of a statement item. Outer model testing is carried out based on the results of questionnaire trials that have been conducted for all research variables. There are three criteria in the use of data analysis techniques to assess the outer model: Convergent Validity, Discriminant Validity, and Composite Reliability. In the development stage, a correlation of 0.50 to 0.6 is considered adequate or acceptable. In research, the limit for convergent validity values is above 0.7.

Outer Model (Structural Model) Testing Before Elimination

Based on the resultsTesting the outer model using SmartPLS, obtained the correlation values between the statement items of the research variables as follows:

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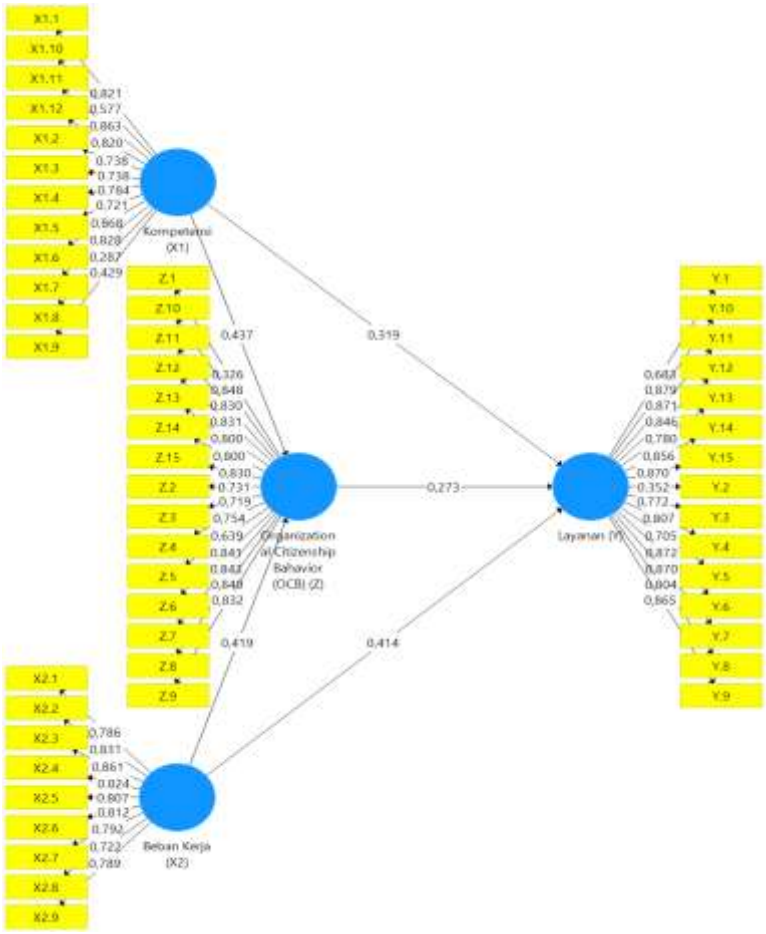
Figure 1. Outer Loadings Before Elimination



In data analysis techniques using SmartPLS, there are three criteria for assessing the outer model: convergent validity, discriminant validity, and composite reliability. Convergent validity of a measurement model with reflective indicators is assessed based on the correlation between item scores or component scores estimated with PLS software. Indicators are considered to have good reliability if they have a value above 0.7. There are three criteria in the use of data analysis techniques to assess the outer model: convergent validity, discriminant validity, and composite reliability. In the development stage, a correlation of 0.50 to 0.6 is considered adequate or acceptable. In research, the limit value of convergent validity is above 0.7.

Outer Model (Structural Model) Testing After Elimination

Based on the resultsTesting the outer model using SmartPLS, obtained the correlation values between the statement items of the research variables as follows:

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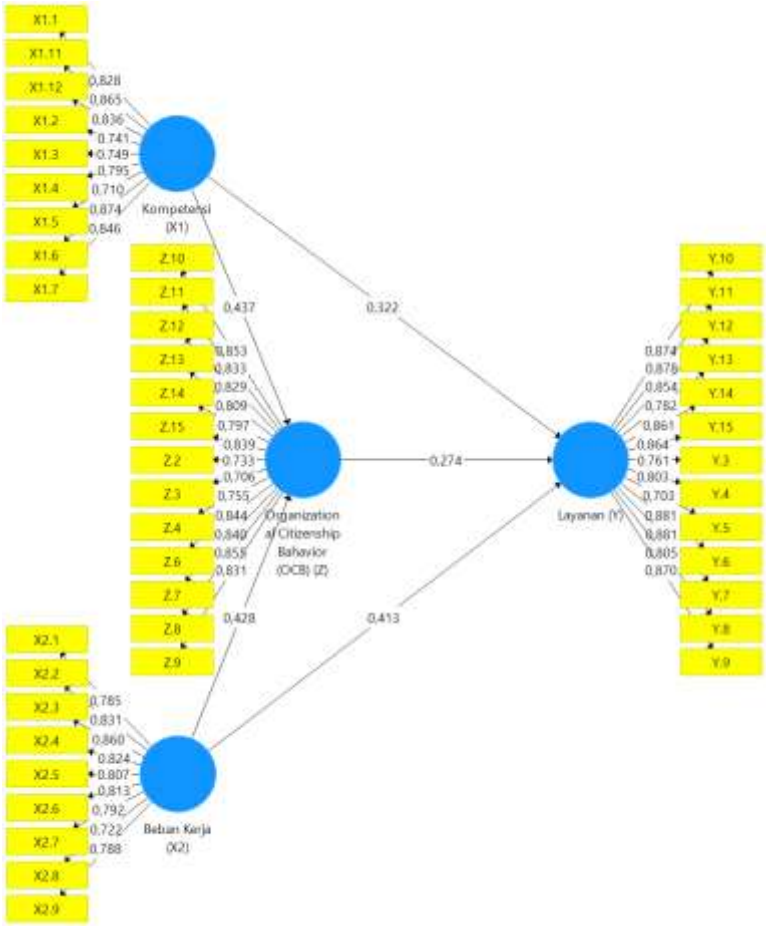
Figure 2. Outer Loadings After Elimination



Average Variance Extracted (AVE) Assessment

The validity criteria for a construct or variable can also be assessed through the Average Variance Extracted (AVE) value for each construct or variable. A construct is considered to have high validity if its value is above 0.50. The AVE values for all variables are presented below.

Table 2. Average Variance Extracted (AVE) Value

	Average Variance Extracted (AVE)
Service (Y)	0.695
Competence (X1)	0.651
Workload (X2)	0.645
Organizational Citizenship Bahavior(OCB) (Z)	0.657

Based on Table 2, it can be concluded that all constructs or variables above meet good validity criteria. This is indicated by the Average Variance Extracted (AVE) value above the recommended 0.50 criterion.

Outer Model Testing (Structural Model)

The next testing process is testing the inner model, or structural model, which aims to determine the relationships between hypothesized constructs. The structural model is evaluated by observing the R-Square value for the endogenous construct and the influence it receives from the exogenous construct.

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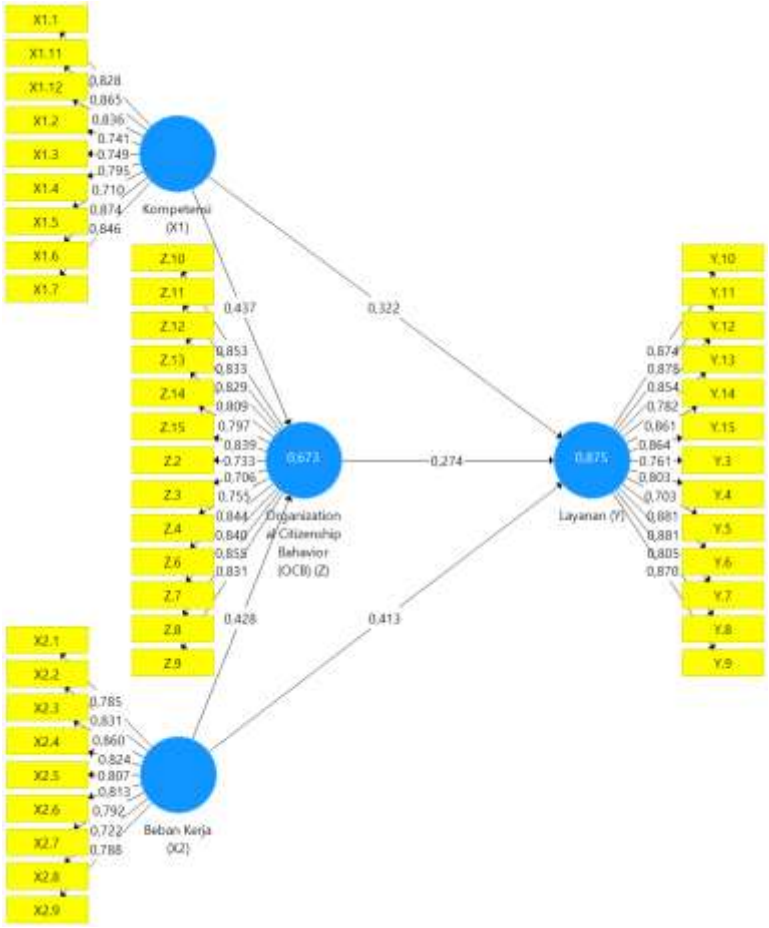
Figure 3. Structural Outer Model



Based on the image above, the structural model above can be formed into the following model equation:

a. Equation model I, is a description of the magnitude of the influenceconstructcompetencies and workloadto*organizational citizenship bahavior*(OCB)with the existing coefficients plus the error rate which is an estimation error or which cannot be explained in the research model.

Z= 0.437X1+ 0.428X2

b. Equation model II, is a description of the magnitude of the influenceconstructcompetence, workload and organizational citizenship behavior (OCB) towards services with each coefficient for each construct plus an error which is an estimation error.

Y= 0.322X1+ 0.413X2+ 0.274 Z

Next, as explained previously, the inner model assessment will be evaluated through the R-Squared value, to assess the influence of certain exogenous latent constructs on endogenous latent constructs to see whether they have a substantive influence. The following is the R-Square estimate:

Table 3. Evaluation of R Square Value

	R Square	*R Square Adjusted*
Service (Y)	0.875	0.870
Organizational Citizenship Bahavior(OCB) (Z)	0.673	0.665

Source: SmartPLS Outer Model Test Results, 2026

In the table above, the r-square value for the service variable is 0.875 or 87.5%, so the contribution of the competency and workload variables is 0.875 or 87.5%.dorganizational citizenship behavior (OCB) towards services is 87.5%, the remaining 12.5% is influenced by other variables outside this research such as work motivation, work discipline and leadership style.

The R-Square value of the organizational citizenship behavior (OCB) variable is 0.673 or 67.3%, so the contribution of the competency and workload variables to organizational citizenship behavior (OCB) is 67.3%, the remaining 32.7% is influenced by other variables outside this research such as work motivation, work discipline and leadership style..

PenHypothesis test

TestingThe hypothesis aims to answer the problems in this study, namely the influence of certain exogenous latent constructs on certain endogenous latent constructs, either directly or indirectly through mediating variables. Hypothesis testing in this study can be assessed from the magnitude of the t-statistic or t-count compared to the t-table of 1.96 at 5% alpha. If the t-statistic/t-count < t-table 1.96 at 5% alpha, then Ho is rejected and if the t-statistic/t-count > t-table 1.96 at 5% alpha, then Ha is accepted. The following SmartPLS output results illustrate the estimated output for testing the structural model.

Table 4. Results for Inner Weights Direct Affect

	Original Sample (O)	*Sample Mean (M)*	*Standard Deviation (STDEV)*	*T Statistics (|O/STDEV|)*	*P Values*
Competence (X1) -> Organizational Citizenship Behavior (OCB) (Z)	0.437	0.434	0.112	3,899	0,000
Workload (X2) -> Organizational Citizenship Behavior (OCB) (Z)	0.428	0.429	0.104	4,133	0,000
Competence (X1) -> Service (Y)	0.322	0.313	0.090	3,581	0,000
Workload (X2) -> Service (Y)	0.413	0.425	0.100	4,133	0,000
Organizational Citizenship Behavior (OCB) (Z) -> Service (Y)	0.274	0.270	0.080	3,405	0.001
Competence (X1) -> Organizational Citizenship Behavior (OCB) (Z) -> Service (Y)	0.120	0.121	0.055	2,159	0.031
Workload (X2) -> Organizational Citizenship Behavior (OCB) (Z) -> Service (Y)	0.117	0.114	0.038	3,094	0.002

4. Conclusion

There is a significant influence of competence on organizational citizenship behavior (OCB) at the Solok Regency Community Health Center. There is a significant influence of workload on organizational citizenship behavior (OCB) at the Solok Regency Community Health Center. There is a significant influence of competence on services at the Solok Regency Community Health Center. There is a significant influence of workload on services at the Solok Regency Community Health Center. There is a significant influence of organizational citizenship behavior (OCB) on services at the Solok Regency Community Health Center. Organizational citizenship behavior (OCB) mediates the influence of competence on services at the Solok Regency Community Health Center. Organizational citizenship behavior (OCB) mediates the influence of workload on services at the Solok Regency Community Health Center.

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