Factors that Influence Counterproductive Behavior at Gatot Soebroto Presidential Hospital

Vera Dumonda[1], Ari Saptono[2], Suparno[3]
Universitas Negeri Jakarta[1, 2, 3]
Jl. Rawamangun Muka Raya No.11, RT.11/RW.14, Jakarta Timur, c13220
Correspondence Email: vdumonda@gmail.com
ORCID ID: 0000-0003-4016-0941

ARTICLE INFORMATION

ABSTRACT

The purpose of this research is to identify the elements that influence counterproductive based on the variables of communication skills and competence at the Gatot Subroto Presidential Hospital. This is a quantitative study. The sample in this study consisted of 1580 voluntary employees, 1250 employees of the Gatot Soebroto Army Hospital, 330 employees of the YMU Pavilion, and 1136 nursing staff. The sampling technique used is probability sampling, namely random sampling. This is a survey method that employs path analysis. The study's findings revealed a good and significant direct relationship between communication skills and competency. There is a direct effect that is negative but not significant between communication skills and counterproductive behavior. However, there is a substantial relationship between communication skills on counterproductive behavior through competence. Finally, there is a considerable detrimental influence between competence on counterproductive behavior. Based on the results, it can be concluded that counterproductive behavior is influenced by communication skills through competence. Therefore, it is hoped that the Gatot Soebroto Army Central Hospital can improve communication skills and competencies to reduce counterproductive behavior in health workers working at the Gatot Soebroto Army Central Hospital.

Keywords: Communication Skills, Competence, Counterproductive Behavior

INTRODUCTION

Central Army Hospital Gatot Soebroto has the main task of providing the best possible health services in the ranks of the Indonesian National Armed Forces to support the duties of the Indonesian Army (Perkasad Number 26 of 2019 in PMKP RSKH, 2019), as the highest reference for the Indonesian National Armed Forces (Perpang TNI Number 45 of 2017 in Lembaga Ketahanan Nasional Republik Indonesia [Lemhannas RI], 2017) and as a reference President of the Republic of Indonesia (Presidential Decree Number 18 of 2018 in peraturan.go.id, 2018). The government appointed Gatot Soebroto Army Central Hospital as an international standard health service provider to administer the JKN-KIS Program in compliance with Regulation No. 71 of 2013 of the Minister of Health of the Republic of Indonesia about Health Services on the National Health Insurance (Global-Regulation, 2013). As a result, the Gatot Soebroto Army Central Hospital requires proper Human Resources (HR) management.

Human resource can be considered as one of the vital variables which has an impact on company success (Qamariah & Muchtar, 2021). Human resource quality must be constantly upgraded, so the role of the company is needed to develop the quality of human resources while efforts to develop human resources are an absolute must to face the demands of current tasks and to answer future challenges. With professional human resource management arrangements, it is expected that employees can work productively and have high performance. The higher the human resource performance, the higher the company's performance (Sutanto, Utami, & Diantoro, 2022). By improving the quality of human resources, it must be used as a benchmark for an organization or the survival of the organization, because the human factor is the most decisive organizational asset. It is expected that there will be an increase in the performance of employees in an organization (Rumawas, 2018). Improving human resource quality can be achieved in the business and health sectors, where hospitals are the object of evaluation from patients to hospital employees. Unfortunately, there are obstacles in making efforts to increase the quality of human resources, specifically the presence of counterproductive employee behavior. Counterproductive behavior is behavior that is inappropriate or contrary to an organization's interests (Gruys & Sackett, 2003). This behavior can occur due to a lack of communication skills and competence possessed by an employee.

Based on the findings of preliminary study, the communication skills of Gatot Soebroto Army Hospital staff were found to be weak so that the message conveyed was sometimes misunderstood or vice versa. In conveying messages/education to patients, there are often misperceptions and not in accordance with expectations, debates often arise and even mediation is required and some take legal action. This needs to be the focus point of Gatot Subroto Hospital to improve the communication skills of its employees in order to reduce the occurrence of employee behavior that is counterproductive and able to reduce the quality of its human resources. In addition, competence also needs to be improved to reduce the occurrence of counterproductive behavior.

Competence is defined as a person's ability, skills, skills, and knowledge in performing a task (Ismail, 2010). In other words, competence is a person's adequate ability to perform a task or job. Competence of hospital management, doctors, health workers and other health workers is a very influential factor in achieving hospital performance. Competency measurement by hospital management for the workforce population in the hospital is very important to know the expectations of each personnel in order to improve the quality of health services. This explanation is in line with research conducted by Irwan (2021), the findings show that competence, experience and work environment vary positively

and significantly affect the performance or performance of employee human resources. Based on some of these explanations, researchers want to conduct research to assess the impact of communication skills and competence on counterproductive behavior.

LITERATURE REVIEW

Communication Skills

Communication is a process or activity of conveying information or thoughts from one person to another in various ways with the intention that that person is able to understand or understand what is meant by the conveyer of information or thoughts (Koontz & Weihrich, 1988). Communication is activity that is always carried out by everyone in everyday life, starting from among friends, groups, organizations, or the masses. The definition of communication in the interaction between doctors and patients is defined as the achievement of understanding and agreements that are built by doctors and patients at every step of solving patient problems (Fourianalistyawati, 2012). To arrive at this stage, various understandings are needed such as the use of types of communication (oral and written), being a good listener, the existence of obstacles to the communication process, choosing the right means of conveying thoughts or information, and expressing feelings and emotions. Furthermore, this definition forms the basis of a communication process model that focuses on the sender of thoughts or information, the channels used to convey thoughts or information, and the recipients of thoughts or information. Several organizations have released thorough lists of communication abilities and subcompetencies that residents should be familiar with. Long lists, while useful, are unlikely to be implemented given the wide range of clinical skills residents must learn and rising work hour constraints (Henry, Holmboe, & Frankel, 2013). Ahlaini, Sowiyah, Pangestu, & Santika (2021) conducted research entitled "Effectiveness of Principals Interpersonal Communication: A Literature Review". This study aims to determine the effectiveness of interpersonal communication in schools in the world context. This study uses comparative journals related to the effectiveness of interpersonal communication within the scope of education. Based on the results of a literature review from various countries in the world, the authors found that interpersonal communication can assist school principals in carrying out their duties by communicating interpersonally by creating relationships, openness, and trust to communicate. The phrases "communication skill" and "communication competence" are defined and distinguished first. With this conceptual framework in place, consideration is given to: (1) taxonomies of interpersonal communication skills; (2) properties of behavior associated with greater effectiveness and appropriateness; (3) the process of adult communication skill acquisition; (4) barriers and impediments to competent communication; (5) essential elements of skill-training programs; and (6) methods of skill and competence assessment.

Competence

Competence is a person's ability or capacity to perform a task in a job (Robbins, 2001). Furthermore, individual abilities are believed to be generated by two factors: intellectual and athletic abilities. The ability to execute cerebral activities is referred to as intellectual ability, but the ability to complete tasks that require stamina, dexterity, strength, and skills is referred to as physical ability. Spencer & Spencer (2006) claim that competency is a basic characteristic possessed by someone related to the person's excellent and efficient performance in doing a job in certain situations and conditions. Competence has five characteristics, namely first, motive which has meaning as something that someone thinks and wants that causes something. Second, the nature that has the meaning of the physical characteristics of the committee's response to situations or information. Third, self-concept which has meaning as an attitude of a person. Fourth, knowledge that has meaning as information that is owned by someone. Fifth, skills, namely the ability to do something related to the physical and mental (Ismail, 2010). Chand & Chand (2014)

conducted a study entitled "Emotional Competencies Towards Counterproductive Work Behavior in the Banking Sector". This study aims to determine the relationship between emotional competence can affect counterproductive work behavior implemented in banking in India. The research population is all junior managers of Indian sector banks. The purposive sampling technique was taken from various Indian public sector banks, thus obtaining 300 junior managers. The results of this study can explain that there is a relationship between emotional competence and counterproductive work behavior applied to the Indian sector banks.

Counterproductive Behavior
Counterproductive work behavior is disruptive activity directed at the organization and its members (Penney & Spector, 2003). This includes excessive actions such as aggression and theft or even more passive actions, such as deliberately failing to follow orders or doing a job improperly. Negative behavior that can be considered deviant such as absenteeism, withdrawal, reduced effort, and behavior that causes corporate inequality (Robinson & Bennet, 1995). Counterproductive appears as a unit-wide property. This indicates that a unit's counterproductive behavior can become consistent inside the unit, and that a unit can be recognized from other units and characterized by its level of counterproductive. For example, unit-level counterproductive is defined as emerging from individual disruptive acts, but it becomes a shared team property through team members' mutual interactions. This shared team characteristic eventually "characterizes the team as a whole". These examples imply that unit level counterproductive functions similarly to a sports team's uniform in that it aids in the identification and differentiation of one team from another (Carpenter, Whitman, & Armhein, 2020). Employee deviation is voluntary in that the employee is less motivated to comply to conventional societal norms or becomes motivated to disobey such expectations. Employees' individual incivility experiences predicted lower performance and citizenship conduct, as well as higher counterproductive behavior, in groups whose members suffered widely disparate incivility treatment and remained silent. These findings suggest that the contextual qualities of one's workgroup influence how employees assess and respond to workplace incivility (Mao, Chang, Johnson, & Sun, 2019). Hasanati, Winarsunu, and Karina (2018) conducted a study entitled "The Influence of Interpersonal Conflict on Counterproductive Work Behavior Mediated by Job Stress". The purpose of this study was to determine the effect of interpersonal conflict on counterproductive work behavior mediated by work stress. Data collection instruments used the Counterproductive Work Behavior Checklist (CWBC) scale, the Interpersonal Conflict at Work Scale (ICAWS), and the Job Stress Inventory (JSI). This method uses mediated multiple regression analysis techniques. Hypothesis testing shows that interpersonal conflict in the workplace has a direct effect on counterproductive work behavior, and interpersonal conflict in the workplace has a direct effect on counterproductive work-related behavior.

RESEARCH METHOD

This study employs a sort of quantitative research that begins with deductive reasoning to generate hypotheses, then conducts field tests, and then draws conclusions or hypotheses based on actual evidence. The research method used is a survey method using path analysis, namely the research method used to reveal the influence between the variables of communication skills, competence, and counterproductive behavior. This research was conducted at the Central Army Hospital Gatot Soebroto Jakarta within a period of 2 months, from February to April 2023.

The primary source of research data is the research subject, which contains information on the variables researched (Arikunto, 2016). While the object of research is the target or main objective of research. The subjects in this study were all patients at Gatot Subroto Army Central Hospital. While the object is the Influence of Interpersonal Communication, Professional Ethics and Competence on Counterproductive Behavior by Mediation of Trust at Gatot Soebroto Army Central Hospital, Jakarta.

This study's participants were all nurses at the Gatot Soebroto Army Central Hospital. Consisting of 1,580 volunteer employees, 1,250 Gatot Soebroto Army Hospital employees and 330 YMU Pavilion employees, 1,136 nursing staff. In this study, the sampling approach used is probability sampling, often known as random sampling. The research model studied is as follows.

Figure 1. Hypothesis Model Research
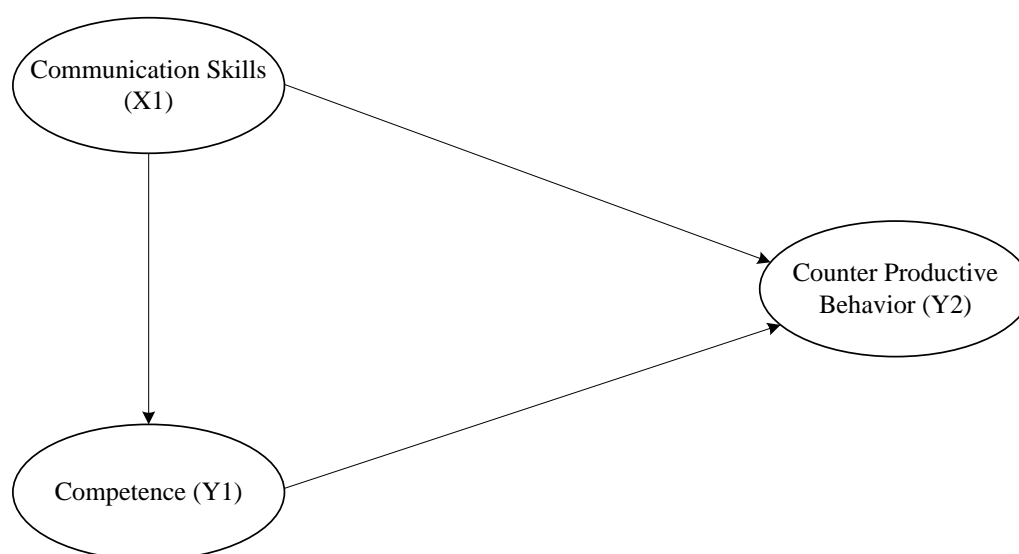
Research hypothesis:
H1: Communication Ability to Competence
H2: Communication Skills on Counterproductive Behavior
H3: Competence for Counterproductive Behavior

Data Analysis Method
In this study, multiple data gathering approaches were used in order to acquire a more comprehensive knowledge. Research by conducting survey techniques and questionnaire techniques. The survey technique was carried out directly by giving questionnaire sheets to the respondents while the questionnaire technique was carried out by giving a questionnaire containing a list of questions about the variables to be studied and to be filled in by the respondents according to the population sample through the use of a questionnaire given to the hospital's medical staff. Gatot Soebroto Army Center. This study's data collection method is the acquisition of primary and secondary data.

Primary Data
The primary data in this study were gathered by directly posing a series of questions to the respondents, who then responded based on the actual circumstance.

Secondary Data

Secondary data for this study were gathered from the Research Library Study by reviewing library resources such as books containing theories, scientific publications, and other research-related materials.

In this study used descriptive and inferential data analysis. Descriptive analysis was used to obtain an overview of the distribution of values from respondents for each variable studied and presented in the form of distribution lists and histograms. While path analysis in SPSS is used to evaluate the hypothesis via inferential analysis. Even though this instrument was taken from several previous studies, it still needs to be tested. The tests that was carried out in this research are (1) instrument tests which were in the form of validity tests and reliability tests on data from questionnaires or questionnaires; (2) classic assumption test was carried out prior to the multiple linear regression analysis, which tries to evaluate whether the regression model's predictions are the best unbiased collinear predictions. The Normality Test, Multicollinearity Test, and Heteroscedasticity Test are examples of classical assumption tests; (3) multiple linear regression analysis of the independent factors' influence on the dependent variable determined the direction and size; (4) T test (partial test) to examine how well the independent factors in this study explained the dependent variable separately and F test (simultaneous test) to assess whether or not the independent variables have a joint or simultaneous influence on the dependent variable; and (5) coefficient of determination to measure how well the model explains the variation of the independent variables.

RESULTS

Validity Check

The validity check was carried out on each question item in the questionnaire and was done by examining the value of the corrected total item correlation. If the corrected total item correlation value was more than one, the instrument was declared to be legitimate was ≥ 0.3.

Table 1. Research Instrument Validity Test

Variable	Items	Corrected Item Total Correlation	Explanation
Communication Skills (X_1)	$X_{1.1.1}$	0.407	Valid
	$X_{1.1.2}$	0.329	Valid
	$X_{1.1.3}$	0.560	Valid
	$X_{1.1.4}$	0.521	Valid
	$X_{1.2.1}$	0.415	Valid
	$X_{1.2.2}$	0.459	Valid
	$X_{1.2.3}$	0.533	Valid
	$X_{1.2.4}$	0.535	Valid
	$X_{1.3.1}$	0.428	Valid
	$X_{1.3.2}$	0.611	Valid
	$X_{1.3.3}$	0.460	Valid
	$X_{1.3.4}$	0.436	Valid
	$X_{1.4.1}$	0.519	Valid
	$X_{1.4.2}$	0.350	Valid
	$X_{1.4.3}$	0.550	Valid
	$X_{1.4.4}$	0.791	Valid
	$X_{1.5.1}$	0.520	Valid
	$X_{1.5.2}$	0.460	Valid

Variable	Items	Corrected Item Total Correlation	Explanation
	$X_{1.5.3}$	0.523	Valid
	$X_{1.5.4}$	0.359	Valid
Competence (Y_1)	$Y_{1.1.1}$	0.565	Valid
	$Y_{1.1.2}$	0.641	Valid
	$Y_{1.1.3}$	0.444	Valid
	$Y_{1.1.4}$	0.518	Valid
	$Y_{1.1.5}$	0.416	Valid
	$Y_{1.1.6}$	0.303	Valid
	$Y_{1.2.1}$	0.566	Valid
	$Y_{1.2.2}$	0.484	Valid
	$Y_{1.2.3}$	0.444	Valid
	$Y_{1.2.4}$	0.586	Valid
	$Y_{1.2.5}$	0.491	Valid
	$Y_{1.2.6}$	0.571	Valid
	$Y_{1.3.1}$	0.387	Valid
	$Y_{1.3.2}$	0.588	Valid
	$Y_{1.3.3}$	0.419	Valid
	$Y_{1.3.4}$	0.519	Valid
	$Y_{1.3.5}$	0.699	Valid
	$Y_{1.3.6}$	0.399	Valid
Counterproductive Behavior (Y_2)	$Y_{2.1.1}$	0,540	Valid
	$Y_{2.1.2}$	0,471	Valid
	$Y_{2.1.3}$	0,544	Valid
	$Y_{2.2.1}$	0,432	Valid
	$Y_{2.2.2}$	0,573	Valid
	$Y_{2.2.3}$	0,431	Valid
	$Y_{2.2.4}$	0,552	Valid
	$Y_{2.3.1}$	0,604	Valid
	$Y_{2.3.2}$	0,565	Valid
	$Y_{2.3.3}$	0,499	Valid
	$Y_{2.4.1}$	0,593	Valid
	$Y_{2.4.2}$	0,654	Valid
	$Y_{2.4.3}$	0,519	Valid
	$Y_{2.4.4}$	0,535	Valid
	$Y_{2.4.5}$	0,462	Valid
	$Y_{2.5.1}$	0,422	Valid
	$Y_{2.5.2}$	0,479	Valid
	$Y_{2.5.3}$	0,591	Valid
	$Y_{2.5.4}$	0,421	Valid
	$Y_{2.5.5}$	0,458	Valid
	$Y_{2.5.6}$	0,541	Valid
	$Y_{2.5.7}$	0,465	Valid
	$Y_{2.5.8}$	0,691	Valid
	$Y_{2.5.9}$	0,513	Valid
	$Y_{2.5.10}$	0,566	Valid
	$Y_{2.5.11}$	0,521	Valid
	$Y_{2.5.12}$	0,459	Valid
	$Y_{2.5.13}$	0,536	Valid
	$Y_{2.5.14}$	0,600	Valid
	$Y_{2.5.15}$	0,531	Valid
	$Y_{2.5.16}$	0,406	Valid

Variable	Items	Corrected Item Total Correlation	Explanation
	$Y_{2.5.17}$	0,687	Valid
	$Y_{2.5.18}$	0,583	Valid

R value for each instrument is compared to 0.3. Based on Table 1, it is discovered that all the items have a Corrected Item Total Correlation value better than 0.3 so that all statement items at the trial stage are valid/correct in measuring variables.

Reliability Check
Table 2. Questionnaire Reliability Check

Variable	Cronbach Alpha Value	Explanation
Communication Skills (X_1)	0.843	Reliable
Competence (Y_1)	0.888	Reliable
Counterproductive Behavior (Y_2)	0.764	Reliable

Based on Table 2, it is possible to conclude that all variables have a Cronbach's Alpha value larger than 0.6, so that the variables of communication skills, competencies, and counterproductive behavior at the trial stage are reliable or meticulous in measuring variables.

Path Coefficient Estimation
In this research, there are two path analysis models. The first model investigates the impact of communication abilities on competency. The second model aims to determine the influence of communication skills and competencies on counterproductive behavior. Table 3 describes the path coefficient estimators in each model.

Table 3. Path Coefficient Estimation

Variable	Coefficient
X_1 on Y_1	0.424
X_1 on Y_2	-0.216
Y_1 on Y_2	-0.527

Based on Table 3, the form of the path analysis equation is as follows.
$$Y_1 = 0.424X_1$$

$$Y_2 = -0.216X_1 - 0.527Y_1$$

Based on the model formed, the coefficient value indicates the magnitude of each variable's contribution. The first model explains that the contribution of communication skills to competence is 0.424 or 42.4%. Meanwhile, the second model explains that the contribution of communication skills and competence to counterproductive behavior is 0.216 or 21.6% and 0.527 or 52.7%, respectively.

Direct Effect
Table 4. Direct Effect

Direct Effect	p-value	Coefficient
X_1 on Y_1	0.000	0.424
X_1 on Y_2	0.147	-0.216
Y_1 on Y_2	0.000	-0.527

Based on the results of the direct influence test obtained, there is a substantial and positive correlation. influence between communication skills (X_1) on competence (Y_1). There is a negative direct effect but not significant between communication skills (X_1) on counterproductive behavior (Y_2). Furthermore, there is a direct and significant negative relationship between competence (Y_1) on counterproductive behavior (Y_2).

Indirect Effect
Table 5. Indirect Effect

Indirect Effect	p-value	Coefficient
X_1 on Y_2 mediated by Y_1	0.000	-0.281

The results of the indirect effect test on the path analysis show that there is a negative and significant sign of the coefficient between communication skills (X_1) on counterproductive behavior (Y_2) mediated by competence (Y_1).

DISCUSSION

Direct Effect of Communication Skills on Competence
The results of the analysis of communication skills on competence have a coefficient of 0.424 (positive) and a p-value <0.05. These implies that the variable communication skills have a positive and strong influence on competence. The higher the communication ability, the higher the competence will be obtained. If it is desired that the lower the communication ability, then the lower competence is needed. Based on this, communication skills are very important for an employee which will be positive evidence of communication between employees and patients in a hospital organization. According to the study's findings, good communication skills can help employees carry out their duties by communicating, creating relationships, openness and communication trust with patients. However, these communication skills must be carried out in conjunction with employee competence. It is hoped that the Gatot Soebroto Army Central Hospital can develop the communication skills of its employees along with the competence of its employees on an ongoing basis to build relationships and trust with anyone, especially patients.

Direct Effect of Communication Skills on Counterproductive Behavior
The results of the analysis of communication skills on counterproductive behavior have a coefficient of 0.216 (negative) and a p-value > 0.05. This means that communication skills have a negative but not significant effect on counterproductive behavior. Therefore, the bigger the the ability to communicate, the lower the counterproductive behavior. Conversely, if you want lower communication skills, it will increase counterproductive behavior. Based on this, counterproductive behavior by health workers, both doctors, nurses and non-health workers working in hospitals, needs to be avoided. Counterproductive behavior is all kinds of behavior or actions carried out by an individual either intentionally or unintentionally which contradict or hinder the organization in achieving organizational goals. Therefore, it is necessary to have good communication skills so that counterproductive behavior can be avoided and the organizational culture of the hospital is maintained. As well as good communication skills are essential in developing successful and constructive professional relationships, such as in nursing practice.

Direct Effect of Competence on Counterproductive Behavior
The results of the competency analysis on counterproductive behavior have a coefficient of 0.527 (negative) and a p-value <0.05. This implies that the competency variable has a negative and statistically significant effect on counterproductive conduct. Hence, the higher the competence, the lower the counterproductive behavior. If you want lower competence, it is necessary to increase counterproductive behavior. Counterproductive behavior can be interpreted as deviant behavior in an organization. Where this deviation is intended to violate organizational norms and threaten the welfare of the organization. Based on this, counterproductive behavior by health workers, both doctors, nurses and non-health workers working in hospitals, needs to be avoided. Therefore, it is necessary to have good competence in terms of attitudes and behavior so that counterproductive behavior can be avoided and the organizational culture of the hospital is maintained. Where this competency can be in the form of skills, knowledge, and an individual's capacity to complete their duties to achieve goals effectively.

Indirect Effect of Communication Skills on Counterproductive Behavior
The findings of the analysis of communication skills on counterproductive behavior mediated by competence have a coefficient of 0.281 (negative) and a p-value <0.05. This means that communication skills have a negative and significant effect on counterproductive behavior through competence. Hence, competence is able to mediate the relationship between communication skills and counterproductive behavior. Conversely, competence is not able to moderate the communication interaction skills and counterproductive behavior. In this study, when the communication skills of the Gatot Soebroto Army Central Hospital staff were low and the messages conveyed were sometimes misunderstood or vice versa, it could trigger counterproductive behavior. Counterproductive behavior can be in the form of different behaviors or actions which have an element of intent and/or with the intent to harm the organization or the organization's stakeholders. Therefore, mediation is needed in the form of competency in conveying messages/education to patients in order to minimize debate. This means that good communication skills are needed to suppress counterproductive behavior through individual competence in communication.

CONCLUSION

According to the findings of the study, it can be summed up that communication skills directly have a significant and positive effect on competence. Based on this, it is expected that the Gatot Soebroto Army Central Hospital can develop the communication skills of its employees along with the competence of its employees on an ongoing basis to build relationships and trust with anyone, especially patients.

Communication skills directly have a negative but not significant effect on counterproductive behavior. However, communication skills indirectly have a negative and substantial impact on counterproductive behavior through competence. In other words, competence is capable of mediating the conflict between communication skills and counterproductive behavior. This means that good communication skills are needed to suppress counterproductive behavior through individual competence in communication. As well as good communication skills are very important in developing successful and constructive professional relationships, such as in nursing practice at Gatot Soebroto Army Central Hospital.

Competence directly has a significant and negative effect on counterproductive behavior. Based on this, it is necessary to have good competence in terms of attitude and behavior so that counterproductive behavior can be avoided and the organizational culture at the Gatot Soebroto Army Central Hospital is maintained. Where this competency can be in the form of skills, knowledge, and an individual's ability to complete their duties to achieve goals effectively.

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DECLARATION OF CONFLICTING INTEREST
The authors declare that there is no conflict of interest.

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