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The Role of Service Culture and Organizational Climate in Healthcare Workforce Digital Adaptation Readiness at the MAS Clinic in Banjarbaru, Indonesia

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ABSTRACT
Digital transformation through Electronic Medical Records (EMR) is an urgent need for primary-level healthcare facilities to improve service quality in the 4.0 era. However, the effectiveness of this technology is often hampered by suboptimal Human Resources (HR) readiness and support from the work environment, particularly in regional primary clinics. This study aims to analyze the role of service culture and organizational climate in the digital adaptation readiness of healthcare workers at the MAS Clinic in Banjarbaru. This study used a descriptive qualitative approach with a case study design. Data collection was conducted through in-depth interviews, observations, and documentation with 12 informants consisting of clinic leaders, doctors, nurses, and administrative staff. The results show that a service culture oriented towards professionalism, collaboration, and commitment to service quality are the main factors driving the acceptance of digital technology. In addition, a supportive organizational climate, especially through direct support from leadership, plays a role in helping healthcare workers overcome digital competency barriers. However, the digital adaptation process still faces several challenges, such as limited technological infrastructure, resistance to change, and low digital literacy. Healthcare workers' digital adaptation readiness depends not only on technological aspects, but also on strengthening the service culture and creating a conducive organizational climate. This study recommends the need for improved technology infrastructure and ongoing digital training at the MAS Banjarbaru Clinic to align conventional work culture with an integrated health information system.

Keywords: Digital Adaptation, Service Culture, Organizational Climate, EMR, Healthcare Workers.

I. Introduction

Digital transformation has now become a key agenda for developing healthcare systems in various countries, including Indonesia. Digitalization is no longer merely used for administrative purposes but also serves as an instrument for improving service quality, operational efficiency, and the accuracy of patient data management. The implementation of digital transformation in the healthcare sector, demonstrated through

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the use of Electronic Medical Records (EMR) at the MAS Banjarbaru Clinic, is one concrete example of this transformation. This implementation requires the readiness of Human Resources (HR), particularly healthcare workers, to adopt and optimally utilize digital technology. Digital transformation in the healthcare sector can improve service efficiency and support organizations in making data-driven decisions more accurately and quickly. This is complemented by government policies that ensure adequate basic infrastructure, patient data protection, system interoperability, and digital service financing mechanisms (Maulaningrum et al., 2025). The readiness of healthcare workers to adapt to digital technology is a crucial aspect determining the success of health information system implementation. This readiness relates not only to technical skills in operating the technology but also encompasses individual understanding, attitudes, and behavioral responses to organizational change. The success of digital transformation is influenced by the readiness of Human Resources (HR), digital literacy levels, acquired experience, training development, the creation of a supportive organizational culture, and the readiness of healthcare workers to embrace technological developments (Hariri et al., 2025). Therefore, an approach that solely focuses on providing technology without considering organizational aspects has the potential to generate resistance and lead to implementation failure.

One influential aspect of an organization is service culture. Service culture reflects the values, norms, and habits that develop within an organization in providing services to patients. A culture that upholds professionalism, collaboration, and is oriented towards service quality can encourage healthcare workers to be more open to innovation, including digital transformation. Conversely, an organizational culture that tends to be rigid and inflexible can hinder the change process. Leadership, organizational culture, human resource readiness, and technological infrastructure are significantly related to readiness for Electronic Medical Records (EMR) implementation. Therefore, strategic planning, training, and information technology optimization are necessary to support the successful implementation of EMR (Sari, 2023). Organizational climate reflects the perceptions of organizational members regarding the work atmosphere and environment, including organizational support, communication patterns, interactions between leaders and healthcare workers, and opportunities for education and career development. A conducive climate can create a sense of psychological security for healthcare workers, thereby increasing their motivation to actively contribute to the digital transformation process. Conversely, limited organizational support can trigger technostress and create resistance to the adoption of new technologies (Ningtiyas & Peristiowati, 2025).

Although digital transformation in the healthcare sector has received considerable attention in various studies, discussion of the role of service culture and organizational climate in healthcare workers' readiness to adapt in primary healthcare facilities remains relatively limited, particularly in private clinics in rural areas. Most studies focus on technology and infrastructure aspects, while organizational factors and human resource dynamics have not been comprehensively examined. The MAS Banjarbaru Clinic is a primary healthcare facility that plays a crucial role in providing access to healthcare services for the community. With the increasing need for fast, accurate, and effective services, the MAS Banjarbaru Clinic also faces the challenge of implementing an integrated health information system as part of the digital transformation of healthcare services. The digital adaptation process in healthcare practices still faces various internal organizational challenges that can impact healthcare workers' readiness to embrace change. Therefore, it is important to understand how service culture and organizational climate play a role in shaping the digital adaptation readiness of healthcare workers in the MAS Banjarbaru Clinic environment. This study aims to analyze the role of service culture and organizational climate in the digital adaptation readiness of healthcare workers at the MAS Clinic in Banjarbaru. Through a qualitative approach, this study is expected to provide a deeper understanding of organizational dynamics in supporting the digital transformation process. Furthermore, the results can provide strategic recommendations for strengthening digital transformation in the healthcare sector, particularly in primary healthcare facilities.

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II. Literature Review and Hypothesis Development

2.1. Service Culture in Healthcare Organizations

Service culture is part of organizational culture related to the values, norms, and behavioral patterns applied in providing services to patients. In healthcare facilities, service culture reflects the organization's orientation toward service quality, empathy, professionalism, and a commitment to patient safety and satisfaction. A positive service culture will shape the behavior of healthcare workers, enabling them to provide responsive, effective, and patient-centered services. Organizational cultural values such as discipline, empathy, team collaboration, openness to change, and innovation contribute to improving the quality of healthcare services. Improving these values can support the successful implementation of digital-based health information systems, including the use of Electronic Medical Records (EMR) (Harun et al., 2025). Organizational culture not only serves as an organizational identity but also as a social control mechanism that can shape the mindset and behavior of healthcare workers (individuals) within the organization. A work culture that encourages continuous learning and openness to innovation plays a crucial role in helping healthcare workers navigate the ever-evolving service system, particularly in the era of digital transformation (Suyatno & Tukiran, 2024). Adaptive use of social media and digital-based patient care systems can improve healthcare workers' readiness to face technological changes in the healthcare environment (Eka et al., 2025). Thus, a positive, innovative, and adaptive service culture can serve as a foundation for improving healthcare workers' readiness to embrace and implement digital transformation in healthcare.

2.2. Organizational Climate

Organizational climate reflects the perceptions of organizational members regarding the daily work environment within the organization. Organizational climate encompasses various aspects such as leadership style, communication patterns, work relationships, reward systems, and forms of organizational support for human resource development (Santana & Pérez-rico, 2022). In healthcare organizations, organizational climate reflects how healthcare workers assess the work environment within the healthcare environment. A conducive organizational climate is characterized by open communication, support from leadership, and the creation of a harmonious and collaborative atmosphere. In addition to its role in improving workplace comfort, organizational climate is a crucial factor influencing healthcare workers' readiness for digital adaptation at the MAS Banjarbaru Clinic and is closely related to healthcare worker performance and the quality of services provided. A supportive and open work environment to change will help healthcare workers more easily adopt digital technology. Furthermore, organizational climate also serves as an enabling factor in the process of organizational change. Without a supportive work climate, introduced innovations tend to generate resistance from organizational members (Tatli et al., 2025).

2.3. Digital Adaptation Readiness of Healthcare Workers

Digital adaptation readiness refers to the level of readiness of individuals and organizations to accept, use, and integrate digital technology into their work processes. In the healthcare sector, this readiness is a key factor in the successful implementation of health information systems and digital-based service transformation. Without adequate readiness, technology utilization will not run optimally and could potentially create obstacles in the service process. Digital adaptation readiness of healthcare workers encompasses several dimensions, including: 1) digital competence (the ability to operate information technology devices and systems); 2) psychological readiness (attitudes toward technological changes in the work environment); 3) organizational readiness (managerial support in policies, infrastructure, and work systems) (Greenhalgh et al., 2017), as well as the implementation of employee training (Alotaibi et al., 2025). These three aspects are interrelated in shaping the level of readiness of healthcare workers for digital

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transformation. The higher the competence, attitudinal readiness, and organizational support, the greater the chance of successful integration of digital technology into healthcare services (Hariri et al., 2025).

Digital readiness in healthcare services is fundamentally influenced by the ability of healthcare workers to use and operate technology, the support and readiness of the organization to provide adequate facilities and infrastructure, and the availability of ongoing training programs implemented by the institution (Odeh et al., 2024). Digital transformation in the healthcare sector has brought significant changes to the service system, particularly through the implementation of electronic medical records (EMR), telemedicine services, and the integration of various integrated health information systems. These developments require healthcare workers to possess not only technical skills but also the readiness to adapt to digital-based work patterns. However, this adaptation process still faces various challenges, such as low digital literacy among healthcare workers, limited facilities and infrastructure, and resistance to changes in existing work processes (Steenkamp et al., 2025). Therefore, digital adaptation readiness cannot be separated from the surrounding organizational factors, such as policy and system support, organizational structure and processes, work culture, human resource management, and policies that encourage change (Brommeyer et al., 2024).

2.4. The Relationship Between Service Culture, Organizational Climate, and Digital Adaptation

Service culture and organizational climate are two interrelated internal factors that shape healthcare workers' readiness for digital adaptation. An organizational culture that encourages innovation, continuous learning, and openness to change will strengthen the creation of a conducive organizational climate, thereby improving the work environment's resilience to technological change (Alsaqqa, 2024). A strong organizational culture positively contributes to improving organizational readiness for the implementation of digital policies and innovations. Furthermore, cultural values such as openness, collaboration, and a focus on service quality also contribute to building a technology-adaptive work environment. Conversely, a supportive organizational climate will strengthen the implementation of cultural values. The combination of a strong service culture and a conducive organizational climate can enhance healthcare workers' readiness for digital transformation. Thus, healthcare workers' readiness for digital adaptation is not solely influenced by individual factors but rather results from a complex interaction between service culture and organizational climate within a healthcare institution.

III. Research Method

This study employed a qualitative approach using a case study design to gain an in-depth understanding of the roles of service culture and organizational climate in shaping healthcare workers' readiness for digital adaptation (Creswell & Creswell, 2022). The study was conducted at MAS Clinic, Banjarbaru, selected because of its relevance to the implementation of health information systems, particularly the Electronic Medical Record (EMR) system. Participants were selected through purposive sampling based on predefined criteria, including direct involvement in healthcare service delivery and EMR utilization, work experience, and the ability to provide rich and relevant information related to the research focus. Of the clinic's 35 employees, 12 participants were recruited, consisting of the clinic director, physicians, nurses, pharmacists, and administrative staff. This number of participants was considered sufficient because the data reached data saturation, meaning that no substantial new information emerged from additional interviews. The number of participants was not predetermined but was guided by the principle of data saturation, whereby data collection ceased when additional interviews no longer generated meaningful new insights. Consequently, the 12 participants were considered to adequately represent the range of perspectives required to comprehensively address the research objectives.

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IV. Results and Discussion

4.1. Research Setting

The MAS Banjarbaru Clinic is one of the first-level healthcare facilities to implement an Electronic Medical Records (EMR) system throughout its entire healthcare process. The clinic is located in Banjarbaru City, South Kalimantan Province. The clinic employs 35 doctors, nurses, administrative staff, pharmacists, and other support staff. The implementation of the EMR was carried out as a digitalization effort to improve service effectiveness, patient data management quality, and clinic administrative efficiency. Based on in-depth interviews and observations, all patient data recording and management processes at the MAS Banjarbaru Clinic utilize an EMR-based digital system. This system helps healthcare workers access patient data more quickly and efficiently than the previous manual system.

Some healthcare workers have been able to use the digital system in their care processes, but implementation has not been optimal due to several obstacles. Despite the full implementation of the EMR, the clinic still faces several challenges in implementing digital-based services. These obstacles stem from human resources and supporting infrastructure. Human resources (HR) have limited digital literacy in operating systems and computers and are accustomed to using manual systems. During its implementation, the MAS Banjarbaru Clinic still faces several technical challenges that could potentially impact the continuity of digital-based healthcare services, particularly internet connectivity disruptions and power outages. To minimize disruptions to the operation of the Electronic Medical Records (EMR) system, clinic management has taken various anticipatory measures, including utilizing smartphone hotspots as an alternative internet connection source when the Wi-Fi network is disrupted and providing a generator as a backup power source to ensure the digital service system continues to operate continuously.

The study also shows that implementing an Electronic Medical Record (EMR) requires a substantial initial investment, as the clinic must provide various technological support facilities to support digital-based healthcare services. This situation demonstrates that digital transformation in healthcare is not only related to the use of technology, but also to the organization's readiness to provide infrastructure and increase human resource capacity. The informants in this study were selected based on their level of involvement and experience in using digital systems at the MAS Banjarbaru Clinic. Informants were selected to obtain a variety of perspectives regarding EMR implementation and the healthcare workforce's readiness to adapt to digital. The characteristics of the informants in this study are presented in Table 1 as follows:

No	Informant Code	Position	Work Duration	Involvement in EMR
1	IF-1	Owner	5 Years	EMR implementation policy makers
2	IF-2	Doctor	5 Years	Active user of the EMR system
3	IF-3	Doctor	4 Years	Active user of the EMR system
4	IF-4	Nurse	4 Years	Input patient examination data
5	IF-5	Nurse	3 Years	Patient service system users
6	IF-6	Administration Staff	3 Years	Patient service system users
7	IF-7	Administration Staff	2 Years	Data input and patient registration
8	IF-8	Nurse	5 Years	Health service system users
9	IF-9	Clinic Staff	3 Years	Dual system user (manual and digital)
10	IF-10	Administration Staff	1 Years	Adaptation to the use of digital systems
11	IF-11	Nurse	4 Years	EMR user in patient service

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12	IF-12	Pharmacist	3 Years	Prescription verification and pharmaceutical service input

The diversity of informant characteristics, both in terms of length of service and position, provides a more comprehensive perspective in understanding the digital adaptation process. Informants have varying work experience, ranging from 1 to 5 years, thus being able to represent the adaptation process of using Electronic Medical Records (EMR) from various levels of work experience. In addition, the involvement of informants from various positions, ranging from clinic owners, doctors, nurses, pharmacists, to administrative staff, allows researchers to gain a more comprehensive understanding of the implementation of digital systems, both in aspects of policy, health services, administration, and technical operations in the clinic environment. Thus, the diversity of informants in this study supports the depth of data and strengthens the interpretation process of the dynamics of service culture, organizational climate, and the readiness of health workers to adapt digitally at the MAS Banjarbaru Clinic.

4.2. Service Culture dalam Implementasi Electronic Medical Records (EMR)

The research results indicate that the full implementation of the Electronic Medical Records (EMR) system at the MAS Banjarbaru Clinic is aligned with a service culture that maintains patient-centered quality as the organization's top priority. All healthcare workers strive to provide fast, accurate, and professional service to patients through digital-based services. Based on interviews with research informants, the use of the EMR system is beginning to contribute to service effectiveness, particularly in accessing patient data and medical history. Healthcare workers, particularly doctors and nurses, stated that the digital system makes it easier to find patient information compared to the previously used manual system. This is as stated by the following informant:

> *"Once patient data is entered into the system, doctors can view patient history more quickly than searching for files manually." (IF-2)*

The research findings indicate that the implementation of Electronic Medical Records (EMR) contributes to increasing the effectiveness of service flows and the efficiency of healthcare workers' performance through the digital integration of patient data. Based on observations, the entire process of recording and managing patient data at the MAS Banjarbaru Clinic is carried out electronically, eliminating the use of physical documentation. Despite the comprehensive implementation of the digital system, there is variation in healthcare workers' ability to operate the EMR system. Senior healthcare workers tend to require a longer adaptation period to understand computer operation and the use of digital applications compared to healthcare workers who already have experience or are used to operating computers and information systems.

4.3. Organizational Climate Supporting Digital Adaptation

The research results indicate that the organizational climate at the MAS Clinic in Banjarbaru tends to support the digital adaptation process and the implementation of Electronic Medical Records (EMR). This organizational support is evident in the involvement of clinic leaders in providing guidance, mentoring, and technical assistance to healthcare workers experiencing difficulties operating the digital system. Based on interviews, MAS Clinic leaders perceive that the main challenge to EMR implementation lies in the readiness of human resources to operate the digital system. Differences in understanding, skills, and operational skills of digital systems mean that the training process needs to be implemented in stages and continuously so that the entire workforce can adapt to a digital-based work system. This is as conveyed by the following informant:

> *"The main challenge is indeed human resources. Not all employees easily understand the training material on EMR usage, so special mentoring and training are needed in stages." (IF-1)*

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This finding indicates that EMR implementation at the MAS Clinic in Banjarbaru is supported by a supportive organizational climate. The direct mentoring provided by leaders reflects adaptive leadership practices in addressing changes in technology-based work systems. Interpersonal support between leaders and healthcare workers is a crucial factor in mitigating psychological and technical barriers during the adaptation process. In addition to organizational support, the study also found structural barriers in the form of unstable internet networks, which impacted the effectiveness of digital system use. Network disruptions sometimes hampered patient data input, resulting in delays in administrative services. One informant stated:

> *"If there's a problem with the internet network, data input is hampered and services can take longer." (IF-7)*

EMR implementation still faces challenges in the technical climate, particularly digital infrastructure and internet network stability, which need to be improved to optimize the effectiveness of digital systems in healthcare. However, strong social support and communication within the organization helped maintain service continuity during the adaptation process.

4.4. Dynamics of Digital Adaptation of Healthcare Workers

In addition to human resource competency, the implementation of Electronic Medical Records (EMR) at the MAS Banjarbaru Clinic also demonstrates that infrastructure readiness is a crucial aspect in supporting the sustainability of digital systems. Research results indicate that EMR implementation requires a relatively large initial investment, particularly in the provision of hardware, internet networks, and other operational support systems. This demonstrates that digital transformation requires not only individual readiness but also organizational readiness in terms of financing and technological infrastructure.

> *"The initial capital for EMR implementation is quite large because it requires preparing computers, networks, and other supporting facilities." (IF-1).*

From an operational perspective, the management of the MAS Banjarbaru Clinic has anticipated potential technical disruptions by providing alternative power sources to maintain the continuity of digital-based services. When internet connectivity is disrupted, smartphone hotspots are used as a solution. Furthermore, management has provided a generator as a backup power source to ensure the EMR system remains operational even during power outages.

> *"If the Wi-Fi network is problematic, we usually use the smartphone hotspot to maintain service." (IF-5).*
> *"If the power goes out, we use a generator, so we can still use the system." (IF-7).*

Meanwhile, from a human resources perspective, it appears that the digital adaptation readiness of healthcare workers at the MAS Banjarbaru Clinic remains dynamic and varies among employees. These differences in readiness are evident in digital literacy skills, age, work experience, and prior experience using computer-based systems. Healthcare workers who are accustomed to using digital technology tend to be quicker to understand and operate the Electronic Medical Records (EMR) system. Conversely, some other healthcare workers still require relatively longer time and assistance in operating the system because they are not yet fully accustomed to using digital applications in daily healthcare services. This is as expressed by the following informant:

> *"Those who are accustomed to using computers adapt more quickly, but some still need guidance when inputting data." (IF-2)*

This finding indicates differences in digital readiness levels among healthcare workers. Individuals with prior technology experience and skills tend to have a higher level of acceptance of digital-based systems

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compared to healthcare workers who are not yet accustomed to using technology in administrative work or clinical services. To facilitate understanding of the research results, the main findings are presented in Table 2 as follows:

Table 2. Key Research Findings

Research Focus	Findings	Data Indication
Service Culture	Service Culture remains focused on quality patient care even with the use of EMR. Healthcare workers continue to prioritize fast, accurate, and professional patient care throughout the adaptation process.	EMR helps speed up access to patient data and simplifies services compared to using manual systems.
Service Culture	Implementation of EMR system helps the efficiency of health services	Doctors can access patient records more quickly through digital systems than through manual systems.
Service Culture	Commitment to service remains intact throughout the digital transformation	Health workers continue to work professionally even though there are adjustments to the work system.
Service Culture	Orientation towards patient satisfaction and safety remains a top priority.	Services did not experience a decline in quality during EMR implementation.
Organization Climate	The leadership provides direct assistance in the use of EMR to health workers.	Health workers feel helped when experiencing technical problems
Organization Climate	EMR usage training is carried out in stages and continuously.	Some health workers still need assistance in operating digital systems.
Organization Climate	There are still technical obstacles in the form of internet network instability.	The patient data input process is sometimes hampered by network disruptions.
Digital Adaptation	Digital literacy of healthcare workers still varies based on individual experience and abilities.	Some healthcare workers are slower to adapt to using EMR systems, compared to those who are used to operating computers.
Digital Adaptation	All services have fully utilized the EMR system.	Data recording and management has used a digital system.
Digital Adaptation	Implementation of digital systems still requires strengthening of human resource capacity.	Clinics require training and assistance in using the system for health workers.
Digital Adaptation	The use of technology is starting to be integrated into the work culture of organizations.	Health workers are starting to get used to using digital systems in their services.

Based on Table 2, the research findings indicate a strong correlation between Service Culture, Organizational Climate, and healthcare workers' readiness for Digital Adaptation in the implementation of Electronic Medical Records (EMR) at the MAS Clinic in Banjarbaru. Regarding Service Culture, healthcare workers maintained their primary focus on patient care quality despite undergoing a digital transformation process. This indicates that pre-established service values serve as a crucial foundation for maintaining sustainable service quality amidst changes in work systems. Regarding Organizational Climate, leadership support through direct mentoring and gradual training were crucial factors in helping healthcare workers adapt to the new system. However, EMR implementation still faces technical obstacles, such as unstable internet connections, which still impact the system's effectiveness in patient care. Meanwhile, regarding Digital Adaptation, it was found that digital literacy skills vary among individuals based on age, experience, and level of technological proficiency, resulting in a gradual adaptation process to the EMR system.

Based on these findings, it is clear that the implementation of Electronic Medical Records (EMR) at the MAS Clinic in Banjarbaru is not solely influenced by technical aspects, but also by factors such as Service

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Culture, Organizational Climate, and healthcare workers' readiness for Digital Adaptation. These conditions indicate that despite the support and positive developments, there are still obstacles that could potentially impact the system's optimal use. Therefore, the following section will outline in more detail the various obstacles to Electronic Medical Records (EMR) implementation encountered in the field, as presented in Table 3.

Table 3. Barriers in Implementing Electronic Medical Records (EMR)

Barriers	Effect	Efforts Made
HR competency gap in EMR usage.	Some healthcare workers need more time to operate computers and EMR systems.	Training and technical assistance, as well as direct assistance by more competent personnel on an ongoing basis
Variations in digital literacy among health workers.	The process of adapting to system usage takes place at different speeds.	Continuous learning and mentoring based on individual needs.
Internet connectivity instability.	Potential delays in patient data access and input.	Coordination with related parties to improve and increase network quality, use of hotspots from smartphones as an alternative.
Power supply disruption.	Risk of EMR system operational downtime.	Provision of generators as a backup power source to maintain service continuity.
High initial investment costs.	A large allocation of funds is required for the procurement of digital devices and infrastructure.	Gradual procurement of information technology facilities and infrastructure (computers, availability of information systems, networks, and supporting facilities).

Based on Table 3, it can be seen that the implementation of Electronic Medical Records (EMR) at the MAS Clinic in Banjarbaru still faces a number of multidimensional obstacles, encompassing human resources, technology, and organizational work patterns. The main obstacles lie in the uneven competency and literacy of healthcare workers in the use of digital systems, as well as the significant investment required to procure the system. This situation indicates that the level of technological mastery within the clinic environment is unequal, resulting in varying abilities to operate the EMR across service units. Furthermore, the varying digital literacy of healthcare workers exacerbates the complexity of the adaptation challenges. These differences in skill levels result in an uneven adjustment process to the digital system, with some healthcare workers adapting more easily, while others require more time and intensive support. This indicates that the success of digital transformation depends not only on system availability but also on the readiness of individuals as primary users of the technology. From a technical perspective, internet network instability is a significant obstacle because it directly impacts operational efficiency, particularly in the process of inputting and accessing patient data. Network disruptions cause slower and less optimal service processes, potentially impacting the quality of healthcare services. Furthermore, limited experience in using digital technology among some healthcare workers also slows the adaptation process. This situation is exacerbated by the need for direct mentoring from leaders and more experienced personnel, as an organizational strategy to accelerate the adjustment process. Overall, these findings indicate that the obstacles to implementing Electronic Medical Records (EMR) at the MAS Banjarbaru clinic are structural and cultural. Therefore, optimizing digital transformation requires strengthening healthcare worker competencies, increasing digital literacy, and strengthening the organization's commitment to supporting comprehensive and sustainable system integration.

4.5. Discussion

a. Service Culture

Research results indicate that Service Culture plays a significant role in supporting the implementation of Electronic Medical Records (EMR) at the MAS Banjarbaru Clinic. The Service Culture developed at this clinic remains oriented toward patient service quality as a top priority, reflected in the healthcare workers' commitment to providing fast, accurate, and professional services despite the ongoing digital transition. This condition aligns with the concept of organizational culture proposed by Schein (2010),

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who defines organizational culture as a pattern of assumptions, values, and basic norms that develop and are learned within an organization and serve as guidelines for members' thinking and acting during external challenges and internal integration (Assens-Serra & Boada-Cuerva, 2021). Service culture, as a critical organizational infrastructure, serves as a pattern of assumptions and a foundation of values to align healthcare workers' behavior, thus acting as a key facilitator in accelerating the adoption of technological innovation and internal service integration (Einhorn et al., 2024). The Service Culture that has been established at the MAS Banjarbaru Clinic serves as a foundation of values that can guide healthcare workers' behavior to maintain service quality amidst changes to digital-based work systems.

Healthcare workers' acceptance of technological innovation is strongly influenced by an organizational culture that aligns core values with the information systems used. Internal mechanisms ensure that new technology is not perceived as an obstacle, but rather as an opportunity to achieve organizational goals by strengthening shared values and engaging human resources (Einhorn et al., 2024). A service- and quality-oriented organizational culture significantly influences the successful adoption of information systems in the healthcare sector, as these values can reduce resistance to technological change. A patient-oriented service culture not only serves as an ethical value in service delivery but also fosters healthcare workers' readiness to accept and implement change. Digitalization is not perceived as a threat but as a tool that can accelerate and strengthen the service process, reduce stress, improve service quality, and improve patient safety, rather than replacing healthcare workers (Rajamani et al., 2022). The results of this study indicate that service culture in the MAS Banjarbaru clinic serves as a key supporting factor in the adaptation process to digital systems. The values of professionalism and patient-centeredness are the main foundations that strengthen the readiness of healthcare workers to accept and use the Electronic Medical Records (EMR) system, so that digital transformation can take place gradually without reducing the quality of services provided to patients.

b. Organization Climate in Support of Digital Adaptation

The research findings indicate that organizational climate at the MAS Banjabaru Clinic plays a crucial role in supporting the digital adaptation process, particularly in the implementation of Electronic Medical Records (EMR). Organizational support is reflected in leadership involvement in providing direction, direct mentoring, and gradual training for healthcare workers to address various technical challenges and facilitate the use of digital systems. The presence of organizational support helps healthcare workers overcome various technical challenges and facilitates the adjustment process to technology-based work systems. These research findings align with organizational climate theory, which explains that employee perceptions of organizational support, communication, and work relationships influence individual readiness to face changes in the organizational environment. A conducive organizational climate strengthens the implementation of service culture values in daily activities. Organizational climate, characterized by leadership support and open communication, is a crucial factor in increasing patient trust and acceptance. Organizational climate and leadership involvement act as critical facilitators in transforming cultural values into concrete actions, thereby increasing user trust and minimizing resistance to digital transformation in healthcare environments (Rajamani et al., 2022).

The research findings also align with the Technology Acceptance Model (TAM), which states that technology acceptance is influenced by user perceptions of perceived usefulness and ease of use, which can be enhanced through training and mentoring, as well as ongoing organizational support throughout the system implementation process (Iria et al., 2025). Furthermore, organizational facilitating conditions are crucial elements in the Unified Theory of Acceptance and Use of Technology (UTAUT) and directly influence information system use, including: 1) performance expectations, 2) ease of use, 3) social environmental influences, and organizational support (Xue et al., 2024). Management support and organizational readiness are key factors in the readiness to implement a health information system based on the UTAUT and TOE frameworks, as they determine the readiness of organizational resources, capacity, and the effectiveness of technology adoption (Pramitasari, 2025). These findings reinforce the strategic role of organizational commitment in supporting digital transformation, as evidenced by the MAS Banjarbaru Clinic, which demonstrated the existence of interpersonal relationships through mentoring by leaders in the Electronic Medical Records (EMR) adoption process. However, external obstacles, such as internet network instability, impacted the system's effectiveness. This demonstrates that EMR system implementation is not solely influenced by internal organizational factors, but also by the readiness of the technology infrastructure.

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Interpersonal climate is characterized by support from leaders and good working relationships, while technical climate encompasses limited network and system stability. The strength of interpersonal climate plays a role in compensating for the weaknesses of technical climate, ensuring the EMR implementation process continues.

c. Digital Adaptation Readiness of Healthcare Workers

The digital adaptation readiness of healthcare workers at the MAS Clinic in Banjarbaru still varies. This difference is evident in their level of digital literacy, work experience, and ability to operate the Electronic Medical Records (EMR) system. However, the EMR implementation has been fully utilized without any dual system (manual and digital), indicating that the digitalization process for healthcare services has been fully implemented. The full use of Electronic Medical Records (EMR) indicates that healthcare workers have entered the stage of adopting digital systems in their daily service activities. This condition reflects the elimination of the manual system in parallel, allowing all patient data recording and management processes to be integrated into the digital system. However, variations in individual readiness to accept this technology are still evident, particularly in aspects of digital literacy and the speed of adaptation to the system's available features.

This is in line with readiness theory, which emphasizes that the success of implementation is greatly influenced by individual readiness, encompassing cognitive, psychological, and technical dimensions (Pramitasari, 2025). One important factor is self-efficacy, which is an individual's belief in their ability to operate a health information system. Low self-efficacy in some health workers can lead to dependence on manual systems as a form of anticipation against the risk of failure in using digital systems (Ngusie et al., 2022). These findings also align with the Technology Acceptance Model (TAM) and the Unified Theory of Acceptance and Use of Technology (UTAUT), which explain that technology acceptance is influenced by perceived usefulness, ease of use, and facilitating conditions (Iria et al., 2025; Xue et al., 2024). In this context, even when EMR is fully deployed, its effectiveness remains influenced by the quality of organizational support, training, and individual readiness to operate the system (Rajamani et al., 2022). This is reinforced by Ghozali et al. (2025), who stated that the successful implementation of an Electronic Medical Records (EMR) system relies on the integration of individual, organizational, and infrastructure factors (Pramitasari, 2025). Overall, these findings indicate that the comprehensive implementation of Electronic Medical Records (EMR) does not necessarily reflect homogenous user readiness. Digital Adaptation Readiness remains the result of a complex interaction between psychological factors (self-efficacy), organizational factors in the form of support and training, and system characteristics that continue to evolve. Adaptive leadership has a strategic role in maintaining and ensuring the sustainability of optimizing the use of digital systems in healthcare environments through leaders' ability to adapt strategies, increase collaboration, and encourage innovation in healthcare environments (Shah et al., 2024).

d. The Relationship between Service Culture, Organization Climate, and Digital Adaptation (supported by previous research)

The relationship between Service Culture, Organizational Climate, and Digital Adaptation Readiness indicates that these three variables mutually shape an internal organizational ecosystem that determines the level of readiness of healthcare workers for digital transformation. Organizational culture serves as a value system to guide individual behavior in embracing technological change and innovation. Meanwhile, Service Culture, which emphasizes quality, collaboration, and openness, is a fundamental factor in shaping the Digital Adaptation Readiness of healthcare workers. An organizational culture that emphasizes innovation and continuous learning contributes significantly to an organization's digital transformation readiness, particularly by strengthening the organization's adaptive capacity to adopt new technologies (Jewapatarakul & Ueasangkomsate, 2024). Organizational culture determines the success of digital transformation because the values and norms prevailing within an organization influence individuals' level of technology acceptance. The stronger the organizational culture that supports innovation, the higher the readiness and acceptance of the digitalization process within the organization.

Therefore, the Digital Adaptation Readiness of healthcare workers is an outcome of the complex interaction between Service Culture and Organizational Climate. Organizational culture plays a role in shaping value systems and attitudes toward innovation, while Organizational Climate provides the social and structural support that enables these values to be actualized in work practices. The integration between the

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two is able to form an organizational ecosystem that is adaptive, responsive, and responsive in facing the dynamics of digital transformation in the health sector.

V. Conclusion

This study shows that Service Culture and Organizational Climate play a significant role in shaping the Digital Adaptation readiness of healthcare workers at the MAS Banjarbaru Clinic. A Service Culture oriented toward professionalism, service quality, collaboration, and patient safety is a supporting factor in the acceptance and use of the Electronic Medical Records (EMR) system. Furthermore, a supportive Organizational Climate, through leadership support and gradual mentoring, can assist healthcare workers in facing the digital transformation process. Although EMR implementation has been fully utilized in healthcare services, the Digital Adaptation process still faces various obstacles, such as limited literacy among healthcare workers, unstable internet connectivity, power supply disruptions, and the high need for investment in technological infrastructure procurement. Therefore, the Digital Adaptation readiness of healthcare workers is not only influenced by technological aspects, but also the readiness of human resources (HR), Service Culture, and Organizational Climate that support the sustainability of digital transformation in the healthcare environment.

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