

Employee Performance Analysis Based on Competency and Work Experience in Hospital

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ABSTRACT

This study provides a comprehensive overview of how employee competency and work experience collectively influence performance within hospital settings. Recognizing the critical role of human capital in ensuring high-quality patient care and organizational sustainability, this research addresses a gap by exploring the interplay of these factors rather than their isolated effects, specifically in Indonesian hospitals. Utilizing a library research method, the study synthesizes theoretical foundations and empirical findings from various scientific journals and relevant books. The analysis consistently reveals that both competency and work experience are significant determinants of employee effectiveness. Competency, encompassing technical skills, cognitive abilities, and behavioral attributes, directly enhances task execution and problem-solving. Work experience, conversely, contributes to operational maturity and practical judgment. Crucially, the findings highlight a synergistic interaction: optimal performance is achieved when strong competencies are reinforced by practical experience, while experience itself is most valuable when underpinned by continuous skill development. The study concludes that an integrated human resource strategy, emphasizing both competency development and experiential learning throughout an employee's career, is vital for sustaining high-quality hospital operations. This approach offers practical implications for refining recruitment, training, and promotion strategies to foster a highly effective healthcare workforce.

Keywords: Employee Performance; Hospital Management; Human Resources.



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INTRODUCTION

Employee performance in hospitals plays a pivotal role in determining not only the quality of patient care but also the overall effectiveness and sustainability of healthcare systems. Amid increasing patient expectations, limited healthcare budgets, and a rapid shift toward digital and value-based healthcare delivery, hospitals are under growing pressure to optimize their human resources. Among various factors influencing employee performance, competency and work experience have consistently been recognized as critical dimensions (Putri *et al.*, 2021; Kusnadi *et al.*, 2023).

While competency development programs have gained traction in many health institutions globally, their integration with performance management systems in Indonesian hospitals remains inconsistent and poorly institutionalized (Yuliani & Firmansyah, 2023). Competency in this context extends beyond technical know-how to include adaptive capacities such as communication, decision-making, and emotional intelligence elements essential for managing clinical uncertainty and interdisciplinary teamwork (Astuti & Widodo, 2022). Simultaneously, accumulated work experience is traditionally valued as a proxy for expertise and institutional familiarity, yet evidence suggests that experience alone may not guarantee high performance unless coupled with continuous competency growth (Rahmawati & Prasetyo, 2021).

Despite the recognition of both factors, current research in Indonesia has largely analyzed competency and experience in isolation, with few studies exploring how these two variables interact to influence employee performance. This fragmented approach has led to inconsistencies in HR policy formulation, such as recruitment that overemphasizes tenure without competency mapping, or training programs that overlook the contextual advantage of experienced staff (Sari & Nugroho, 2020; Hakim *et al.*, 2024). Furthermore, there is an ongoing debate in hospital HR practice: whether performance outcomes are better predicted by years of service or by demonstrated competencies, a question that becomes increasingly relevant in the era of outcome-based healthcare (Kusnadi *et al.*, 2023).

This study addresses this gap by systematically analyzing the combined effect of employee competency and work experience on performance in a hospital setting. It adopts an integrated approach that seeks to move beyond the conventional binary view of "experience versus skill" and instead examines how these dimensions interact and potentially reinforce each other. Unlike previous works that focus solely on nurses or administrative staff, this study includes a broader range of hospital roles to provide a more comprehensive perspective.

The novelty of this research lies in its attempt to provide empirical evidence to support integrated competency-experience performance models, which are still underdeveloped in the Indonesian hospital context. By identifying specific patterns of influence, this study seeks to inform more precise and effective HR strategies particularly in recruitment, training, and promotion.

The main aim of this study is to examine the relationship and interaction between employee competency and work experience on job performance in hospitals. The anticipated outcome is a set of actionable insights for hospital management to better align workforce development strategies with performance expectations, contributing to improved organizational effectiveness and service quality.

LITERATURE REVIEW

Competency and Employee Performance

In hospital settings, employee competency has been widely acknowledged as a crucial determinant of performance outcomes, influencing not only individual productivity but also the broader quality of healthcare delivery. Competency is broadly defined as a dynamic combination of knowledge, technical and non-technical skills, judgment, attitudes, and values that enable professionals to carry out their responsibilities effectively and ethically (Getha-Taylor *et al.*, 2015; WHO, 2020). In modern healthcare, these competencies are expected to evolve in response to changing clinical demands, technological innovations, and patient-centered care models.

Within clinical environments, competencies extend far beyond technical knowledge of procedures or diagnostics. They increasingly include soft skills such as emotional intelligence, cultural competence, digital literacy, and interprofessional collaboration (Astuti & Widodo, 2022; Frenk *et al.*, 2017). These competencies are particularly vital in settings characterized by complexity, uncertainty, and the need for rapid decision-making under pressure features inherent to hospital environments.

Empirical research in various global contexts has supported the significant role of competency in shaping employee performance. Kusnadi *et al.* (2023) found that hospitals with clearly structured competency development frameworks especially those integrated into continuing professional development (CPD) programs exhibited enhanced performance across both clinical and administrative functions. Such frameworks allowed hospitals to align employee capabilities with service delivery goals, particularly in the context of quality improvement initiatives.

Moreover, Putri *et al.* (2021) observed that in the administrative sector of Indonesian hospitals, competency mapping and role-specific competency matrices reduced miscommunication, improved patient data management, and increased accountability. These results are consistent with broader international studies indicating that competency-based systems can serve as performance enablers, especially when embedded in performance appraisal mechanisms, incentive schemes, and decision-making structures (Lucia & Lepsinger, 2015; OECD, 2019).

However, competency although fundamental cannot operate in a vacuum. Several studies have identified that the impact of competency on performance may be constrained by a lack of contextual experience or insufficient organizational support systems (Yuliani & Firmansyah, 2023; Park & Kim, 2018). In particular, junior staff with high theoretical competence may underperform in real-time clinical environments due to limited exposure, confidence, or task familiarity. This underscores the importance of integrating competency with experiential learning processes, mentorship, and scenario-based simulations to ensure practical readiness.

Furthermore, from a systems perspective, the effectiveness of competency development initiatives also depends on institutional factors such as leadership commitment, feedback culture, access to learning infrastructure, and digital transformation readiness. Hospitals lacking strategic HR planning or adequate investment in human capital may struggle to translate competency into performance gains (Aulakh *et al.*, 2019).

In light of these insights, the present study seeks to extend the current literature by not only reaffirming the direct effect of competency on performance but also by analyzing its interaction with work experience, a variable that may condition, moderate, or enhance the impact of competency on real-world outcomes. By doing so, this study contributes to a more nuanced understanding of employee performance in hospitals,

offering practical implications for evidence-based workforce planning, competency-based hiring, and continuous improvement strategies.

Work Experience and Performance Outcomes

Work experience, conventionally defined as the cumulative duration and depth of professional engagement within a specific occupational context, has long been recognized as a foundational element in shaping employee performance. Rooted firmly in human capital theory, work experience is understood as a dynamic process through which individuals accrue tacit knowledge, develop nuanced contextual understanding, and cultivate adaptive behavioral responses that collectively enhance workplace productivity (Becker, 1993; Lin & Lin, 2019). In high-stakes environments such as hospitals, these accumulated insights become exceptionally valuable, as healthcare professionals are consistently tasked with navigating complex workflows, responding to unpredictable patient conditions, and ensuring seamless interprofessional coordination, often under immense pressure.

Experienced healthcare professionals consistently tend to exhibit enhanced decision-making speed, greater procedural fluency, and superior emotional resilience, particularly evident in acute care settings. Rahmawati and Prasetyo (2021) specifically emphasize that work experience empowers hospital staff to more effectively anticipate risks, circumvent common operational pitfalls, and maintain composure during critical emergency situations. This aligns with the broader academic consensus that experience enriches clinical judgment, thereby contributing directly to safer and more efficient patient care outcomes. Empirical findings further solidify this established relationship. For example, Hakim *et al.* (2024) observed that hospital personnel possessing more than five years of tenure consistently demonstrated significantly greater consistency, responsiveness, and reliability in both clinical and administrative tasks. Similarly, a study by Ardiana *et al.* (2019) in public hospitals highlighted that seasoned employees frequently function as informal mentors to junior staff, thereby facilitating crucial institutional knowledge transfer and fostering greater social cohesion within teams.

However, it is crucial to acknowledge that the relationship between experience and performance is neither linear nor universally positive. A growing body of contemporary research has begun to critically question the traditional assumption that longer experience invariably equates to superior performance. For instance, Sari and Nugroho (2020) compellingly argue that performance plateaus are a common occurrence among long-tenured staff who do not actively engage in continuous professional development (CPD). These individuals may become overly reliant on established routines, exhibit resistance to innovation, or disengage from reflective learning practices, particularly problematic within rapidly evolving healthcare systems.

This concern becomes significantly amplified in the current era of digital transformation. Yuliani and Firmansyah (2023) caution that experienced employees, despite their operational competence, may struggle to effectively adapt to and utilize new technologies such as Electronic Medical Records (EMRs), sophisticated telemedicine platforms, and advanced AI-based diagnostic tools, especially when lacking adequate digital literacy training. In such scenarios, experience alone can prove insufficient or even become counterproductive if not complemented by an openness to change and proactive upskilling initiatives. Cross-cultural research further corroborates these findings. A comparative study conducted by Aulakh *et al.* (2019) across various Southeast Asian hospitals, for example, revealed that the impact of experience on performance was significantly moderated by the prevailing organizational learning culture and leadership style. In rigid or highly hierarchical systems, experienced staff were more inclined to

resist process improvements, whereas in adaptive and flexible organizational cultures, experience was strategically leveraged as a valuable asset for mentoring and fostering innovation.

Given this inherent duality, work experience should not be conceptualized as a static variable. Instead, it must be understood as a dynamic attribute that actively interacts with the broader organizational context, existing training systems, and individual personal motivation. Consequently, this study deliberately moves beyond viewing work experience as an isolated predictor of performance. Instead, it critically explores its interaction with competency, seeking to ascertain whether the presence of high competency significantly amplifies the positive impact of experience on performance outcomes, or conversely, whether robust competencies can effectively compensate in situations where an employee possesses limited prior experience.

Model and Hypothesis Development

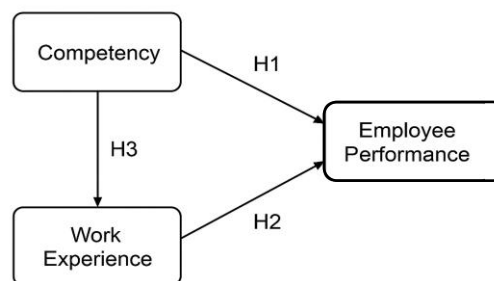


Figure 1. The Influence of Competency and Work Experience on Employee Performance
Source: (Getha-Taylor *et al.*, 2015; Astuti & Widodo, 2022; Kusnadi *et al.*, 2023; Rahmawati & Prasetyo, 2021; Yuliani & Firmansyah, 2023)

The conceptual framework presented in this study reflects an integrated view of how employee competency and work experience influence employee performance within hospital settings. Drawing from both empirical findings and theoretical foundations, particularly those outlined in the competency-performance literature, the model emphasizes that performance is not merely the result of isolated skills or tenure but emerges from the dynamic interplay between the two.

As discussed earlier, competency encompasses not only technical expertise but also behavioral and cognitive attributes such as clinical judgment, adaptability, and communication (Astuti & Widodo, 2022; Boyatzis, 2008; Noe *et al.*, 2017). These attributes are essential in hospital environments characterized by complexity, uncertainty, and the need for rapid, accurate decision-making. However, the actualization of these competencies in day-to-day practice is often conditioned by an employee's practical exposure and situational familiarity both of which are cultivated over time through work experience.

In this framework, competency is hypothesized to have a direct positive effect on employee performance (H1), as supported by studies showing that structured competency development programs lead to higher productivity and service quality (Kusnadi *et al.*, 2023; Putri *et al.*, 2021). Work experience is also posited to exert a positive effect on performance (H2), based on the premise that accumulated experience contributes to better

task efficiency, confidence, and institutional knowledge (Rahmawati & Prasetyo, 2021; Hakim *et al.*, 2024).

Critically, the model introduces an interaction between competency and work experience (H3), capturing the idea that competencies may not fully translate into performance outcomes unless reinforced by practical experience and conversely, that experience may not yield optimal results without being underpinned by updated, role-relevant competencies. This resonates with the argument that competency must be contextualized, and its effectiveness can be amplified or constrained depending on how deeply it is rooted in experiential learning (Yuliani & Firmansyah, 2023; Park & Kim, 2018).

RESEARCH METHOD

This study employed a library research method, also known as a literature review, as its primary methodological approach. This means the research focused on systematically collecting and critically analyzing information from a diverse range of existing written sources. These sources included foundational theoretical books, particularly those relevant to Human Resource Management (HRM), alongside a comprehensive collection of scientific journal articles.

To ensure a broad and relevant scope, all cited scientific articles were meticulously sourced from reputable academic databases such as Mendeley and Google Scholar. This rigorous selection process allowed for the inclusion of both highly regarded and more specialized publications, providing a nuanced understanding of the existing scholarly discourse.

Consistent with the definition provided by Snyder (2019), this literature review involved creating a structured summary of articles, books, and other pertinent documents. This process enabled the organization of past and present theories and information into relevant thematic categories, directly supporting the research objectives.

The nature of the data utilized in this study was exclusively secondary data, obtained solely through this library research. This method was chosen specifically for its efficacy in gathering information and sources directly pertinent to the research topic. Following the exhaustive data collection phase, a descriptive analysis method was applied to interpret the amassed findings. This analytical approach went beyond mere outlining of facts; it involved a thorough and in-depth examination, providing adequate understanding and comprehensive explanation of the relationships and insights derived from the synthesized literature.

RESEARCH RESULTS

Competency as a Determinant of Performance

Recent empirical research consistently supports the view that employee competency plays a decisive role in shaping hospital performance outcomes. Competency, which comprises the integration of technical proficiency, cognitive capability, behavioral attributes, and emotional intelligence, is increasingly regarded as a strategic asset within healthcare institutions (Astuti & Widodo, 2022; Kusnadi *et al.*, 2023). In modern hospital settings, especially those adapting to patient-centered and digital models of care, the presence of competent staff directly correlates with improvements in service delivery, patient safety, and operational efficiency.

Multiple studies have demonstrated that hospitals implementing structured competency development programs including role-specific training, digital upskilling,

and interprofessional simulations report measurable gains in employee productivity, communication accuracy, and clinical judgment. For instance, Kusnadi *et al.* (2023) found that competency-based training integrated into routine performance appraisals significantly improved coordination across clinical and administrative units in a multi-site hospital network. Similarly, Putri *et al.* (2021) observed that competency mapping in the administrative departments of Indonesian hospitals helped reduce procedural errors and enhance accountability mechanisms, especially in patient data management.

The implementation of continuous professional development (CPD) programs has also emerged as a key enabler in reinforcing and sustaining employee competencies. These programs often combine theoretical instruction with applied learning and feedback loops, enabling healthcare workers to update their skills in alignment with evolving technologies and standards of care (Suhartono & Yuniarti, 2021). Hospitals with embedded CPD frameworks tend to demonstrate stronger alignment between human resource capabilities and organizational performance targets, such as response time, documentation accuracy, and service consistency.

Beyond technical skills, competencies such as emotional regulation, cultural competence, and adaptive leadership have become essential in complex, multidisciplinary environments where clinicians must manage uncertainty and patient diversity (Efawati, 2020). Astuti and Widodo (2022) emphasized that competencies related to communication, empathy, and teamwork were especially crucial during the COVID-19 pandemic, when healthcare systems were under extreme operational and emotional stress. Moreover, Yuliani and Firmansyah (2023) argued that competency is most effective when treated as a dynamic attribute rather than a fixed qualification. Their study of two tertiary hospitals in Indonesia showed that employees who engaged in ongoing skill refinement exhibited higher performance and resilience, even in departments with high workloads and rapid technological change.

Importantly, recent research also highlights that competency-based human resource governance where hiring, promotion, and performance evaluation are explicitly tied to validated competency models produces stronger organizational alignment and enhances the effectiveness of leadership decisions (Hakim *et al.*, 2024). Such systems not only ensure that the right personnel occupy the right roles but also contribute to a culture of accountability, transparency, and continuous improvement.

In the context of digital transformation, competency in digital literacy, systems thinking, and health informatics has emerged as a critical requirement. Hospitals that fail to upskill their staff in these areas risk underutilizing technological investments and compromising the quality of patient care. Thus, competency is increasingly viewed as the operational foundation for innovation in healthcare delivery (Kemenkes RI, 2022).

Taken together, the evidence suggests that competency is not simply a contributing factor but a determinant of employee and institutional performance. It is also a predictive variable that enables proactive human resource planning in response to external shocks, such as pandemics or regulatory reforms. Therefore, competency development should be seen as a strategic investment that drives both clinical excellence and organizational sustainability.

Role of Work Experience in Enhancing Job Effectiveness

Work experience has long been regarded as a vital contributor to individual effectiveness and organizational stability in hospital environments. Defined as the accumulated exposure to professional responsibilities and clinical scenarios over time, work experience provides healthcare employees with the tacit knowledge, reflexive judgment, and psychological readiness necessary to navigate complex institutional demands (Lin &

Lin, 2019; Hakim *et al.*, 2024). In the context of healthcare service delivery, experience often translates into operational maturity, an ability to remain composed under pressure, prioritize effectively, and manage competing clinical demands with minimal error.

Recent studies have reinforced this view. Hakim *et al.* (2024) observed that hospital personnel with over five years of service exhibited significantly greater consistency in performance indicators, such as decision speed, protocol compliance, and task prioritization. These experienced professionals demonstrated fluency in both procedural and informal aspects of hospital operations qualities that enabled them to mentor junior colleagues, de-escalate high-stress situations, and contribute to team cohesion.

Moreover, research by Ramadhani and Taufik (2022) highlights that seasoned staff tend to outperform novices in coordinating multidisciplinary care and navigating interdepartmental workflows, particularly in emergency and critical care units. Their accumulated exposure to diverse medical cases and administrative challenges fosters a deeper understanding of the institutional culture, policies, and unstructured “workarounds” often necessary in high-volume care settings.

However, recent evidence also points to limitations in relying solely on tenure as a performance predictor. Sari and Nugroho (2020) found that the benefits of experience may plateau if not accompanied by continuous professional development (CPD) or digital literacy training. Their findings suggest that some long-serving employees become entrenched in legacy practices, showing reluctance to engage with new tools such as Electronic Medical Records (EMRs), AI-assisted diagnostics, or telemedicine platforms. This resistance is particularly pronounced in hospitals undergoing rapid technological transformation, where the pace of change may outstrip the learning adaptability of older staff.

In a similar vein, Yuliani and Firmansyah (2023) noted that experienced employees may display a cognitive bias toward familiarity, which leads them to resist procedural innovations or ignore early signs of clinical deterioration due to over-reliance on heuristic judgment. The study emphasized the importance of institutional mechanisms to renew experiential capital such as mandatory re-certification, rotational assignments, and exposure to innovation labs.

Importantly, the interaction between work experience and organizational learning culture has emerged as a key moderating factor. Aulakh *et al.* (2019), in a comparative study of Southeast Asian hospitals, demonstrated that in adaptive work environments, experienced staff actively contributed to quality improvement initiatives, whereas in rigid, hierarchical systems, they tended to resist change and were less likely to share knowledge with junior staff.

Thus, work experience should be understood not as a linear or uniformly positive influence on performance, but rather as a conditional factor that is highly dependent on institutional support structures, digital adaptability, and motivational orientation. Its effectiveness is maximized when coupled with structured learning interventions and when experienced professionals are empowered to act as knowledge bridges across generational and disciplinary boundaries.

In conclusion, while work experience remains an indispensable asset within hospital HR systems, its contribution to performance must be contextualized and complemented by ongoing skill renewal and institutional adaptability. Hospitals that recognize the dual nature of experience as both a resource and a potential constraint are better positioned to design HR strategies that unlock the full value of their tenured workforce.

Integration of Competency and Work Experience

The integration of employee competency and work experience represents a critical nexus in shaping performance outcomes in hospital environments. Numerous empirical and theoretical studies over the last decade have increasingly emphasized that these two human capital dimensions should not be treated in isolation, as their synergistic interaction often yields stronger, more consistent performance compared to either factor alone (Lucia & Lepsinger, 2015; Kusnadi *et al.*, 2023).

In high-stakes healthcare settings such as emergency rooms, intensive care units, or operating theatres, the convergence of updated competencies and practical experience leads to enhanced clinical decision-making, improved task execution, and greater situational adaptability. Astuti and Widodo (2022) found that employees with both high competence in communication and sufficient exposure to acute clinical scenarios showed markedly better responsiveness in managing patient deterioration, minimizing adverse events, and collaborating effectively under time pressure.

Conversely, a misalignment between competency and experience can limit performance potential. Junior staff who have recently completed formal education may possess strong theoretical knowledge and digital fluency but often struggle with real-time judgment and task prioritization due to limited field exposure. On the other hand, senior staff with extensive institutional memory may be deeply familiar with hospital systems but may underperform if their competencies particularly in emerging areas like health informatics, AI-based diagnostics, or culturally sensitive communication are outdated (Yuliani & Firmansyah, 2023; Sari & Nugroho, 2020).

Aulakh *et al.* (2019) conducted a multi-country analysis of hospital workforces and concluded that high-performing institutions actively manage the competency–experience interface by offering tailored development programs that consider years of service, functional role, and projected organizational needs. These programs often involve reverse mentoring (where younger, tech-savvy employees guide senior staff in digital literacy), rotational assignments, and multi-generational team structures to promote mutual learning and performance symmetry.

Moreover, hospitals that explicitly design HR strategies integrating both competency and experience tend to demonstrate greater organizational agility. Hakim *et al.* (2024) documented that healthcare institutions with competency-experience integration in their recruitment, training, and performance appraisal systems were more effective in managing workforce transitions, including succession planning and digital upskilling.

This integration also aligns with the competency-based approach promoted by global health authorities such as the World Health Organization (WHO, 2020), which advocates for performance-based career progression models that account for both demonstrated skills and contextual experience. The WHO's "Working for Health" strategy underscores the importance of experiential learning combined with structured competency evaluation in building resilient health systems.

The COVID-19 pandemic has further illuminated the importance of competency-experience synergy. Ramadhani and Taufik (2022) noted that healthcare personnel who demonstrated both clinical competence and prior exposure to disaster response protocols adapted more quickly to pandemic workflows, exhibited less psychological distress, and contributed to faster institutional learning curves.

Ultimately, hospitals that seek sustainable workforce performance must abandon binary HR models that prioritize either tenure or technical ability. Instead, they should adopt dynamic talent development frameworks that reinforce experiential learning among competent staff, and ensure experienced personnel continuously renew their skills in line

with evolving service standards. By doing so, healthcare institutions can not only enhance individual job effectiveness but also strengthen organizational readiness, safety culture, and service quality.

DISCUSSION

This study set out to investigate how the combination of employee competency and work experience influences job performance in hospital settings. The results of the literature-based analysis strongly support the hypothesis that both variables play significant and interdependent roles in determining employee effectiveness. The integration of updated competencies both technical and behavioral with relevant experience enables hospital personnel to perform optimally in complex, high-pressure environments.

First, competency emerges as a robust predictor of employee performance across various hospital departments. Competent employees demonstrate improved task execution, enhanced communication, and stronger problem-solving abilities, particularly when competencies are aligned with job-specific demands and continuously reinforced through professional development programs (Kusnadi *et al.*, 2023; Astuti & Widodo, 2022). This finding affirms the general proposition in human resource theory that skill-based alignment between individual capabilities and organizational needs yields measurable performance benefits.

Second, work experience also contributes positively to performance but in a more nuanced manner. Experienced personnel bring depth of understanding, familiarity with procedures, and informal leadership skills that help maintain consistency and efficiency in service delivery (Hakim *et al.*, 2024). However, the discussion reveals that experience alone may not suffice in dynamic healthcare systems especially those undergoing digital or procedural transformations. Several studies highlight that without proactive upskilling or re-certification, long-serving employees may become resistant to change or stagnant in performance (Yuliani & Firmansyah, 2023; Sari & Nugroho, 2020). This nuance addresses the first research question regarding whether tenure or competency has greater influence suggesting that neither should be viewed in isolation.

The most significant insight arises from the interaction between competency and experience. The findings clearly demonstrate that the highest levels of performance are achieved when both variables are present and strategically integrated. Employees who possess strong technical and soft skills and sufficient real-world exposure show greater adaptability, critical thinking, and teamwork attributes essential in hospitals where time-sensitive decisions and cross-functional collaboration are routine (Ramadhani & Taufik, 2022). This synergy confirms the third hypothesis and reflects the emerging consensus in workforce development literature that performance optimization requires a multidimensional approach.

Nevertheless, the discussion also acknowledges areas of uncertainty. Some studies report mixed results regarding the role of experience, especially in rigid or hierarchical organizational cultures that fail to incentivize continuous learning (Aulakh *et al.*, 2019). In such settings, even highly experienced professionals may underperform if institutional barriers limit their participation in innovation or intergenerational collaboration. This ambiguity underscores the importance of organizational context and learning climate as mediating factors in translating experience into performance outcomes.

Overall, the discussion highlights that an integrated human resource strategy, one that maps competency development along career stages and proactively reskills experienced staff, offers the greatest potential for sustaining high-quality hospital

performance. Hospitals that succeed in this regard tend to embed competency models into performance appraisals, training designs, and succession planning systems, ensuring that institutional knowledge and contemporary skillsets are harmonized.

CONCLUSION

This study commenced with the objective of investigating the combined influence of employee competency and work experience on job performance within hospital settings. Leveraging a library research method, the analysis systematically synthesized existing scholarly literature, revealing robust evidence that both variables are not merely significant but also interdependent determinants of employee effectiveness. The findings strongly support the central premise that the strategic integration of updated competencies—encompassing both technical proficiency and crucial behavioral attributes—with relevant practical experience empowers hospital personnel to achieve optimal performance in complex, high-pressure clinical and administrative environments. This holistic perspective moves beyond fragmented analyses, offering a more nuanced understanding of performance drivers in healthcare.

Firstly, the analysis consistently identifies competency as a potent and direct predictor of employee performance across diverse hospital departments. Competent employees, characterized by their alignment with job-specific demands and continuous reinforcement through professional development initiatives, demonstrably exhibit superior task execution, enhanced communication capabilities, and more effective problem-solving abilities (Kusnadi *et al.*, 2023; Astuti & Widodo, 2022). This outcome aligns with established human resource theories positing that a precise skill-based alignment between individual capabilities and organizational requirements yields tangible performance benefits and improves service quality outcomes, particularly vital in patient-centered healthcare.

Secondly, the contribution of work experience to performance, while undeniably positive, manifests in a more intricate manner. Experienced personnel bring invaluable depth of understanding, procedural familiarity, and often assume informal leadership roles, thereby fostering consistency and efficiency in service delivery (Hakim *et al.*, 2024). However, a critical nuance emerged from the literature: reliance on experience alone may prove insufficient within dynamic healthcare systems, especially those undergoing rapid digital or procedural transformations. Several sources highlight that without proactive upskilling, re-certification, or engagement in continuous learning, long-serving employees may exhibit resistance to change or experience performance stagnation (Yuliani & Firmansyah, 2023; Sari & Nugroho, 2020). This finding directly addresses a key research inquiry, indicating that neither tenure nor competency holds singular, absolute influence; instead, their interplay is paramount.

The most profound insight derived from this study concerns the interaction between competency and work experience. The synthesized evidence unequivocally demonstrates that the pinnacle of performance is attained when these two variables are simultaneously present and strategically integrated. Employees possessing robust technical and soft skills, coupled with substantial real-world exposure, exhibit markedly superior adaptability, critical thinking, and collaborative teamwork—attributes indispensable in hospitals where time-sensitive decisions and cross-functional collaboration are routine (Ramadhani & Taufik, 2022). This synergy validates the third hypothesis, underscoring the emerging consensus in workforce development literature that true performance optimization necessitates a multidimensional and integrated approach, moving beyond simplistic 'skill-versus-tenure' debates.

Nevertheless, the discussion also acknowledges certain contextual complexities. Some studies present mixed results regarding the consistent positive impact of experience, particularly when embedded within rigid or hierarchical organizational cultures that fail to incentivize continuous learning or knowledge sharing (Aulakh *et al.*, 2019). In such environments, even highly experienced professionals may underperform if institutional barriers impede their participation in innovation or intergenerational collaboration. This observed ambiguity underscores the significant mediating role of the organizational context and a supportive learning climate in translating accumulated experience into tangible performance outcomes.

In essence, the overarching discussion underscores that an integrated human resource strategy—one that systematically maps competency development across various career stages and proactively facilitates the reskilling of experienced staff—offers the greatest potential for sustaining and elevating high-quality hospital performance. Hospitals that successfully implement this integrated approach typically embed competency models directly into their performance appraisal systems, training designs, and succession planning frameworks. This strategic harmonization ensures that invaluable institutional knowledge is preserved and leveraged, while contemporary skillsets are continually acquired and applied, ultimately contributing to a resilient and highly effective healthcare workforce.

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