

# The Relationship of Organizational Culture and Patient Safety Culture on Service Development in The Hospital Dr. Ario Wirawan Salatiga

Sri Hariyanti<sup>1</sup>, Anton Agus Setyawan<sup>1</sup>, Iwan Setiawan Adji<sup>1</sup>, Jati Waskito<sup>1</sup>

<sup>1</sup> Postgraduate School, Muhammadiyah University of Surakarta, Surakarta, Indonesia

\*Corresponding Author: [p100190025@student.ums.ac.id](mailto:p100190025@student.ums.ac.id)

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**Abstract:** *The primary objective of his research is to examine the relationship between the organizational culture and patient safety culture at the Dr. Ario Wirawan Pulmonary Hospital in Salatiga, specifically in the context of service development. The study comprised 99 participants who were admitted to Lung Hospital by Dr. Ario Wirawan Salatiga. Data collection was conducted through the use of a questionnaire. Utilizing a non-probability sampling method for the sampling procedure. The data analysis technique included multiple linear regression analyses. The study's findings indicate that organizational culture has a pivotal role in stimulating service growth, exerting a distinct and substantial influence. The study's findings clearly indicate that the most prominent part of patient safety culture in hospitals is "teamwork in units." Conversely, the aspects that need enhancement include "staffing" and "handoff and transition." (2) A robust safety culture has a substantial and beneficial impact on the advancement of services.*

**Keywords:** Organizational Culture, Work Safety Culture, Service Development

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## 1. Introduction

Ensuring patient safety is an essential aspect of providing top-notch care services, necessitating unwavering dedication from the healthcare team. The convergence of various factors within a hospital setting can create a potentially hazardous environment. In order to grasp the potential dangers associated with intricate health care procedures, it is imperative to have access to data regarding instances of misconduct and near-fatalities. This information can assist healthcare providers in addressing current deficiencies and lowering morbidity and mortality rates to the desired standard of care. (Farley et al., 2015)

There has been a strong emphasis on patient safety since the late 1990s. Mistakes are a common occurrence in the field of health care, impacting approximately 10% of all hospital admissions. Some of these errors could have severe consequences, potentially even leading to the loss of life. Based on previous research, it has been found that a significant number of illnesses in hospitals can be attributed to avoidable medical errors (Havens & Boroughs, 2000). After the release of multiple reports, there has been a growing global focus on enhancing patient safety, leading to a significant shift in how patient safety is perceived. However, the global health situation continues to be a cause for concern. Research on the factors contributing to

medical errors and unforeseen incidents indicates that inadequate patient care has a substantial impact on the quality of healthcare (Farley et al., 2015)

An important factor that may affect the level of error and the quality of patient care results is the health care provider's security attitude or the hospital's safety culture (Halligan & Zecevic, 2016). In a study by (Almutairi et al., 2013), An investigation was conducted to explore the perceptions of 319 nurses regarding the safety culture at the main Saudi hospitals. Based on these findings, it appears that approximately 50% of nurses tend to view a culture of safety as insecure, particularly among those with a western background. Two studies on nurse perception also yielded negative results. One of the 649 nurses employed in hospitals under the Saudi Ministry of Health (MOH)(Algahtani, 2015) and the second is among nursing workers working in six intensive care units (ICUs) of Saudi hospitals (Alayed et al., 2014). In another study that was conducted by (Alzahrani, 2015), Doctors and nurses from three Saudi Armed Forces hospitals engaged in discussions regarding their safety attitudes in various clinical fields. These findings reveal a concerning trend among nurses and doctors, with less than half demonstrating a favorable attitude towards patient safety, particularly in the areas of stress recognition and management perception. In addition, there tends to be a lower level of positive attitudes towards patients' safety among nursing staff and physicians who work in emergency units.

The lack of a robust and reliable healthcare system is a formidable obstacle for healthcare professionals across several domains, encompassing both present and accessible care. The citation is from (Jones et al., 2008). In order to address this issue, it is imperative to shift the perception of healthcare culture, which currently attributes errors to individual shortcomings, towards one that considers mistakes as a chance to enhance the overall system (Ingram, 1971). The fundamental basis of a secure and knowledgeable culture is a voluntary reporting system that prioritizes the acquisition of knowledge from mistakes and the enhancement of care systems (Jones et al., 2008).

Each health organization possesses a distinct culture that shapes the attitudes and actions of its members. The proficiency and principles of personnel and healthcare administrators are crucial factors in the effectiveness and triumph of the business(Lunenburg, 2011). This study examines a type B hospital in Jakarta, Indonesia that maintains high-quality medical services by implementing effective corporate and clinical governance. The patient safety culture in this hospital seems to have evolved, as evidenced by the frequency of patient safety incidents reported to the institution's patient safety team. According to (Irviranty et al., 2014), the hospital experienced a total of 22 patient security events in 2012, out of which 19 were classified as unexpected.

The healthcare system's culture and principles inherently prioritize organizational sustainability, making it the most essential part of the organization. The significance of organizational culture in the transformation and modernization of public administration and the delivery of care services is generally acknowledged (Jung et al., 2016).

Assessing the culture of patient safety is a crucial measure for enhancing patient safety inside healthcare institutions. Furthermore, patient safety serves as a mechanism to examine the organizational factors that may contribute to adverse occurrences and harm to patients (Nieva & Sorra, 2003).

The research is aimed at building a culture of patient safety and identifying the cultural profile of an organisation at Paru Hospital, Dr. Ario Wirawan Salatiga, Indonesia, in order to know the steps of service development.

## 2. Research Methods

### 2.1 Library Review

(Iriviranty et al., 2014) An individual conducted an assessment of patient safety culture and organizational culture in order to improve patient security in a hospital situated in Jakarta, Indonesia. The study was conducted in 2014 in a hospital in Jakarta, Indonesia, using a cross-sectional qualitative-descriptive approach. The study population comprised a heterogeneous group of experts from several healthcare domains, with a total of 152 participants. Data was collected using the Hospital Survey on Patient Safety Culture, a measure developed by the Agency for Healthcare Research and Quality (AHRQ), in addition to the Organizational Culture Assessment Instrument (OCAI). According to the results of this survey, healthcare providers generally show a positive outlook towards the development of a patient safety culture in hospitals. Thus, the action plan is formed through cooperative decision-making and is considered successful in incorporating patient safety within the hospital's vision and goal.

(Heningnurani & Ayuningtyas, 2019) Conducted research entitled "Development of Patient Safety Culture in Jambi Public Hospital." This study utilizes quantitative research techniques, namely cross-sectional research methodologies, followed by qualitative approaches to collect descriptive data. The research was conducted at Jambi General Hospital in Indonesia, encompassing a total of 128 participants. Data was collected through surveys employing the HSOPSC and OCAI questionnaires. A focus group discussion was conducted to ascertain the constraints and expectations associated with the implementation of a patient safety culture. Patient safety culture outcomes are classified as medium culture, which is regarded as the least robust feature of reporting. Management commitment and employee empowerment, in addition to system improvement, are crucial for fostering a patient safety culture. Further investigation is necessary to examine many aspects in order to foster a culture of reporting. The paper is titled "The Implementation of Patient Safety Culture in Nursing Practice."

(Gunawan & Tutik Sri Hariyati, 2019) The authors examine the actual implementation of patient safety culture in the field of nursing. We did a comprehensive analysis of peer-reviewed articles published from 2009 to 2018. The articles were sourced from four credible online databases: Emerald Insight, EBSCO, ScienceDirect, and Wiley Online. We want to investigate the correlation between patient safety culture, nurses, and hospitals. For article selection, we utilize the PRISMA Groove Model, which involves a three-step method. This entails conducting a comprehensive examination of the title, abstract, and content of the piece. The selected papers underwent a comprehensive analysis based on the 12 aspects of a patient safety culture, as specified by the Agency for Healthcare Research and Quality (AHRQ).

### 2.2 Theoretical tracks

#### Patient safety culture

The Institute of Medicine (Ingram, 1971) defines patient safety as freedom from accidental injury. As stated in the Department of Health RI (Kemenkes RI, 2022) Ensuring patient safety involves proactively preventing and mitigating unforeseen incidents or addressing harm resulting from healthcare procedures. Hospital patient safety refers to the implementation of measures inside hospitals to enhance the security of patient care and minimize the occurrence of injuries resulting from errors or omissions in the delivery of appropriate medical

interventions. The system encompasses the evaluation, recognition, and control of hazards associated with patients, as well as the documentation and investigation of incidents and the implementation of strategies to mitigate risks.

### Patient safety culture

According to the Agency for Healthcare Research and Quality (Jones et al., 2008), the patient safety culture of an organisation is the product of individuals and groups that represent values of attitudes, perceptions, competences, and behaviours that generate the commitment and patterns of health management to patient safety. Hospitals, as healthcare organisations, strive to enhance the growth of a culture of patient safety. (Gunawan & Tutik Sri Hariyati, 2019) says that a culture of patient safety is mandatory, and all staff are responsible for the safety of themselves, patients, and visitors. The focus of the new culture of security is the constant learning of the mistakes that have taken place.

### Organisational Culture

According to (Jung et al., 2016), organisational culture is a system of common meanings that members observe that distinguishes an organisation from others. This common meaning system is a set of key characteristics that are highly regarded by the organization. Organisational culture is about how an employee understands the cultural characteristics of an organisation and is not about whether the employee prefers those characteristics or not. Organisational culture is a descriptive attitude, not job satisfaction, which is more evaluative.

## 3. Facts and interpretations

The data processing procedures employed in this study utilize SPSS 20 for Windows software. The purpose of the validity test is to assess the suitability of a questionnaire as a research tool. A scale is considered legitimate when it accurately measures the intended variables (Sugiyono, 2016). Rehabilitation is conducted to assess the reliability of the questionnaire in evaluating consistent symptoms. A measuring instrument is considered to have high rehabilitation or reliability when it exhibits stability, dependability, and predictability. The amount of reliability can be quantified using an alpha scale ranging from 0 to 1 (Sugiyono, 2016). The integration of alpha stability measurement is possible when the scale is divided into five classes with equal intervals.

**Table 1: Reliability Test Results**

Variable	Cronbach Alpha	Information
<i>Work Safety Culture</i>	0.933	<i>Reliable</i>
Organizational culture	0.908	<i>Reliable</i>
Service Development	0.844	<i>Reliable</i>

Source: Reliability Test Results, 2022

Based on the provided table, it is evident that the Cronbach Alpha values for the variables of work safety culture, organizational culture, and service development exceeded the specified threshold of 0.600. This indicates that all variables demonstrate a high level of reliability.

**Table 2: Normality Test Results**

Variable	Kolmogorov–Smirnov	<i>p-value</i>	Information
<i>Unstandardized Residuals</i>	0.559	0.914	Normal data distribution

Source: Processed Primary Data, 2022

According to the SPSS output, the normality test yielded a result of 0.914. Since this value is greater than 0.05, it indicates that the data utilized follows a normal distribution.

**Table 3: Multicollinearity Test Results**

Independent Variable	Equation 1		Information
	Tolerance	VIF	
Organizational Culture (X1)	0.808	1,238	Multicollinearity Free
Work Safety Culture (X2)	0.808	1,238	Multicollinearity Free

Source: Data analysis results, 2022

The results of the multicollinearity test indicate that the independent variables have VIF values below 10 and tolerance values below 1. Therefore, the major independent variable does not exhibit multicollinearity.

**Table 4: Heteroskedasticity Test Results**

Variable Model	Equation 1		Conclusion
	tcount	Sign	
Organizational Culture (X1)	-2,872	0.055	Heterskedasticity Free
Work Safety Culture (X2)	1,118	0.266	Heterskedasticity Free

Source: Data analysis results, 2022

The heteroscedasticity test results indicate that the variables, organizational culture (X1) and work safety culture (X2), have a p-value greater than 0.05. This suggests that the investigated variables do not exhibit heteroscedasticity.

**Table 5: Multiple Linear Regression Test Results**

Variable	$\beta$	Std. Error	t count	Sign.
Constant	-0.016	2,543	-0.006	0.995
Organizational Culture (X1)	0.540	0.085	6,355	0,000
Work Safety Culture (X2)	0.095	0.017	5,531	0,000
R 0.753		F count 63,023		
R Square 0.568		Probability F 0.000		
Adjusted R <sup>2</sup> 0.559				

Source: Regression test results, 2022

The linear regression equation can be formulated as follows, based on the findings of the analysis:

$$Y = -0.016 + 0.540 X1 + 0.095 X2 + e$$

Given the double linear regression equation provided, it can be approached in the following manner:

- The constant is -0.016, showing that in the absence of both organizational culture and occupational safety culture variables, the value of service development remains constant.
- The positive regression coefficient X1 indicates a direct relationship between organizational culture and service development, meaning that as the organizational culture increases, so does the level of service development.
- The positive regression coefficient X2 indicates a direct relationship between the level of employment safety culture provided by the organization and the level of service development. In other words, as the employment safety culture increases, so does service development.



## Model Accuracy Test

### i. Determination Coefficient Test

The coefficient of determination quantifies the extent to which an independent variable can account for the variation in a dependent variable. When the value of  $R^2$  approaches 1, the independent variables possess nearly all the necessary information to accurately forecast a dependent variable. The analysis in Table 5 yielded a determination coefficient ( $R^2$ ) value of 0.568. The service development variable may be attributed to the organizational culture variable and the occupational safety culture, with an explanatory power of 56.8%.

### ii. F-test

The F test determines if all independent variables included in the model have a collective impact on the dependent variables. This can be demonstrated by the calculation of a F value of 63.023, which has a probability value of 0.000. The counting probability F value is significantly less than 0.05, indicating that the regression model is suitable for predicting service development. In other words, the factors of organizational culture and occupational safety may effectively account for the variation observed in service development.

## Hypothesis Test

To test the clarity of the regression model for each variable, it can be partially obtained using the t test. The regression test uses a two-way test using a 95% confidence rate, which means that  $\alpha = 5\%$ . The calculation of the t-table size is 1,984.

The following will describe the partial testing of each variable, among others:

- a) Testing for organizational cultural variables. Based on the test results obtained with a probability value  $t$  greater than 0,000 ( $0,000 < 0,05$ ),  $H_0$  is rejected at the level of significance of 0,05. That means that the variable organizational culture has a significant influence on service development.
- b) Testing against variables of occupational safety culture. Based on the test results obtained with a probability value  $t$  greater than 0.05 ( $0,000 < 0.05$ ),  $H_0$  is rejected at the level of significance of 0.05. That means that the variable culture of occupational safety has a significantly positive influence on the development of services.

## Discourse

Test results have shown that the variable organizational culture and the culture of occupational safety have an influence on the development of services. Here's the test description seen in the t-test.

- i. The influence of organizational culture on the development of services. The thitung value (6,355) for the organizational culture variable is higher than the table value (1,984), as indicated by a significance value of  $0.000 < \alpha = 0.05$ . Therefore,  $H_1$  is statistically supported, suggesting that organizational culture has a significant impact on the development of services. The findings of this study corroborate the research conducted by (Irviranty et al., 2014), which demonstrated that healthcare providers generally have favorable views regarding the patient safety culture and organizational culture within hospitals. Therefore, the action plan is formed using a process of reaching agreement and is deemed successful in clearly expressing the importance of patient safety in the hospital's vision and goal.

The advancement of service is evident not just in the acquisition of proficient technical abilities but also in the aptitude to effectively control and direct oneself, as well as in fostering interpersonal connections. An organization can be likened to a living organism,

whose ability to survive is mostly dependent on its capacity to adapt to its surroundings. The dynamic and multifaceted nature of the strategic environment necessitates those businesses possess the ability to effectively respond and adjust to quick changes across numerous dimensions, including technology, social, economic, legislative, and globalization. If organizations fail to adapt in a timely manner, there is a high probability that they may withdraw or face extinction.

As to the findings of (Abani et al., 2022) organizational culture refers to a set of commonly held values, beliefs, and practices within a company that, in conjunction with its formal structure, establish standards of conduct. Organizational culture encompasses the principles and rules that govern the actions of individuals within an organization and shape the overall trajectory of the organization. Culture as output is a portrait or partner of a cultural process that takes place within an organization or company at a given time.

In organizations that have a strong culture, employees tend to follow a given direction. A weak organizational culture tends to result in employees not having a clear direction, so they choose to go on their own. As a result, service development has become unoptimal. A strong culture can help the development of services in compliance with corporate regulations. Behavior and shared values make one feel comfortable at work.

ii. The impact of a culture of occupational safety on the development of services

The variable of occupational safety culture has a higher thitung value (5.531) compared to the table value (1.984), as evident from the significance value of  $0.001 < \alpha = 0.05$ . Therefore, H2 is statistically valid, indicating that the occupational security culture significantly influences the development of the service. The findings of this study corroborate the research conducted by (Irviranty et al., 2014), which demonstrated that healthcare providers generally hold a favorable view of the patient safety culture and organizational culture within hospitals. Therefore, the action plan is formed using a process of reaching agreement and is deemed successful in clearly expressing the importance of patient safety in the hospital's vision and goal.

(Heningnurani & Ayuningtyas, 2019) A Focus Group Discussion study was done to explore the limitations and anticipated requirements in implementing a culture that prioritizes patient safety. The results of patient safety culture correspond to the medium-cultural category, which is the least strong cultural factor of reporting. Developing a culture of patient safety requires management commitment, personnel empowerment, and system development. Additional research is required to examine multiple aspects in order to cultivate a reporting culture. The hospital's measurements can be observed as follows:

**Table 6: Positive Responses**

Overall Safety Perception	96%
Teamwork in Units	97%
Teamwork throughout the Unit	86%
Supervisor Expectations and Actions	85%
Organizational Learning	85%
Feedback and Communication About Errors	84%
Management support for patient safety	80%
Openness of Communication	73%
Frequency of Events reported	64%
Non Punitive Response to Error	63%
Handoffs and Transitions	53%
Staff	44%

According to the results of this study, the team-in-unit dimension has the highest rate of reaction, while the staffing dimension has the lowest level of response. The study conducted in Makassar, Indonesia revealed that the component of "teamwork in units" obtained the greatest scores for patient safety culture (95%), whereas the dimension of "non-punishment response to mistakes" received lower scores (51%). Similarly, research conducted at 42 hospitals in Taiwan (12) found that the aspect of "teambuilding in unities" had the greatest scores (94%), whereas the aspect of "staffing" earned the lowest marks (39%).

Upon thorough examination of the data, it is clear that the most prominent cultural aspects of patient safety are "collaborative teamwork within a unit," "support from management for patient safety," and "ongoing enhancement of organizational learning." However, this categorization may not be universally relevant to all professions. For example, specific cultural dimensions that are regarded as advantageous and moderate may be seen as insufficient cultural classifications, depending on the area of specialization. Therefore, in order to apply this cultural classification to other occupations, further clarification is required.

#### 4. Conclusion

Based on the results of research and data analysis, some conclusions are drawn as follows:

- i. Organizational culture has a positive and significant influence on service development. According to the results of this study, the strongest cultural dimension of patient safety in hospitals is "teamwork in units," while the weakest dimensions are "staffing" and "handoff and transition"
- ii. The culture of security has a positive and significant influence on the development of services.
- iii. The value of the determination coefficient (R<sup>2</sup>) is 0.440. It shows that the consumer interest variable can be explained by the word-of-mouth variable, and the quality of service is 44%.

#### Acknowledgement

Based on the summary above, some research suggestions are presented as follows:

- i. Generally speaking, the patient safety culture in this hospital is at a moderate level. Announcement culture issues become the weakest culture. Management commitment to



patient safety programs is necessary to develop a culture of patient safety through integration, empowerment of staff, and human resource development through patient safety training, the implementation of standard controlled and measured procedures, and the improvement of reporting systems. Further research is expected to investigate various factors to develop a reporting culture.

- ii. There are limitations, so the scope of research is getting smaller. For future research, it is expected to study more deeply about the variables that will be used and performed in other cities to find out if they are consistent or not so that they can be corrected. that a new dimension of transparency (openness) with patients and their families about medical incidents is added to the AHRQ instrument.

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