

Determinants of Employee Competence and Organizational Commitment on Turnover Intention

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Abstract: Sustaining organizational performance in B2B healthcare service companies requires competent and committed sales employees to minimize turnover intention. This study examines the effects of Transformational Leadership, Employee Empowerment, Employee Competence, and Organizational Commitment on Turnover Intention, while investigating the moderating role of Organizational Learning Culture. A quantitative survey was conducted involving 200 sales employees from B2B healthcare service companies, and the proposed model was analyzed using Partial Least Squares Structural Equation Modeling (PLS-SEM). The findings indicate that Transformational Leadership positively and significantly influences Employee Empowerment, while Employee Empowerment significantly enhances both Employee Competence and Organizational Commitment. Organizational Commitment, in turn, has a significant negative effect on Turnover Intention. However, Transformational Leadership does not significantly affect Employee Competence, and Employee Competence does not significantly influence Organizational Commitment. In addition, Organizational Learning Culture does not significantly moderate the relationships between Employee Empowerment and either Employee Competence or Organizational Commitment. These findings emphasize that strengthening employee empowerment and organizational commitment is more effective in reducing turnover intention than relying solely on leadership or organizational learning culture.

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INTRODUCTION

Considering that it is a depiction of employees' intentions to quit the organization, turnover intention is an issue that warrants a great deal of attention. According to Holtom et al. (2008) and Zhang (2023), this is because it has the potential to result in workforce instability, reduced productivity, greater expenditures connected with recruiting, and interrupted relationships with consumers. Additionally, it has the potential to result in a disruption of services provided to customers. This challenge is especially relevant for business-to-business (B2B) healthcare sales staff, whose responsibilities need them to have product knowledge, consultative selling, and long-term connections with institutional clients (Dhakal et al., 2024; Prastikawati & Herachwati, 2023; Rentz et al., 2002). In addition, this problem applies to sales workers who work in the healthcare industry. The sales professionals working for B2B companies have a particularly significant challenge. According to Kim and Kim (2021), Prastikawati and Herachwati (2023), Zhang (2023), and Zhu et al. (2022), organizational commitment is commonly believed to be a key factor in lowering the desire to quit a firm. This theory is supported by the findings of a number of researchers. The explanation for this is that employees who have stronger emotional links to their work and a larger feeling of loyalty to their employers are less inclined to contemplate quitting their current position. This occurs because these employees feel more connected to their jobs. Several factors, such as the support that a person

receives from their organization, the connections that they have at work, and the opportunities that they have for professional growth, may have an impact on the amount of commitment that an individual has (Lo et al., 2024; Nam et al., 2022; Nguyen et al., 2025).

Each of these factors can have an impact on the individual's level of commitment. In addition, it is anticipated that employee empowerment would increase both organizational commitment and employee competence by fostering autonomy, engagement, and learning thru experience (Spreitzer, 1995; Djunaedi et al., 2024; Kim et al., 2012; Kyei-Frimpong et al., 2024). This is achieved via the encouragement of learning thru experience, engagement, and autonomy. This is due to the fact that employee empowerment encourages employees to take responsibility for their own personal growth and development via their employment. Due to the fact that it will foster learning via experience, this is something that is anticipated to take place as a result of the fact that it will support learning. Furthermore, empowerment improves competence by providing chances for decision-making and problem-solving (Potnuru et al., 2019; Van et al., 2025). Such possibilities are provided by empowerment. The empowerment of individuals creates chances like this. Both Baidun et al. (2024) and Gienardy et al. (2024) have shown that an increase in technical skill alone is not necessarily connected with an increase in organizational commitment. This is something that has been demonstrated before. This is because highly competent employees often have greater options for career advancement outside of the company, unless they are supported by proper incentives and career development opportunities. This is the reason why this is the case.

It is thought that transformational leadership will result in an increase in the level of employee empowerment and competency for the organization. This will be accomplished via the use of vision, inspiration, individual concern, and intellectual stimulation. The research conducted by Afsar and Masood (2019), Akdere and Egan (2020), Alwaely et al. (2024), Jong and Faerman (2020), Kark et al. (2003), and Zhang et al. (2021) are only a few examples of the studies that have shown a correlation between transformational leadership and a wide range of favorable outcomes. In addition to performance and employee empowerment, these objectives include creative thinking, learning, the ability to adapt, and performance. However, other criteria that may effect employee competence include technical training, product knowledge, field experience, and contacts with clients, especially in the context of business-to-business (B2B) healthcare sales (Rentz et al., 2002). These qualities must be taken into consideration when evaluating employee competence. These components are of utmost significance when it comes to working with clients or consumers. The moderating effect of organizational learning culture has been found to vary from one piece of research to another (Azeem et al., 2021; Joo & Shim, 2010; Potnuru et al., 2019; Watkins & O'Neil, 2013; Djunaedi et al., 2024). This has been shown by a number of studies. On the other side, a culture of learning within an organization has the ability to foster learning, the exchange of knowledge, creativity, competence, and devotion among its members.

There are also three areas of concern that are highlighted in the present research. To get things started, previous study has focused on environments such as hotels, the public sector, hospitals, and frontline employees. Consequently, there has not been a thorough investigation of the B2B healthcare sales team. Second, the bulk of studies have examined the connections between transformational leadership, employee empowerment, competence, commitment, and turnover intention in isolation rather than within the context of an integrated framework. This is a significant limitation of the study. Third, the findings on the moderating impact of organizational learning culture, as well as the

effects of transformational leadership on employee competence and employee competence on organizational commitment, call for more study in the context of business-to-business (B2B) healthcare sales. Several of these conclusions are in direct opposition to one another.

In order to fill these voids, the objective of this study is to investigate the effects of transformational leadership, employee empowerment, employee competence, and organizational commitment on the desire to leave a company. In addition, the research explores the role that corporate learning culture plays as a moderator in the relationship between the two variables. It is anticipated that the study will make a contribution in two different ways: first, theoretically, by developing an integrated research model; and second, practically, by providing insights for B2B healthcare service companies to strengthen employee empowerment, competence, organizational commitment, and strategies for reducing sales force turnover intention. Both of these contributions are expected to be made.

RESEARCH METHOD

This study employed a quantitative approach with a causal research design to examine the relationships among transformational leadership, employee empowerment, employee competence, organizational commitment, turnover intention, and the moderating role of organizational learning culture. Primary data were collected through an online survey using a structured questionnaire distributed via Google Forms and measured using a five-point Likert scale ranging from 1 (strongly disagree) to 5 (strongly agree). The instrument consisted of 32 items measuring six constructs adapted from established studies: employee empowerment (Spreitzer, 1995), transformational leadership (Fenn, 2011), organizational learning culture (Watkins & O'Neil, 2013), employee competence (Spencer & Spencer, 1993), organizational commitment (Meyer & Allen, 1991), and turnover intention (Mobley et al., 1978). The study involved 200 respondents selected through purposive sampling from a population of 410 sales employees at a B2B healthcare service companies in Indonesia, with respondents required to have at least one year of work experience and regular interaction with supervisors, colleagues, or customers.

Data were collected in June 2026. Partial Least Squares Structural Equation Modeling (PLS-SEM) using SmartPLS 4.0 was employed because the research model comprised six latent constructs, eight hypotheses, and two moderating relationships, while the sample size satisfied the "10-times rule" recommended by Hair et al. (2022). Prior to the main survey, the questionnaire was pre-tested with 30 respondents using Exploratory Factor Analysis (EFA) to assess construct validity through the Kaiser-Meyer-Olkin (KMO), Measure of Sampling Adequacy (MSA), communalities, and extraction values, whereas internal consistency was evaluated using Cronbach's Alpha. The measurement model was subsequently assessed based on factor loadings (>0.70), Average Variance Extracted (AVE >0.50), the Fornell-Larcker criterion, Heterotrait-Monotrait Ratio (HTMT <0.90), Composite Reliability (>0.70), and Cronbach's Alpha (>0.70). The structural model was evaluated using path coefficients, Inner VIF, R^2 , Q^2 , and effect size (f^2), while hypothesis testing was conducted through bootstrapping with a two-tailed significance level of $t > 1.96$ and $p < 0.05$, following the recommendations of Hair and Alamer (2022).

RESULTS AND DISCUSSION

Prior to the main survey, the instrument was pre-tested with 30 respondents using Exploratory Factor Analysis (EFA) in SPSS. All constructs met the validity criteria, with KMO values above 0.50, appropriate factor loadings, and Cronbach's Alpha values exceeding 0.70, indicating that all items were valid, reliable, and suitable for the main survey. The final survey involved 200 sales employees from a B2B healthcare service companies, all with at least one year of work experience. Respondents were predominantly male (62%), aged 36–45 years (47.5%), held a Bachelor's degree (63%), and had more than 10 years of tenure (35.5%). The measurement model evaluation using SmartPLS confirmed that all indicators satisfied convergent validity requirements, with outer loading values ranging from 0.749–0.817 for Employee Competence, 0.653–0.764 for Employee Empowerment, 0.651–0.922 for Organizational Commitment, 0.656–0.877 for Organizational Learning Culture, 0.860–0.933 for Turnover Intention, and 0.773–0.875 for Transformational Leadership. Although several indicators showed outer loading values slightly below the recommended threshold of 0.70, ranging from 0.651 to 0.699, these indicators were retained because their loadings remained acceptable and the corresponding constructs achieved adequate composite reliability and Average Variance Extracted (AVE) values above 0.50. Therefore, removing these indicators was not considered necessary, as the overall measurement model demonstrated satisfactory convergent validity and reliability. The measurement model is presented in Figure 1.

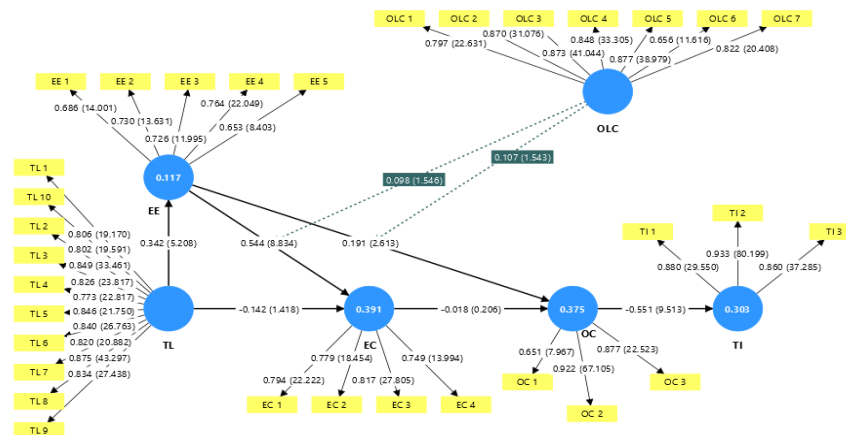


Figure 1. Model Output SMART-PLS

Reliability testing indicates that all constructs met the criteria, as both Cronbach's Alpha and Composite Reliability (CR) values exceeded 0.70. The Cronbach's Alpha and Composite Reliability values were, respectively: Transformational Leadership (0.949; 0.956), Organizational Learning Culture (0.919; 0.936), Turnover Intention (0.871; 0.921), Employee Competence (0.792; 0.865), Employee Empowerment (0.763; 0.837), and Organizational Commitment (0.760; 0.863). Furthermore, all Average Variance Extracted (AVE) values exceeded 0.50, confirming that convergent validity requirements were met.

Discriminant validity testing was conducted using the HTMT ratio and the Fornell-Larcker criterion. All HTMT values fell below the 0.90 threshold; the highest value was 0.792 (for the relationship between Transformational Leadership and Organizational Learning Culture), and the lowest was 0.212 (for the relationship between Turnover Intention and Employee Empowerment). Thus, each construct demonstrated adequate discriminant validity and the ability to measure distinct

concepts. Discriminant validity testing using the Fornell–Larcker criterion showed that the square root of the AVE for each construct was greater than its correlation with other constructs. These values were: Turnover Intention (0.892), Transformational Leadership (0.827), Organizational Commitment (0.825), Organizational Learning Culture (0.824), Employee Competence (0.785), and Employee Empowerment (0.713). Consequently, all constructs were capable of measuring distinct concepts and satisfied discriminant validity requirements. The evaluation of the inner model began with a test for multicollinearity using Variance Inflation Factor (VIF) values. All inner VIF values fall within the range of 1.000–2.306, remaining below the thresholds of 3.30 and 5.00 (Hair & Alamer, 2022). The VIF values for the interactions of OLC with EC and OC are also low, at 1.202 and 1.209. Consequently, the model does not suffer from multicollinearity issues and is suitable for proceeding to structural testing.

The R-Square results indicate that the model explains 39.1% of the variation in Employee Competence, 37.5% in Organizational Commitment, 30.3% in Turnover Intention, and 11.7% in Employee Empowerment. Consequently, the model's explanatory power falls within the weak-to-moderate range, with the remaining variation attributed to factors outside the model. Furthermore, the effect size (f^2) value was used to assess the magnitude of each exogenous variable's contribution to the endogenous variables, based on the criteria of 0.02 for a small effect, 0.15 for a medium effect, and 0.35 for a large effect Hair & Alamer, (2022). The results show varying contribution magnitudes across the model's paths. Model fit evaluation yielded an SRMR value of 0.072, which is below the maximum threshold of 0.08. Thus, the model demonstrates an adequate level of fit—as the discrepancy between observed and predicted correlations is relatively small—making it suitable for testing structural relationships (Henseler et al., 2015). Q-Square (Q^2) analysis was employed to assess the model's predictive relevance. All endogenous constructs exhibited Q^2 values above zero: Organizational Commitment (0.323), Turnover Intention (0.221), Employee Competence (0.129), and Employee Empowerment (0.085). Therefore, the model possesses predictive relevance and is appropriate for hypothesis testing.

Hypothesis testing in this study was evaluated by examining the path coefficient (Original Sample), t-statistic, and p-value derived from the bootstrapping procedure using SmartPLS. A hypothesis was deemed significant if the t-statistic exceeded 1.96 and the p-value was below the 0.05 (5%) significance level. The results indicate that H1 is accepted, as Transformational Leadership has a positive and significant effect on Employee Empowerment ($\beta = 0.342$; $t = 5.208$; $p < 0.001$; $f^2 = 0.132$). H2a is also accepted, as Employee Empowerment has a positive and significant effect on Employee Competence ($\beta = 0.544$; $t = 8.834$; $p < 0.001$; $f^2 = 0.361$), whereas H2b is rejected because Organizational Learning Culture does not significantly moderate this relationship ($\beta = 0.098$; $t = 1.546$; $p = 0.122$; $f^2 = 0.016$). H3a is accepted, as Employee Empowerment has a positive and significant effect on Organizational Commitment ($\beta = 0.191$; $t = 2.613$; $p = 0.009$; $f^2 = 0.033$), while H3b is rejected because Organizational Learning Culture does not significantly moderate this relationship ($\beta = 0.107$; $t = 1.543$; $p = 0.123$; $f^2 = 0.018$). H4 is rejected because Transformational Leadership does not have a significant effect on Employee Competence ($\beta = -0.142$; $t = 1.418$; $p = 0.156$; $f^2 = 0.015$), and H5 is also rejected because Employee Competence does not have a significant effect on Organizational Commitment ($\beta = -0.018$; $t = 0.206$; $p = 0.836$; $f^2 = 0.000$). H6 was accepted because Organizational Commitment has a significant negative effect on Turnover

Intention ($\beta = -0.551$; $t = 9.513$; $p < 0.001$; $f^2 = 0.435$), representing the strongest relationship in the model.

Discussion

The results of the first hypothesis (H1) indicate that transformational leadership has a positive and significant effect on employee empowerment ($\beta = 0.342$, $t = 5.208$, $p < 0.001$, $f^2 = 0.132$), indicating that stronger transformational leadership enhances employees' perceived empowerment. Descriptively, respondents reported high perceptions of transformational leadership, with 74.5%–83% selecting responses 4 and 5 across the main indicators, while employee empowerment was also rated highly, with 84%–96.5% of respondents selecting the same responses. These findings suggest that leaders who communicate an inspiring vision, provide support, build trust, and encourage autonomy foster greater confidence, independence, and decision-making authority among employees. In the context of B2B healthcare sales, transformational leadership is most effective when it is reflected in clear goals, employee involvement, delegated responsibility, and opportunities to resolve customer issues independently. These findings are consistent with Kark et al. (2003), Jong and Faerman (2020), Alwaely et al. (2024), and Seibert et al. (2011), who emphasized that transformational leadership and supportive work environments strengthen psychological empowerment by promoting trust, autonomy, and employee engagement.

The hypothesis testing results (H2a) show that employee empowerment has a positive and significant effect on employee competence, indicating that granting authority, autonomy, and organizational trust encourages employees to proactively develop their knowledge, skills, and capabilities through direct work experience. Employees with greater autonomy are more likely to learn by solving operational problems and adapting to workplace challenges. These findings are consistent with Djunaedi et al. (2024), Nguyen et al. (2025), and Van et al. (2025), who emphasized the importance of empowerment and work autonomy in competence development. They are further supported by Charbonnier-Voirin et al. (2010) and Faupel et al. (2018), who argued that empowering work environments promote adaptability, innovative problem-solving, and continuous professional development.

The hypothesis testing results (H2b) indicate that Organizational Learning Culture does not significantly strengthen the relationship between Employee Empowerment and Employee Competence. This suggests that competence is primarily developed through the learning-by-doing process embedded in empowerment, where employees gain experience by making decisions, solving problems, and taking responsibility for their work. Although Organizational Learning Culture provides opportunities for learning and knowledge sharing, these practices may not sufficiently address the specific competency needs of B2B healthcare sales employees. The findings are consistent with Djunaedi et al. (2024) but differ from Potnuru et al. (2019), indicating that empowerment plays a more direct role in competence development than organizational learning culture in this context.

The hypothesis testing results (H3a) indicate that Employee Empowerment has a positive and significant effect on Organizational Commitment ($\beta = 0.191$, $t = 2.613$, $p = 0.009$, $f^2 = 0.033$), indicating that greater employee empowerment contributes to stronger organizational commitment. Descriptively, respondents reported high levels of empowerment, with 84%–96.5% selecting responses 4 and 5 across the main indicators, while organizational commitment was also relatively high, ranging from 69.5% to 82%. These findings suggest that employees who feel trusted, involved

in decision-making, and empowered to perform their work are more likely to develop emotional attachment and a stronger intention to remain with the organization. The results are consistent with Djunaedi et al. (2024), Kyei-Frimpong et al. (2024), and Kim et al. (2012), who emphasized that empowerment, autonomy, and organizational trust strengthen employee commitment. In the context of B2B healthcare sales, empowering employees through delegated authority, flexible sales approaches, and participation in field-level decisions can reinforce organizational commitment.

The hypothesis testing results (H3b) show that Organizational Learning Culture does not significantly strengthen the relationship between Employee Empowerment and Organizational Commitment. Although empowerment directly enhances commitment by fostering trust, autonomy, and a sense of value, organizational learning culture primarily emphasizes learning, collaboration, and knowledge sharing, which may not be the main drivers of employees' intention to remain with the organization. These findings differ from Joo and Shim (2010) and Djunaedi et al. (2024), suggesting that the moderating role of organizational learning culture is context-dependent and may be less influential than trust, authority, rewards, and career opportunities in shaping commitment among B2B healthcare sales employees.

The findings show that Employee Empowerment directly improves Employee Competence and Organizational Commitment, whereas Organizational Learning Culture does not strengthen these relationships. This indicates that empowerment remains effective regardless of the level of organizational learning culture. Empowerment promotes competence by providing opportunities for decision-making, problem-solving, and learning through direct work experience, while it enhances commitment by fostering trust, autonomy, and employee involvement. The absence of a significant moderating effect does not imply that Organizational Learning Culture is unimportant; rather, it suggests that its learning practices may be too general and insufficiently aligned with the specific competency needs of B2B healthcare sales employees. The overlap between several learning culture indicators and organizational support or leadership, as well as the relatively homogeneous respondent perceptions, may also explain the insignificant moderation. These findings suggest that Organizational Learning Culture may be more appropriately examined as a direct or mediating variable rather than a moderator.

The results of the fourth hypothesis (H4) indicate that Transformational Leadership does not significantly affect Employee Competence ($\beta = -0.142$, $t = 1.418$, $p = 0.156$, $f^2 = 0.015$). Although respondents reported high perceptions of transformational leadership (74.5%–83% selecting responses 4 and 5), employee competence was also consistently high (92%–93%), suggesting that competence is more likely shaped by factors other than leadership alone. In the context of B2B healthcare sales, technical competence appears to depend more on practical experience, product knowledge, and job-related learning than on transformational leadership.

These findings differ from Zhang et al. (2021) and Alshamari et al. (2024), who reported that transformational leadership enhances employee capability and adaptive performance. In the context of B2B healthcare sales, however, competence depends more on product knowledge, negotiation skills, interpersonal abilities, and direct customer experience than on leadership alone. Inspirational leadership and intellectual stimulation are unlikely to improve competence without technical training, field experience, delegated responsibility, and opportunities for autonomous decision-making. This explanation is consistent with Rentz et al. (2002), who emphasized that sales effectiveness is primarily driven by interpersonal skills, salesmanship, and technical knowledge. Therefore,

competency development should combine leadership with coaching, product training, negotiation simulations, mentoring, and customer-based learning.

The results of the fifth hypothesis (H5) indicate that Employee Competence does not significantly influence Organizational Commitment ($\beta = -0.018$, $t = 0.206$, $p = 0.836$, $f^2 = 0.000$). Although respondents reported high competence (92%–93% selecting responses 4 and 5), organizational commitment was comparatively lower (69.5%–82%), suggesting that competent employees do not necessarily develop stronger attachment to the organization. These findings differ from Baidun et al. (2024) and Azeem et al. (2021) but are consistent with Gienardy et al. (2024), who argued that the relationship between competence and commitment depends on supporting factors such as compensation, career development, and organizational support. In the B2B healthcare sales context, commitment appears to be influenced more by rewards, career opportunities, supervisor support, and a sense of belonging than by competence alone.

The results of the sixth hypothesis (H6) indicate that Organizational Commitment has a significant negative effect on Turnover Intention ($\beta = -0.551$, $t = 9.513$, $p < 0.001$, $f^2 = 0.435$), making it the strongest predictor of turnover intention in the research model. Descriptively, organizational commitment was relatively high, with 69.5%–82% of respondents selecting responses 4 and 5, while 68.5% disagreed with the intention to leave the organization. These findings suggest that employees who feel a stronger sense of belonging, loyalty, and emotional attachment are less likely to seek alternative employment or leave the companies. The results are consistent with Zhang (2023), Prastikawati and Herachwati (2023), and Dhakal et al. (2024), who identified organizational commitment as a key factor in reducing turnover intention. Therefore, organizations should strengthen commitment through fair rewards, supervisor support, effective two-way communication, clear career opportunities, and recognition of employee contributions to reduce turnover intention among B2B healthcare sales personnel.

CONCLUSION

Based on the test results and discussion, this study demonstrates that transformational leadership has a positive and significant effect on employee empowerment; thus, inspirational, visionary, and supportive leadership enhances employees' self-confidence and autonomy. Furthermore, employee empowerment is shown to positively influence employee competence and organizational commitment, indicating that delegating authority and granting work autonomy foster competence development through hands-on experience while strengthening employees' attachment and loyalty to the companies. Conversely, transformational leadership does not significantly affect employee competence, nor does employee competence influence organizational commitment. These findings suggest that competence is driven more by work experience and autonomy, whereas high competence does not necessarily generate employee loyalty. The study also confirms that organizational commitment has a negative and significant effect on turnover intention; consequently, higher employee commitment corresponds to a lower intention to leave the companies. Additionally, an organizational learning culture does not moderate the relationship between employee empowerment and either employee competence or organizational commitment. These findings underscore that, within the context of B2B healthcare sales personnel, employee empowerment

directly enhances competence and commitment without requiring reinforcement from an organizational learning culture.

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