

ROLES BETWEEN MANAGEMENT COMMITMENT AND OCCUPANCY HEALTH AND SAFETY (OHS) DURING COVID- 19 PANDEMIC IN HIGHER EDUCATION INSTITUTION

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Abstract

Since Covid-19 has been declared as pandemic, many sectors are affected, including higher education. Accordingly, the good management commitment to handle the pandemic effect in an internal of an organization or higher education institutions is needed, especially to mitigate fatality risk, as they provide service for global sectors. This research is expected to provide information on right strategy and action for Higher Education Institution management to apply, and to provide positive managerial implication on organization management. The purpose of this research is to find out to what extent Active Commitment, Passive Commitment, Employee Awareness and OHS Compliance in Higher Education Institution. This is a survey research by conducting questionnaire with one-shot study. The data was obtained from 200 respondents, the employees of Higher Education Institution in Tangerang, Banten on Januari to April 2021. The analysis method in this research was using SEM with LISREL. The research shows several results: a) high Active Commitment would increase Employee Awareness on OHS; b) low Passive Commitment management would increase Employee Awareness on OHS; c) high Employee Awareness affects OHS Compliance; d) high Passive Commitment management affects Compliance on OHS.

I. INTRODUCTION

The application of Integrated Management System is a strategic system in operational sector of an organization or company, which contributes to a specific function, namely Occupancy Health and Safety (OHS). The OHS management can be implemented independently and need support from all parties (Ballesteros-Rodriguez *et al.*, 2012). The research on Occupancy Health and Safety is considered as important because of two reasons: first, it indicates the consistency of a management in an organization or company, especially to apply the OHS into work performance. In the process, employee's awareness and OHS compliance rules and regulation has to be performed well (Stemn *et al.*, 2018); second, it is verified that companies with certified OHS management shows difference substantially, namely how success they manage the OHS (Stemn *et al.*, 2018)

International Organization for 45001:2018 Standard, which is adopted by UK, is aimed to level up occupancy safety and to mitigate risks in workplace by presenting requirements for OHS management. The Occupancy Health and Safety Standard that is adopted by Canada highlights the importance of effective occupancy health and safety, which aimed to provide control on potential risk (Trakoli, 2015). Furthermore, in the United States, there is different standard that is applied to define the minimum requirements for occupancy health and safety management system, in order to mitigate workplace injuries risk (Putri *et al.*, 2018).

A previous research points out that a routine management intervention in implementing occupancy safety drill to their employees generates positive impact in improving occupancy safety, with implication that knowledge about safety is improved and lead to the more safe behavior and work practice, especially in mitigating workplace injuries risk (Burke *et al.*, 2011).

Regarding Occupancy Health and Safety, now the countries across the world are facing COVID-19 pandemic. It began on December 2019 in Wuhan, China, and struck the other continents rapidly, causes health crisis, and carries great impact to mental health to the whole population as panic hit them (Susilo *et al.*, 2020). A research in epidemiology highlights that human population would suffer from psychological trauma, in which it carries uncomfot feelings, especially when dealing with life issues; however, most of them are resilient and committed to rebuild their own life (Tang *et al.*, 2020). The common symptoms of *COVID-19* infection affect respiratory tract, for examples: acute fever, acute cough, and acute breathing difficulty. The incubation period is on average 5 to 6 days, and the longest period is 14 days (Brunner & Suddarth, 2010).

A number of research have been conducted on the correlation between occupancy safety factor and awareness on employee safety (Barbaranelli *et al.*, 2015). It indicates there is a consistency between occupancy safety, motivation, compliance, participation, and – if any – employee injuries. In the previous research, Rodrigues *et al.* (2020) states that it is important to build a commitment in an organization on OHS management system, in which it is the main factor that affects the success of prevention program that includes injuries, illness, and death caused by work practice. The success of OHS Management system depends on Active Commitment of Organization Management and avoiding passive commitment, therefore participation from both organizational levels, managers and employees, are going well (Fernandez-Muniz *et al.*, 2012).

However, most of previous research on Occupancy Health and Safety focus on workplace injuries in companies and OHS in hospitals. Therefore, this research exposes different subject to study, namely investigating and discussing OHS Management System during current COVID-19 pandemic, considering that COVID-19 is one of many pandemics within a century (Parker, 2020), including Spanish

flu in 1918, Asian flu in 1957, Hong Kong flu in 1968, HIV / AIDS in 1981, and Swine flu in 2009. Regarding COVID-19, it predicted that it will last between 18 months to two years (Parker, 2020).

Based on the research gap, the Occupancy Health and Safety that has been investigated is still related to workplace injuries. Moreover, there are still few who investigated Occupancy Health and Safety regarding plague, especially COVID-19 pandemic. Accordingly, the purpose of this research is to find out to what extent the willingness of Management Commitment in an Organization or Company on Occupancy Health and Safety (OHS) as one of priorities, and employee awareness on Occupancy Health and Safety factor, especially the OHS implementation strategy during the current COVID-19 pandemic.

II. LITERATURE REVIEW

Active Commitment

Vinodkumar & Bhasi (2010) define management commitment as a process in managing work safety, assuring that work practice is going well, handling post-injuries administration, and conducting work safety drill as a socialization of safety at workplace by analyzing the role of mediation and control within the correlation between safety factors and safety performance. Active commitment is a means to improve both program and safety system at workplace, in which the safety factor program would generate organizational commitment on safety and employees on injuries at work (Vinodkumar & Bhasi, 2010).

Furthermore, it is important to keep active commitment in order to implement occupancy health and safety management in promoting compliance to all employees with safe and convenient work practice method. (Vredenburg, 2002). In addition, Rodrigues *et al.* (2020) also points out that active commitment is defined as a process in which OHS management focuses on main factor that affects the success of prevention program, including injuries, illness, and death caused by work practice OHS certification is also accommodating to improve management commitment, employee participation, and the improvement of communication channel (Fernandez-Muniz *et al.*, 2012).

Passive Commitment

Passive commitment is a condition where commitment and participation from all organizational levels on work safety is low, and employee engagement in this process is very minimum (Fernandez-Muniz *et al.*, 2012). In a previous research, De Silva & Wimalaratne (2012) also points out that passive commitment shown by the management would cause the majority of workplace injuries that occur from uncontrolled human actions, behaviors, and errors triggered by lack of knowledge on work procedure, lack of responsibility, and environmental factor as leading factors that cause injuries.

Fernandez-Muniz *et al.* (2012) also defines that the success of OHS Management system depends on Active Commitment of Organization Management and avoiding passive commitment, therefore participation from both organizational levels, managers and employees, are going well.

Employee Awareness

Employee work awareness is a process that is aimed to raise employee's sense of responsibility for their own safety, to get knowledge and training on the improvement of work safety, and to motivate them to response actively on the report regarding work safety i.e. unsafe condition or any practice that is not following the procedure (Cigularov *et al.*, 2010). The beginning of Tahira M. Probst & Estrada (2010) research shows that work safety can be anticipated earlier if there is an accident there is reported earlier by an employee with high awareness, even though there is an overlapping between work safety treatment and effective ethical code in a company.

Employee awareness is also defined as a process in which higher awareness on all OHS aspects is important to minimize work risk evaluation, and as a determination to prevent workplace injuries (Rodrigues *et al.*, 2020). It is expected that the workplace injuries level is lower when the awareness on compliance in implementing regulations and promoting employee training actively in order to improve knowledge on work safety are considered important (Stemn *et al.*, 2018)

Occupancy Health and Safety Compliance

Compliance on occupancy health and safety is an action process to build effective safety culture, which is in accordance with the recommendations from other research in OHS literature (Masi *et al.*, 2014). In addition, Barbosa *et al.* (2019) points out that compliance on OHS is impactful on harm and workplace injuries mitigation: it includes compliance on legal obligation and productivity that lead to effective use of the resources.

Rodrigues *et al.* (2020) states that the previous research points out that the compliance on OHS management is a compliance on rules that cover all occupancy health and safety. The other research by Gopang *et al.* (2017) points out that a management system that has been implemented control steps would make employees aware of OHS issues: they would improve their compliance on work risk, they are aware of essential benefit in relation to improvement in worker's safety and health (the decrease of injuries level), and they also aware of compliance to legal requirements.

CORRELATION BETWEEN VARIABLES AND HYPOTHESES DEVELOPMENT

Correlation between active commitment on Occupancy Health and Safety

OHS active management commitment must focus on the main factor that affects the success of prevention program that includes injuries, illness, and death caused by work practice (Rodrigues *et al.*, 2020). This would encourage effective workplace injuries risk control (Gopang *et al.*, 2017). According to Fernandez-Muniz *et al.* (2012), The success of OHS Management system depends on commitment and participation from all organizational levels, in order to mitigate workplace injuries level.

In the previous research, the employee's intention to commit on work safety by keeping work consistency is through compliance on OHS system within themselves on work safety (Goh *et al.*, 2018). The maximum implementation of OHS resources by an organization shows social commitment, good relationship with employees, and the consistency of commitment built between the two parties (Goh *et al.*, 2018). **Thus, based on the descriptions above, this research proposes first hypothesis as follows:**
H1: High active commitment management would improve employee awareness level on Occupancy Health and Safety.

Correlation between passive commitment management on Occupancy Health and Safety

Resource distribution to achieve optimum work safety process depends on support from top management level and continuous active commitment, not the passive ones (Ramos *et al.*, 2020). In addition, Geller (2014) introduces the term *OHS gnawer* as the cause of failure of OHS implementation in an organization; however, it usually happens as the result of passive commitment by management on workers safety. Furthermore, organization technical capability in supporting purposive work safety represents the organization's ability to improve good commitment; if the management commitment is unassertive, then all mutual company purposes cannot be achieved (Parmigiani *et al.*, 2011).

Thus, based on the descriptions above, this research proposes second hypothesis as follows:

H2: Low passive commitment management would improve employee awareness level on Occupancy Health and Safety.

Correlation between employee awareness on Occupancy Health and Safety

A number of research on the correlation between work safety factor and employee safety awareness have been done (Barbaranelli *et al.*, 2015). This indicates a consistent correlation between work safety knowledge, motivation, compliance, participation, and – if any – employee injuries. Compliance on work safety regulations and executing routine employee trainings would improve knowledge and employee awareness level about their work risk, so it is expected that the injuries level can be minimized (Stemn *et al.*, 2018).

Work safety culture is a rule and regulation that evaluates organizational awareness on employee safety in general, by assuring that the right training is given to them to protect them from injuries and its impact (Stemn *et al.*, 2018). Awareness on work safety is a basis hold by professionals in an organization in order to provide training related to their expertise in OHS, therefore it is expected that occupancy health and safety behavior would share positive impact to all employees (Stemn *et al.*, 2018). **Thus, the descriptions above inspire this research proposes third hypothesis as follows:**

H3: Employee awareness has high impact on Occupancy Health and Safety Compliance

Correlation between active commitment management on Occupancy Health and Safety

Compliance on OHS rules is a starting point to build effective safety culture, which is in accordance to active commitment from organization management (Stemn *et al.*, 2018). This is impactful on harm and workplace injuries mitigation: it includes compliance on legal obligation and productivity that lead to effective use of the resources (Stemn *et al.*, 2018).

The importance of work safety management affects the compliance on work safety in an organization, and it must get support by organizational commitment so it meets the safety of co-workers and all employees (Chandrakantan Subramaniam *et al.*, 2017). The previous research shows that the implementation on occupancy health and safety, also the initiative and response from work safety management would benefit the organization viewed from all aspects within it (Chandrakantan Subramaniam *et al.*, 2017). **Thus, based on the descriptions above, this research proposes second hypothesis as follows:**

H4: High active commitment management has positive impact on Occupancy Health and Safety Compliance

Correlation between passive commitment management on Occupancy Health and Safety compliance

Both passive commitment and active commitment show the management availability to put OHS actively in a workplace, in which it contributes basis or motivation that is translated into the foundation of effective OHS regulation, and this is supported by resources-based theory (Awais, 2014) that emphasizes the importance of human resources in improving competency and OHS in a workplace (Awais, 2014).

The previous research exposes several fatality cases of injuries in a number of organizations with passive management. It describes the organization unwillingness on work safety compliance, e.g. safety certification and audit (Chandrakantan Subramaniam *et al.*, 2017), in which the majority of injuries in organizations is related to bad work safety compliance management or insufficiency, and did not get serious attention (Chandrakantan *et al.*, 2017). Work safety compliance requirements could protect workers indirectly and to assure whether the system made by an organization is well executed, as workplace injuries are commonly happened due to the incompliance within work safety implementation (Akbar & Ahsan, 2019). **Thus, based on the descriptions above, this research proposes second hypothesis as follows:**

H5: High passive commitment management has impact on Occupancy Health and Safety compliance

Based on all descriptions above, the research model is designated in the following figure:

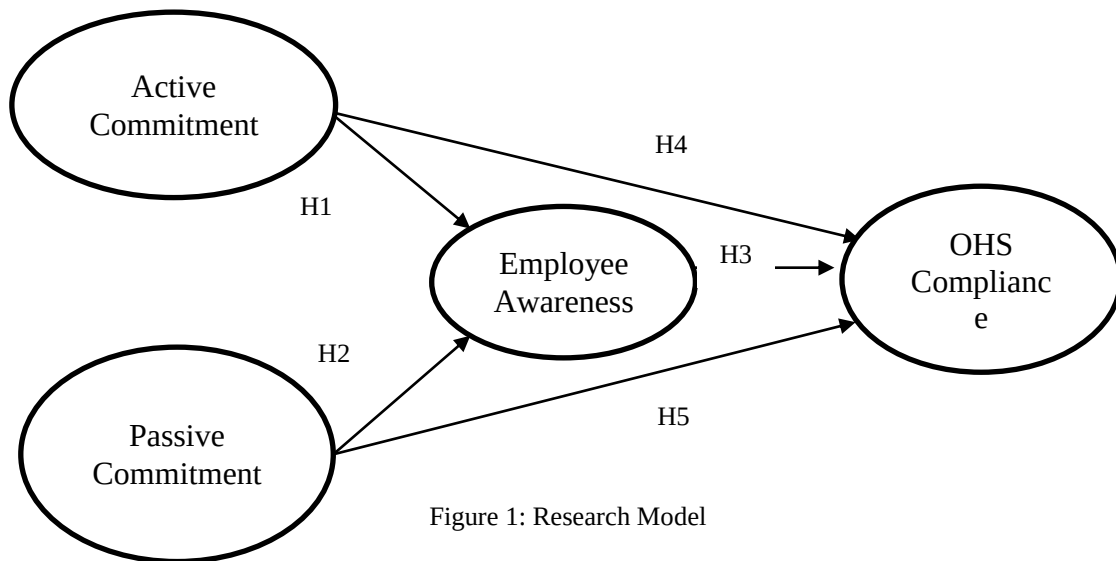


Figure 1: Research Model

III. RESEARCH METHODS

Measurement

There are Exogenous and Endogenous variables studied in this research. The two exogenous variables are Active Commitment and Passive Commitment, and two endogenous variables are Employee Awareness and OHC Compliance. The measurement of Active Commitment variables is based on (Carder & Ragan, 2003), (Cheyne & Cox, 2000), (Donald & Canter, 1994), (Grote & Kunzler, 2000), (Mearns *et al.*, 2003), (Rundmo & Hale, 2003), (Vredenburg, 2002), (Wu *et al.*, 2007), (A.I. Glendon *et al.*, 2001), (Hayes *et al.*, 1998), (Melia Navarro & Sese Abad, 1999), (Bentley & Haslam, 2001), (Cox & Cox, 1991), (Terziovski *et al.*, 1997), and (Fernandez-Muniz *et al.*, 2009). There are 3 dimensions and 14 questions in the measurement of Active Commitment variable: Management Commitment (8 questions), Communication (3 questions), and Safety Participation (3 questions). The measurement of Passive Commitment variable is based on (Wu *et al.*, 2007). There are 3 dimensions and 27 questions in the measurement of Passive Commitment variable: Commitment and work safety implementation from Organization Leader (10 questions), Commitment and work safety from OHS Manager K3 (10 questions), and emergency response (7 questions). The measurement of Employee Awareness is adopted from (Gillen *et al.*, 2002), (Ismail *et al.*, 2012), (Fang & Wu, 2013), (Sherif Mohamed, 2002), (Fung *et al.*, 2016), (Kwon & Kim, 2013), (Al-Refaie, 2013), (Benjaoran & Bhokha, 2010), and (Parmigiani *et al.*, 2011). There are 3 dimensions and 13 questions in the measurement of Employee Awareness variable: the first is on Social Influence (5 questions), OHS functions that have been experienced (3 questions), and Awareness Level on OHS (5 questions). The measurement of Occupancy Health and Safety Compliance variable was using the *Occupational health and safety measures* dimensions proposed by (Ezekiel M. Makori, 2012) with 6 questions in total.

This examination in this research used *Statistical Product and Service Solutions (SPSS)* software for validity and reliability tests, a questionnaire, and Lisrel application. In addition, *confirmatory factor analysis* in SPSS was applied to test the validity by examining the value of *Kaiser-Meyer-Olkin Measure of Sampling (KMO)* dan *Measures of Sampling Adequacy (MSA)*. Furthermore, if the KMO value is below 0.5, then the question is cannot be used or invalid. Whereas the reliability test

refers to *Alpha Cronbach* value, in which the value must be at *dimana nilainya harus* > 0.5 , which indicates reliable data.

The pre-test result on the first 40 respondents shows that Active Commitment variable with 14 questions is deemed valid and reliable. Secondly, Passive Commitment variable with 27 questions is deemed valid and reliable. Next, Employee Awareness variable with 13 questions is deemed valid and reliable. The other one, OHS Compliance variable with 6 questions is deemed valid and reliable. Therefore, based on pre-test result analysis, the 60 questions are deemed valid to be set as questionnaire for this research (the results can be checked in attachment 5).

Population and Sample

Population in this research is all permanent employees, contract employees, outsourcing employees (outsourced from an external organization), and Client Management. Due to large number of population that reach more than 300 employees, this research took samples for the study, namely the employees whose jobs are related to Occupancy Health and Safety (OHS), having potential-risk jobs that are related to OHS and involved in COVID-19 Task Force and Procedure. The method in taking samples is *purposive sampling*, a sampling technique in which it determines sample-taking by deciding specific features that are in accordance with purpose of this research. Therefore, it is expected that this method would answer research problem. The sample criteria are employees who work in Higher Education Institution for more than 1 (one) year, in which 1 (one) year is the assumption of minimum time that is considered sufficient to witness and experience Occupancy Health and Safety (OHS) aspects. The data collection technique began with the pre questionnaire distribution (*pre test*) using form, sent to the 40 respondents.

This research collected the data through survey method by distributing questionnaire online using *google form*, and using likert scale measurement method from 1 to 5 (1: strongly disagree and 5: strongly agree). The site of questionnaire distribution is in 1 (one) of Private Higher Education Institutions in BSD (Bumi Serpong Damai) area, Kabupaten Tangerang, Indonesia. This decision was taken due to this Higher Education Institution has implemented Occupancy Health and Safety (OHS) with ISO 9001:2015 certification (Quality Management System) and with ISO 45001:2018 certification (International Standard for Occupancy Health and Safety Management [OHS]), which replaces OHSAS 18001 standard.

Data Analysis Method

Validity test in this research was conducted by examining *Kaiser-Meyer-Olkin Measure of Sampling* (KMO) and *Measures of Sampling Adequacy* (MSA) measurement. In this test, the obtained value has to be bigger than 0.5. It indicates that the factor analysis is valid to be processed afterwards. The sample was taken from the whole population and using likert scale with interval scale from one to five. Data analysis method applied in answering hypotheses is SEM method through LISREL software

IV. RESULTS

Analysis of Respondents' Demographic Profiles

Analysis of respondents' demographic profiles (sex, age, educational background, work duration, and work unit) was conducted to find out whether there is a significant difference on each variable (Active Commitment, Passive Commitment, Employee Awareness, OHS Compliance). Therefore, a difference test is needed. Based on ANOVA test, there is no difference within respondent answers, so the whole answers are deemed *Homogeneity*, in which each variable shows Sig value of *Homogeneity* at >0.05 and Anova value is >0.05 . This indicates that there is no Homogeneity difference. (The result can be checked in attachment 7).

Construct Validity and Construct Reliability Tests

The respondents in this research are permanent employees, contract employees, outsourcing employees (outsourced from an external organization) and Client Management with work duration more than 1 (satu) year. The respondents are grouped based on sex, age, work duration, educational background, and employment status. The construct validity and construct reliability tests are accepted if the indicator on each variable has *loading factor* value more than 0.50. (Hair *et al.*, 2014). In this research, most of *loading factor* values are above 0.50. Furthermore, the calculation of *Construct Reliability* value is deemed to meet the requirement if the CR value is above 0.60. In this research, all CR values are above 0.60, namely Active Commitment (KA=0.91), Passive Commitment (KP=0.96), Employee Awareness (KK=0.94), and OHS Compliance (KTK=0.87).

Analysis of Structural Test

Analysis of structural test was conducted to find out R^2 values on each equation. R^2 value is aimed to analyze to what extent each independent variable can explain its dependent variable. Based on data processing, the first analysis result shows that Employee Awareness (KK) variable is affected altogether by Active Commitment (KA) and Passive Commitment (KP) with R^2 at 0.67. It indicates that 67% variance of Employee Awareness are affected by these variables.

On the second analysis it was found that OHS Compliance variable is affected by Employee Awareness (KK), Active Commitment (KA), and Passive Commitment (KP) with R^2 value at 0.82. It indicates that 82% variance of OHS Compliance are affected by these variables.

Analysis of Whole Model Fitness

Based on fitness test, it was found that most of the tests show good fitness, namely *Chi Square*, *ECVI*, *AIC*, *CAIC*, *Fit Index*, *Critical N* and *Goodness of Fit*. This research shows that there is fitness on the whole model (*Goodness of Fit*), even though there are some fitness in the marginal fit level. (The data can be checked in attachment 8).

Thus, the description of the research results is recorded within the following T-Value diagram:

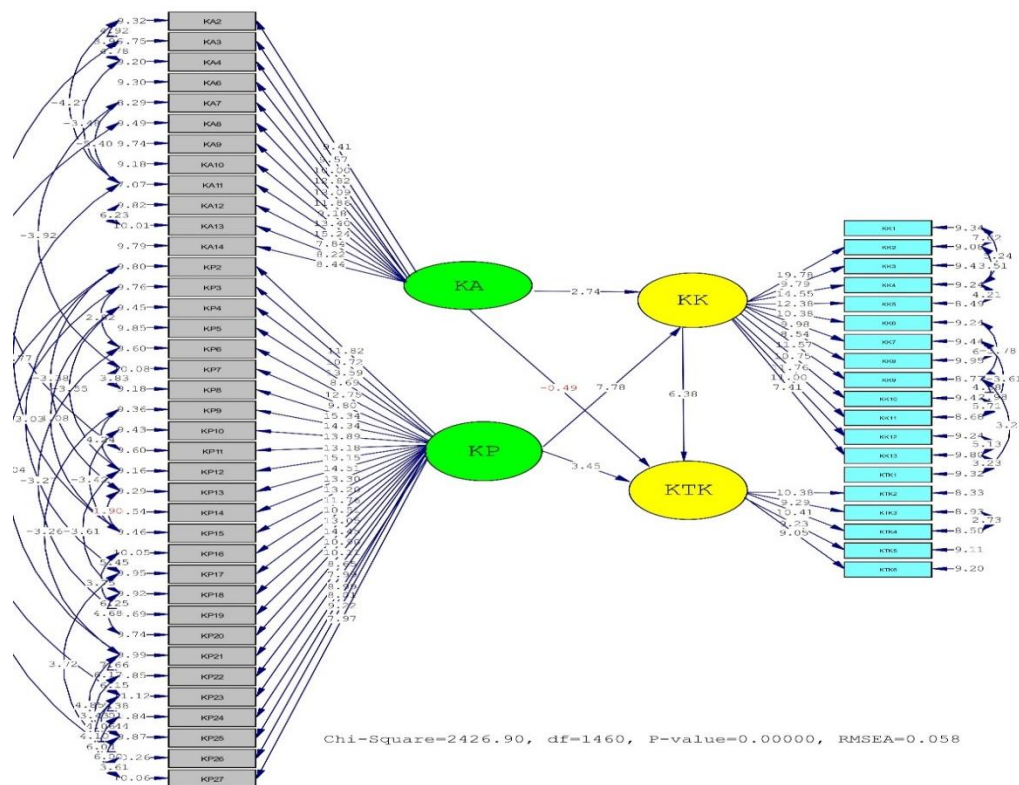


Figure 2
T-Value test results

List of Abbreviations: Active Commitment (KA), Passive Commitment (KP), Employee Awareness (KK), OHS Compliance (KTK3).

Based on *T-Value Path Diagram* in the figure 2 above, the tests of research hypotheses model can be explained as follows:

Table 1
The Test Results of Research Hypotheses Model

Hypothesis	Hypotesis Statement	<i>T-Value</i> Score	Notes
H1	High active commitment management would improve employee awareness level on Occupancy Health and Safety.	2.74	Data support the hypothesis
H2	Low passive commitment management would improve employee awareness level on Occupancy Health and Safety	7.78	Data support the hypothesis
H3	Employee awareness has high impact on Occupancy Health and Safety Compliance	6.38	Data support the hypothesis
H4	High active commitment management has positive impact on Occupancy Health and Safety Compliance	-0.49	Data do not support the hypothesis
H5	High passive commitment management has impact on Occupancy Health and Safety compliance	3.45	Data support the hypothesis

Based on table of hypotheses tests above, it is found that there are data with *T-Value* score under 1.96. It indicates that these data do not support the hypothesis, namely H4. The other hypotheses, H1, H2, H3 and H5 show the *T-Value* scores above 1.96. It indicates that these data support the research hypotheses that have been examined. (Further information on this research can be checked in attachment 9, on *t-value* diagram).

DISCUSSION

The purpose of this research is to find out to what extent the availability of Management Commitment of an Organization on Employee Occupancy Health and Safety priority and Employee Awareness on Occupancy Health and Safety Compliance, especially the OHS implementation strategy during current COVID-19 pandemic. In the first test (**H1**), it was found that Active Commitment from responsive Organization Management is able to improve employee awareness level on Occupancy Health and Safety, so the data support the hypothesis. In addition, employees who shows high active commitment on occupancy health and safety at workplace also prove that there is high awareness on organizational commitment level by organization management. This research result is in accordance to the research by McCaughey *et al.* (2020), that states the leadership in an organization combined with active commitment would play important role in generating employee commitment to follow the required work safety process within the whole industry or organization, and the anticipation on Occupancy Health and Safety has existed as a dominant work dimension. This research result is also supported by Clarke,

(2010); McCaughey *et al.* (2013), (2020); and Singer *et al.* (2009). These research state that good employee performance and the minimum workplace injuries can be applied as barometer with significant positive impact on an organization in executing Occupancy Health and Safety commitment.

The next hypothesis test (H2) result shows that low Passive Commitment management would improve employee awareness on Occupancy Health and Safety, and the data support the hypothesis. Many researchers state that a type of low passive commitment has many factors that make management finds difficulty in implementing management commitment on Occupancy Health and Safety, the failure in filling a system, a forced safety program, or budget and cost allocation. Employee awareness level and commitment conceptualization is necessary at workplace to share foundation and motivation. This research result is also supported by Awais Ahmad Tipu, (2014)'s statement. The similar research by Saks, (2006) also emphasizes that management commitment and employee awareness on safety is very important as organizational commitment on individual bonding with one's organization.

The result of third hypothesis test (H3) shows that employee awareness has high impact on Occupancy Health and Safety Compliance, and the data support the hypothesis. Awareness on work safety would become weak when a company or employees ignore work safety rules, regarding work safety is an impactful factor. A research has been conducted on to what extent psychological behavior affects organization and employee work safety on environment, in which awareness level on work safety can be affected by work environment and external factor. This research result is supported by Fung *et al.* (2016)'s statement. Furthermore, the other previous research by Cheng *et al.* (2012); Ismail *et al.* (2012); dan Quinn, (2010) also support the research result, in which work safety management committee is deemed as important role in sharing the importance of work safety to arise awareness within each employee.

Nevertheless, there is one test result that shows the hypothesis is not supported by the data, namely high active commitment management has positive impact on Occupancy Health and Safety Compliance (**H4**). It indicates that high active commitment management cannot affect directly on occupancy health and safety that has been set. This research result is contrary to the hypothesis and the previous research by Ali *et al.* (2009); Clarke, (2010); and McCaughey *et al.* (2013) that point out management commitment plays role actively in all safety intervention aspects, work safety management practice, and also committed to play effective role on safety to minimize workplace injuries. This statement is supported by Clarke, (2010), who states that employee with high active commitment on workplace safety is believed to have strong organizational commitment.

Furthermore, this research finds out that high passive commitment management has impact on Occupancy Health and Safety compliance (**H5**), and the data support the hypothesis. Passive Commitment management is an uncommitted behavior shown by an organization on employee work safety factor, in which an organization has commitment in building behavior within an individual and the bond on the organization. Therefore, organizational commitment on executing occupancy health and safety compliance has to be consistent. This result is also supported by the statement of the previous research by Cohen, (1993) and Saks, (2006).

V. CONCLUSION AND RECOMMENDATION

Conclusion

There are four conclusions drawn in this research. First, high active commitment management would improve employee awareness level on Occupancy Health and Safety. Secondly, low passive commitment management would improve employee awareness level on Occupancy Health and Safety. The third conclusion is employee awareness has high impact on Occupancy Health and Safety

Compliance. The other conclusion is high passive commitment management has impact on Occupancy Health and Safety Compliance.

Research Limitation

Research limitation refers to several weaknesses in this research. Firstly, this research only focus on several variables like Active Commitment, Passive Commitment, Employee Awareness, and Occupancy Health and Safety Compliance. What needs to be highlighted is that this research was conducted when COVID-19 pandemic began to transmit globally since March 2020 until this research was completed, therefore the number of respondents cannot achieve maximum target due to a number of organizations that implement employee efficiency and *Work From Home* (WFH) mode. In addition, there is a possibility that the respondents filled in based on their expected ideal condition, not based on actual current condition.

Recommendation for Further Research

The development for further research might focus on other variables other than Active Commitment, Passive Commitment, Employee Awareness, and Occupancy Health and Safety Compliance. For instance, the further research could investigate Occupancy Health and Safety Supervising Committee (P2K3) variable during COVID-19 pandemic, either in the scope of Higher Education Institution or in national-scale companies.

Managerial Implication

The purpose of this research is to find out the role of the availability of Organization Management or Organization on Occupancy Health and Safety priority, and also to examine Employee Awareness on Occupancy Health and Safety factor Compliance, especially the OHS implementation strategy during COVID-19 pandemic in higher education institution. Since 2020, COVID-19 Task Force has constructed four strategies that are executed consistently to strengthen the *physical distancing* policy as a basic strategy to handle the transmission of Coronavirus that causes COVID-19. The first strategy refers to the mandatory in using face mask in public places or outside home, which is viewed as the strengthening of basic strategy. Secondly, the task force conducts contact tracing. It is started from the in-patients who have been tested positive by using *rapid test* mode, and continue to their closest relatives, the medical teams who treat COVID-19 patients, and the people who live in a zone where the cases are confirmed. The third strategy is providing education on the disease and self-isolation areas for those who have been confirmed positive based on rapid test with the valid condition that is suitable for self-isolation. The last strategy is isolation at the hospital when the self-isolation is not accommodating anymore, for example, when clinical symptoms occur and need definitive service in the hospital. The Higher Education Institution that is chosen to be the subject in this research, where the questionnaire was distributed, is one of Educational Institutions who are affected by COVID-19. Since the pandemic hit global community, there are 4000 students who undergo online learning because the institution cancels all classroom learning.

Furthermore, the managerial implication applied in this research is Occupancy Health and Safety Compliance, in which the current OHS role is viewed as vital on Higher Education Institution or Company. OHS is a field that is related to Health and Safety in an institution, which aimed to maintain workplace Health and Safety, so the workers are able to prevent injuries when doing their work. Hence, the Occupancy Health and Safety Supervising Committee (P2K3) is deemed necessary to assist organization leader in implementing work safety, and also to set management policy and work procedure to improve work safety.

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