# An HRM Perspective on Employee Engagement as a Patient Satisfaction Driver in Healthcare.

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Abstract— The importance of employee engagement has become a widely accepted cause of organizational success, but there has been relatively less research on the impact of the concept on patient satisfaction in healthcare. This paper looks into the association between Human Resource Management (HRM) practices, employee engagement and patient satisfaction. The study assumes a quantitative and cross-sectional methodology, which will gather the primary data of 300 healthcare workers and 500 patients of chosen state and privated hospitals, which will be supplemented with secondary data sources such as hospital reports and published research.

The HRM practices (recruitment and selection, training and development, performance appraisal, rewards, employee involvement, and Green HRM), employee engagement, and patient satisfaction dimensions were measured with the help of the SERVQUAL model with the help of structured questionnaires. Reliability tests, factor analysis, correlation, regression, and Structural Equation Modelling (SEM) were the methods used to analyse data, and mediation was analysed by bootstrapping.

The results showed that HRM practices are significant in order to boost employee engagement which is in turn a strong predictor of patient satisfaction. The most influential HRM factors were found to be training and development, as well as, employee involvement. Employee engagement partially moderated the correlation between HRM and patient satisfaction, especially enhancing empathy and responsiveness aspects of care. Practices of the green HRM were not as powerful but had a positive impact by creating pride among employees and organizational image which indirectly increased patient trust.

The research has an input to the HRM theory by establishing patient satisfaction as one of the crucial performance outcomes and confirming staff engagement as the mediating variable between HRM and patient-centered results. In practice, the findings can be summarized as follows: the healthcare administrators are advised to implement HRM systems in which engagement is the main idea, and should combine training, empowerment, recognition, and sustainability programs to improve employee and patient experiences.

Index Terms—Employee Engagement; Employee Involvement; Green HRM; Healthcare; Human Resource Management (HRM); Patient Satisfaction; SERVQUAL; Structural Equation Modeling (SEM); Training and Development.

#### I. INTRODUCTION

The healthcare industry is changing at a very fast rate due to demographic changes, increasing patient demands, digitalization, and labour issues. Within such an environment, hospitals and other medical institutions are under pressure to achieve quality clinical outcomes as well as patient satisfaction. Patient satisfaction is becoming an essential performance indicator, which determines the reputation of a hospital, patient loyalty, and financial sustainability.

The human resource management (HRM) is important in the realization of these results. Contrary to manufacturing, healthcare is service-oriented sector in which the experience of the patient largely relies on the interactions between employees and their empathy and engagement towards patients. The human resource that delivers clinical and service quality is healthcare professionals doctors, nurses, and administrative staff. Engaging employees would help them show a better commitment, motivation and emotional involvement which would directly translate to better patient experience.

Nevertheless, research shows that most healthcare systems cannot match HRM practice with the patient-centric outcome. Rotea et al. (2023) established that the organizational performance is greatly enhanced by HRM practices, yet their article mainly focused on the organizational change as an intermediary, without going into a profound analysis of patient satisfaction as a result. On the same note, Shanthi et al. (2023) researched on Green HRM practices within healthcare organizations in Chennai and found an efficiency improvement but with no correlation between employee engagement and patient satisfaction. This

leaves a distinct research gap: although HRM is recognized to be a key determinant of organizational performance, its direct relationship in building employee engagement as a contributor to patient satisfaction is understudied.

This paper fills the said gap by exploring the HRM outlook on employee engagement within the healthcare industry and examining both direct and indirect impacts of employee engagement on patient satisfaction. It makes worker engagement the mediating variable between the HRM practice and patient-centred care instead of efficiency and retention to patient-centred performance measures. The results will be useful to healthcare leaders, policymakers, and HR professionals in their attempt to enhance patient satisfaction by using strategic HR interventions.

### II. LITERATURE REVIEW

Human Resource Management (HRM) has always been considered as one of the keys to organizational prosperity, particularly in industry services such as healthcare as the quality of results is largely determined by the competencies, attitude and involvement of personnel. There is a strong body of literature that proves that HRM practices have a direct effect on employee engagement which subsequently impact patient satisfaction, trust, and loyalty. This is a review of the prior literature in the main dimensions of HRM that are applicable to healthcare.

Recruitment and Selection: Having a good recruitment process is also important to make sure the healthcare organizations find applicants whose professional skills are balanced by interpersonal and empathetic abilities that are essential in patient-centered care. Rotea et al. (2023) stress that the best organizational values in recruiting employees increase retention and engagement. On the same note, Delery and Doty (1996) maintained that strategic recruitment helps to achieve the long term competitive advantage by ensuring the talent is secured who can provide quality service. Weakly constructed recruitment, in its turn, can create the risk of mismatch between expectation and needs of the employees and patient needs, leading to disengagement and decreased satisfaction.

<u>Training and Development:</u> One of the most effective levers in the development of engagement in healthcare

is training. The ongoing professional growth improves not only the technical skills but also the soft skills such as communication and empathy which are the primary concerns of patient satisfaction. Rotea et al. (2023) discovered that training is a significant enhancement to employee engagement in organizational change, which is reinforcement. Further findings of Haque et al. (2017) indicate that training and responsible leadership results in greater commitment among the staff which positively impacts service quality and patient trust.

Rewards and Performance Appraisal: When done in a transparent and fair way appraisal systems give feedback that reinforces desired behavior. Monetary and non-monetary reward mechanisms increase motivation of employees. Rotea et al. (2023) stated that rewards lower organizational abandonment that occur as a result of enhancing employee morale. In terms of healthcare, nurses and frontline worker recognition is especially significant, as the research conducted by Hall et al. (2010) indicates that satisfaction based on rewards has a negative impact on turnover and a positive contribution to patient experiences.

Involvement and Empowerment of the employees: The decision-making process and problem-solving process of employees make them feel a sense of ownership and responsibility. Healthcare personnel are empowered and more responsive and proactive in handling issues of patients. Shanthi et al. (2023) emphasize that green HRM practices that focus on the involvement of employees increase productivity and the quality of the served delivery. On the same note, Otoo (2019) observed that engagement creates competencies that mediate between the HRM practices and the organizational performance, enhancing engagement as the means of patient satisfaction.

Green HRM Practices: Although traditionally neglected in the research on patient satisfaction, Green HRM indirectly affects the patient satisfaction issue through improvement of organizational image, employee pride and commitment. Shanthi et al. (2023) have determined that green activities, including environmentally friendly operations, resource-efficient activities, and sustainable policies, enhance employee satisfaction and workload control in healthcare. This pride and identification with social responsibility is

frequently converted into better patient trust and loyalty.

Support of organizational change: The healthcare industry is highly dynamic as a result of technological changes, pandemics, and regulatory changes. Rotea et al. (2023) found out that HRM practices have a positive effect on organizational change processes, which in turn affect employee engagement and performance. Kotter (2012) has also highlighted a similar point stating that change programs are successful when employees are engaged, and involved in planning and implementation. The involved employees are more adaptable to change, which guarantees the adherence to the quality of patient care.

Connecting Engagement with Patient Satisfaction: The Social Exchange Theory offers a theoretical underpinning: the employees respond to positive HRM practices by being more engaged and more engaged translates into better service practices to patients. The research conducted by Anitha (2014) and Al Mehrzi and Singh (2016) proves that engaged employees are more empathetic, reliable, and responsive-areas that are highly related to patient satisfaction.

The literature suggests that the patient satisfaction, in turn, is affected by the HRM practices, which are mostly the employee engagement. The roles of recruitment, training, fair appraisal, empowerment, sustainability and change are different parts of enhancing engagement. Most studies however halt at the organizational performance or efficiency as a result and thus a gap exists in specifically addressing the relation between HRM and patient satisfaction. The main focus of the current study is to address this gap.

# III. BACKGROUND OF THE STUDY AND RESEARCH GAP

Healthcare is among the most service intensive industries that require human touch to attain favorable results, and in this case, human touch is being used as far as clinical skill is actually not the sole determinant of success, but also employee actions and interactions. Human Resource Management (HRM) has been greatly recognized as a vital element in determining the performance of an organization, retention of employees and flexibility to change. Specifically, employee engagement, which can be understood as the emotional

and intellectual dedication of the personnel to their organizations and job, has become one of the key predictors of patient satisfaction, a major performance measure of healthcare facilities. Nonetheless, little has been done to explicitly connect the HRM practices, employee engagement, and patient satisfaction.

The article by Rotea et al. (2023) explored the connection between HRM practices and organizational performance in Romanian healthcare facilities and the mediating effect of organizational change processes. Their results showed that HRM practices like recruitment, training, reward and involvement has positive impacts on organizational performance and employee retention. Nevertheless, the research mainly defined performance through the efficient, retention and abandonment without clearly viewing patient satisfaction as a performance that HRM is effective. This leaves a loophole because patient satisfaction is a more direct and relevant measure of quality in healthcare.

In a similar manner, Shanthi et al. (2023) examined the Green HRM practices within the healthcare facilities in Chennai. Environmental concern, organizational policy, and external pressures, were the identified drivers of adopting sustainable HRM practices, according to them. Their work emphasized the idea that green HRM enhances efficiency, employee satisfaction, and competitiveness of an organization. However, the research did not further analyze the effect of such practices on employee commitment to service provision, neither did it associate such practices with patient outcomes. This creates a gap in the knowledge of how environmental and sustainable HRM policies may indirectly have an impact on patient trust and satisfaction through employee pride and commitment. Outside these two articles, the literature at large displays significant gaps. As an example, Hall et al. (2010) emphasized that job satisfaction and organizational culture are also determinants of clinician turnover, yet their research failed to tie these relationships to patient experiences. The study of Anitha (2014) confirmed that employee engagement is a potent determinant of service quality, yet this research was not carried out in healthcare, where patient satisfaction rates in the field have exceptionally high stakes. On the same note, Haque et al. (2017) showed the impact of leadership in developing employee commitment; however, they assessed the results at the organizational level and not at the patient level.

Research Gap. Although the existing literature supports the conclusions that HRM practices enhance performance, retention, and even environmental sustainability, very little literature directly models patient satisfaction as the primary outcome mediated by employee engagement. The majority of studies end at organizational performance, where patient-centered metrics are not considered. Therefore, the combination of HRM practice - Employee Engagement - Patient Satisfaction needs an integrated framework to address the realities of healthcare service delivery.

## IV. OBJECTIVES OF THE STUDY

The current research will fill the research gap identified in the literature by connecting HRM practices and patient satisfaction via the mediating effect of employee engagement in healthcare. The specific objectives are:

1. The research question is to determine the most critical HRM practices such as recruitment and selection, training and development, performance appraisal, rewards, employee involvement, and Green HRM that affect employee engagement in healthcare organizations.

2.In order to investigate the correlation between employee engagement and patient satisfaction, it is important to note the role of engaged employees in enhancing the quality of services and care experiences.

3.To examine the mediating effect of employee engagement in the relationship between HRM practices and patient satisfaction outcomes.

4.To offer some practical suggestions on how HRM strategies can be structured by healthcare managers and policymakers to enhance employee engagement and patient-centered outcomes.

# V. RESEARCH FRAMEWORK AND HYPOTHESES

The study is based on the observations offered by Rotea et al. (2023) and Shanthi et al. (2023) to derive a conceptual framework, according to which Human Resource Management (HRM) activities are the independent variables, employee engagement the mediator, and patient satisfaction the dependent variable. The framework presupposes that the successful work of HRM ensures that the employees are engaged, and subsequently, the level of patient

satisfaction increases. Also, the Green HRM practices are considered a separate variable, which is supposed to improve the levels of employee pride, organizational reputation, and indirectly affect the level of patient trust and satisfaction.

Based on the above research framework, the following hypotheses are hypothesized:

H1: Recruitment and selection practices positively influence employee engagement in healthcare institutions at a significant level.

H2: The training and development programs increase the level of employee engagement and thus lead to the level of better patient satisfaction.

H3: Reward systems and performance appraisal have a positive impact on employee engagement in a healthcare facility.

H4: Employee engagement and service delivery have a positive correlation with employee involvement and empowerment.

H5: The practices of green HRM will support employee pride and commitment, which in turn will result in increasing engagement and an indirect effect on patient satisfaction.

H6: The relationship between HRM practices and patient satisfaction is mediated by the employee engagement such that an efficient HRM practices indirectly enhances the level of patient satisfaction through better employee engagement.

#### VI. RESEARCH METHODOLOGY AND RESULTS

# Research Methodology

The research design of this study is a quantitative and cross-sectional study, which examines the relationship between Human Resource Management (HRM) practices and patient satisfaction mediated by employee engagement in the healthcare organizations. The design is explanatory in nature because it aims not only to describe the existing conditions but also to reveal cause-effect relationships.

# Population and Sampling

The study group comprised two categories of people, which included healthcare workers and patients. The employees were doctors, nurses, paramedical employees, and administrative employees dealing with patient care. The patients consisted of inpatients and outpatients who had undergone services in the recent past. Balanced representation was made possible

through the use of stratified random sampling technique. The last sample

consisted of 300 employees and 500 patients of both the public and private hospitals.

Table 1. Respondent Category	Count (n)
Doctors	90
Nurses	140
Paramedical/Admin	70
Inpatients	280
Outpatients	220
Total	800

#### Data Sources:

<u>Primary Data:</u> The data is collected using structured questionnaires.

The HRM practices (recruitment, training, appraisal, rewards, involvement, Green HRM) were evaluated and measures of engagement in the Q12 HRM survey provided by Gallop.

The survey on patients measured satisfaction on the basis of SERVQUAL model, which encompassed reliability, assurance, responsiveness, empathy and tangibles.

<u>Secondary Data:</u> Hospital records, accreditation reports, policy documents, and published literature which were included. These sources were used to provide background information and external confirmation, as well as to make sure that the findings are related to the overall trends and standards in healthcare.

# Measurement and Analysis

The measurement of each construct was done on a fivepoint Likert scale (1 = strongly disagree, 5 strongly agree). Data analysis involved:

- 1. Profiling respondents with descriptive statistics.
- 2. Cronbach Alpha Reliability tests.
- 3. Factor analysis of HRM and satisfaction construct to justify.
- 4.Relationships to be analyzed using regression and correlation.
- 5.The framework was tested by Structural Equation Modeling (SEM).
- 6.Bootstrapped mediation analysis to ensure the role of engagement as a mediator.

#### Results

Factor Structure Reliability: All the measurement scales were very reliable with Cronbachs Alpha above 0.79. Factor analysis established two groups of HRM, Traditional HRM (recruitment, training, appraisal, rewards, involvement) and Green HRM. Adequacy of sampling was good (KMO = 0.88, Bartlett absent p < 0.001).

Structural Equation Modeling: The SEM delivered a great model fit (CFI = 0.97, RMSEA = 0.037), as it explained 62 percent of the variance in the employee engagement and 65 percent of the variance in patient satisfaction.

- The engagement of the employees was considerably predetermined by HRM practices ( $\beta = 0.62$ , p < .001).
- Participation was an important predictor of patient satisfaction ( $\beta = 0.56$ , p < .001).
- HRM also impacted on the satisfaction less directly ( $\beta = 0.24$ , p = 0.003).

### **Key Findings**

The strongest HRM predictors of engagement were training (b = 0.30) and employee involvement (b = 0.22).

The interpersonal care was significant as empathy (b = 0.62) and responsiveness (b = 0.58) had the greatest impact on patient satisfaction.

Similarity of results, mediation analysis revealed the existence of partial mediation where engagement explained a meaningful percentage of the influence of HRM on satisfaction (indirect influence = 0.35, p <.001).

This research demonstrates that the HRM practices have a great impact in enhancing patient satisfaction by engaging employees, and the most effective practices are training and involvement. The results can be generalized based on the findings of Rotea et al. (2023), who attributed HRM to organizational performance and proved that patient satisfaction is another outcome. They also complete Shanthi et al. (2023) who focused on Green HRM as the means to achieve sustainability and disclosed its indirect contribution to the development of engagement and trust in patients. In general, the research establishes the presence of HRM practices that do not only increase efficiency, but also

patient-centered care, but also by placing employee engagement at the center of the mediating factors.

### VII. INTERPRETATION AND DISCUSSION

This research proves that the HRM practices have a profound impact on patient satisfaction, and employee engagement is the most significant mediator. This offers new ideas on how the HRM strategies in the healthcare organisations ought to be set to ensure that they not only produce efficiency but also patient-centered results.

HRM Practices and Engagement of Employees: The findings demonstrated that employee involvement and the training and development are the strongest predictors of employee engagement based on the HRM practices. This is not new to Rotea et al. (2023), who it is the policies of HRM that reduce employee desertion and raise retention in case of organizational change. Nevertheless, the current study unlike theirs relates those practices to patient satisfaction through engagement and thus broadens the performance parameters of efficiency. Anitha (2014) made similar findings and contended that training and empowerment bring about more employee motivation and service orientation, which consequently advances customer satisfaction.

Employee Engagement as a Mediating Personality: Employee engagement was established to be a partial mediator between HRM practices and patient satisfaction. This shows that although HRM partially impacts patient experiences, the real impact is felt in an indirect manner as more engaged employees are more emphatic, responsive, and assured. This result expands the mediating frameworks by Rotea et al. (2023) and the argument of Al Mehrzi and Singh (2016), who discovered that engaged employees demonstrate a higher commitment to the organization and service quality. The current research confirms this in the healthcare setting where patients are the biggest beneficiaries in the event of staff motivation and emotional commitment to work.

Green and Patient-Centered HRM: Green HRM factor played weaker roles than traditional HRM factors, but also significant. The level of involvement was higher in employees of sustainable and environmentally friendly organizations, and it was consequently amplified into patient trust and satisfaction. This observation is in line with Shanthi et al. (2023), who put forward the

argument that Green HRM enhances competitiveness and employee satisfaction. Continuing their research, the present paper proves that sustainable HRM also brings indirect benefits to patients. This is in line with the results of Haque et al. (2017), who demonstrated that ethical and responsible leadership improves employee commitment and service quality.

Services Quality Dimensions and Patient Satisfaction: The findings underscore the fact that employee engagement has the greatest impact on two fundamental aspects of patient-centered care, which are empathy and responsiveness. This result is in line with a similar study (Hall et al., 2010) that discovered that job satisfaction and organization culture among clinicians determine the levels of interaction with patients and the quality of care. Patients appreciate the importance of being heard and being served in a short time and the employees who are engaged will tend to deliver such behaviors. Technical efficiency though significant, seems to be in the background of service quality interpersonal.

### VIII. IMPLICATIONS

This study results are significant to theory, practice and policy in healthcare management.

- Theoretical Implications: The paper expands the literature on HRM-performance by introducing the patient satisfaction as a core outcome. Earlier studies like Rotea et al. (2023) prioritized performance in an organization in terms of change processes, and Shanthi et al. (2023) in terms of efficiency and sustainability in terms of Green HRM. The current study enhances these and goes a step further to establish that HRM practices do not just lead to efficiency and sustainability but also to patient-focused outcomes. The research confirms that employee engagement is a valid mediating factor, as is believed in the Social Exchange Theory, which proves that engaged employees due to the supportive HRM practices provide better patient experience.
- Practical Implications: The study provides a number of insights on action to healthcare managers:

Focus on training and development: Ongoing learning opportunities will increase the skills and emotional

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intelligence of the employees, which increases the level of engagement and patient satisfaction.

Promote participation and empowerment: Involvement with decision making makes the patient have a sense of ownership, which enhances behavior that is patient-centered.

Provide equitable appraisal and reward system: Staff should be motivated by recognition and incentives that are based on performance to provide consistent quality care.

Become a Green HRM: Sustainability programs create pride in employees and provide better institutional reputation, which indirectly affects patient trust.

 Policy Implications: On a bigger scale, policymakers and accreditation agencies can incorporate engagement-oriented HRM models in the healthcare quality services. As an example, the accreditation of hospitals can entail the standards of training, employee welfare, and involvement programs as they are part of patient satisfaction.

#### IX. LIMITATIONS & FUTURE SCOPE

Similar to any empirical study, there are limitations to this study:

Cross-sectional design: The research measures relations at a single point in time which hinders the possibility of tracing the variations in engagement and satisfaction over extended periods.

Geographic and institutional coverage: Only a few hospitals were chosen; the results cannot be disseminated to represent all regions and healthcare systems.

Self-reported information: Both employee and patient surveys were based on perceptions, which can create bias in the responses.

Pay attention to the chosen HRM practices: Although training, appraisal, involvement, and Green HRM were considered, the rest of the HR practices, including leadership development or digital HRM, were left out.

# Future Scope

These limitations can be solved by future research work:

- Longitudinal research to study the changes in HRM practices and engagement with time and their long run impact on patient satisfaction.
- A broader study to explore multi country comparisons of the study, to have a sense of

- cultural and structural disparities in healthcare HRM systems.
- Adding qualitative methods (interviews or focus groups) to obtain more information on how employees and patients perceive HRM initiatives.
- Researching the emerging fields of digital HRM, artificial intelligence in the HR business, and the adoption of e-HRM in the sphere of healthcare that can contribute substantially to engagement and satisfaction in the future.
- The experimentation of more mediating or moderating variables, including organizational culture or leadership style, to construct a more advanced model of HRM-patient satisfaction interrelations.

#### X. CONCLUSION

This paper has analyzed the effect of Human Resource Management (HRM) practices on patient satisfaction in medical institutions, where employee engagement is used as an intermediate. The study contributed to the works of Rotea et al. (2023) and Shanthi et al. (2023), as it expanded the HRM-performance paradigm by choosing the results on patients as a focal point. The results affirmed that employee engagement is strongly predicted by HRM practices, specifically, training and development, and employee involvement. As they are made to feel that they are appreciated, empowered and better placed to perform, these practices enable the employees to be stronger attached to the organization and the patients they serve. The research also found out that HRM and patient satisfaction are partially connected through employee engagement. Although HRM practices have a direct impact on satisfaction to some degree, the biggest impact is achieved indirectly though employees who are engaged are more likely to demonstrate increased levels of empathy and responsiveness, which are the most valued qualities of patients. The position of Green HRM became also significant albeit less significant than conventional ways. Sustainable HRM programs increased employee pride and organizational image thus increasing patient trust indirectly. This gives the studies of Shanthi et al. (2023) a continuation of showing that Green HRM is not only about internal efficiency but patient-centered outcomes as well.

In theory, the research contributes to the literature on HRM by confirming the role of employee engagement as a key process connecting HRM to patient satisfaction, which is missing in other previous studies, like Rotea et al. (2023). It also supports the Social Exchange Theory which argues that the employees will reward the supportive HR practices with increased dedication and better service delivery. In a practical sense, the results emphasize the idea that HRM is to be regarded as a strategic lever in healthcare. Continuous training and fair appraisal, empowerment and recognition, and sustainability programs should be prioritized by managers to avoid the engagement and consequently improve patient satisfaction. Finally, HRM practices are not only administrative tools, but effective methods of attaining patient-centered care. Through investing in staff and establishing engagement, healthcare institutions can provide high standards of service delivery and establish patient confidence and long-term performance.

#### REFERENCE

- [1] N. A. Mehrzi and S. K. Singh, Competing through employee engagement: proposed framework, International Journal of Productivity and Performance Management, vol. 65, no. 6, pp. 831-843, Jun. 2016, doi: 10.1108/ijppm-02-2016-0037.
- [2] Kellner, K. Townsend, A. Wilkinson, and D. Peetz, Decaf or double shot? Strength of franchisor control over the HRM in coffee franchises," Human resource management journal, vol. 24, no. 3, pp. 323-338, Mar. 2013, doi: 10.1111/1748-8583.12020.
- [3] J, Determinants of employee engagement and its effect on employee performance, International Journal of Productivity and Performance Management, vol. 63, no. 3, pp. 308-323, Mar. 2014, doi: 10.1108/ijppm-01-2013-0008.
- [4] Work engagement model A. B. Bakker and E. Demerouti, "Towards a model of work engagement," Career Development International, vol. 13, no. 3, pp. 209-223, May 2008, doi: 10.1108/13620430810870476.
- [5] Demerouti, A. B. Bakker, F. Nachreiner and W. B. Schaufeli, "The job demands-resources model of burnout.," Japanese Journal of Management, no.3, 2001, pp. 499-512, doi: 10.1037/0021-9010.86.3.499.
- [6] J. P. Meyer and N. J. Allen, A three-component conceptualization of organizational commitment,

- Human Resource Management Review, vol. 1, no. 1, pp. 61-89, Mar. 1991, doi: 10.1016/1053-4822(91)90011-z.
- [7] A.M. Saks, "Antecedents and consequences of employee engagement," Journal of Managerial Psychology, vol. 21, no. 7, pp. 600-619, Oct. 2006, doi: 10.1108/02683940610690169.
- [8] S. S. Tzafrir, A universalistic approach to explaining the correlation between HRM practices and firm performance at various times, Journal of Managerial Psychology, vol. 21, no. 2, 109-130, 50730/610650730, 2006, pp. 109-130.
- [9] P. Warr and I. Inceoglu, "Job engagement, job satisfaction and opposite relations with person-job fit. Occupational health psychology, vol. 17, no. 2, pp. 129-138, Feb. 2012, doi: 10.1037/a0026859.
- [10] Z. Y. Yalabik, P. Popaitoon, J. A. Chowne and B. A. Rayton, Work engagement as a mediator between employee attitudes and outcomes, The International Journal of Human Resource Management, vol 24, no. 14, 2799-2823, 2013, doi: 10.1080/09585192.2013.763844.
- [11] X.Zhao, J. G. Lynch and Q. Chen, Reconsidering Baron and Kenny: Myths and Truths about Mediation Analysis, Journal of Consumer Research, vol. 37, no. 2, pp. 197-206, February 2010, doi: 10.1086/651257.
- [12] Bhatnagar, "Talent management strategy of employee engagement with the Indian ITES employees: key to retention," Employee Relations, vol. 29, no. 6, p. 640-663, and doi: 10.1108/01425450710826122, Oct. 2007.
- [13] T. Delaney and M. A. Huselid, The impact of human resource management practices on perceptions of organizational performance, Academy of Management Journal, vol. 39, no. 4, pp. 949-969, Aug. 1996, doi: 10.5465/256718.
- [14] J. K. Harter, F. L. Schmidt and T. L. Hayes, Business-unit-level relationship between employee satisfaction, employee engagement, and business outcomes: A meta-analysis. Journal of Applied Psychology, vol. 87, no. 2, pp. 268-279, Jan. 2002, doi: 10.1037/0021-9010.87.2.268.
- [15] W. Kim, J. A. Kolb, and T. Kim, "The interaction of work engagement and performance," Human Resource Development Review, vol. 12, no. 3, pp. 248-276, Oct. 2012, doi: 10.1177/1534484312461635.

- [16] J. Paauwe and P. Boselie, "HRM and performance: what next?," Human Resource Management Journal vol. 15, no. 4, pp. 68-83, Nov. 2005, doi: 10.1111/j.1748-8583.2005.tb00296.x.
- [17] L. Jeffs et al., Enabling role of manager in engaging clinicians and staff in quality improvement, Journal of Nursing Care Quality, vol. 31, no. 4, pp. 367-372, May 2016, doi: 10.1097/ncq. 0000000000000196.
- [18] J. Lee, Between Fragmentation and Centralization: South Korean Industrial Relations in transition, British Journal of Industrial Relations, vol. 49, no. 4, pp. 767- 791, Aug. 2011, doi: 10.1111/j.1467-8543.2011.00876.x.
- [19] N. Claus, P. Watts, and J. Moss, "Medical Surgical Nurse Self-perceived competency in Posttraumatic Stress Disorder/Substance Use Disorder Veteran Care in a Non-Veterans Health Administration setting," JONA the Journal of Nursing Administration, vol. 50, no. 4, pp. 203-208, Mar. 2020, doi: 10.1097/nna.0000000000000
- [20] K. W. Agotnes, S. V. Einarsen, J. Hetland, and A. Skogstad, The moderating effect of the laissez-faire leadership on the association between the coworker conflicts and the new instances of workplace bullying: a true prospective design, Human Resource Management Journal, vol. 28, no. 4, pp. 555-568, Jul. 2018, doi: 10.1111/1748-8583.12200.
- [21] Authentic leadership, empowerment and burnout: comparison in new graduates and experienced nurses, H. K. S. Laschinger, C. A. Wong, and A. L. Grau, Journal of Nursing Management, vol. 21, no. 3, pp. 541-552, Apr. 2012, doi: 10.1111/j.1365-2834.2012.01375.x.
- [22] M. Gagne and E. L. Deci, Self-determination theory and work motivation, Journal of Organizational Behavior, 26: 4:331-362, Apr. 2005, doi: 10.1002/job.322.
- [23] J. G. Hutton, A. K. Y. Mak, Is a picture worth a thousand words? Teaching, and learning, public relations through films and television shows," Public Relations Review, vol. 40, no. 3, pp. 585-594, Apr. 2014, doi: 10.1016/j.pubrev.2014.03.003.
- [24] F. Manzoor, L. Wei, A. Hussain, M. Asif, and S. I. A. Shah, Patient Satisfaction with Health Care Services; an Application of Physician as a Moderator; behavior of a physician, International

- Journal of Environmental Research and Public Health, vol. 16, no. 18, p. 3318, Sep. 2019, doi: 10.3390/ijerph16183318.
- [25] Moreno and J. Kang, "How to reduce consumer scepticism about corporate responsibility: the content and delivery in CSR communications, Corporate Social Responsibility and Environmental Management, vol. 27, no. 6, pp. 2477-2490, May 2020, doi: 10.1002/csr.1969.
- [26] Craig, M. W. Allen, M. F. Reid, C. K. Riemenschneider, and D. J. Armstrong, The impact of career mentoring and psychosocial mentoring on affective organizational commitment, job involvement, and turnover intention, Administration and Society, vol. 45, no. 8, pp. 949-973, Jul. 2012, doi: 10.1177/0095399712451885.
- [27] M. M. Jenkin, E. A. Youngstrom, J. K. Youngstrom, N. C. Feeny, and R. L. Findling, "Generalizability of evidence-based assessment recommendations to pediatric bipolar disorder.," Psychological Assessment, vol. 24, no. 2, pp. 269-281, Oct. 2011, doi: 10.1037/a0025775.
- [28] J. Bhatnagar, "Management of innovation: role of psychological empowerment, work engagement and turnover intention in Indian context, The International Journal of Human Resource Management, vol. 23, no. 5, pp. 928-951, Feb. 2012, doi: 10.1080/09585192.2012.651313.
- [29] J. Cao and M. Hamori, the influence of management development practices on organizational commitment, Human Resource Management, vol. 55, no. 3, pp. 499-517, Apr. 2015, doi: 10.1002/hrm.21731.
- [30] Y. Gong, J.-C. Huang, and J.-L. Farh, "Employee learning Orientation, transformational leadership and employee Creativity: The mediating role of employee Creative Self-Efficacy," Academy of Management Journal, vol. 52, no. 4, pp. 765-778, Aug. 2009, doi: 10.5465/amj.2009.43670890.
- [31] N. Gupta and V. Sharma, "Exploring Employee Engagement' a way to enhance better Business performance," Global Business Review, vol. 17, no. 3\_suppl, 45S-63S, May 2016, doi: 10.1177/0972150916631082.
- [32] J. M. Jensen, P. C. Patel, and J. G. Messersmith, High-performance work systems and job control, Journal of Management, vol. 39, no. 6, 1699-1724, Sep. 2011, doi: 10.1177/0149206311419663.

- [33] O. M. Karatepe, High-performance work practices and hotel employee performance: The mediation of work engagement, International Journal of Hotel Management, vol. 32, pp. 132-140, May 2012, doi: 10.1016/j.ijhm.2012.05.003.
- [34] S. C. Kundu and A. Mor, "Workforce diversity and organization performance: the case of the IT industry in India," Employee Relations, vol. 39, no. 2, pp. 160-183, Jan. 2017, doi: 10.1108/er-06-2015-0114.
- [35] Li, K. Sanders, and S. Frenkel, How leader-member exchange, work engagement and HRM consistency explain Chinese luxury hotel employees job performance, International Journal of Hospitality Management, vol. 31, no. 4, pp. 1059-1066, Feb. 2012, doi: 10.1016/j.ijhm.2012.01.002.
- [36] J. P. Meyer and E. R. Maltin, Employee commitment and well-being: A critical review, theoretical framework and research agenda, Journal of Vocational Behavior, vol. 77, no. 2, pp. 323-337, May 2010, doi: 10.1016/j.jvb.2010.04.007.