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# Strategies to Increase Employee Engagement in Long-Term Residential Agencies

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# Walden University

College of Management and Technology

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Corey Odell Fair

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Walden University  
2018

Abstract

Strategies to Increase Employee Engagement in Long-Term Residential Agencies

by

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MA, Webster University, 2007

BA, Coker College, 2003

Doctoral Study Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Business Administration

Walden University

January 2018

## Abstract

Disengaged employees adversely affect organizational strategies to promote higher standards of care and quality of life for long-term residential patients. The purpose of this single case study was to explore strategies healthcare leaders use to engage employees. The targeted population for this study was the senior leaders of a long-term residential care agency located in South Carolina who had initiated strategies and practices to engage employees. Kahn's theory of personal engagement and disengagement was the conceptual framework for this study. Data collection included semistructured face-to-face interviews with open-ended questions, and the long-term residential agency's employee handbook, training agenda, and incentive program. Data were transcribed, coded, and then validated through member checking and triangulation, resulting in the development of 6 themes: leadership attentiveness to promote workplace meaningfulness, incorporation of robust communication policies and procedures, organizational support for engagement, fostering interpersonal relationships for increased employee value, meaningful rewards and recognition, and training and development for personal and professional growth. Leaders have a significant role in the development of conditions within the work environment that foster employee engagement. The implications for positive social change include the improvement of physical and social qualities of life for long-term residential patients and their families, the ease of financial burdens for healthcare professionals, and a reduction in the amount of tax revenue needed to support the needs of aging U.S. citizens.

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## Dedication

I dedicate this study to my life's partner Krystal and our children. Thank you for so many prayers. Your faith and strength carried me through tough times. Thank you for believing, with me, our Father's plan and will for our lives. Also to my late father O'dell (1956-2014) who taught me to trust and believe in God to achieve and excel above all that I request or dream. To my daughters Kierra and Kori, here I build on the foundation of my legacy for you. Upon my legacy you will complete the work that our Father has for you. To my mother, I love you. Little truly became much when I realized that all you had was all I needed, your love. You birthed the first member of our family to earn a doctoral degree. I am eternally grateful that our Father chose you.

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I would like to thank my Heavenly Father for the abundance of life gifted to me through the series of relationships developed during this journey. To Dr. Ghormely (Chair), I am thankful that you were a guiding light and my beacon of hope through the many doctoral valleys. I am grateful for all that you are. To Dr. Figgers (Mentor), thank you for lending a shoulder, ear, wisdom, and understanding. To my extended family thank you for your patience and support during this journey.

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## Section 1: Foundation of the Study

The healthcare industry has evolved significantly in the areas of operations management and supply chain management in recent years (Dobrzykowski, Deilami, Hong, & Kim, 2014; Pourabdollahian & Copani, 2014). Scholars contend that information and strategies that promote a collaborative and decentralized view of engagement could enhance service quality and increase productivity (Dobrzykowski et al., 2014; Pourabdollahian & Copani, 2014). Thus, to receive the maximum level of contribution from employees, leaders of long-term residential care agencies need to evaluate the psychological and organizational environment for opportunities to increase productivity through engagement strategies (Gabel-Shemueli, Dolan, & Suárez Ceretti, 2015).

### **Background of the Problem**

The healthcare needs of aging U.S. citizens are growing at an unprecedented rate (Harris-Kojetin, Sengupta, Park-Lee, & Valverde, 2013). By the year 2030, 1 in 5 U.S. citizens will be over the age of 65 (Ortman, Velkoff, & Hogan, 2014). Moreover, increased healthcare costs have caused business leaders to research, restructure, and develop strategies to sustain service quality while operating on a more restricted budget (Cutler, 2015). Leaders are redistributing workloads and responsibilities among employees to maintain financial stability, leading to lower performance and a compromise of service quality by employees (Chodorow-Reich, 2014).

Researchers have shown there is a strong correlation between levels of employee engagement and levels of employee performance (Kotze, van der Westhuizen, & Nel,

2014). Organizations that exhibit higher levels of engagement outperform organizations that exhibit lower levels of engagement (Li & Liao, 2014; Wiley, 2013). Kotze et al. (2014) posited that one of the benefits of high levels of engagement is productivity. However, more than half of U.S. workers are disengaged, and organizations continue to lose billions of dollars annually due to this phenomenon (Brennan & Monson, 2014). Nurses scored lowest on job engagement and highest on burnout of any healthcare group of healthcare workers (Gabel-Shemueli et al., 2015). Chabok, Javadi, Jafari, Shahrokh, and Mousavi (2013) noted that, at the most fundamental level of engagement, leaders must implement strategies to manage employee commitment, support continuous training and development, and measure performance to increase productivity.

### **Problem Statement**

Disengaged employees adversely affect organizational strategies to promote higher standards of care and quality of life for long-term residential care patients (Gabel-Shemueli et al., 2015; Liu, Norman, & While, 2013). According to Dempsey and Reilly (2016), 15% of nurses in the United States are disengaged, costing an estimated \$333,000 in lost productivity annually. The general business problem was that employee disengagement affected organizational productivity. The specific business problem was that some healthcare leaders lack employee engagement strategies.

### **Purpose Statement**

The purpose of this qualitative single case study was to explore strategies healthcare leaders use to engage employees. The targeted population for this study was senior leaders of a long-term residential care agency located in South Carolina who had

initiated strategies and practices to engage employees. The findings may contribute to positive social change because increased employee engagement could (a) enhance the quality of life for members of the community who stand to benefit from long-term residential care services, (b) lower taxpayer entitlement costs, (c) reduce the incidence of medical error, and (d) increase quality patient care services.

### **Nature of the Study**

I used a qualitative method for this study. Researchers use the qualitative method to explore perceptions of participants who have experienced a given phenomenon (Tracy, 2013). Qualitative research was appropriate for this study because I explored the phenomenon as experienced by the participants. Quantitative researchers examine numerical data to test a hypothesis (Hoe & Hoare, 2013). Because I did not gather numerical data to test a hypothesis, the quantitative method was not appropriate. Researchers use mixed methods to integrate objective and subjective data to highlight specific matters within a topic of interest (Tracy, 2013). Mixed methods research was not an appropriate method for this study because a combination of objective (quantitative) and subjective (qualitative) data was not needed to address the research question.

I selected a case study design for this research. According to Yin (2014), researchers use a case study as an empirical inquiry to understand a phenomenon within a real context. Researchers utilizing case studies proceed from a realist perspective: a single reality independent from the observer or with the researcher as a dependent observer (Yin, 2014). A case study design was most appropriate to explore the strategies that leaders used to engage employees because I proceeded from a realist perspective

serving as the independent observer of the phenomenon. Ethnographic researchers immerse themselves in a culture to describe a phenomenon from the view of the study participant (Mifsud, 2015). Because the scope of my study did not involve describing a participant's viewpoint of a culture, an ethnographic design was not appropriate. In phenomenological studies, the researcher seeks to explore the lived experience of individuals who have encountered a particular occurrence (Moustakas, 1994). However, the phenomenological design was not applicable because I did not explore a specific phenomenon through lived experiences.

### **Research Question**

What strategies do healthcare leaders use to engage employees?

### **Interview Questions**

The interview questions were as follows:

1. What strategies do you use to ensure employee meaningfulness for workplace engagement?
2. What strategies do you use to ensure employee value for workplace engagement?
3. What strategies do you use to ensure a sense of return on investment for employees?
4. What strategies do you use to encourage a safe work environment where employees are free to express themselves in work activities?
5. What strategies do you use to ensure a sense of trust in leadership?



6. What physical resources do you use to ensure employee investment in role performance?
7. What emotional resources do you use to ensure employee investment in role performance?
8. What confidence-building strategies do you use to ensure employee investment in role performance?
9. What more can you add regarding this study?

### **Conceptual Framework**

I used the theory of personal engagement and disengagement (TPED) as the conceptual framework for this study. Kahn (1990), the author of TPED, proposed that engagement occurs the moment employees inhabit their work-related roles physically, cognitively, and emotionally. Kahn (1990) established the central tenets of TPED, explaining that engagement behaviors stem from a worker's perception of meaningfulness, safety, and availability. Kahn (1990) introduced TPED as a theoretical framework to understand the antecedents and processes that lead employees to engage in the work environment. Kahn and Fellows (2013) determined that workers engage on various levels based on their ability to insert true expressions of themselves into work roles. I analyzed my study findings through the lens of TPED.

### **Operational Definitions**

*Availability:* Li and Tan (2013) stated that availability refers to an employee's belief in self-investment for physical, emotional, and psychological resources to produce meaningful outcomes when performing work-related tasks.

*Employee Value:* Scholars describe employee value as the effort of leaders to recognize the talent, knowledge, and skills of each member of the organization (Barrick, Thurgood, Smith, & Courtright, 2015; Costa, Cook, & Dierickx, 2013; Shanafelt et al., 2015). Leaders can increase productivity by acknowledging the value of employee input and developing strategies that reinforce desirable behaviors (Beliveau, 2013).

*Emotional Resources:* Emotional resources represent the strategies or programs leaders implement to support employee morals and values that guide emotional attachment or commitment to work activities (Kiazad, Holtom, Hom, & Newman, 2015).

*Long-Term Residential Care Agency:* Long-term residential care agencies provide indefinite residential placement and care for individuals with physical and mental illnesses in settings such as hospitals, day care, hospice, and residential communities (Henwood, Katz, & Gilmer, 2015; Smith, 2013).

*Meaningfulness:* Meaningfulness is the value employees attach to their involvement and contributions to organization goals (Paterson, Luthans, & Jeung, 2014).

*Physical Resources:* Physical resources are the material means by which workers complete their assignments or meet expectations (Memon, Salleh, Baharom, & Harun, 2014).

*Safety:* Safety is the contextual state of refuge in which employees are free to invest their true emotional and psychological characteristics without fear of embarrassment, ridicule, or retribution (Cappelen et al., 2014; Kahn, 1990; Li & Tan, 2013).

*Senior Leader(s)*: Senior leaders include executives, human resources (HR) managers, and residential and nursing services directors (Komarudin, De Feyter, Guerry, & Berghe, 2016).

### **Assumptions, Limitations, and Delimitations**

#### **Assumptions**

Assumptions are basic, underlying factors of a study that are out of a researcher's control (Leedy & Ormond, 2014). Two assumptions guided this research. The first assumption was that all participants would be genuine and truthful in their responses. The second assumption was that patterns and themes would emerge from participant responses.

#### **Limitations**

Ndimande, Chisoro, and Karodia (2016) defined limitations as possible weaknesses in the study that are beyond a researcher's control. A concern regarding the participants' ability to articulate their knowledge and understanding of the study topic did not manifest. However, my application of inclusion criteria may have limited the quality of interview data collected for this study.

#### **Delimitations**

Delimitations are characteristics that shape and define boundaries of a study, as well as limit the scope of the proposed endeavor (Neutens & Rubinson, 2014). The first delimitation was that the personal biases of long-term residential care leaders could potentially contaminate the outcome of the study results. The second delimitation was that the combination of interviews and an archival document used to collect and

triangulate data may exclude useful information that I could gain through other qualitative or quantitative research designs. Next, I analyzed the findings solely through the lens of TPED. Another delimitation of this study was that I only interviewed leaders from one long-term residential care agency. My decision to conduct a case study on a single organization might affect the application of my study findings across the long-term healthcare industry. Lastly, the population of this study was delimited to organizational leaders of long-term residential care agencies located in South Carolina.

### **Significance of the Study**

The study results may be valuable to long-term residential facilities and patrons. The exploration of engagement strategies might allow healthcare leaders to enhance engagement for productivity among workers. Leaders have a significant role in the development of a work environment that fosters engagement to enhance the quality of life for patients and their families (Gabel-Shemueli et al., 2015; Liu et al., 2013).

### **Contribution to Business Practice**

Price and Whiteley (2014) noted that developing and sharing core values positively affects employee engagement among all organizational members. Bandura and Lyons (2014) identified employee engagement as one of the key components of increased performance for strategic management. Moreover, Kerns (2014) concluded that member engagement could affect profits, sales, and organizational return on investment. Data from this study may provide leaders with strategies to enhance employee engagement and mitigate employee disengagement for increased productivity. The findings of this study addressed a gap in business practice regarding employee engagement strategies.

## **Implications for Social Change**

The volatile state of the U.S. economy has forced organizational leaders to revisit strategic alignment of resources necessary to meet the needs of the aging and disabled population in the United States (Henwood et al., 2015; Smith, 2013). In 2013, the South Carolina Ombudsmen Office investigated 8,394 grievances in residential healthcare facilities and reported that safety (accidents and improper handling as a result of disengaged employees) was the chief complaint among long-term residential care agencies (Ombudsman, 2013). Information regarding employee engagement strategies and practices may increase the quality of care provided to individuals receiving services through long-term residential care agencies (Van Malderen, Mets, De Vriendt, & Gorus, 2013). Social change manifests through engaged employees because engaged employees improve the physical and social qualities of life for the patients and their families. Society benefits when community members are assured that an aging and disabled population receives efficient and effective care. Furthermore, healthcare employee engagement may reduce treatment cost and federal and state tax burdens on a community.

## **A Review of the Professional and Academic Literature**

A review of literature is required to establish the entry point of a specific study into a larger body of research (Balakumar, Inamdar, & Jagadeesh, 2013). I used this literature review to (a) assess the body of research, (b) confirm that the study addressed a gap in research, and (c) advanced the current body of research regarding a specific topic. Literature reviews are an integral part of research and help investigators outline and develop research questions that guide studies (Hodgkinson & Ford, 2015; McGinn,

Taylor, McColgan, & McQuilkan, 2016).

Literature applicable to business strategies indicated that a significant correlation exists between employee engagement and organizational productivity (Hsu, Shinnar, & Powell, 2014; Kahn, 1990; Memon et al., 2014; Nimri Bdair, & Bitar, 2015). Therefore, the objective of this literature review was to explore and synthesize literature relevant to employee engagement and productivity. The sections for the review of the professional and academic literature that pertained to this study included: organizational leadership, organizational productivity, employee engagement, the business of healthcare, long-term residential care, and theories related to engagement and motivation and the conceptual framework.

The peer-reviewed article search process involved the following databases: Google Scholar, Gale, JSTOR, Science Direct, EBSCOhost, and ProQuest. Keywords included *HR development, leadership, long-term care, employee engagement, employee motivation, productivity, organizational development, residential care, and strategic alignment*. I collected information from 187 resources for the literature review, of which 186 (99%) were peer-reviewed articles and 176 (94%) were published between 2013 and 2016.

This literature review included scholarly work related to strategies that long-term residential care agency leaders may use to enhance employee engagement. First, I discuss TPED and compare theories. Then I explore the generalizability of organization leadership, employee engagement, engagement work culture, long-term residential healthcare, and the perceived benefits of employee engagement. The good of employee

engagement and productivity requires that leaders search beyond the status quo to identify and organize rare, imitable, and value-adding resources (Barrick et al., 2015; Lin & Wu 2014; Schneider, 2015). In effect, this literature review may serve as a benchmark for leaders to evaluate current literature regarding employee engagement strategies for increased productivity.

The purpose of this qualitative single case study was to explore strategies healthcare leaders use to engage employees. The engagement of healthcare employees increases productivity, which has a wide-ranging effect on healthcare services, healthcare products, hospitals, transportation, and safety (Heckman et al., 2016; Nazir et al., 2013; Suter et al., 2014). The findings could contribute to positive social change through the development of motivated, proactive, and empathetic employees within the healthcare industry.

### **Theory of Personal Engagement and Disengagement**

Kahn (1990), in seminal engagement research, proposed that engagement occurs the moment employees inhabit their work roles physically, cognitively, and emotionally. Kahn and Fellows (2013) asserted that workers moderate engagement levels according to their ability to insert true expressions of themselves into work-related roles. According to the central tenets of TPED, work environments should support the worker's perception of meaningfulness, safety, and availability (Kahn, 1990). Kahn (1992) iterated that employees are more apt to exert discretionary effort when the work environment is favorable and beneficial to the individual implanting personal and professional characteristics into the role performance. In support, Kahn and Heaphy (2014) advanced

the fundamental principles of TPED, declaring that employees disengage when organizational leaders fail to incorporate the strategies and practices necessary to support a worker's individuality, ideas, and passions.

Through the conceptual framework of TPED, researchers have explored the external and intrinsic factors of human behavior to reveal a comprehensive view of elements that influence employees' decisions to insert whole or fragmented portions of themselves when executing their work roles (Costa, Passos & Bakker, 2014; Memon, et al., 2016; Romans & Tobaben, 2016; Zhong, Wayne, & Liden, 2016). Work engagement interrelates with the psychological assessment employees use to measure the significance of the work role (Kahn, 1992; Kahn & Fellows, 2013). In extended research, utilizing TPED, Kahn (1992) submitted that when workers embed psychologically, they are more observant, attached, cohesive, and absorbed in their function as members of the organization.

Teamwork, leadership, growth, and environment are the psychological drivers of personal engagement within an organization (Costa et al., 2014; Memon et al., 2014; Romans & Tobaben, 2016; Zhong et al., 2016). Accordingly, workers are more apt to engage when conditions are favorable and beneficial for embedding personal and professional characteristics into their duties and responsibilities (Kahn, 1992). According to Kahn and Heaphy (2014), employees engage when organizational leaders incorporate the strategies and practices necessary to support workers individuality, ideas, and passions.



In line with the principles of TPED, Wernerfelt (2014) stated that the ability of leaders to identify and position resources is a dynamic component of leadership that leads to employee engagement. Paterson et al. (2014) established that the demonstration and communication of robust understanding and clear expectations by leadership stimulates a meaningful work environment for employees. The willingness of employees to engage is contingent upon the efforts of leadership to develop value in the talents, knowledge, and skills of each member of the organization (Barrick et al., 2015; Costa et al., 2013; Shanafelt, 2015). In support of TPED, scholars contend that leaders align performance and employee engagement initiatives to unify departmental ideologies that empower employees to work independently and share their perceptions about the quality of the work environment (Keating & Heslin, 2015; Kwon, Farndale, & Park, 2016; Mackay, Allen, & Landis, 2016).

**Meaningfulness.** Pentland and Haerem (2015) noted that communication of expectations is critical for the development of value in the employee and employer relationship. Employees are more willing to maximize their efforts when leaders incorporate strategies and expectations that create meaning for their involvement (Shweiki et al., 2015; Terada et al., 2013). Moreover, expectations are necessary for employees to validate their role, purpose, and capabilities, which affects the relevance of their contributions towards achieving goals and objectives (Terada et al., 2013). Terada et al. (2013) concluded, in a study among long-term care agencies, that the employee's personal connection or validation of purpose, because of expectations, affected the quality of care provided by workers.

**Safety.** Gabel-Shemueli et al. (2015) and Purvis, Zagenczyk, and McCray (2015) postulated that the psychological bearing of engagement on employees could obstruct productive efforts. However, the employees' overall relationship with leaders and members of the organization determined whether the employees viewed strategies as negative or positive (Purvis et al., 2015). Heldenbrand and Simms (2012) asserted that employees are reluctant to provide input or fully attach themselves to the work environment when they feel that inserting their personal thoughts, individual talents, and subjective ideas is not safe. Cappelen et al. (2014) explained that prejudices and inequalities in the work environment stimulated a psychological response that resulted in the individual's attempt to balance the input to outcome ratio by decreasing the exertion of physical or mental involvement.

Beliveau (2013) proposed that the quality of person-centered care depended on the ability of each member to share a holistic view of residents' needs, supporting the importance of communication and the safety of employee contributions as indicated in TPED. Successful delivery of effective services requires that managers engage direct care workers through effective communication and the transfer of knowledge (Beliveau, 2013). However, Heldenbrand and Simms (2012) argued that the transfer of knowledge is a mutual transaction, and although managers transfer their knowledge of strategies, they must safely allow and value input from direct care workers.

**Availability.** Mazur-Wierzbicka (2015) suggested that engaged employees balance their work environment with life outside the job and have healthy relationships. Therefore, factors that are both internal and external to the work environment influence

the employees' perceived value of rewards (Purvis et al., 2015; Shweiki et al., 2015; Squires et al., 2015). Furthermore, the perceived value of work rewards affects the extent to which the worker is available to engage (Kahn, 1990). The value of achieving the desired outcome increases when performance practices include input from employees (Kim, Wehbi, Dellifraie, & Brannon, 2014).

Autonomy and empowerment have an impact on employee engagement (Yoon, Probst, & Distefano, 2016). Kim et al., (2014) found that the application of human resource practices yielded higher satisfaction among healthcare workers in a decentralized work environment. Kim et al. described decentralized healthcare environments as having a less formalized organizational structure that empowers workers and promotes autonomy in the delivery of care. The intrinsic and extrinsic value that workers place on autonomy and empowerment can lead to engagement (Yoon et al., 2016).

### **Comparative Conceptual Framework**

**Expectancy theory.** Relevant to meaningfulness, scholars of expectancy theory (ET) claim that behavior is influenced by a worker's perceived value of commitment to the organization's vision and goals, and the employee's return on investment for pursuing a specific outcome (Nimri et al., 2015; Vroom, 1964). A work environment that supports employees' achievement of personal goals and ambitions exemplifies the conditions needed to influence employees to give freely of themselves intellectually, physically, and emotionally (Alonso & Mo, 2014; Vosloban, 2013). Concentrated employee fulfillment

and rigorous organizational support lead to employee engagement (Ellinger & Ellinger, 2014; Menguc, Auh, Fisher, & Haddad, 2013).

Scholars of ET contend that expectancy, instrumentality, and valence are elements of ET that increase and decrease the dynamics of employee engagement within the work environment (Chou & Pearson, 2012; Kim et al., 2014; Terada et al., 2013; Vosloban, 2013). According to ET research, leaders who convey clear expectations, provide the necessary resources, and support the achievement of personal goals and ambitions can motivate employees to engage (Alonso & Wang, 2014; Vosloban, 2013). Collectively, engagement scholars concur that employees are motivated to engage when leaders ensure that their efforts are meaningful and will lead to superior performance (Nimri et al., 2015; Shweiki et al., 2015). However, Kahn and Fellows (2013) suggested that employee engagement may be more complex than the motivational strategies highlighted by advocates of ET; a need for further exploration is needed. Kahn and Fellows (2013) argued that engagement is moderated by the extent to which employees can insert themselves into the processes and tasks of the work environment; and further suggested that strategies developed according to principles of ET can only lead to rigorous involvement (Kahn, 1990).

Proponents of engagement research and ET framework contend that leaders can create the circumstances or antecedents to engage workers through supportive relationships, strategies, resources, and rewards strategies that enhance employee value (Choi, Tran & Park, 2015; Karanges et al., 2014; Rayton & Yalabik, 2014). Kahn (1992), from a more intricate posture than scholars of ET, submitted that employees connect to

their work and others when conditions are suitable to support their creativity, beliefs, and personal relations. Moreover, Kahn and Fellows (2013) iterated that the frequent engagement and disengagement of employees could render ET strategies inefficient in bureaucratic work environments. Kahn (1992) asserted that the mundane policies and procedures of inflexible work environments could cause workers to disengage, become task-oriented, and emotionally absent.

**Social exchange theory.** May, Gilson, and Harter (2004) revealed through the social exchange theory (SET) that meaningfulness, safety, and availability, were significantly related to the tenets of engagement. According to the implications of SET, the leader's ability to manage the core functions of the organization, such as job analysis, morale management, and retention, determines the behavior and response of employees. As such, Massey and Campbell (2013) identified a major knowledge gap regarding the proficiency of small businesses owners in relation to SET. Studies conducted among small businesses revealed that owners often lack the skills and ability to manage the core functions of business effectively (Massey & Campbell, 2013). Consequently, leaders who lack such skills may have difficulty developing a work environment in which employees feel safe to engage fully.

Heldenbrand and Simms (2012) documented the results of implementing an improvement system based on SET, citing that employees were reluctant to provide input because of the negative consequences or lack of safety imposed by management during previous initiatives. Questionnaire responses revealed that direct care workers felt that their knowledge improvement ideas were insignificant and often overlooked by leaders

and managers, which had a direct negative impact on organizational performance (Heldenbrand & Simms, 2012). Engagement strategist and SET researchers alike postulate that an employee's physical and mental response to the organization's vision, mission, and goals is determined by the perceived amount of support that leaders exhort to meet their economic and social needs (Heldenbrand & Simms, 2012; Rodwell, McWilliams, & Gulyas, 2016). According to the supporters of TPED, leaders can positively affect the engagement of employees by acknowledging the value of their input and developing strategies that reinforce desirable behaviors (Beliveau, 2013; Heldenbrand & Simms, 2012; Kahn, 1992).

Based on SET, leaders can promote a safe environment for workers to engage by acknowledging the value of employee input and developing strategies that allow employees to engage preferred characteristics of themselves freely (Beliveau, 2013; Heldenbrand & Simms, 2012; Rodwell et al., 2016). Through the lens of SET, scholars obtain a theoretical explanation for how individuals respond to the antecedents of engagement (Choi et al., 2015; Memon et al., 2014; Reader, Mearns, Lopes, & Kuha, 2016). According to the central tenet of SET, workers feel more inclined to reciprocate with positive reactions more frequently when leaders embrace and protect their identity, thoughts, and feelings (Reader et al., 2016; Rodwell et al., 2016; Saks & Gruman, 2014). In line with the conceptual framework of SET, Kahn (1990) concluded that employees engage in work and connect with others when allowed to immerse personal proportions of themselves into their jobs.

## **Organizational Leadership**

The success of organizational leaders is predicated on understanding the centrality of employee expectations (Choi et al., 2015; Ishimaru & Galloway, 2014; Shanafelt et al., 2015). Worldviews that guide the ideologies of organizational members are diverse and sometimes conflict with the goal and vision of the organization (Orgambídez-Ramos, Borrego-Alés, & Mendoza-Sierra, 2014). Nonetheless, Beerli, Dayan, Vigoda-Gadot, and Werner (2013) suggested that effective leadership strategies underpin a work environment that is the sum of negotiated expectations between management and workers. Trouset, Gupta, Jenkins-Smith, Silva, and Herron (2015) further suggested that negotiations are a derivative of leadership practices orchestrated to meet the needs of employees and achieve the goals of the organization succinctly. Considering the significance of employees' centrality, the deliberation of the employee expectations as a key leadership characteristic may lead to productive outcomes.

When policies originate exclusively from senior leaders, without consideration or buy-in from employees, the results of strategies are affected (Ehlen, van der Klink, Roentgen, Curfs, & Boshuizen, 2013; Janssen & Gao, 2015; Milliken, Schipani, Bishara, & Prado, 2015). Ramos, Man, Mustafa, and Ng (2014) suggested that workplace engagement was likely to increase when the efforts and interests of leaders also address the expectations and needs of the workers. Rai (2013) suggested that a balance of interdependent and bureaucratic leadership strategies could promote psychological safety among employees. Consistent with Rai (2013), Paterson et al. (2014) established that a demonstration of robust understanding and clear expectations by leadership stimulates a

meaningful work environment for employees. Accordingly, organizational leadership is supported when strategic developments are communal (Karanges, Beatson, Johnston, & Lings, 2014).

Organizational leaders promote communication, workflow, and accountability through a well-designed organization (Csaszar, 2013; Pentland & Haerem, 2015).

Schneider (2015) suggested that the alignment of core competencies, resources, and viable constituents within the organization could lead to the discovery of knowledge needed by leaders to manage business risks and increase organizational sustainability. Moreover, leaders are more inclined to experience knowledge sharing advantages in organizations where the leadership supports unity, values membership, and stimulates positive interaction (Choi et al., 2015; Rayton & Yalabik, 2014).

The willingness of employees to commit to an organization's vision is contingent upon the efforts of leadership to establish value in the talents, knowledge, and skills of each member of the organization (Barrick et al., 2015; Costa et al., 2013; Shanafelt et al., 2015). Wernerfelt (2014) stated that the ability of leaders to identify and position resources is a dynamic component of leadership. Arslanagic-Kalajdzic and Zabkar (2015) suggested that effective leadership capabilities, in knowledge and information areas, strengthen critical elements of the customer and employee's relationship that affect the marketability of services. Accordingly, Donate and de Pablo (2015) emphasized that the configuration of information systems and leadership could lead to the successful development of knowledge systems within the organization. Therefore, the success of an organization is impacted by the ability of leadership to harness knowledge that engages



employees into unique resources that can promote customer value (Donate & de Pablo, 2015; Radnor & Noke, 2013).

### **Employee Engagement for Increased Organizational Productivity**

The application of methods to increase engagement in a specific area begins with the alignment of goals and objects with available human resources (Livitchi, Hacina, & Baran, 2015; Matei, 2013; Singhal, Garg, & Saxena, 2014). Livitchi et al. (2015) argued that misalignment between strategy implementation and resource development could lead to a waste of resources. Regarding the pursuit of engagement, Dallinger (2013) posited that employees become negative assets when organizations fail to invest in their development. Engagement increases and liability decreases when organizational leaders recruit, develop, and assign staff suitable for meeting the needs of the organization (Dallinger, 2013). In agreement, Sattar, Ahmad, and Hassan (2015) added that collaborative efforts of managers and leaders across the organization are an important function of productivity and leads to the development of an engaged workforce. Collectively, members of the organization contribute pertinent information regarding conditions that are internal and external and have a critical bearing on the allocations of resources in business (Udani, Cuervo, & Rayo, 2015). Research regarding organizational productivity indicated that agencies with high levels of efficiency also demonstrated elevated levels of employee engagement (Sattar et al., 2015).

**Communication.** Leaders recognize that (a) communication, (b) plan implementation, (c) accountability, (d) ownership, and (e) quality are key components of employee engagement for productive outcomes (Karanges et al., 2014; Mikkelsen, York,

& Arritola, 2015; Mishra, Boynton, & Mishra, 2014). Karanges et al. (2014) found communication strategies to be most effective when building support systems that foster employee engagement. Without an effective way of communicating goals, organizational leaders risk losing employee focus and may compromise an employees' ability to engage other employees (Mishra et al., 2014). Ashford, Jackson, and Turner-Stokes (2015) contended that leaders must set goals to provide direction, and objectives help leaders map the course of actions required to achieve goals. Mikkelson et al. (2015) suggested that leaders and staff must share a comprehensive understanding of processes, purposes, and goals to identify with their position and role in the organization.

**Leadership strategies.** Leaders need strategies to (a) assess the strengths and weaknesses of the agency, (b) measure the proficiencies of employees, (c) evaluate the competencies of managers, (d) identify and exploit inimitable resources, and (e) advantageously distribute and replenish resources to sustain productivity (Barrick et al., 2015; Lin & Wu, 2014). Costa et al. (2013) posited that organizational leaders implement strategies that focus on improving the quantity or quality of products to achieve competitive advantages. However, Heldenbrand and Simms (2014) declared that healthcare leaders should orient the direction of leadership towards maximizing the value of resources and employee capabilities rather than micromanaging activities and process for increasing the quality of services.

Organizations may experience lower levels of employee performance where decreased levels of synchronization exist in the areas of communication and the distribution of responsibilities (Csaszar, 2013; Gerpott, 2015; Oertig, Schüler,

Brandstätter, & Augustine, 2014). Yorks and Barto (2013) argued that traditional forms of leadership exclude the importance of achieving a balanced infrastructure. In accordance, the number of engaged workers decreases when leadership development does not enrich the leader's ability to communicate expectations, harness employee skills, evaluate performance, and recognize accomplishments (Tonvongval, 2013).

Systemic training enhances the outcome of productivity strategies; however, the implementation of engagement strategies must also exemplify the commitment of leadership (Alagaraja & Egan, 2013; Blomme, Kodden, & Beasley-Suffolk, 2015; Choi et al., 2015). Alagaraja and Egan (2013) assessed the role of senior leaders in shaping and influencing strategy implementation and concluded that senior-level managers should not force employee application of corporate strategies and values. Leadership significantly impacts the quality of (a) direction, (b) learning, and (c) implementation (van Dun & Wilderom, 2016). Comparable to van Dun and Wilderom (2013), Radnor and Noke (2013) submitted that the commitment of staff rank high among factors that determine the outcome of organizational goals and objectives.

Business leaders communicate measures of accountability and bolster psychological ownership through integrative management strategies to encourage the employee to connect and commit to achieving a successful outcome (Brees & Martinko, 2015; Liu et al., 2014). Liu, Wang, Hui, and Lee (2014) noted that personal responsibility and psychological ownership are distinct, but require the same measure of importance to achieve productivity. Moreover, Wallace, Johnson, and Mathe (2011) also explained that while accountability is obligatory, ownership is an act of free will. Leadership's

expression of an organizational vision, goals, and objectives are extrinsic to the employee (Wallace et al., 2011).

When leaders align management strategies and communicate effectively, employees feel connected, engaged, and more likely to produce high-quality results for the organization (Brees & Martinko, 2015; Pentland & Haerem, 2015). Wallace et al. (2011) submitted that the alignment of personal accountability and psychological ownership give way to the development and successful implementation of quality initiatives. In comparison to the research of Wallace et al. 2011, Millar (2012) advocated that under high levels of personal accountability, contextual performance was high. However, Millar (2012) further stated that job engagement decreased with lower levels of personal responsibility. Researchers have demonstrated that a positive psychological correlation exists between accountability, ownership, engagement, and organizational productivity (Brees & Martinko, 2015; Millar, 2012; Pentland & Haerem, 2015).

Research on the affect of strategically managed employee benefits has shown that companies that implemented employee-centered programs scored higher on employee satisfaction surveys (Pommi-Biswas & Mittar, 2015). Mulvaney (2014) proposed that leaders traditional approach to benefits have shifted from retirement, paid time off, and medical coverage to connect and expound on the natural value employees place on financial security, health, and wellness, and work-life balance. The modern approach to workers' benefits is comprehensive and helps to increase employee engagement (Mulvaney, 2014).

Input from representatives of departments during the development of organizational strategies provide a comprehensive view of the company's capabilities (Bamel, Kumar Bamel, Sahay, & Thite, 2014; Makó, Mitchell, & Illéssy, 2015). Kolachi and Akan (2014) contended that the foundation of organizational strategy requires considerable attention because strategic activities on a departmental level can increase the value and efficiency of efforts on a broader scale. However, Mitchell and Meacheam (2011) posited that organizational strategies and leadership activities might be created and executed with biased ideologies and remain segregated on the departmental level. Leadership's acquisition of a comprehensive view of employee capabilities, void of bias, may enable healthcare organizations to increase efficiency through employee engagement (Kolachi & Akan, 2014).

**Human resource development.** Human resource development (HRD) is the combination of practices used to enhance or promote the efficiency of individuals, departments, and organizations (Alfes, Shantz, Truss, & Soane, 2013; Garavan, Shanahan, Carbery, & Watson, 2016; Kehoe, & Wright, 2013; Saks & Gruman, 2014). Through HRD strategies, leaders target personal, professional, and organizational development to promote engagement among members of the organization (Torraco, 2016). However, Muscalu and Muntean (2013) suggested that leadership's emphasis on the scope of performance administration utilities could vary from agency to agency, depending on the organizational mission. In support of Mascalu and Muntean, Kim and Callahan (2013) submitted that organizational leaders pursue HRD through either teaching or learning approaches. Organizations that follow an instructional model

implement formalized educational activities, while supporters of the learning paradigm seek the autonomy of development (Kim & Callahan, 2013).

Organizations incorporate HRD strategies to increase productivity by enriching the knowledge of workers, encompassing methodical approaches to engage the employee, and helping leaders to identify and align available resources with the goals and objectives of the agency (Chabok et al., 2013). Chabok et al. (2013) suggested that, at the most basic level of HRD, organizations must educate employees, manage employee commitment, and measure productivity. In support of the inclinations submitted by Chabok et al. (2013), Alagaraja and Egan (2013) concluded that the role of HRD in developing human talent is fundamental. However, Alagaraja and Egan (2013) contended that HRD strategies affect the entire fabric of the organization and potentially influence the overall quality of strategic decision-making.

Delahaye (2015) noted significant changes, relevant to HR strategies, since scholars' introduction of HRD theories into the field of business more than 40 years ago. Scholars have expanded the concept of HRD beyond vocational education to include theories that support the development of practices that support the complete involvement of organizational members (Delahaye, 2015; Torraco, 2016). In research related to productivity, Harris and Samreen (2015) and Song, Chermack, and Kim (2013) identified HRD practices that supported the employees' personal growth as a common characteristic among proficient organizations.

Organizational leaders that implement superior HRD strategies (a) encourage personal growth, (b) empower members individually and collectively, (c) support job

promotions, and (d) engage all members of the organization (Gagnon et al., 2015; Salehzadeh, Asadi, Khazaei Pool, Reza Ansari, & Haroni, 2014). Delahaye (2015) postulated that at a minimum level of HRD activity, leaders focus on the compliance and qualifications of workers rather than personal development. However, organizational leaders that incorporated advanced systems of HRD exhibited a significantly higher level of employee productivity (Hasson, Tafvelin, & Schwarz, 2013; Kim & Han, 2015).

Training and development literature has shown that the scope of HRD in learning organizations is broader than the opportunities generated in traditional work environments (Kim & Han, 2015). In like manner, Sambrook and Willmott (2014) asserted that the self-sufficient nature of HRD in professional institutions reflect many productivity initiatives that are comparable to the HDR creativity found in learning organizations (Pokharel & Choi, 2015). Organizations can configure HRD strategies to meet a wider range of needs that are internal and external to the organization (Park, Song, Yoon, & Kim, 2014; Sambrook & Willmott, 2014). As such, organizational leaders can use HRD strategies to introduce new theories, incorporate modern practices, and consider the input of a more diversified group to yield productive results (Sambrook & Willmott, 2014).

***Strategic human resource planning.*** Scholars have expanded the meaning of strategy to describe the assessment and acquisition, and alignment and management, of talents necessary to achieve a successful or desired outcome (Gerpott, 2015; Mirabeau & Maguire, 2014; Sohrab, 2013). In response to market and environmental uncertainties, Camillus (2014) proposed that strategic leadership decisions should extend beyond

internal control and profits and address the humanitarian interests of stakeholders as well. In related literature, Schneider (2015) concluded that leader's reoccurring reflection on stakeholder's needs and the alignment of strategies accordingly was necessary to stimulate productivity and achieve long-term sustainability in organizations.

Literature regarding the evolution of strategic planning across traditional and innovative economies revealed that the ongoing emergence of new strategies coupled with technological developments has helped organizations to withstand environmental uncertainties and sustain productivity (Baden-Fuller, & Haefliger, 2013; Ferreira de Lara & Neves Guimarães, 2014; Sarfaraz, Shariatmadari, Hedayat, & Vadoudi, 2013). Ferreira de Lara and Neves Guimarães (2014) concluded that competition among different firms and the organization directly affects innovation, and in turn, the outcome of strategies. However, Velu (2015) submitted that innovative changes to a company's business model yield a higher level of performance than product and process innovation. Moreover, the results of Velu's (2015) research indicated that the innovative efforts of leaders to increase (a) value proposition, (b) value capture, and (c) customer value, through systemic change, produced more sustainable outcomes. As such, exploring innovative changes regarding a firm's business model and technological advances may reveal information about how leaders select systemic and technical changes that increase engagement in healthcare organizations. Accordingly, Donate and de Pablo (2015) emphasized that the configuration of information systems and leadership could lead to the successful development of knowledge systems within the organization.



*Human capital resources.* Collectively scholars have defined human capital as the acquisition and utilization of an individual's skills and abilities for organizational advancement (Aryee, Walumbwa, Seidu, & Otaye, 2016; Barrick et al., 2015; Martin, McNally, & Kay, 2013). Human capital resources emerge when individual knowledge, skills, abilities, and other characteristics are congruent with the vision and developments of the organization (Aryee et al., 2016). Ployhart and Moliterno (2011) argued that the transcendence of human capital from a lower level of functionality to a higher standard of productivity is dependent upon the work environment and the level of employee awareness. Moreover, Almutawa, Muenjohn, and Jiaying (2015) asserted that leaders should focus specifically on service quality to increase organizational productivity. Almutawa et al. (2015) determined the connectivity of employees with their perceptions concerning the intricacy of tasks versus their work environment produces critical determinants of service quality. In literature concerning human capital resources, Aryee et al. (2016) and Almutawa et al. (2015) concluded that leaders could positively impact service quality through engagement strategies.

### **High Engagement Work Culture**

The development and sharing of core values, among all organizational members, has a positive impact on corporate culture and employee engagement (Price & Whiteley, 2014). Moreover, the results of Price and Whiteley's (2014) grounded empirical study revealed that an unrestricted flow of communication is vital in the development of organizational culture. In related research, Fuchs and Prouska (2014) determined that the assimilation of processes, purposes, and goals is ongoing and requires leaders at all levels

to show support for employees as they pursue the organization's vision. Fuchs and Prouska postulated that the experiences of employees regarding the support of leadership could stimulate positive or adverse behavioral responses among employees. In support of Fuchs and Prouska, Tanner and Otto (2015) submitted that communication and a demonstration of support from leadership towards employees was a key factor in establishing work environments that aid organization change.

Mazur-Wierzbicka (2015) insisted that employees' work environment must support a significant level of balance with life outside the job to foster healthy relationships within the organization. In support, Kemeny and Mabry (2015) suggested that effective leadership practices include engagement factors that cultivate a caring climate for employees and clients. In comparable research, Kim, Wehbi, DelliFraine, and Brannon (2014) identified strong communication, sustainability, high quality, work/life balance, and strong relationships as key factors found in an engaged work environment.

Organizations often underperform because the expectations of leaders and employee performance are misaligned (Wiley, 2013). Barrick et al. (2015) contended that although meeting goals and achieving profitable outcomes are signs of progress, this manifestation of progress is a result of a system designed to guide organizational activity. Gilley et al. (2014) posited that leaders make determinations about how to improve performance by exploring activities between the work environment and the employee. Within the dynamics of work climate and worker's needs, leaders use the assessment of (a) information, (b) knowledge, (c) resources, (d) capacity, (e) incentives, and (f) motives

to analyze behaviors and expose gaps that lead to poor performance (Campbell, 2014; Kemeny & Mabry, 2015).

There is potential for increased productivity in disengaged work environments, and the need for leaders to improve grows as the influence of disengaged workers affect the workplace (Wertz, 2013). Gilbert (1978) postulated that, by dividing the agency's highest standard of performance by the current level of performance, leadership could pinpoint the potential for improvement in specific areas. Accordingly, agency leaders can maximize productivity by incorporating strategies to identify and reduce the ramifications of disengagement (Gilbert, 1978).

The opportunity to increase productivity remains undiscovered when leaders rely solely on policy and procedures to engage employees (Low et al., 2015). A lack of strategic planning in leadership may cause managers to rely on bureaucratic processes that can lead them to underestimate the potential of the workforce (Bartscht, 2015). Leaders need information about how best to develop a workforce that can adapt to the volatility, uncertainty, complexity, and ambiguity of the environment (Bartscht, 2015; Bennett & Lemoine, 2014). Technology, employee engagement, talent management, and agility are key components of performance that require leaders to develop and incorporate more strategic systems of management (Bandura & Lyons, 2014).

The challenge leaders face, when developing incentive strategies, involves the dissimilarity in how employees' value rewards individually (Al-Aufi & Ahmed Al-Kalbani, 2014). The employee's perceived value of a reward affects the outcome of performance strategies. Employees are motivated to engage when the rewards of meeting

goals and expectations satisfy their intellectual, physical, and emotional needs (Nimri et al., 2015; Purvis et al., 2015). Sattar et al. (2015) determined that incentives such as recognition, cash bonuses, and paid time off are common forms of rewards in business and are related to an employee's engagement.

The rewards of meeting goals and expectations must satisfy the employees' intellectual, physical, and emotional needs (Nimri et al., 2015; Purvis et al., 2015). Factors that are both internal and external to the workplace influence the employees' perceived value of rewards (Purvis et al., 2015; Shweiki et al., 2015; Squires et al., 2015). Mazur-Wierzbicka (2015) suggested that engaged employees balance their work environment with life outside the job and have healthy relationships. Squires et al. (2015) identified several distinct and organizational factors that influence the satisfaction of employees. Squires et al.'s (2015) empirical research on the satisfaction of long-term residential care workers revealed that empowerment and autonomy are intrinsic factors that affect job satisfaction on an individual level; additionally, facility resources and workload are extrinsic factors that influence satisfaction on an organizational level. Pentland and Haerem (2015) submitted that leaders of well-designed organization promote work-life balance through communication, workflow, accountability, and authority. The fundamental determinants of satisfaction, proposed in literature by Pentland, and Harlem (2015) and Squires et al. (2015), could inform leaders about how to develop engagement strategies that have a positive impact productivity.

Autonomy and empowerment affect employee engagement. Kim et al. (2014) found that the application of HR practices, such as training and communication, yielded

higher satisfaction among healthcare workers in a decentralized work environment. Kim et al. (2014) described decentralized healthcare environments as having a less formalized organizational structure that empowers employees and promotes autonomy in the delivery of care. In similar research on employee satisfaction, Yoon et al. (2016) indicated that the intrinsic and extrinsic value that workers place on autonomy and empowerment could lead to engagement. The value of achieving the desired outcome increases, when leaders develop a performance strategy with input from employees, (Kim et al., 2014).

**Performance management.** Scholars have defined performance management as the orchestration and positioning of human capital by leaders to ensure that organizational transactions are effective and efficient (Brunnert et al., 2014; Kotze et al., 2014). Leaders incorporate activities such as setting and monitoring performance goals and objectives, providing feedback, and cultivating a work environment to foster employee engagement (Andries & Czarnitzki, 2014). Andries and Czarnitzki (2014) noted that performance management is paramount in business strategy because member engagement can increase profits, sales, and the return on investment. Correlating to member engagement, Babaei, Rahimian, Ahmad, Omar, and Idris (2015) proposed HR planning to be a crucial component of performance management. In opposition to a universal approach to performance management practices, Hvidman and Anderson (2014) cautioned that the transfer of techniques across public and private sectors of business could produce unreliable results. Moreover, Arnaboldi, Lapsley, and Steccolini

(2015) submitted that performance management systems in public organizations could thwart maximum productivity by failing to support the engagement of employees.

Human resource literature relating to the pursuit of organizational productivity showed positive relations between performance management and leader's ability to plan and direct the workforce towards accomplishing the goals of the organizations (Karimi-Majd, Mahootch, & Zakery, 2015; Pournader, Tabassi, & Baloh, 2015). Scholars consider HR planning to be among the three most important variables in HRD, alongside performance assessment and training, because uncalculated decisions in planning the use of human capital can affect performance (Babaei et al., 2015; Galperin & Lituchy, 2014). According to Komarudin et al. (2016), senior leadership's decisions challenge departmental managers to (a) identify, (b) acquire, (c) redistribute, and (d) allocate human resources to achieve and maintain sufficient levels of performance. In a multi-level examination of organizational leaders' decisions, Komarudin et al. (2016) concluded that changes on a departmental level are made based on the immediate needs of that department to continue the pursuit of organizational goals. Therefore, the ramification of leaders' decisions on departmental activity can have an adverse impact on the manager's ability to increase the performance of the workforce (Komarudin et al., 2016).

Leaders align performance management strategies with initiatives to unify the departmental ideologies that moderate the performance of organizational members at all levels (Keating & Heslin, 2015; Kwon et al., 2016; Mackay et al., 2016). Similarly, Ratu and Suciu (2013) considered the unification of departmental ideologies necessary because

perceptions of employees and managers often differ in regards to performance and motivation. Moreover, differences in perception can cause leaders to discourage the input of employees and result in the development strategies that merely support mundane membership and relationships (Kwon et al., 2016). Leaders can cultivate high-performance work environments by encouraging employees to communicate openly (Keating & Heslin, 2015). More conclusively, researchers have substantiated practices that encouraged empowerment, delegation, collaborative decision-making, and employee performance as key elements to maximizing the overall productivity of an organization (Winiecki, 2015; Li et al., 2012). Thus, productivity is most likely to increase when conditions are favorable for engaged employees to express themselves.

The results of research regarding human resources have informed leaders' understanding about how labor productivity increases when firms invest in planning, hiring, and employment development (Chabok et al., 2013; Torraco, 2016). Winiecki, (2015) concluded that there is a meaningful and positive relationship between a firm's productivity and sustainable performance. In comparison, Fox (2013) placed particular emphasis on the competitive advantage that companies may gain by recognizing the value of their human capital. Fox (2013) asserted that recognizing the valuable and rare abilities that employees possess could lead to increases in productivity. Correspondingly, promotions from within the company have a significant impact on labor productivity and sustainable performance (Pfeifer, Janssen, & Yang, 2013). The exploration of strategies used by leaders to obtain a comprehensive assessment of employees could result in an understanding of practices necessary to increase productivity among the employees.

**Business value of high engagement work cultures.** The acquisition of competitive advantages and sustainable solutions is complex. Sheehan, Garavan, and Carbery (2014) postulated that organizational leaders must endorse and encourage the adaptation of strategies constructed from a holistic perspective of the social, political, and economic transformations in the environment to achieve sustainability. Regardless of the methodology, obtaining competitive advantages is both challenging and complex (Costa et al., 2013). Andersen and Samuelsson (2016), in a review of strategic planning and productivity, suggested that leaders construct the framework of the organization to support the discovery of value, rarity, and imitability in available resources. Organizations acquire and sustain competitive advantages when leaders organize the inimitable properties of tangible and intangible resources to identify profitable opportunities in business (Andersen & Samuelsson, 2016; Brem, Maier, & Wimschneider, 2016).

Employee engagement strategies can improve an organization's ability to absorb environmental challenges and reach sustainable solutions (Crabtree, 2013). Researchers' examination of productivity and leadership dynamics supports the overarching concept that the effectiveness of strategies is subject to the correlation of priorities among members of the organization (Alagaraja, 2014). Research indicates that leaders need to possess knowledge and skills that not only bridge the communication gap between members of organizations but also embrace the intrinsic values of the employee to stimulate commitment (Alagaraja, 2014; Wiley, 2013).



Organizations benefit when leaders encourage disengaged employees to take ownership and embrace their roles in helping to achieve the goals and objectives established by leaders of the organization (Pendleton & Robinson, 2011). Lamas and Luna (2015) noted that leaders generate connectivity when activities contribute to the personal growth of employees. Subsequently, leaders achieve a superior level of organizational development when they use strategies to align the personal goals of the employee with the organization's vision (Brent & Perez, 2015; Lamas & Luna, 2015).

Brent and Perez (2015) investigated the initiatives of leaders at General Motors to engage employees through career development. Brent and Perez (2015) highlighted the critical role of employee input, noting that employees desired to connect with the leaders and participate in career conversations. Communication with staff about their current position and future within the organization helps leaders to assess and establish engagement strategies (Brent & Perez, 2015). In a review of research regarding the management of talent and competitive advantages in business, Venkatesh (2014) argued for the formulation and embedment of leadership strategies that engage workers by the aligning personal goals of employees with the purpose and objective of the organization. In support, Gazica and Spector (2015) concluded that individuals who identified, develop, and utilized their skills to achieve personal and organizational goals exhibited the psychological antecedents of engagement found in members of highly efficient work environments.

***Service quality.*** In long-term residential care agencies, residents need their surroundings to feel as close to their home environment as possible. Suter et al. (2014)

revealed, in a content analysis of quality among three residential care facilities, that the collaborative efforts of caregivers and the clarity of roles and responsibilities are strongly associated with quality of care and resident satisfaction. In confirmation, Heckman et al. (2016) determined that in facilities where all members engaged to deliver individualized treatment services, the business outcomes signified high levels of quality and satisfactory outcomes. The research findings of both Suter et al. (2014) and Heckman et al. (2016), regarding service quality in healthcare, indicated that disengaged caregivers negatively affected the development and delivery of treatment and, in some instances, compromised the wellness and safety of residents.

Nazir et al. (2013) concluded, in a study of long-term care agencies, that person-centered services increased the quality of treatment for consumers. However, to achieve a superior level of service quality, organizations should develop systems of leadership that exceed the probabilities of bureaucratic policies to maximize engagement (Gazica & Spector, 2015; Venkatesh, 2014). The potential for superior quality care increases when employees engage and contribute skills that exceed the expectations of the leaders (Hechman et al., 2016; Suter et al., 2014).

**Employee commitment.** Research has revealed a significant level of correlation between work engagement and employee commitment (Geldenhuis, Laba, & Venter, 2014; Yalabik, Van Rossenberg, Kinnie, & Swart, 2015). Employee engagement is a predictor of commitment (Kiazad et al., 2015; Simons & Buitendach, 2013). However, Poon (2013) argued that the results of research concerning commitment could inform leaders about the reasons employees engage in work. In support of Poon (2013), Eldor

and Vigoda-Gadot (2016) documented that sequentially, organizational support led to commitment and in turn, employees exemplified engagement behaviors such as vigor, dedication, and absorption. In support of common factors, Geldenhuys et al. (2014) submitted that the construct of employee engagement has positive implications for fostering work environments that exhibit high levels of commitment. Kiazad et al. (2015) concluded that employees are happier, healthier, and more engaged when the context of commitment is spawned from the morals and values that guide emotional attachment.

**Job satisfaction.** Scholars suggest that job satisfaction is an antecedent to engagement (Huang et al., 2016; Rayton & Yalabik, 2014). In support of this notion, Medlin, Green, and Wright (2016) offered that organizations could accomplish a moderate level of engagement through satisfaction factors such as trust and cooperation. Medlin et al.'s (2016) research results highlighted the need for management to recognize the efforts of employees and demonstrate equality and support for progressive work relationships. In a comparable study containing similar findings, Anitha (2014) underscored the significance of leadership strategies that foster healthy work environments for positive peer relations. Stromgren, Eriksson, Bergman, and Dellve (2016) identified work relationships as capital and confirmed that the development of social capital results in increased job satisfaction and engagement. Leaders that integrate strategies to affect the satisfaction of workers could also experience productivity (Lavy & Littman-Ovadia, 2016).

**Employee expectations.** Employees have different expectations of what they are capable of achieving (Avery, Smillie, & Fife-Schaw, 2015; Tomazevic, Seljak, &

Aristovnik, 2016). Leaders maximize workgroup potential by acknowledging dissimilarities in expectations among employees and strategically aligning practices that promote congruency (Carmeli, Dutton, & Hardin, 2015). Leaders are less likely to acknowledge the expectations of employees in work environments where managers group workers into mainstream communities (Timming & Johnstone, 2015). Timming & Johnstone (2015) speculated that ignoring the needs of others and continuing to accept inefficient practices, as the norm, could not lead to sustainable solutions.

Ignoring the expectations of employees leads to low performance (Pentland & Haerem, 2015; Terada et al., 2013). Pentland and Haerem (2015) noted that leadership's communication of performance expectations is critical for the development of the employee and employer relationship. Expectations are necessary for employees to validate their role, purpose, and capabilities, and can affect the effort individuals are willing to contribute to achieving the goals and objectives set for them (Terada et al., 2013). Evaluations help leaders assess performance; however, leaders increase performance when they tailor expectations to the employee's strengths and weaknesses. Terada et al. (2013) concluded, in a study among long-term care agencies, that the employee's expectations of the employer determined the quality of attention. Employees are more willing to provide superior care and maximize their contributions towards achieving agency goals when strategies and expectations are obtainable (Shweiki et al., 2015; Terada et al., 2013).

Employees need to know that their efforts are meaningful and that an increase in their performance will lead to a desirable outcome (Chabok et al., 2013; Scanlon &

Woolforde, 2016). Leaders often use engagement strategies comprised of methodical approaches to assess the organization's need for resources that enrich the employee with knowledge (Chabok et al., 2013). However, Gabel-Shemueli et al. (2015) documented that, although skilled and equipped with resources, nurses score the lowest on job engagement and highest on burnout of any employee healthcare group. Therefore, leaders should conduct a comprehensive assessment of variables within the work environment and acknowledge factors that may spawn adverse consequences for employee engagement prior to implementing performance policies (Gabel-Shemueli et al., 2015; Scanlon & Woolforde, 2016).

### **The Business of Health Care**

The healthcare industry has evolved significantly in the areas of operations management and supply chain management (Dobrzykowski et al., 2014; Pourabdollahian, & Copani, 2014). Dobrzykowski et al. (2014) asserted that the priorities and focus of leaders in the field of healthcare have shifted from a general perception of delivery to incorporate a more tailored service approach such as person-centered care (PCC). In comparison, Pourabdollahian and Copani (2014) noted similar growth in the demand for customizable health-related products, citing that the upsurge was due to the increase in patients' quality of life. Dobrzykowski et al. (2014) also argued that the influx of healthcare research, regarding business operations and the provision of services, be evidence of the shift and need for innovative business strategies. In like manner, Pourabdollahian and Copani (2014) confirmed the need for new business models that support the customization of products.

Scholars contend that information and strategies that promote a collaborative and decentralized view could enhance service quality and increase productivity (Dobrzykowski et al., 2014; Pourabdollahian, & Copani, 2014). In contrast, Brownie and Nancarrow (2013) documented the need for additional research confirming the effects of PCC due to the complexity of the healthcare environment. Moreover, leaders have become increasingly interested in how to combine business strategies with healthcare delivery to increase organization productivity (Dobrzykowski et al., 2013; Brownie & Nancarrow, 2013).

**Healthcare leadership.** The central emphasis of leadership in healthcare is to identify and implement strategies that help guide service quality, costs, and productivity (Cocowitch, Orton, Daniels, & Kiser, 2013; Kumar & Khijee, 2016; Beer et al., 2013). Scholars have argued several concerns over the efficiency of traditional leadership and the efficacy of traditional operating strategies. Cocowitch et al. (2013) submitted that healthcare leaders should make decisions with a holistic view of organizations people, work cultures, and operating systems in mind. Cocowitch et al. (2013) concluded that the development of successful leadership in healthcare was contingent upon leaders ability to embrace change and unify members of the organization. Evans (2014) identified leadership as a core function for all activities that occur within the organization and further cited the knowledge of leaders alone as an insufficient source to develop effective leadership in the healthcare business. In agreement with Cocowitch et al. (2013), Evans (2014) maintained that in healthcare, leadership is the combination of information,

experiences, and skill contributed by health professionals occupying various positions in the organization.

### **Long-term Residential Care**

Common among researchers is the perspective that the design of healthcare organizations must support the flow of knowledge between workers and leaders to operate the business efficiently while maintaining compliance and competitiveness (Macon & Heislitz, 2016). Suter et al. (2014) discovered, in a content analysis of quality among three residential care facilities, that the collaborative efforts of caregivers and the clarity of roles and responsibilities were strongly associated with the quality of care and resident satisfaction. Moreover, Suter et al.'s (2014) findings indicated that disengaged caregivers negatively affected the development and implementation of services and, in some instances, compromised the care and safety of residents.

Residential facilities that incorporated multidisciplinary interventions and engaged all members of the care team demonstrated high levels of quality and customer satisfaction (Morgan, 2013; Vroomen et al., 2012). Nazir et al. (2013) concluded, in a study of residential care facilities, that person-centered services increased the quality of care for consumers. Low et al. (2015) argued that achieving such a superior level of quality required levels of engagement that often exceeded the expectations of leaders using bureaucratic policies and procedures. However, Vroomen et al. (2012) asserted that the resources needed to provide person-centered services could cause the price of delivering services to increase and result in competitive challenges.

The potential for superior quality care increases when employees engage and contribute skills that exceed the expectations of the leaders (Gazica & Spector, 2015; Venkatesh, 2014). Berta, Laporte, Deber, Andrea, and Gamble (2013) suggested that the role of direct care workers is paramount to service quality citing that direct care workers provide more than 75% of the patient services in long-term care agencies. Berta et al. (2013) postulated that healthcare costs affect the efficiency of care and can cause leaders to resort to the use of bureaucratic management systems, neglecting the quality of employees hired to provide care. Berta et al. (2013) also pointed out that often leaders' use of bureaucratic systems place expectations on direct care workers that sometimes exceed their skills and abilities. This bureaucracy can lead to employee disengagement and result in what scholars of agency theory define as a principal-agent problem (Berta et al., 2013). Ehlen et al. (2013) and Sambrook and Willmott (2014) proposed that in bureaucratic work environments, the scope of HRD is narrow because senior leaders define processes based on needs that are derivative of strict forecasting rather than the needs of employees.

**Standard of care.** Person-centered care (PCC) represents the highest standard of care provided in long-term care facilities (Beliveau, 2013; Li & Porock, 2014). Li and Porock (2014) postulated that PCC is a multifaceted all-inclusive viewpoint of care. The principles of knowing the patient, individualizing care, and enabling enhanced relationships, underpin the models that promote PCC. The outcome of goals and expectations set in PCC environments are contingent upon employee attributes such as professional competence, interpersonal skills, job commitment, the clarity and alignment



of beliefs and values, and the employees' understanding of their abilities (Li & Porock, 2014). Yoon, Roberts, Grau, and Edvardsson (2015), in comparable PCC research, confirmed that PCC environments promote positive outcomes for resident's quality of life. Yoon et al. (2015) concluded that the successful implementation of PCC required that direct-care workers receive ongoing training to reinforce attributes such as hospitality, safety, and all-inclusive decision-making. Higher levels of care are dependent upon the strategies that leaders implement to foster (a) the growth of a therapeutic culture, (b) satisfaction of care, (c) participation in care planning, and (d) the well-being of long-term care patients (Clissett, Porock, Harwood & Gladman, 2013; Gill, 2013). Beliveau (2013) suggested that leaders could achieve higher standards of care by aligning engagement strategies with the expectations of employees.

**Residential care outcome variations.** Xu, Kane, and Shamliyan (2013) examined the link between ownership (non-profit and for-profit) characteristics and the quality of life for residents and determined that non-profit facilities demonstrated a higher quality of care than for-profit facilities. In addition to the indication of a significant relationship between agency programs and the quality of life, the review of data also revealed inconsistencies in the quality of care across facilities (Xu et al., 2013). Relevant to this study, the inconsistent information presented by Xu et al. (2013) showed that various levels of autonomy and empowerment affected the outcome practices implemented to improve the quality of long-term residential care. Kim et al. (2014) advanced the notion of inconsistent results among decentralized and formalized systems of leadership stating that the outcome initiatives to promote the quality of residential

programs varied across demographics. Therefore, leaders should incorporate strategies that are compatible with the diversity of staff, management, and customers (Kim et al., 2014; Xu et al., 2013).

### **Literature Review Summary**

Organizations incorporate HRD strategies to increase productivity by enriching the knowledge of workers, encompassing methodical approaches to engage the employee, and helping leaders to identify and align available resources with the goals and objectives of the agency (Chabok et al., 2013). Leaders can achieve a superior level of organizational development when they use strategies to align the personal goals of the employee with the organization's vision (Brent & Perez, 2015; Lamas & Luna, 2015). Thus, strategies used by leaders to (a) assess the strengths and weaknesses of the agency, (b) measure the proficiencies of employees, (c) evaluate the competencies of managers, d) identify and exploit inimitable resources, and (e) advantageously distribute and replenish resources can help sustain productivity (Barrick et al., 2015; Lin & Wu, 2014).

Management support, resources, control and structure, rewards, and retribution are common variables investigated by researchers when using conceptual models to explore elements of engagement relative to productivity (Gabel-Shemuely et al., 2015; Hackman & Oldham, 1976; Purvis et al., 2015). Leaders engage members of an organization by implementing training and development strategies to ensure that the efforts of employees will lead to superior performance (Gabel-Shemuely et al., 2015; Shweiki et al., 2015). Moreover, by aligning engagement strategies with the expectations of employees, organizations could exhibit higher standards of care (Beliveau, 2013).

Regarding the management of talent and competitive advantages in business, research supported the formulation and embedment of leadership strategies that engage workers by the aligning personal goals of employees with the purpose and objective of the organization. When leaders align leadership strategies and communicate effectively, employees feel connected, engaged, and more likely to produce high-quality results for the organization (Brees & Martinko, 2015; Pentland & Haerem, 2015).

The potential for organizations to deliver superior quality care increases when employees engage and contribute skills that exceed the expectations of the leaders (Gazica & Spector, 2015; Venkatesh, 2014). Therefore, leaders incorporate activities such as setting and monitoring performance goals and objectives, providing feedback, and cultivating a work environment to foster employee engagement (Andries & Czarnitzki, 2014). Of equal importance are practices incorporated by leadership to assess the work environment and identify factors that may spawn adverse consequences for engaged employees (Gabel-Shemueli et al., 2015; Scanlon & Woolforde, 2016).

Through leaders' acknowledgment and understanding of social network ties, group interactions, and formal communication practices, organizations can receive the maximum level of contribution from employees (Gabel-Shemueli et al., 2015; Nimri et al., 2015; Purvis et al., 2015). Researchers suggest that healthcare leaders should orient the direction of leadership towards maximizing the value of resources and employee capabilities rather than micromanaging activities and process for increasing the quality of services (Heldenbrand & Simms, 2014). The increase of engagement is grounded in the competency of leadership to assess and understand the centrality of employee

expectations (Ishimaru & Galloway, 2014; Shanafelt et al., 2015; Choi et al., 2015).

### **Transition**

At the center of this qualitative case study is the exploration of current strategies that leaders use to increase levels of employee engagement. Some organizations may lack information regarding employee engagement strategies and practices that could help increase productivity and customer satisfaction by decreasing behaviors associated with disengaged employees. With heightened engagement, organizations may be able to increase the quality of their services or products as well as contribute positively to employment rates by expanding their workforce to meet consumer demands, which may create new jobs in the community.

This section included background information on the existence of a current business problem involving employee engagement and organizational efficiency. Insight into current research provided an overview of the specific business problem as well as the need for strategies that may assist organizations in increasing productivity and addressing the issue of employee engagement. In Section 2, I will expound on the research methodology selected to explore strategies that long-term residential care agency leaders may need to enhance productivity through employee engagement. In Section 3, I will present the data from the interviews, and the analysis of those interviews, as well as the summary of the findings and recommendations for future research.

### **Section 2: The Project**

I chose a qualitative single case study designed to explore current strategies that leaders use to increase employee engagement. A semistructured face-to-face interview

with ten senior leaders in South Carolina and archival data provided the data for this study. Section 2 includes details of the methodological elements of the research project. In Section 2, I will highlight specific information regarding the role of the researcher, participants, research method and design, population and sampling technique, data collection and analysis. I conclude Section 2 with a discussion of instruments and processes as well as the study reliability and validity.

### **Purpose Statement**

The purpose of this qualitative single case study was to explore strategies healthcare leaders use to engage employees. The targeted population for this study was at least 10 senior leaders of a long-term residential care agency located in South Carolina who had initiated strategies and practices to engage employees. The findings may contribute to positive social change because engaged employees could (a) enhance the quality of life for members of the community who stand to benefit from long-term residential care services, (b) lower entitlement taxpayer costs, (c) result in medical error reduction, and (d) increase quality patient care services.

### **Role of the Researcher**

As the researcher, I undertook a critical role in the collection of data. Xu and Storr (2012) asserted that, in qualitative studies, the researcher is actively engaged in the collection of all data. Unluer (2012) stated that the researcher's role as a data collection instrument is intricate and the responsibilities involved affects the credibility of the data obtained.

As a leader and practitioner in the field of human services for 15 years, my experience in leadership development, management, and HRD supported the study. As a quality assurance team lead, I obtained interview experience by interviewing potential candidates for employment. Grant (2014) noted that the biography of the practitioner has a significant impact on the navigation of the research process, particularly during participant interviews. There were no personal or direct relations with the chosen population and myself.

A fundamental obligation of the researcher is to ensure the confidentiality of all entities participating in a research study (Johnson, 2014). I obtained approval from the Walden University Internal Review Board (IRB) prior to conducting this study. A university IRB board ensures that the researcher complies with federal regulations to protect vulnerable populations against exploitation and the disclosure of private information (Pike, 2012). A researcher must abide by the ethical guidelines documented in the Belmont Report. Researchers that adhere to the legal and ethical standards outlined in the Belmont Report underwrite the protection of research participants (Welch et al., 2015). The National Institutes of Health (NIH) Office of Extramural Research has issued me a certificate of completion for the training course *Protecting Human Research Participants* (Certificate #566970, Appendix A).

My objective was to explore a phenomenon without bias and as depicted by the participants. According to Irvine, Drew, and Sainsbury (2013), researchers increase research objectivity by avoiding bias. Prasad and Berger (2015) contended that researchers must understand and acknowledge personal biases or views to prevent

emphasis on, or avoidance of, content. In addition, Onwuegbuzie and Hwang (2014) stated that by avoiding questions that lead the participant's responses, researchers avoid bias. I developed the interview questions based on the literature to avoid questions that may lead participant responses.

Qualitative researchers must monitor tone, thoughts, and reactions carefully during interviews to ensure that their personal feelings do not affect the outcome of the interview. Yin (2014) postulated that a researcher could test potential bias by acknowledging and monitoring their reception and openness to findings that contradict preconceived ideas. In response to this postulation, I purposed to remain open and assess my findings persistently to acknowledge biases that might guide my interpretation of the data during this continuous evaluation.

An interview protocol can guide the researcher in developing and implementing practices that maintain ethical standards, establish trust, and yield reliable data (Jacob & Furgerson, 2012; Yin, 2014). Based on Jacob and Ferguson's (2012) prescriptions for interviewing, I used an interview protocol (Appendix B) to (a) add uniformity and reliability to the research process, (b) map and maintain the direction of the interview format, (c) adhere to ethical research guidelines, and (d) identify and pursue emergent themes. Jacob and Furgerson (2012) suggested that interview protocols are beneficial to qualitative research investigators and can serve as a guide for significant data collection.

### **Participants**

Elo et al. (2014) indicated that researchers improve the trustworthiness and transferability of the study with the use of criteria to identify participants. Participants in

this study (a) held a leadership position in a long-term residential care agency for at least 3 years, and (b) implemented successful strategies to engage employees. Gilley et al. (2014) noted that experience and knowledge regarding the acquisition, distribution, and utilization of resources are necessary attributes for the development and efficacy of strategies that increase productivity. In residential long-term care agencies, the outcome of strategies is contingent upon how senior leaders allocate and make use of experience and knowledge (Squires et al., 2015). Squires et al. (2015) submitted that the role of senior leaders is rooted in the operational processes and client relationships that affect productivity in long-term residential care agencies. Furthermore, members that provide direct care rank highest among disengaged employees than in any other healthcare group (Gabel-Shemueli et al., 2015). Kim et al. (2014), in a review of the literature on satisfaction, found that nurses and nurse aids are more apt to terminate their relationship with their employer because of staffing and quality of care concerns. Conversely, researchers attributed low employee engagement among direct care workers to leaders' lack of concern for compensation and benefits (Ejaz et al., 2015).

To gain access to the participants, I located long-term residential agencies in the southeast region of South Carolina via the South Carolina Department of Health and Environmental Control (SCDHEC) online public directory. Franco, Tursunbayeva, and Pagliari (2016) noted that *e-government* portals have evolved to include citizen's access to information and services. The SCDHEC website contains information on all residential care facilities operating in the state of South Carolina including locations, addresses, phone numbers, and directors' e-mail contact information



(<http://www.scdhec.gov/Health/Docs/LicensedFacilities/hrcrcf.pdf>). Bertot, Estevez, and Janowski, (2016) indicated that the growth of the public's interest to develop policies and highlight the availability of services had increased the accessibility of open data in government. Zhang, Zhang, Liu, Zhang, and Liu (2013) maintained that researchers could use information from public websites to retrieve research data and locate potential research participants.

Contact with directors of long-term residential agencies occurred via email and included an explanation of the subject, significance, and potential business impact of the study (Appendix C). I conducted my study on site using the facility of the first director that responded to my email granting permission. The director (authorized representative) forwarded a letter introduction to leaders and staff (Appendix D). Participants that met the study criteria contacted me directly via email. Potential participants who met the research criteria received a letter of informed consent via email.

The process of developing a good working relationship requires that a researcher establish trust, rapport, and credibility with the research participants (McDermid, Peters, Jackson, & Daly, 2014). Ma et al. (2013) indicated that the disclosure of detailed information regarding the intent of the study has a positive effect on participants' willingness to participate and helps establish the foundation for a working relationship. I established open communication with participants to foster the relationship by reiterating the purpose of the study and expounding on my academic and professional qualifications. Karnieli-Miller, Strier, and Pessach (2009) noted that open communication with research participants is a positive factor in the researcher-participant relationship.

## **Research Method and Design**

### **Research Method**

I selected a qualitative method. The use of a qualitative method is appropriate when concepts or categories within a study are unknown, and the nature of research study is exploratory (Tracy, 2013). Researchers use qualitative methods to investigate phenomena in their natural setting, which allows the researcher to interpret the phenomena through participants' conveyed meanings (Denzin & Lincoln, 2011). Through an interpretive approach, qualitative researchers use techniques that are flexible and allow new meaning to emerge from generated data (Willig, 2013). According to Yin (2014), the strength of qualitative research is that researchers can explore the subjective attributes of reality. A qualitative method was most suited to this study because I sought to explore a contemporary case that was not easily distinguished from the surrounding context to explore strategies healthcare leaders use to engage employees.

Goertz and Mahoney (2013) posited that probability and statistics are the central basis for quantitative research. Quantitative researchers collect measurable data to test hypotheses and examine the statistical relationships between relevant variables (Denzin, 2012). However, the statistical techniques and numerical data collection procedures found in quantitative methods may reduce the quality of participant input (Hoe & Hoare, 2013). The reduction of quality could limit the breadth and depth of participants' narratives and experiences, ultimately not yielding sufficient data to answer the research question and address the research problem (Hoe & Hoare, 2013). I did not select a

quantitative method due to the nature of the research study, which required an exploration of human perceptions, absent of numerical data to test a hypothesis.

Through a mixed methods approach, practitioners implement multiple techniques to elucidate and reduce the complexities of results and to validate the results of the study (Johnson, Onwuegbuzie, & Turner, 2007). Researchers utilizing a mixed method approach combine qualitative and quantitative methods to develop a comprehensive inquiry into the origin of an outcome within individual cases and measure the effect of the cause (Venkatesh, Brown, & Bala, 2013). Frels and Onwuegbuzie (2013) indicated that a mixed methods approach is appropriate in such cases that the quantification of data is necessary to substantiate qualitative data, or qualifying the quantitative data with participants' narratives. I did not intend to substantiate the causality of specific outcomes through mixed methods because a combination of objective (quantitative) and subjective (qualitative) data was not needed to satisfy the case study inquiry. Moreover, the combination of objective and subjective data to condense or reduce the complexities of results could have limited the scope and depth of the investigation; a mixed method was not appropriate. Using a qualitative approach, the intent of this case study of strategies healthcare leaders use to engage employees was to acquire rich description and gain an in-depth understanding of leaders' experiences.

### **Research Design**

For this study, I used a single-case study design. Through case study designs, researchers utilize flexibility not found in other qualitative designs to explore the perceptions, knowledge, and experiences of participants (Hyett, Kenny, & Dickson-Swift,

2014). Yin (2014) advocated for the use of a case study design to investigate specific phenomena and to answer how and why questions while using multiple data collection modalities. According to Yin (2014), researchers use a case study as an empirical inquiry to understand a phenomenon within a real context. Case studies proceed from a realist perspective; a single reality independent from the observer or with the researcher as a dependent observer (Yin, 2014). Scholars use multiple sources of evidence within the case study design to divulge unique information and understanding associated with central research question and interview questions (Kaczynski, Salmons, & Smith, 2014; Yin, 2014). A case study design was most appropriate to explore the strategies that leaders use to engage employees because I proceeded from a realist perspective serving as the independent observer of the phenomenon. The phenomenon is engagement in work environments. Utilizing a single-case study design to investigate and understand a case through multiple data collection modalities was relevant to the central research question and purpose of the study.

Phenomenology and ethnographic are qualitative research designs researchers consider (Lewis, 2015). Researchers utilize a phenomenological design to explore participants lived experiences in the natural world (Moustakas, 1994). Through phenomenological studies, researchers enter the participants' world, to search for implicit meanings of a phenomenon (Finlay, 2013), which did not support the purpose of this study. Roberts (2013) noted that the fundamental objective of phenomenological researchers' is to identify complex, rich data and depict the lived experience as comprehended by participants to divulge a universal understanding of the phenomenon.

A phenomenology design was not appropriate because an investigation of the essence and meaning leaders associate with the phenomenon of disengagement in the work environment, as a common reality, was not relevant to the research inquiry or purpose of this study.

Ethnography is the study of culture (Dawson, 2014; Venzon & Higginbottom, 2013). Through cultural immersion, researchers describe or interpret the participants' values, or behaviors from a cultural context (Tracy, 2013; Williamson, Twelvetree, Thompson, & Beaver, 2012). Because the scope of my study did not involve describing a participant's viewpoint of a culture, an ethnographic design was not appropriate. As a form of qualitative inquiry, researchers utilize ethnographic designs to search out deep insights and thorough understanding about human social and organizational systems within a given context for theory development (Dawson, 2014; Venzon & Higginbottom, 2013). Although ethnographic participants' stories, researcher submersion, and observations could yield in-depth depictions of subjective aspects of engagement, I did not purpose to use the information relevant to the research inquiry and interview questions to form a new theory; an ethnographic design was not applicable.

Data saturation is paramount to the transferability and trustworthiness of a qualitative study (Elo et al., 2014). According to O'Reilly and Parker (2013), the appropriateness and adequacy of the sample affect the rate at which new themes or data cease to emerge. O'Reilly and Parker (2013) suggested researchers might achieve saturation more quickly in a study that explores a more specific subject and sample, as opposed to a more generalized study. However, Fusch and Ness (2015) stated that the

sample necessary to achieve saturation is unique to each study and proposed that researchers continue the interview process until no new data or themes appear. Adhering to the recommendation of O'Reilly and Parker (2013), I identified a sample that was most probable to possess knowledge information and about the research topic. Marshall, Cardon, Poddar, and Fontenot, (2013) proposed that qualitative researchers might terminate the interview process once new information ceased to appear. No new themes emerged (data saturation) after completing interviews with 10 leaders of the long-term residential agency.

### **Population and Sampling**

The acquisition of participants for this study occurred using purposeful sampling. Purposeful sampling enables researchers to construct samples according to the unique requirements of the research inquiry (Kaczynski et al., 2014). Patton (2015) described purposeful sampling as a form of non-probability sampling in which researchers draw participants from a population that has experience with the phenomenon under study. Qualitative researchers use purposeful sampling to ensure the population selected is most qualified to provide information about the research inquiry (Gentles et al., 2015). Furthermore, Patton (2015) advanced that the strength of a purposeful sample involves the researcher's ability to identify interviewees who can provide specific knowledge about the research topic.

According to Morse (1994), the number of participants selected must be sufficient to ensure that the data collected reveals a significant perception. O'Reilly and Parker (2013) suggested that, in qualitative research, sample size depends on the nature of the

research inquiry. Robinson (2014) noted that there is little research regarding the correct sample size in qualitative research for case studies. However, Clarke and Braun (2013) suggested that the sample size of studies, where the case is bound by a commonality, could range from 6 to 10 participants. According to the research of Fugard and Potts (2015), a sample size of at least 10 participants is adequate to reach a point of data replication for qualitative case studies. Yin (2014) advocated using a sample size of at least six participants for a case study. Marshal et al. (2013) maintained that a researcher had substantiated the size of the sample needed when existing themes begin to reoccur. For this study, I interviewed ten senior leaders at one long-term residential care agency located in South Carolina until no new themes from data analysis occurred.

Researchers determine the number of participants needed by the richness of the data required to reach the point of saturation (O'Reilly & Parker, 2013; Yin, 2014). Fugard and Potts (2015) noted that when data reaches a point of saturation, continued data collection functions only to confirm emergent themes. Fusch and Ness (2015) suggested that a researcher should increase the sample size if the data collected from the initial participants is insufficient to attain saturation. I interviewed participants until no new themes from data analysis emerged.

The participants chosen for this study were senior leaders in a long-term residential agency. Girard, Ecalle, and Magnan (2013) noted that by establishing inclusion and exclusion criteria, researchers could identify participants that may provide the most relevant information. Participants (a) held a leadership position in a long-term residential care agency for at least 3 years, and (b) implemented successful strategies to

engage employees. Gilley et al. (2014) posited that senior leaders direct the acquisition, distribution, and allocation of resources that are necessary for employee engagement. Lou, Kanuri, and Andrews (2014) asserted that senior leaders are *entrenched* in the processes and relationships of their firms, and must endure the responsibility of implementing strategies to engage employees. Additionally, Berta et al. (2013) noted that worker engagement is a significant component of the outcome of strategies implemented by senior leaders. Senior leaders are the key stakeholders in the development and implementation of strategies that increase employee engagement (Alagaraja & Egan, 2013; Heldenbrand & Simms, 2012; Squires et al., 2015).

I worked in partnership with the participant to choose a secure location, onsite, to conduct face-to-face interviews. Jacob, Gagnon, and McCabe (2014) proposed that researchers consider the interview location as an intricate part of the interview process. Mneimneh, Tourangeau, Pennell, Heeringa, and Elliott (2015) suggested that researchers select a private and secure setting to conduct interviews. A safe, secure, and comfortable environment is necessary to ensure that the participant was able to speak candidly about their experiences and elaborate on responses (Herring, 2013).

### **Ethical Research**

Griffiths (2014) noted that informed consent is a process used in everyday transactions to legitimize the acquisition or release of information. In research, the informed consent process is necessary to document permission and protect the rights of research participants (Schrems, 2014). The procedure for obtaining informed consent begins with the disclosure of information prior to the transaction and involves the



development of trust, rapport, and credibility with the appropriate entities (Griffiths, 2014). The informed consent form contained the study's purpose and data collection procedure. Prior to beginning research, participants received an informed consent form via email. The participant's response to the email with the words *I consent* served as an indication of the individual's agreement to participate in the study.

Participants could withdraw or refuse participation prior to the completion of the member checking process by submitting a formal request to me via email. Porter, Togni, and Pasqualetti (2014) suggested that the disclosure of the option to withdraw from participating in research is a matter of fundamental ethics. Bernstein and Feldman (2015) warned that although incentives can increase participation, investigators should avoid incentives. Incentives may seem coercive and negatively regarding the autonomy of participation for ethical concerns. Furthermore, Zutlevics (2016) stated that researchers should negate offering incentives to mitigate potentially adverse effects on volunteerism and the nature of consent. However, once the doctoral study is published, participants will receive a summary of the study results.

As suggested by Kaiser (2012), I discussed the preservation of confidentiality and the assurance of privacy with all participants face-to-face prior to beginning the research interview. Lahman et al. (2015) maintained that scholars and practitioners commonly use pseudonyms to protect the identity and confidentiality of human subjects and organizations. Researchers identify participants by pseudonyms or unique identifiers to conceal personal information and other sensitive information that may be revealed during the collection of data (Yin, 2014). For this study, a unique identifier containing a

combination of alphanumeric characters replaced the participant's personal identification information. Researchers can choose from a massive combination of alphanumeric characters to assign unique identifiers (Maerlender, Nelson, & Honaker, 2016). In addition, Zhang et al. (2015) supported the use of alphanumeric characters to create unique identifiers that conceal personal information. Papoulias, Robotham, Drake, Rose, and Wykes (2014) supported the use of de-identification strategies that conceal the identity of individuals and prevent others from tracing or linking data back to the research participants. In addition, to protect the confidentiality of participants, I maintain sole access to a password-protected computer containing all data.

Oye, Sorensen, and Glasdam (2016) advised ethical guidelines and principles protect participants and reduce harm. I will not release confidential material or misrepresent the participants or agencies involved in this study. My adherence to the requirements for research as outlined by the Walden University Institutional Review Board (IRB) is of the utmost importance. My Walden IRB approval number # is 05-11-17-0067184. All data and information collected during this research will remain stored on a password protected external drive and secured in a fire-rated safe, both of which will be accessible by only me. The discarding of all research data will occur, via a cross-shredder and data wipe computer software, after 5 years.

### **Data Collection Instruments**

I was the primary data collection instrument in this study. Yin (2014) noted that, in qualitative studies, researchers are the primary data collection instrument. Marshall and Kaczynski et al. (2014) stated that qualitative researchers, who conduct interviews,

are human instruments because all data are mediated through them instead of surveys or statistical instruments. Kaczynski et al. explained that, as human instruments, qualitative researchers explore the multifaceted understandings of the participant's experiences through direct interaction. Yilmaz (2013) posited that the credibility and honesty of a qualitative study are contingent upon the researcher's ability, as the data collection instrument, to collect and recount an accurate and truthful description of the phenomenon as conveyed by the participant.

I utilized semistructured interviews to collect data from senior leaders of long-term residential care agencies. Collecting data through semistructured interviews allows the researcher to explore complex factors such as employee engagement to increase productivity for enhanced quality and delivery of services. (Doody & Noonan, 2013). Yilmaz (2013) highlighted that a benefit of conducting semistructured interviews corresponds with the researcher's ability to structure inquiries in anticipation of new and unexpected data. Yin (2014) noted that researchers use semistructured interviews to elicit a deeper understanding of the participant's experience about the specific case under study.

Researchers use open-ended questions during semistructured interviews to produce rich data (Cridland, Jones, Caputi, & Magee, 2015). Doody and Noonan (2013) noted that open-ended questions support the sensitive nature of qualitative interviews because participants have the opportunity to elaborate on their responses. Lewis (2015) pointed out that open-ended questions are appropriate to use when practitioners seek to disclose what is unknown about the specific problem under study. I utilized open-ended

questions, developed based on the nature of the qualitative inquiry and supported by the literature. I followed an interview protocol containing the open-ended questions for all semistructured interviews (Appendix B).

The integration of archival data, such as employee handbooks, bylaws, or records of engagement training, enhanced the data collection and triangulation process. Organizations frequently store and use archival documents to record the outcome of initiatives as evidence for events that occur (Cotteleer & Wan, 2016). Elman, Kapiszewski, and Kirilova (2015) advocated that archival documents are a viable source to increase coherence between the participants' recount of the phenomenon and the occurrence of events. Sharp et al. (2012) asserted that researchers could use archival sources to corroborate the interview data with the textual data to increase the richness and rigor of research. Furthermore, Kaczynski et al. (2014) argued that researchers using a case study often incorporate archival documents as an additional source of information to understand the context of the phenomenon and address the research problem.

Petty et al. (2012) highlighted the importance of incorporating an interview protocol to ensure the consistency of the data collection instrument. Supporting the importance of incorporating an interview protocol, Elo et al. (2014) suggested that the researcher pays strict attention to interview conduct to safeguard the reliability of the data collection instrument. As the data collection instrument, I utilized an interview protocol to maintain conduct consistency and pose the same questions to each participant to ensure reliability. Yin (2014) noted that presenting the same interview questions to all participants during semistructured interviews strengthens the transferability of the

research study. While presenting the same open-ended questions during each semistructured interview helps to ensure reliability and credibility, doing so contributes to the identification of themes during data analysis (Hermanowicz, 2013; Patton, 2015).

I used an interview protocol during the interview process to maintain the uniformity of each interview for consistency. Petty, Thomson, and Stew (2012) indicated that incorporating an interview protocol ensures that each participant is asked the same questions, which enables the researcher to probe consistently for sufficient data to address the research question. Moreover, by implementing an interview protocol, researchers increase the dependability of each semistructured interview (Jacob & Furgerson, 2012). Sackett and Lawson (2016) indicated that researchers include the interview protocol as part of the audit trail to increase the dependability of the research process. Researcher's adherence to the systematic process of an interview protocol increases the validity and dependability of the data collection instrument (Martinez, Perez, & Rodriguez del Bosque, 2014).

I used member checking to enhance the reliability and validity of the data collection process. Member checking is a method of quality control widely used in qualitative research to increase reliability and validity (Birt, Scott, Cavers, Campbell, & Walter, 2016; Lincoln & Guba, 1985). During member checking, the researcher conducts a follow-up interview to share a summary of the information collected (Boblin, Ireland, Kirkpatrick & Robertson, 2013). Houghton, Casey, Shaw, and Murphy (2013) suggested that member checking allowed participants to recount and either affirm or disaffirm the researcher's interpretation of their original statements. Once the transcription of interview

responses is complete, I summarized my interpretation of the participant's responses and sent a summary of my interpretation via email to the participant. Participants had 2 weeks to confirm or disconfirm that the information accurately described the responses conveyed throughout the interview process. There were no requests for changes submitted by the participants during the specified timeframe via email or telephone conversation. A modification of the summaries was not warranted by the participants.

All interviewees participated in member checking; I did not remove or recruit additional participants. Harvey (2015) submitted that member checking is a measure of trustworthiness; therefore, a lack of participation could diminish the credibility of the study. In addition, member checked data is a critical assessment of accuracy for the data collection instrument (Koelsch, 2013). Birt et al., (2016) concluded that researchers could draw conclusions about the integrity of the study results based on reports from member checking.

### **Data Collection Technique**

Data collection began after I received approval from Walden University IRB. According to Madill (2011), practitioners' use of semistructured interviews serves as a conduit to probe deep into the phenomenon under study and collect rich data. Cridland et al. (2015) suggested that researchers possess a higher level of flexibility when using key themes within the interview questions, in conjunction with the semistructured interview process and may stimulate in-depth answers and knowledge. However, Peredaryenko and Krauss (2013) posited that interviewers should maintain their neutrality during interviews

and avoid questions that lead the participant by utilizing a semistructured interview process.

Irvine et al. (2013) contended that, during interviews, qualitative researchers build rapport and a natural conversational experience through face-to-face contact. Drabble, Trocki, Salcedo, Walker, and Korcha (2016) added that, by establishing rapport and demonstrating respect for the participant's contributions, researchers add value and viability to research interview. Irvine et al. (2013) noted that researchers, conducting face-to-face interviews, could create a more personable atmosphere and increase the responsiveness of interviewees. Moreover, researchers choose face-to-face interviews to preserve the personal nature of qualitative research (Vogl, 2013). I conducted face-to-face interviews to build rapport and to ensure the quality of the participant's response.

The location of face-to-face interviews is a fundamental and vital part of establishing privacy and maintaining confidentiality (Gagnon, Jacob, & McCabe, 2014). Gagnon et al. (2014) argued that the element of location has a significant effect on the interview process and the quality of data collected during the interview. Bugos et al. (2014) indicated that researchers should consider safety, privacy, and convenience when identifying the setting for interviews. Furthermore, Mitchell (2015) submitted that researchers should allow participants to determine the time and place of the interview as to facilitate the participant's security and comfort. Accordingly, I conducted face-to-face interviews at the long-term residential care agency in a secure conference room chosen by the participant to ensure privacy, safety, and comfort.

I recorded all interviews using a primary and a backup digital recording device. Doody and Noonan (2012) recommended audio recording research interviews and suggested that the researcher diverts excessive note taking to exhibit more attention towards the interviewee. I used a researcher log to take notes during each interview. In taking notes, interviewers are able to acknowledge participant's behaviors, feelings, and the overall tone of the interview (Urry et al., 2015). However, to gain rapport with the participant, the interviewer should reiterate the recording and afford the interviewee the option to stop the recorder at any time during the interview (Doody & Noonan, 2012). Witty (2014) noted that interview recordings are advantageous because they allow the interviewer to capture and recount an accurate description of the interview. McGonagle, Brown, and Schoeni (2015) concluded that digital audio recordings increase the quality of data captured during interviews.

According to Witty (2014), the investigator's ability to produce an amenable setting can affect the quality of data. Thus, researchers should remain flexible and cognizant of maintaining a cooperative environment (Irvine et al., 2013; Peredaryenko & Krauss, 2013). I established and maintained a supportive and accommodating atmosphere by reiterating to each participant, prior to starting the interview, (a) the voluntary nature of the study, (b) their right to rescinded consent up until member checking is complete, (c) and that refusal to participate would go unquestioned and without consequence.

During member checking, participants reviewed my summarization of the participant's responses based on the interview transcripts to ensure the accuracy of my interpretations and provide feedback and corrections as necessary. Birt et al. (2016) noted



that member checking is a method of quality control often used in qualitative research to ensure the accuracy of the participants' response. According to Boblin et al. (2013), member checking affords the researcher the opportunity to verify that the information collected during the initial interview results accurately reflects the perception of the participant's experiences. Moreover, Houghton et al. (2013) noted that the process of member checking ensures adequate verification of data by allowing participants to review the researcher's interpretation of responses from the interview. I emailed my textual summarization of the interview responses to the participants for review and validation of my interpretation of their original statements within 1 week of the interview. The participants responded to the email within 2 weeks with no additional clarifications or changes. An email requesting a read receipt from each participant was necessary to identify and notate who had opened the email. All participants confirmed the read receipt of the email. Although some participants did not respond, I deemed their lack of response as an implicit confirmation of the summary. No additional recruitment occurred. All participants met the study criteria.

Within a case study design, researchers evaluate and include relevant archival documents to increase coherence between the participants' recount of the phenomenon and the occurrence of events (Elman et al., 2015; Sharp et al., 2012). Kaczynski et al. (2014) submitted that researchers using a case study often incorporate archival documents as an additional source of information to understand the context of the phenomenon and address the research problem. Furthermore, organizations frequently

store and use archival documents to record the outcome of initiatives as evidence for events that occur (Cotteleer & Wan, 2016).

The second data collection technique entailed a review of the long-term residential agency's incentive program, employee handbooks, bylaws, and records of training. By corroborating the interview data with textual data linked to communication, engagement training, employee development, and the work environment, I increased the richness and rigor of the description regarding strategies leaders used to engage employees. Archival documents are a viable source to increase coherence between the participants' recount of the phenomenon and the occurrence of events (Kirilova, 2015). Sharp et al. (2012) asserted that researchers could use archival sources to substantiate the interview data with the textual data to increase the richness and rigor of research. Bekhet and Zauszniewski (2012) suggested that the utilization of archival documents to validate interview data strengthened the results of research.

### **Data Organization Technique**

Researchers implement data organization techniques to track and manage information (Gibson, Webb, & Lehn, 2014) and to maintain credibility and reliability (Brown et al., 2013). After collecting data through semistructured interviews, I utilized a transcription service to convert the audio recordings into typed, textual data. The transcriptionist signed a confidentiality agreement. Each participant was assigned a unique identifier to mitigate exposure of the participants' personal information, organize the textual information in a Microsoft Word® document, and upload the document into QSR NVivo 11®. I organized and stored the member-checked interview data, research

log, and archival documents in folders by data type on a secured computer. Elo et al. (2014) proposed that the organization of data allows the researcher to monitor the accuracy, applicability, and thoroughness of information during each stage of analysis. The member-checked interview data was the basis for the data analysis.

In conjunction with member checking and archival data, I retained a research log containing notable entries documented throughout the study. Scholars use research logs to capture rich data that potentially leads to a deeper insight and the identification of themes and patterns during analysis (Moffat, Jenkins, & Johnson, 2013). Boblin et al. (2013) noted that the use of research logs, containing notes taken during the interview, adds clarity and allows the researcher to conceptualize, interpret, and recollect the participants' responses. Additionally, one of the main advantages of keeping a research log is that journaling allows the researcher to identify themes and maintain a record of thoughts and ideas that occur during the study (Mackenzie et al., 2013).

I concealed the identity and maintained the confidentiality of all research participants using letters and numbers as a labeling system. The letter L and a sequential number (L1, L2, etc.) represented senior leaders in the order interviewed. Before releasing study results, researchers implement strategies that are necessary to remove information that might allow others to identify the participant and organization directly or indirectly (Killawi et al., 2014). Papoulias et al. (2014) noted that the de-identification strategies should conceal the identity of participants and alleviate the possibility of relinking data with individuals. Herron and Skinner (2013) suggested that de-identifying participants upheld ethical standards and principles. Researchers de-identify research

participants and build confidence by using pseudonyms or unique identifiers (Herron & Skinner, 2013; Papoulias et al., 2014; Yin, 2014). Storage and protection for the interview recording, journal logs, and transcripts will continue for 5 years on one encrypted hard drive exclusively accessible only by me.

### **Data Analysis**

I applied methodological triangulation by integrating the long-term residential care agency's employee handbook and incentive plans as an archival document to substantiate the participants' responses to the interview questions. Methodological triangulation is the use of multiple methods of data collection, such as conducting in-depth interviews and excavating data from documents, to confirm congregating results of research (Denzin, 2012). According to Denzin (2012), researchers triangulate multiple sources of data to add accuracy, richness and gather a profound understanding of the research inquiry. In support, Bekhet and Zauszniewski (2012) suggested that triangulation of multiple data sources, such as archival documents and interviews, enhanced clarity and strengthened results. Moreover, utilizing multiple sources of information strengthens the results of a study by helping the researcher to avoid bias (Song, Son, & Oh, 2015). Additionally, Fusch and Ness (2015) proposed that triangulation enables the researcher to increase the reliability of the study by integrating two or more data sources. In this study, I conducted interviews and collected supporting archival documentation, such as the long-term residential care agency's employee handbook, for methodological triangulation during my analysis.

During the data analysis stage, researchers reduce raw data into concepts that are categorized into themes to understand the relativity of the phenomenon to the research inquiry (Elo et al., 2014). Data analysis involves the application of processes necessary for the researcher to grasp the wholeness of the phenomenon and search beyond the facts to extract significant data (Lewis, 2015). Noble and Smith (2014) suggested that researchers review the member checked textural data, study the data, and develop a data coding system to gain a holistic view of the phenomenon and establish a common set of principles.

The objective of the qualitative researcher, during the data analysis process, is to conduct a comprehensive evaluation of the themes and patterns that emerge from interview data, archival data, and journal log (Noble & Smith, 2014; Sotiriadou et al., 2014). Researchers use computer-assisted qualitative data analysis software (CAQDAS) tools to link themes, concepts, and categories to organize and analyze various sources of data (Edwards-Jones, 2014). Sotiriadou et al. (2014) noted that utilizing CAQDAS tools shortens the time required to group data and aids in thematizing and organizing the information received from the participants. CAQDAS are viable tools that enable the qualitative researcher to manage and organize data, along with generating codes and subsequent categories and themes (Edwards-Jones, 2014). I uploaded, organized, and analyzed the research data utilizing QSR NVivo®.

QSR NVivo 11® is a CAQDAS that allows researchers to achieve greater immersion and an in-depth comprehension of the information (Sotiriadou et al., 2014; Edwards-Jones, 2014). QSR NVivo 11® supports the upload of documents, video, and

audio for management and analysis and triangulation (QSR International, 2015).

Edwards-Jones (2014) highlighted that researchers could load multiple sources of information into CAQDAS software, such as NVivo 11<sup>®</sup>, to develop models, graphs, and reports that reflect emergent themes and patterns. Campbell, Quincy, Osserman, and Pedersen (2013) advocated that CAQDA software is a viable tool for researchers to upload data into NVivo 11<sup>®</sup> for analysis.

Thematic analysis (TA) is a technique researchers use to analyze qualitative data for emerging patterns and meaningful themes (Clarke & Braun, 2013). Clark and Braun proposed that qualitative researchers identify patterns through the process of *familiarization, coding, theme development, and revision*. Vaismoradi, Turunen, and Bondas (2013) defined TA as an interpretive approach that adds rigor to the data analysis process. I utilized TA as a guide for the data analysis process. Following the six phases of TA demonstrated by Gupta, Ganguli, and Ponnampalath (2015), I (a) became familiar with the data, (b) reviewed and coded the member checked participant responses, (c) searched for themes, (d) classified themes with names, and (e) wrote a narrative providing details about the information. NVivo 11<sup>®</sup> is a tool that qualitative researchers use to code and thematize data. As such, I performed my TA using NVivo 11<sup>®</sup>.

TPED is the conceptual framework for my study. Gupta et al. (2015) indicated that researchers use the conceptual framework to guide data collection and analysis, and to identify main themes. Utilizing a literature review as a reference supports the conceptual framework and the identification of coherent patterns in the data that are relevant to the research question (Clarke & Braun, 2013; McCray, Turner, Hall, Price, &

Constable, 2014). I conducted a literature review to enrich my knowledge regarding the research problem and utilized the conceptual framework as the lens to analyze the study findings. Based on the tenets of TPED, emergent themes that related to the research question were a need to (a) stimulate leadership attentiveness to promote workplace meaningfulness, (b) incorporate robust communication policies and procedures, (c) establish organizational support for employee engagement, (d) develop interpersonal relationships for increased employee value, (e) integrate meaningful rewards and recognition, and (f) apply training and development for personal and professional growth.

### **Reliability and Validity**

In qualitative research, the terms reliability and validity refer to the quality and trustworthiness of the study (Lincoln & Guba, 1985). Collectively researchers define reliability as the ability to apply research methodologies in comparable environments and attain consistent results, and validity as the relativity of research results and the intended use of the research instrument (Yilmaz, 2013). Therefore, reliability and validity serve as a guide for researchers when determining the design of a study (Yin, 2014). Tracy (2013) noted that researchers ensure the reliability and validity of qualitative research by implementing methods to increase the dependability, creditability, transferability, and confirmability of the findings.

### **Reliability**

Scholars deem the results of a study reliable if the results are replicable and consistent (Yin, 2014). Kihn and Ihantola (2015) argued that reliability is contingent upon how accurately the results of the study align with the data collected. Tracy (2013)

noted that, by ensuring the accuracy of the study results, researchers could increase the success of replicating the study.

Onwuegbuzie and Leech (2007) argued that the investigator is responsible for establishing and monitoring procedures to confirm reliability in qualitative research. Member checking, as an intricate part of the data collection, interpretation, and analysis phases of research, can help ensure the reliability of a study (Houghton, Casey, Shaw, & Murhy, 2013). Busch, Van Stel, De Leeuw, Melhuish, and Schrijvers (2013) used the member checking process to correct inconsistencies and clarify contradictions that threaten the reliability of their research. In my pursuit to ensure the reliability of this study, I conducted member checks to resolve illogicalities and ensure transparency.

**Dependability.** Shenton (2004) pointed out that researchers focus on dependability to illustrate how investigators, given the same context, utilizing similar methods in relative populations could achieve similar results. Fusch and Ness (2015) proposed that the dependability of the study increases when the triangulation of two or more data sources share the same outcome. Moreover, Bekhet and Zauszniewski (2012) suggested that researchers enhance clarity and strengthen the results of data through the triangulation of archival documents and interviews. I triangulated the long-term residential care agency's operational policies and procedural information, interviews and research log to address reliability.

Birt et al. (2016) proposed that researchers use member checking as a method to detour the improper analysis of data and assure dependability. Pashaki, Mohammadi, Jafaraghaee, and Mehrdad (2015) implemented the process of member checking to ensure



that the researcher's interpretation of the data was dependable and accurately reflected the participant's recount of the phenomenon. Koch and Harrington (1998) contended that rigor in research depended on upon the researcher's ability to demonstrate to the reader that the results were derived from an unadulterated collection of data. I assured dependability by incorporating member checks as a method to increase the precision of the data collected and the accuracy of the analyzed data.

### **Validity**

Research validity is the readers' perceived confidence and trustworthiness regarding the relativity and accuracy of research results (Seidman, 2012). Krizman (2011) noted that investigators incorporate methods of assuring research validity as a means of increasing certainty. Often validity involves triangulation, acknowledgment of bias, and the inclusion of archival documents to establish the truth and legitimacy of research outcomes (Cope, 2014; Yin, 2014).

**Credibility.** In qualitative research, validity is measured through an assessment of the creditability of the study. Researchers employ rigorous methods throughout the qualitative study process to increase creditability by ensuring that the reader can understand the phenomenon as experienced by the participant (Yilmaz, 2013). I followed the data analysis and interpretation processes in relation to the research method, design, data collection, and analysis outlined for this study.

Researchers increase creditability through member checking by assuring that the interview results accurately reflect the phenomenon as conveyed by the participants (Lincoln & Guba, 1985). Elo et al. (2014) submitted that the results of the study must

reflect the voices of the participants, and their experiences to establish trustworthiness. In support, Houghton et al. (2013) utilized member checking to ensure credibility by allowing participants to review a summary of the researcher's interpretation of the interview findings for accuracy and provide feedback. Likewise, I incorporated member checking for participants to review my interpretation of the interview findings, provide feedback, and apply any change requests.

**Transferability.** Transferability refers to results that are generalizable to other settings (Yilmaz, 2013). Houghton et al. (2013) indicated that qualitative researchers achieve transferability by implementing processes that thoroughly explicate the research structure so that others in like or similar settings might comprehend. Trochim (2006) indicated that in qualitative research, determining the generalizability or transferability of a research study is the responsibility of the person assessing the transferability.

To ensure transferability, I infused a high level of detail into every section of this study. Salmona, Kaczynski, and Smith (2015) noted that the alignment of components and processes is ongoing from the beginning to the completion of qualitative research and enables the reader to trace all of the steps involved in the study. Thus, I aligned each component, such as the participants, population, and sampling method, with the qualitative purpose and focus of this study. I acknowledged the assumptions, limitations, and delimitations so that other researchers might determine the transferability of the study. Salmona et al. (2015) posited that researchers could achieve transferability of the research results if the construct of the study design is methodologically complete.

**Confirmability.** Trochim (2006) declared that confirmability refers to the ability of others to confirm the results of the study. Elo et al. (2014) described confirmability as the collective effort a researcher takes to reduce bias, acknowledge assumptions, limitations, and delimitations, and provide in-depth justification for all decisions. Yilmaz (2013) noted that researchers ensure confirmability when they follow steps that are necessary to certify the authenticity of the research results.

Methods to increase confirmability include documenting all procedures and creating an audit trail to allow others to assess the study as a whole (Lincoln & Guba, 1982; Shenton, 2004; Trochim, 2006). Carefully crafting a detailed map of my data collection and analysis will enable others to assess the confirmability of my findings. Furthermore, I addressed study confirmability by adhering to the qualitative indicators and processes outlined in this study (e.g., interview protocol, member checking and triangulation). Researchers who seek to ensure study results are confirmable should carefully follow their predetermined data analysis methods so that no bias or preconceived notions impact the results (Cope, 2014; Polit & Beck, 2012; Yilmaz, 2013). I carefully followed the data analysis method chosen to ensure that the study results were derived from an accurate analysis of data, reflects clarity, and exemplifies the unadulterated experiences of the participants

**Data saturation.** Qualitative researchers regard the concept of saturation as essential to achieving study results that thoroughly describe the phenomenon explored (Tracy, 2013). Corbin and Strauss (2008) noted that a study is saturated when the inclusion of new data no longer adds merit to the results. Furthermore, researchers deem

the number of participants in the study to be appropriate when the main themes provide depth and variation across participants and are sufficient to express the perspectives and experiences of the participants (Fusch & Ness, 2015). As such, I continued interviewing participants until no new information emerged.

### **Transition and Summary**

Section 2 contained a discussion of the acute components of my qualitative case study. Based on an exploration of literature, the research methodology and design most credible to support the extraction and analysis of data as they pertain to the research inquiry were selected and described. In doing so, a discussion regarding the purpose of the study, participants, research method and design, population and sampling, and ethical research criteria was included. There was also an inclusion of the plans for exploring the phenomenon through the use of suitable data collection instruments and techniques, data organization techniques, data analysis, and finally the verification reliability and validity. Section 3 reflects a review of the study's purpose and a presentation of the findings. Additionally, Section 3 includes the (a) application to professional practice, (b) implications for social change, (c) recommendations for action, (d) recommendations to advance research, (e) reflections, and (f) relevance of the findings.

### Section 3: Application to Professional Practice and Implications for Change

#### **Introduction**

The purpose of this qualitative single case study was to explore strategies healthcare leaders use to engage employees. I interviewed 10 senior leaders of a long-term residential care agency located in South Carolina and collected the agency's training agenda, employee manual, and incentive program information (archival documents) for methodological triangulation. The six themes that emerged as strategies for engaging employees were a need to (a) stimulate leadership attentiveness to promote workplace meaningfulness, (b) incorporate robust communication policies and procedures, (c) establish organizational support for employee engagement, (d) develop interpersonal relationships for increased employee value, (e) integrate meaningful rewards and recognition, and (f) apply training and development for personal and professional growth.

First, participants suggested that direct engagement with staff and encouragement are critical attributes for developing an engaged workforce. Second, study participants highlighted the importance of leaders allowing staff members to communicate their concerns openly. Third, study participants emphasized the need for leaders in the organization to advocate on behalf of staff members and be visible. Fourth, participants identified respect and trust for staff members as a critical attribute of employee engagement. Fifth, study participants illustrated that utilizing incentives, rewards, and appreciation were successful strategies for increasing employee engagement. Finally, participants identified professional development and personal growth as essential characteristics for stimulating engagement among staff members.

## **Presentation of the Findings**

The central research question for this study was this: What strategies do healthcare leaders use to engage employees? I used semistructured face-to-face interviews with open-ended questions (Appendix B), and the long-term residential agency's training agenda (Appendix F), incentive program (Appendix G), and employee manual (Appendix I) as sources of data for this research study. Using QSR NVivo®, I analyzed the interview and archival data to generate the findings of this study. In Tables 1 through 6, I display the number and frequency of participants' responses to interview questions.

Communication with staff members about their current and future position within the organization helps leaders to assess and establish engagement strategies (Brent & Perez, 2015). Radnor and Noke (2013) submitted that the commitment of staff ranked high among factors that determine the outcome of organizational goals and objectives. Moreover, leaders and staff members must share a comprehensive understanding of processes, purposes, and goals to identify with their position and role in the organization (Mikkelsen et al., 2015).

### **Theme 1: Leadership Attentiveness to Promote Workplace Meaningfulness**

Business leaders communicate measures of accountability and bolster psychological ownership through integrative management strategies to encourage the employee to connect and commit to achieving a successful outcome (Brees & Martinko, 2015; Liu et al., 2014). More conclusively, researchers have substantiated practices that encouraged empowerment, delegation, collaborative decision-making, and employee

performance as key elements to maximizing the overall productivity of an organization (Li et al., 2012; Winiecki, 2015). As indicated in Table 1, 10 (100%) participants contributed to the conception of the theme *leadership attentiveness to promote workplace meaningfulness*.

Table 1

*Theme 1: Leadership Attentiveness to Promote Workplace Meaningfulness (Frequency)*

Participant	Interview questions	References
L1	1, 5, 8	5
L2	3, 8	3
L3	9	1
L4	5, 8	2
L5	1, 2, 3, 6, 8	5
L6	1, 4, 5, 8	5
L7	8	1
L8	1	2
L9	1, 3	3
L10	6, 8	3

Ten (100%) participants indicated the need for leaders to engage and encourage employees on a consistent basis. Four (40%) participants shared that to achieve workplace meaningfulness, employees needed to feel that their voices and suggestions mattered. Seven leaders (70%) noted that, while working alongside staff members, they encouraged staff members to take pride in their work and seized the opportunity to build staff members' confidence. Five leaders (50%) acknowledged the significance of a content workforce and voiced the value of implementing strategies to encourage meaningfulness through appreciation.

Relevant to employee confidence, 7 (70 %) participants expressed that, through involvement, leaders can promote meaningful work environments and stimulate the assurance employees need to engage. Participant L10 emphasized the need to “give them [staff members] that confidence to say okay, I’ve done something right—I know what I’m doing.” In support of using strategies that build confidence, Participant L2 indicated that, through meaningful work experiences, leaders could inspire employees to take on new roles and responsibilities. Participant L2 shared that an unsure staff member was reluctant to move into a new position; however, with the encouragement of Participant L2, the staff member gained the confidence needed to pursue a new job role. Little, Gooty, and Williams (2016) advanced that leaders develop and incorporate strategies to manage behaviors and emotions to influence meaningful relationships in the workplace. Relevant to the tenets of TPED, employees engage when leaders develop strategies and practices necessary to support a worker’s individuality, ideas, and passions (Kahn & Heaphy, 2014). Participant L2 further postulated that the opportunity to encourage is present when leaders engage and can increase confidence among employees. Similarly, Participants L3, L4, and L5 deemed leaders’ involvement as a successful strategy to encourage employees to engage. Participant L2 shared, “I try to make sure that staff doesn't feel under-valued. I show them that I believe in them. When they don't think they can, I encourage them.” Participant L2 shared a follow-up conversation with the trainee regarding the employee’s progress and suggested that encouragement through reflection was important and added meaning to the work experience.



Organizations benefit when leaders encourage disengaged employees to take ownership and embrace their roles in helping to achieve the goals and objectives established by leaders of the organization (Pendleton & Robinson, 2011). Participant L4 revealed that, by observing employees' excellence, leaders could build confidence. Participant L4 stated, "I compliment staff. I commend them and often say 'I like the way you're doing that' or 'you're doing excellent'". The senior leaders spoke of encouragement as a necessity for staff members to believe in their ability to succeed and accomplish goals, but also acknowledged that some employees "have low self-esteem" and often disengage (Participant L5). According to the fundamental principles of TPED, Kahn and Heaphy (2014) declared that employees disengage when organizational leaders fail to incorporate the strategies and practices necessary to support a worker's individuality, ideas, and passions. In accordance with TPED, Participant L10 noted that aligning individuals with job roles gave them more opportunities to be confident. Lamas and Luna (2015) stated that leaders generate connectivity when activities contribute to the personal growth of employees. Participant L6 testified that encouragement made a noticeable difference in the ability of staff members to achieve productivity.

Participants L1, L3, L5, L6, L9, and L10 discussed the application of specific strategies that leaders used to encourage employees to invest in the workplace. Alonso and Mo (2014) postulated that a work environment that supports employees' achievement of personal goals and ambitions exemplified the conditions needed to influence employees to give freely of themselves intellectually, physically, and emotionally. Participant L9 suggested that the job role alone was insufficient to encourage employees

to invest because the bureaucracy of some job-related tasks added no psychological or emotional value. For Participant L9, encouragement was important to engage the staff member as a human being who worked to serve other humans “because we work with people.” Participant L9 further explained that although the provision of care produced a sense of gratification or encouragement for employees, leaders’ involvement and concern for staff member’s role added value to their contributions. Participant L10 reported that “simple” strategies such as purchasing t-shirts for employees to wear in the community encouraged staff members to acknowledge their contributions and be proud of the organization. Participants L10 and L3 expressed that when employees were proud of their workplace and felt valued in their job role, their performance often exceeded expectations and their engagement increased. Concentrated employee fulfillment and rigorous organizational support lead to employee engagement (Ellinger & Ellinger, 2014; Menguc et al., 2013).

From the leadership perspective, Participant L1 stressed the need for leaders and employees to engage together in activities that foster teamwork. Parallel to engagement research, teamwork, leadership, growth, and the work environment are the psychological drivers of personal engagement within an organization (Costa et al., 2014; Memon et al., 2014; Romans & Tobaben, 2016; Zhong et al., 2016). Through the use of community outreach activities, such as volunteerism, Participant L3 stated that staff members “feel that they’re a part of the team.” Participant L1 further noted that using team-building exercises to increase camaraderie “opened a safety net for the staff members and myself.” Kahn (1992) iterated that leaders are more apt to experience unrestricted energy from

employees when the individual is able to implant personal and professional characteristics into the role performance.

Participants L1, L5, and L6 advanced additional input regarding the need for leaders to encourage and engage employees. Leaders mentioned that a part of working together as a team meant that senior leaders worked alongside their staff members when needed. L1 explained, “If I am willing to perform the tasks that I ask of my staff, they seem to trust me more. I have no problem leaving my office to work on the floor doing entry-level tasks.” Participant L1 shared, “I use my personal time to be available for staff I’m constantly making my presence known to the staff...If I am needed, staff can trust that I will come through.” In support, Participant L6 iterated that sacrificing personal time to support employees increased trust, stating, “If somebody calls out I’ll go in. I don’t want them to do anything that I wouldn’t do or put them in jeopardy to where it might cost them their job.” In a summary of leader’s responsibilities, Participant L5 expressed that “As a leader, I have to be able to explain their job and perform their job as well. If I can’t perform their job, I can’t explain it to them.”

The testaments of all participants revealed that the leaders intentionally connected and encouraged employees for promoting engagement in the workplace. Kahn (1992) submitted that the premise of TPED is that employees connect to their work and others when conditions are suitable to support their creativity, beliefs, and personal relations. In line with engagement strategist and TPED, participants advocated that leaders should engage and encourage with the intent of increasing employee engagement in long-term residential care agencies. Employee’s physical and mental response to the organization’s

vision, mission, and goals is determined by the perceived amount of support that leaders exhort to meet their economic and social needs (Heldenbrand & Simms, 2012; Rodwell et al., 2016).

**Archival document analysis.** I utilized the long-term residential care agency's employee manual as the archival document for methodological triangulation. The archival document disclosed the mission and vision for the organization and services offered, and outlined the rules and regulations of the long-term residential care agency (Appendix I). The archival document outlined the importance of teamwork between staff members and supervisors to foster a collaborative and supportive work environment (Appendix I). By creating a collaborative and supportive atmosphere, interaction among staff members and supervisors occurred when necessary. Sattar, Ahmad, and Hassan (2015) added that collaborative efforts of managers and leaders across the organization are an important function of productivity and leads to the development of an engaged workforce. Furthermore, and to support the interview findings, the long-term residential care agency coordinates staff members into groups with a supervisor as the team lead to create a sense of comradery within the agency (Appendix I). Employees are asked to "report to their team leader" and be assigned the day's duties (Appendix I). Paterson et al. (2014) established that the demonstration and communication of robust understanding and clear expectations by leadership stimulates a meaningful work environment for employees.

## **Theme 2: Incorporate Robust Communication Policies and Procedures**

Beliveau (2013) proposed that the quality of person-centered care depended on the ability of each member to share a holistic view of residents' needs, supporting the importance of communication and the safety of employee contributions. Pentland and Haerem (2015) noted that communication of expectations is critical for leaders to establish and uphold value in the employee and employer relationship. Karanges et al. (2014) found communication strategies to be most effective when building support systems that foster employee engagement. Table 2 reflects 40 references to communication as a tool to increase employee engagement.

Table 2

### ***Theme 2: Incorporate Robust Communication Policies and Procedures (Frequency)***

Participant	Interview questions	References
L1	1, 4, 7, 8	7
L2	1, 2, 3, 4	9
L3	5, 9	2
L4	1, 4, 8	3
L5	4, 5, 7	4
L6	1, 4, 7	4
L7	2, 3, 4, 5, 9	5
L8	2, 3, 4, 5	4
L9	1, 5	2
L10	2, 4, 8	6

Ten (100%) participants discussed the importance of establishing open communication with staff members for trusting relationships between staff and supervisors. Table 2 displays the occurrence of participants' responses, regarding communication, across Questions 1, 2, 3, 4, 5, 7, 8, and 9. Whether a minor issue or a

potential safety hazard, the participants wanted staff members to feel comfortable and safe sharing their concerns. Eight (80%) leaders indicated that communication strategies were important to encourage a safe work environment where employees could freely express themselves. Five (50%) participants reported that leaders use communication strategies to ensure employee meaningfulness. Participants favored the opportunity to provide feedback or praise honestly. Four (40%) expressed support for leaders to utilize communication as a method to ensure employee value.

Engagement researchers define safety as the contextual state of refuge in which employees are free to invest their true emotional and psychological characteristics without fear of embarrassment, ridicule, or retribution (Cappelen et al. 2014; Kahn, 1990; Li & Tan, 2013). Eight (80%) leaders responded that communication strategies were important to encourage a safe work environment where employees could freely express themselves. Heldenbrand and Simms (2012) asserted that employees are reluctant to provide input or fully attach themselves to the work environment when they feel that inserting their personal thoughts, individual talents, and subjective ideas is not safe.

Participant L1 expressed that communication ranged from praise to problem-solving. Moreover, L1 shared that the leaders of the long-term residential care agency encouraged communication between staff members and supervisors to uphold the quality of care for clients. Participants L1, L2, L3, L8, and L10 identified implementing an open-door policy for all employees as a communication strategy to promote the safety of employee expression in the work environment. However, L1 explained that there were limitations to integrating an open-door policy stating, “I want the staff to be aware that I

do have meetings. I can't always be available but when I am available my door is always opened to them." Moreover, Participant L1 conveyed that, through open and constant communication strategies, "I've built a rapport with them." Participant L8 shared that implementing an open-door policy "allows my staff to come and vent to me" about an issue they may be having with a supervisor or another employee. Participants L3 and L5 provided additional insight into the policies that support employee safety citing that leaders of the long-term residential care agency communicate and enforce rules regarding harassment and retaliation against employees. L5 shared that constantly communicating to staff that "we will not retaliate" if employees "bring a concern or issue to our attention" helps employees to feel comfortable in their work roles.

Five (50%) participants reported that leaders use communication strategies to ensure employee meaningfulness. Paterson et al. (2014), supporters of TPED, submitted that meaningfulness is the value employees assess to their involvement and contributions to organization goals. Participant L10 outlined the use of two additional platforms for staff members securely communicate suggestions and raise awareness about safety concerns. L10 indicated that the long-term residential care agency utilizes a formal process that requires staff to complete and submit a form to the "risk manager," and "We've got a suggestion box that staff can put suggestions in." L10 and L3 relayed that confidentiality was an important factor in staff members' willingness to communicate their concerns in a face-to-face format. Participant L10 explained that the suggestion box was anonymous, saying, "Only authorized personnel opens [the suggestion] box just to make sure it isn't something that anybody's trying to hide or anything like that." L10

indicated that, as a result, staff members have the opportunity to provide anonymous tips about safety and security concerns. Participant L3 added that, in relation to communication strategies, agency leaders promote the importance of confidentiality. L3 contended that the long-term residential care agency's investigative process is designed to maintain employees' privacy and confidentiality. Participant L3 concluded, saying, "I cannot disclose the origin of information regarding harassment to the employee being investigated. I think with that it gives the employee a sense of importance and that their leaders have their back."

Participants L4 and L5 noted that by maintaining employee confidentiality, leaders could provide agency-wide training or group discussions about specific concerns without causing embarrassment or humiliation. L5 detailed, "I use [their] experiences as teaching moments, and I maintain confidentiality. No one knows the origin of the concern except for that employee that we had [the] one-on-one with." Participants L5 and L10 emphasized the need for leaders to maintain the confidentiality of employees, so that staff members are encouraged to express their concerns freely. Participant L5 submitted that when "staff doesn't share their concerns, they can exhibit behaviors of depression and neglect their responsibilities. So it's best to speak out and let us know what's going on." Participant L10 reiterated that their long-term residential care agency has a no retaliation policy in place, which causes employees to feel more confident to communicate their concerns without negative consequence. Participant L10 shared, "I think as far as staff and consumers feeling like they can freely talk about things without the retribution." Participant 10 went on to explain further, "I think it goes back to the trust



with ...so they can [feel] like I can report this and we can get it taken care of and people not looking for blame.”

Medlin et al. (2016) highlighted the need for leaders to recognize employee efforts and demonstrate equality and support for progressive work relationships. Stromgren, Eriksson Bergman, and Dellve (2016) identified work relationships as capital and confirmed that the development of social capital increases job satisfaction and engagement. Four (40%) expressed support for leaders to utilize communication as a method to ensure employee value. Participants noted that leaders should utilize communication strategies to discuss mistakes and to praise staff members for meeting the goals of the organization. Participant L9 noted that, when employees make mistakes, the benefit of open communication strategies is that leaders can gain a better understanding of the problem. Moreover, L9 reported that through open communication more often than not, “It’s not me talking to them, it’s staff” communicating the need for help, “and we figure out where we need to go.” Participant L5 explained how open communication could help transform a mistake into a learning experience and afford leaders the opportunity to maintain employee value. L5 stated “I tell them although you didn’t get it right this time – don’t give up, keep fighting, and keep striving... We’re all here to learn. You learn something new every day. We teach stuff every day.” Participant L5 concluded that, through communication, leaders use experiences to edify employees.

Yoon et al. (2015) concluded that the successful implementation of person-centered care PCC required that direct-care workers receive ongoing training to reinforce attributes such as hospitality, safety, and all-inclusive decision-making. Creating a

supportive environment where staff members can learn from their mistakes helped leaders to build a learning environment conducive to growing employee skills. According to data, open communication helped leaders identify the areas where professional development opportunities would benefit employees most. Participants L3 and L10 relayed that communication strategies generate equality among employees such that their peers train staff members who may need a refresher on proper technique. L3 stated, “If you have one employee that’s a little bit better than another employee in a certain area, have the employee teach the others because it makes them feel important too.” Participant L3 described the importance acknowledging the contributions and communicating giving praise stating, “I look at our direct support professionals as our lead people, we can’t just leave them on the sideline... If they’re not there, we don’t have our jobs. So, I think that’s just important.” While participants discussed setting up events to convey appreciation, communication through one-on-one conversations was the most common strategy leaders used to praise employees. Kim et al. (2014) found that the application of HR practices, such as training on communication, yielded higher satisfaction among healthcare workers.

**Archival document analysis.** The employee manual listed the many ways staff members could reach out to their supervisors with their concerns. Informal techniques included having a one-on-one conversation with the supervisor whereas formal techniques included the submission of official documentation to the HR manager regarding a complaint (Appendices H & L). The archival document included proper procedures to report “harassment, discrimination, and retaliation” (Appendix H). With

effective communication strategies, organizational leaders foster a safe environment for employees to focus and engage other employees (Mishra et al., 2014). The document explicitly stated that employees who file official complaints are protected by a non-retaliation policy (Appendix H). By alleviating retaliation, staff members are more willing to share and disclose harassment behaviors to their supervisors, which further supports open communication between staff members and supervisors. Scholars contend that information and strategies that promote a collaborative and decentralized view could enhance service quality and increase productivity (Dobrzykowski et al., 2014; Pourabdollahian, & Copani, 2014). The manual referred to the suggestion box as a mechanism for employees to provide feedback and ideas to improve processes and techniques to either create an efficient and safe work environment (Appendix I). Moreover, the suggestion box is available for employees to make suggestions anonymously (Appendix I). By encouraging employees to communicate, leaders can circumvent dissimilarities in perceptions about policies and procedures needed to support work engagement (Kwon et al., 2016).

### **Theme 3: Organizational Support for Engagement**

Employee engagement is a predictor of commitment (Kiazad et al., 2015; Simons & Buitendach, 2013). As such, Poon (2013) argued that the results of research concerning commitment could inform leaders about the reasons employees engage in work. In support of Poon (2013), Eldor and Vigoda-Gadot (2016) documented that sequentially, organizational support led to a commitment and in turn, employees exemplified engagement behaviors such as vigor, dedication, and absorption. Relevant to the

framework of TPED, a work environment that supports employees' achievement of personal goals and ambitions exemplify the safe conditions needed to influence employees to give freely of themselves intellectually, physically, and emotionally (Alonso & Mo, 2014; Vosloban, 2013). Moreover, researchers submit that concentrated employee fulfillment and rigorous organizational support lead to employee engagement (Ellinger & Ellinger, 2014; Menguc et al., 2013).

Nine (90%) participant responses indicated that the advocacy of leaders on behalf of the employee affected engagement. Four (44%) leaders viewed employee advocacy as organizational support that led employees to invest in their job roles. Three (33%) participants expressed that employees feel safe and free to express themselves when leaders are genuine about their intent to advocate for employee support. Table 3 shows participants' reference to the theme *organizational support for engagement*.

Table 3

*Theme 3: Organizational Support for Engagement (Frequency)*

Participant	Interview questions	References
L1	7	2
L2	4, 5	2
L3	8	1
L4	3	1
L5	1, 4	2
L6	3, 5, 7	3
L8	1, 4, 6	3
L9	6, 7	2
L10	2, 7	3

Participants L10 and L8 focused on dynamic interaction as an organizational support strategy to promote employee value for role performance. L10 further noted that leaders should visit employees while they are performing in their work roles to be more

accessible to their employees. By being accessible and visible to their employees, supervisors assisted and supported employees in areas they needed assistance and support. Leader's reoccurring reflection on employee needs and the alignment of support accordingly is necessary to engage employees and achieve long-term sustainability in organizations (Schneider, 2015). Based on the implications of TPED, leaders show organizational support by acknowledging the value of employee input and developing strategies that reinforce desirable behaviors (Beliveau, 2013; Heldenbrand & Simms, 2012). Additionally, from a leadership perspective, L10 proposed that leader's interaction should demonstrate care and concern for employee personal well-being. Participant L10 acknowledged a period of separation within the long-term residential care agency because leaders rarely visited or interacted with staff during the performance of their work role. L10 concluded that leaders needed to "go around the offices and speak to people... to let them know that I care about them personally more than just work." Participant L8 indicated that visibility, from a hands-on approach, strengthened the relationship between leaders and employees when staff members were able to "observe me doing the same type of work that they're doing. In addition, Participant L8 submitted that becoming more visible to employees helps leaders to identify areas where staff members may need more support or receive input that could make the jobs more efficient. Relevant to the values of safety highlighted in TPED, employees are inclined to provide input when the actions of leaders exhibit support for workers' involvement (Kahn, 1992).

Participants L3, L6, L9, and L10 (40%) presented a preference for advocacy as an organizational resource to ensure employee investment in role performance. Four (44%) participants submitted that the nature of staff members' job role in providing long-term residential care services could have a negative impact on the employee health. The long-term residential care leaders discussed the importance of advocating on behalf of their staff members to the agency's board of directors regarding personal time off. Four (44%) participants submitted that advocacy for time off is necessary and allows for staff members to focus on their own health. L3 noted that when staff members returned from vacation, they engaged in their job roles with more compassion and kindness. In their responses, participants L10 and L6 acknowledged the emotional taxation within the long-term residential care work environment and highlighted the need for support to reduce the probability of employee burnout. Based on the central tenet of TPED, workers feel more inclined to reciprocate with positive reactions when leaders support their safety needs (Kahn, 1990).

Participant L10 espoused that leaders should make every effort to develop relationships that allow employees to share openly about the need for personal time off. L9 explained, "things happen, and people go through things" supervisors should recognize diminished work ethics and advocate on behalf of employees to avoid burnout. Participants L9 and L10 expressed the importance of making sure their staff members were able to get the days off they requested. Participant L6 stated, "Some staff work nonstop and don't ask for [time] off... So when they ask for days off, I make sure I accommodate them, even if I have to go in there and work it myself." Moreover, L6

stated that leaders should remain cognizant of healthy work relationships to avoid the onset of a disengaged workforce. L3, L6, and L9 responded that leaders should serve as advocates to mitigate lapses in communication that can lead employees to disengage.

Participant L10 championed establishing an advisory board as a platform to advocate for staff members. L10 expounded that the advisory committee represented the voice of employees across various levels within the long-term residential care agency. Participant L10 explained that the committee met with senior leaders periodically to discuss employee ideas and concerns. Regarding employee advocacy, L10 suggested that the advisory committee was a useful tool for leaders to show interest and value in the ideas of staff members. Franklin and Richard (2016) posited that advisory committees serve as a conduit to gain diversified input on decisions that affect the organization. The transfer of knowledge is a mutual transaction, and although managers transfer their knowledge of strategies, they must support and value input from staff members (Kahn & Heaphy, 2014).

Five (50%) participants indicated that leaders should secure resources to support employees' emotional investment in role performance. Kahn (1990), in the development of TPED, determined that engagement required emotional resources. Kahn (1990) explained that, in work environments that are emotionally taxing, training and development could help employees manage their use of emotional energy. The long-term residential care agency created an environment where employees felt comfortable and safe reporting harassment, emotional issues, and other concerns (Appendix H). Regarding organizational support, L2 and L5 maintained that implementing and enforcing a

retaliation policy gave employees the comfort they needed to express themselves freely. Furthermore, Participant L9 suggested that leaders should adopt and support strategies that promote advocacy for employee safety and a better work environment. Kahn and Fellows (2013), in their analysis of TPED, asserted that workers moderate levels of engagement according to their ability to insert true expressions of themselves into work-related roles.

Participant L3 acknowledged that their staff members were human beings who “have a life outside these doors” and through the agency’s healthcare plan, “there are resources available [to staff members] . . . as far as emotional, behavioral, [and] alcohol drug rehab.” Participant L1 identified leaders as resources contending that because leaders advocate and are actively involved, they can better detect and resolve the concerns staff members. L1 explained, “When the staff arrives for duty, if it [seems] as though something is bothering them I can almost see it when they come in. So, I engage in conversation.” Participant L1 clarified, “The agency does provide different outlets for employees having personal issues at home or some emotional problems that they feel they can’t deal with. The agency does provide counseling and things like that.” L1 concluded that although resources are available, staff should be allowed to find their solutions, stating, “They can always come and talk, and I can help them find their own solution. . . I try to help them find their own solutions so that they can be more effective at work.” Participant L4 shared that “sometimes you know I do have some who will call me and in emotional distress I’ll sit there, I’ll listen and a lot of times I just pretty much tell them you know I understand.” L4 shared that, as a form of organizational support, staff



members have the option of utilizing time off, but “most of the time they’ll say no.” In addition, Participant L9 indicated that leaders often served as an outlet for staff members to communicate their personal issues.

Kurtessis, Eisenberger, Ford, Buffardi, Stewart, and Adis (2017) described perceived organizational support (POS) as the employee’s holistic experience of leadership, human resource practices, and the work environment. The testimonies of the participant’s encompassed the organization’s efforts to appeal to employee’s perception of organizational support by establishing and demonstrating value for employees’ psychological and physical wellness. Through leadership and HR practices, leaders can affect POS for increased engagement (Caesens, Marique, Hanin, & Stinglhamber, 2016).

**Archival document analysis.** The long-term residential care agency’s employee manual outlined the importance of supervisors being available to their staff members (Appendix I). An employee’s physical and mental response to the organization’s vision, mission, and goals is determined by the perceived amount of support that leaders exhort to meet their economic and social needs (Heldenbrand & Simms, 2012; Rodwell et al., 2016). The employee manual indicates that staff members should notify their supervisors immediately of issues that could affect the workplace (Appendix I). Supervisors were staff members’ first point of contact in all situations relating to workplace concerns or issues, such as being unable to come into work because of a sudden illness or reporting harassment (Appendix I). As a result, supervisors were visible to their staff members during their shifts in case concerns or issues arose while at work. Supervisors advocated for their staff members because of their dedication to their staff as a part of their team.

Teamwork was an important aspect of organizational support because the relationship between staff members and their supervisor affected the quality of services (Appendix I). Sattar, Ahmad, and Hassan (2015) posited that the collaborative efforts of managers and leaders across the organization are an important function of employee support and leads to the development of an engaged workforce.

#### **Theme 4: Fostering Interpersonal Relationships for Increased Employee Value**

Kahn (1990) in the application of TPED postulated that the safety of employee's engagement was contingent upon leader's ability to establish clear and consistent boundaries between acceptable behaviors or actions, violations, and probable consequences. In reference to respect within the TPED framework, Kahn (1990) submitted that meaningful interactions between leaders and employees involved mutual reverence and appreciation. Researchers contend that, at the core of engagement, leaders' use of policies and procedures that guide equality and justice for employees have a wide-ranging effect on employee engagement (Kahn, 1990; Kahn & Fellows, 2013; Kwon et al., 2016). Moreover, Kwon et al. (2016) found that employees reciprocated a higher level of work engagement when leader's actions demonstrated respect and trust for the individual's input.

Six (60%) participants provided input on the importance of fostering interpersonal relationships to express value for staff members and their job functions. L2, L9, and L10 provided comments on the relevance of trust and respect to strategies leaders use to ensure a sense of trust in leadership. Participants L1 and L5 reported on the efficacy of trust and respect as pertained to employee meaningfulness and availability. The study

participants highlighted actions such as modeling behaviors, providing information, and exhibiting dignity for staff as significant components that lead to engagement. Table 4 outlines the participants whose responses contributed to the conception of the theme *fostering interpersonal relationships for employee value*.

Table 4

*Theme 4: Fostering Interpersonal Relationships for Employee Value (Frequency)*

Participants	Interview questions	References
L1	1, 8	4
L2	2, 5	3
L4	3	1
L5	1	1
L9	5,	3
L10	5, 8	2

The perceived value of interpersonal relationships affects the extent to which the worker is available to engage, as concluded in Kahn's (1990) assessment of TPED. The value of achieving the desired outcome increases when performance practices include input from employees (Kim et al., 2014). Participants L2 and L9 asserted that the development of interpersonal relationships is a determining factor for leaders when maximizing employee engagement. Participant L9 shared that leaders should avoid micromanaging staff members. L9 indicated that by empowering employees to work without micromanagement and at their own pace, leaders demonstrate respect and in turn gain the trust of employees. However, L9 reported that empowerment transpired as employees' tenure grew. Furthermore, L9 stated that leaders should reverence the contributions of employees and allow employees to implant personal characteristics into

their role performance. In a concurring statement, Participant L2 explicated, “I can trust my staff. I tell them that I do expect loyalty and honesty. I treat my staff the way I want to be treated.” Participant L2 urged that by communicating respect and trust leaders demonstrate value for employee and gain their confidence. In line with TPED, the development of interpersonal relationships affects the intrinsic and extrinsic value that workers place on their job roles and can lead to engagement (Kahn, 1992).

Regarding respect and trust in interpersonal relationships, L1 responded, “I try to treat them [staff] with dignity and respect because that’s how I would want to be treated.” L1 stated, “I’m sure you heard of the golden rule ‘treat others as though you would like to be treated.’ Most people misquote that, but if you treat people how you would like to be treated, you get a greater response.” Participant L1 added that the “golden rule” applies to all agency related relationships such as employee-client relationships “because we deal with individuals with learning disabilities and one of the greatest things that we preach is dignity and respect for those individuals.”, Through the central tenets of TPED, researchers concluded that the employees’ overall social relationship with leaders and members of the organization determined whether the employee’s response to engagement strategies was negative or positive (Kahn, 1990).

While participants L1 and L5 reiterated the importance of demonstrating dignity and reverence, Participant L10 provided additional insight that respect and trust involved building employee confidence. According to the principles of TPED, the psychological availability of employees increase and decrease according to the ability of leadership to grow employee’s confidence and value (Kahn, 1990). L10 elaborated and shared, “We

got to put them into the leadership classes; we got to sit down with them if it's one-on-one on how to do this form, this plan, this program. So, the more we pour into people, the more confident I think that they'll get and build those skills." In a similar response, L1 discussed how "leaders made leaders" posturing that, "modeling, leading by example, and treating staff with dignity and respect" was at the core of engagement.

Participant L10 advocated that respect and trust were critical components of the interpersonal relationship that leaders use to foster employee buy-in and lead a team forward. Consistent with TPED, workers rely on their perceptions of equality and justice in the work environment to balance the ratio of contribution to outcomes (Arvanitis & Hantzi, 2016; Cappelen et al., 2014; McKown, 2013). Participant L10 shared and acknowledged, "When the vision is there you got to spread it out through your people because one person can't do it all." Acknowledging his role in the process, Participant L10 indicated that leaders should, "bear the communication, the teamwork, and the trust, and self-awareness, all of those things are things you got to pour into your staff." Scholars of TPED propose that a balance of social and material exchanges could result in the increase of physical, emotional, and psychological energy and lead to engagement (Arvanitis & Hantzi, 2016; Memon et al., 2014; Noe et al., 2014).

Owens, Johnson, and Mitchell (2013) found that through humility, effective leaders pursue interpersonal relations and willingly share their power. Moreover, Owens et al. (2013) determined that unpretentious leaders were able to increase employee confidence and improve their decision-making skills. Participant L10 concluded, "at the end of the day, they [employees] start thinking, okay this is how we handle this situation.

This is what we do. This is how we handle it.” According to the sentiments of Participant L10, leaders should develop and implement practices that help facilitate a culture where the efforts of the staff are congruent with achieving organizational goals. L10 submitted that leaders foster respect and trust by embracing opportunities for staff members to demonstrate leadership. Within interpersonal relationships, leaders exhibit ethical leadership through communication, corroboration, and decision-making responsibility and accountability to earn the trust and commitment of employees (Walumbwa, Hartnell, & Misati, 2017).

**Archival document analysis.** Yoon et al. (2016) indicated that the intrinsic and extrinsic value that workers place on autonomy and empowerment could lead to engagement. The long-term residential care agency’s employee manual outlined the responsibilities and duties of staff members according to their position (Appendix I). While supervisors made the final decision regarding these duties, the long-term residential agency highlighted the autonomy and empowerment of staff members to meet the standards of care and accomplish the long-term residential care agency’s mission (Appendix I). Kim et al. (2014) described decentralized healthcare environments as having a less formalized organizational structure that empowers employees and promotes autonomy in the delivery of care. As a part of the long-term residential care agency’s strategy on teamwork, leaders encouraged supervisors to gain the trust of their staff members by respecting their position and fostering cooperative problem-solving strategies. In a display of respect for employees’ job role, leaders often visited and assisted staff while they were performing their role. Medlin, Green, and Wright (2016)

offered that organizations could accomplish a moderate level of engagement through satisfaction factors such as trust and cooperation.

### **Theme 5: Meaningful Rewards and Recognition**

Factors that are both internal and external to the work environment influence the employees' perceived value of rewards (Purvis et al., 2015; Shweiki et al., 2015; Squires et al., 2015). Kahn (1990) proposed that the perceived value of work rewards affects the extent to which the worker is available to engage. Within the dynamics of work climate and worker's needs, leaders use the assessment of incentives, and motives to analyze behaviors and expose gaps that lead to poor performance (Campbell, 2014; Kemeny & Mabry, 2015). Table 5 highlights participant responses that supported the theme *meaningful rewards and recognition*.

Table 5

#### *Theme 5: Meaningful Rewards and Recognition (Frequency)*

Participant	Interview questions	References
L1	2,	1
L2	2,	3
L3	2	1
L4	2	1
L6	2	1
L7	1	1
L8	3, 8	2
L9	2, 3	3
L10	2	2

As indicated in table 5, nine (90%) study participants expressed, in questions 1, 2, 3, and 8, the benefit of showing genuine gratitude for staff members' dedication and hard work. Seven out of nine (78%) of these nine participants indicated that leaders ensure

employee value when they make sure their staff members know they are appreciated with activities and rewards. Participants L1, L2, L3, L4, L6, L9, and L10 indicated that leaders ensure employee value when they incentivize, reward, or appreciate staff members.

Participant L6 advocated that leaders organize activities and events as a means to promote value for staff members. L6 stated, “We have staff meetings, we get together, we play games, we participate in team-building exercises to show their value and other group activities to let them know that they’re valued.” Participant L8 expressed that “cookouts for staff and Christmas events” reinforces leader’s appreciation for employees and their contributions. Participant L3 described employee appreciation week for the long-term residential care agency, stating “We have a spin-the-wheel where they can win some money, employee t-shirts, and it’s their week it’s their week for us to appreciate them.” Participant L3 stated that the purpose of these activities was to “show staff that we do value them even though they’re in the frontline and we don’t usually get to see them a lot.”

Seven (70%) participants reported using incentives and appreciation as methods to demonstrate employees’ worth. Participant L10 noted that leaders could develop and implement strategies to ensure value for employees without financial burden. Participant L9 and L10 shared that leaders could relay exhibit appreciation to staff members by acknowledging their birthdays. L10 stated, “I have a stack of birthday cards over there. And so we try to send every employee a birthday card [during the month of their birthday].” L10 mentioned that the leaders include a personal message and when permitted a \$5 Wal-Mart gift card. Participant L10 expressed that leaders needed to show



genuine appreciation to their staff members, however, “job satisfaction isn’t always about the dollar.” According to L10, leaders could search out alternative means of ensuring employee value when financial incentives are not feasible. L9 provided that while “we don’t have the options most time to give bonuses,” as their leader I try to do “something for them just to know that they are valued. . . Whether it’s a holiday, a birthday, a birth of a child, I take an interest in that.”

Participant L1 recounted ongoing projects within the incentive program to recognize the efforts of employees. In a description of the incentive program, L1 shared, “I try to recognize [staff] in a smaller environment in my long-term residential care homes, and I call them the Atkinson West Star.” L1 furthered, “It doesn’t matter what they have done last month or last year, but if they do something exemplary I recognize them... Incentives have definitely been effective because the staff work hard to try to become that star.” According to (Appendix G), the long-term residential care agency incentivizes employees financially for not calling out of work for an extended period or for receiving Medical Technician re-certification within one year of the previous certification date for agency compliance.

Leaders allotted time to recognize employees and the importance of staff members’ roles in their respective departments. Data indicated that the consensus among leaders, for both large and small departments, was that leaders should take the time to reach out and commend their staff members for their efforts consistently. Participant L2 explained, “I know I can’t do my job without them and I do value them. I do want them to know that their job matters to me.” L9 submitted that there are periods when leaders

are not able to provide formalized incentives to employees. Therefore, L9 utilizes recognition as an alternative strategy to encourage employees “to perform above and beyond so that if the opportunity comes for a promotion, they’ll have that opportunity.” Leaders utilize recognition within the workplace to edify the identity of employees (Islam, 2013). Strategies that involve conveying words of affirmation confirm, to employees, their value within the organization (White & White, 2017).

**Archival document analysis.** The archival documents did not explicitly identify techniques to show appreciation to staff members. However, the manual contained a reminder for performance evaluators to express appreciation for staff member during their one-year review (Appendix I). Medlin et al. (2016) highlighted the need for management to recognize the efforts of employees and demonstrate equality and support for progressive work relationships. Employees are motivated to engage when the rewards of meeting goals and expectations satisfy their intellectual, physical, and emotional needs (Nimri et al., 2015; Purvis et al., 2015). Appendix G outlines an example of incentives the long-term residential agency utilized in the past year to promote completion of annual training courses for agency compliance. Zhong et al. (2016), scholars of TPED, argued that the perceived value of work rewards affects the extent to which the worker is available to engage.

#### **Theme 6: Training and Development for Personal and Professional Growth**

Leaders convey clear expectations, provide the necessary resources, and support the achievement of personal goals and ambitions to motivate employees to engage (Alonso & Wang, 2014; Vosloban, 2013). Moreover, Wernerfelt (2014) stated the ability

of leaders to identify and position human resources is a dynamic component of leadership that leads to employee engagement. Livitchi et al. (2015) proposed business leaders align strategy implementation and resource development to avoid wasting human resources. Schneider (2015) suggested that, through the alignment of core competencies, resources, and viable constituents within the organization, leaders could ascertain the knowledge needed to manage business risks and increase organizational sustainability. Researchers of TPED conclude that employees define prestige and impact as units of measurement for the value of their job role. Drawing from the tenets of TPED, Basit (2017) suggested that through training and development, leaders can positively affect the employees' perception of self-worth within the organization through psychological meaningfulness. Eight (80%) study participants responded that professional development, training opportunities, and other programs positively affect employee engagement. In Table 6, participants L1, L2, L3, L4, L6, L7, L9, and L10 responded that professional development and other resources promoted meaningfulness, a return on investment, and role performance. According to Torraco (2016) leaders target personal, professional, and organizational development to promote engagement among members of the organization. Table 6 outlines participant responses that supported the theme *training and development for personal and professional growth*.

Table 6

*Theme 6: Training and Development for Personal and Professional Growth (Frequency)*

Participant	Interview questions	References
L1	7, 8	4
L2	6, 7	2
L3	3, 6, 7, 8	4
L4	6, 7	2
L6	1, 6	2
L7	6	1
L9	6	1
L10	3	3

In respect to identifying strategies to increase employee engagement, Participant L3 declared, “Staff invest their time towards the organization to build something. We have individuals that come in as subs and they have been promoted up to supervisors, coordinators and to management roles.” L3 iterated that leaders should provide employees with the opportunity to refresh and re-educate themselves. According to Participant L3, new employees receive extensive training before providing care and are mandated to attend a course for updates and recertification. New employees receive extensive training from training coordinators for a period of two weeks to ensure a comprehensive review of procedures, regulations, policies, and skills specific to the agency (Appendix I). Agency leaders provide a Pre-Service Orientation Training to help acclimate new employees to the long-term residential care agency’s policies, procedures, and standards. Participant L1 asserted, “training is important to becoming an effective staff member.” In addition, Participant L3 contended that there were extensive

professional development opportunities available throughout the duration of employment with the agency.

Participant L10 provided input regarding leaders' ability to ensure a return on investment for employees and the agency. L10 mentioned that after receiving training and professional development opportunities, leaders of the long-term residential care agency afford employees the opportunity to demonstrate or facilitate training for other staff members. In return, employees gain confidence, a return for investing their time (Participant L3). Participant L10 indicated that when staff members retain the information the agency receives a higher return on investment. L10 corroborated the response of L3 providing that leaders must initiate ongoing opportunities for staff members to refresh and update their knowledge and skills.

Six (75%) participants espoused the need for physical resources to ensure employee investment in role performance. Participant L6 highlighted that leaders trained employees to "make sure they're aware of changes when it comes to policies and the procedures" that affect their jobs directly. L9 expressed the importance of leaders making professional resources available to staff members, "I make sure they have all the reading materials, the trainings, even the equipment that they need to help them with a lot of these consumers that we work with." Participant L4 reiterated the sentiments of L3 sharing that staff members "have to have the proper resources in order to do their jobs effectively." Relative to the tenets of TPED, the availability of resources for growth and development affect the frequency in which employee's move in and out of engagement (Kahn, 1990). Employees equate opportunities for training development and personal growth to the

strength of the organization (Haung, Ma, & Meng, 2017). Moreover, employees that deem the initiatives of leaders, relative to growth and development, as strong are most likely to engage in achieving the organization's vision (Bakker, 2017; Haung, Ma, & Meng, 2017).

**Archival document analysis.** Gilley et al. (2014) noted that experience and knowledge regarding the acquisition, distribution, and utilization of resources are necessary attributes for the development and efficacy of strategies that increase productivity. Systemic training enhances the outcome of productivity strategies (Alagaraja & Egan, 2013; Blomme, Kodden, & Beasley-Suffolk, 2015; Choi et al., 2015). Appendix F referred to the extensive training available to employees when first hired by the agency. In addition, Appendix G contains a summary regarding the importance of completing certification, or recertification, for important skills needed within the job. Chabok et al. (2013) noted that leaders must implement strategies to manage employee commitment, and support continuous training and development for increased productivity.

### **Applications to Professional Practice**

Identifying the strategies that leaders of long-term residential agencies use to enhance employee engagement and mitigate employee disengagement may prove beneficial for increased productivity across the healthcare industry. Business leaders may be able to develop a comprehensive approach to identifying and addressing the needs of staff members based on the results of this study. From a general business perspective, member engagement affects profits, sales, and organizational return on investment

(Kerns' 2014). However, at the fundamental level of business performance, employee engagement is a key component that requires leaders to develop and integrate engagement strategies into the core values that guide organizational members (Bandura & Lyons, 2014; Price & Whiteley, 2014). The overall professional practice implications, based on the study findings, are the development of potential best practices for leaders of long-term residential care agencies to utilize to enhance the level of contribution from employees through communication, incentives, and training strategies.

Researchers have substantiated practices that encouraged empowerment, delegation, collaborative decision-making, and employee performance as key elements to maximizing the overall productivity of an organization (Winiiecki, 2015; Li et al., 2012). Kahn and Heaphy (2014) suggested that leaders interact with employees to search out their individuality, ideas, and passions. A leader's ability to enact engagement strategies that affect the value employees assess to their involvement and contributions to organization goals may encourage the employee to connect and commit to achieving successful outcomes. Ten (100%) study participants stressed the need for leaders to connect with employees consistently and intentionally through a hands-on approach. Participants stressed that during one-on-one encounters they engaged and encouraged employees regarding purpose, expectations and the importance of their job role. Parallel to the research of Terada et al. (2013), the findings of this study underpin the need for leaders to corroborate the relevance of employee contributions towards achieving goals and objectives through involvement and reinforcement.

Paterson et al. (2014) established that the demonstration and communication of a robust understanding and clear expectations by leadership stimulates a meaningful work environment for employees. Comparable to the implications of Paterson et al. (2014), 10 (100%) participants bolstered the importance of allowing staff members the opportunity to communicate their concerns. While 10 (100%) participants promoted the significance of availability among leaders to hear employee concerns, five (50%) highlighted the enactment of an open-door strategy. As such, leaders allow staff members to discuss personal or agency concerns at any time, no formal meeting required. In addition, participants accentuated the execution of a non-retaliation policy, whereby, staff members are encouraged to voice their concerns without penalty. Keating and Heslin (2015) postulated that leaders could cultivate high-performance work environments by encouraging employees to communicate openly. Based on the inferences Kahn (1990) regarding TPED and the need for workers to feel safe, leader's use of communication strategies, as outlined in the study results, may prove vital to increasing employee engagement for productivity.

Leaders embrace and protect the identity, thoughts, and feelings of workers with the expectation that employees will reciprocate with positive reactions more frequently (Rodwell et al., 2016; Reader et al., 2016; Saks & Gruman, 2014). Kahn (1990) advocated that employees engage in work and connect with others when allowed to immerse personal proportions of themselves into their jobs. Nine (90%) participants shared that a leader's presence can spawn a noticeable change in employee performance. More specifically participants stressed the need for leaders to advocate for their



employees and physically share in work experiences. Parallel to the central tenets of TPED and engagement research, findings from this study indicate that the perceived amount of support that leaders exhort to meet their economic and social needs affects employees' physical and mental availability (Heldenbrand & Simms, 2012; Rodwell et al., 2016).

Medlin, Green, and Wright (2016) offered that organizations could accomplish a moderate level of engagement through satisfaction factors such as trust and cooperation. Medlin et al.'s (2016) research results highlighted the need for management to recognize the efforts of employees and demonstrate equality and support for progressive work relationships. At the core of employee engagement, there is a need for trust among employees and leaders. Researchers indicate that employees trust leaders to incorporate strategies and provide the tools to necessary to maximize their potential. The analysis of data revealed that leaders trust in staff members were paramount to the quality of service provided to their consumers. Participants L2 and L10 suggested that the actions of long-term residential care leaders must establish respect and exhibit trust in their employees. Participant L1 stated that the "golden rule" for leaders of residential facilities must lead by example and respect employees. Based on the analysis of data, the enactment of trust and respect by leaders towards employees can manifest in the overall quality of services provided by the agency.

The perceived value of work rewards affects the extent to which the worker is available to engage (Kahn, 1990). Sattar et al. (2015) determined that incentives such as recognition, cash bonuses, and paid time off are common forms of rewards in business

and are related to an employee's engagement. Nine (90%) study participants supported the need for leaders to incentivize, reward and appreciate. Participant L10 introduced hand-written birthday cards as an act of appreciation for employees, while other participants reinforced their agency's use of gift cards as an incentive or reward. The testimonies of participants L9 and L10 suggested that the monetary value of the rewards and incentives was insurmountable to worth employees assessed to the leader's acknowledging and appreciating their efforts. Accordingly, seven (70%) offered that leaders appreciation for employees through acts of kindness, incentives, or rewards is a critical strategy for increasing value among healthcare workers. Study findings may assist leaders to increase engagement by integrating incentives, rewards, and acts of appreciation to satisfy the intellectual, physical, and emotional needs of employees.

The findings of the study may contribute to closing a gap in knowledge among healthcare leaders regarding strategies to manage employee commitment and support continuous training and development. Comparable research by Kim et al. (2014) indicated that the application of HR practices, such as training and communication, yielded higher satisfaction among healthcare workers. In like manner, the analysis of data from this study revealed that leaders incorporated professional development training, refresher training, and a combination of emotional resources to ensure the success of the employees. Participant L3 suggested that leaders assure employee confidence through strategies that increase their competence. Leaders can affect the outcome of goals and expectations through engagement strategies that affirm professional competence,

interpersonal skills, job commitment, the clarity and alignment of beliefs and values, and the employees' understanding of their abilities (Li & Porock, 2014).

### **Implications for Social Change**

By the year 2030, 1 in 5 U.S. citizens will be over the age of 65 (Ortman et al., 2014). The aging population is a concern among leaders of society responsible for the planning and development of programs that ensure and secure the welfare of aging communities (Ortman et al., 2014). Society benefits when community members are assured that an aging and disabled population will receive efficient and effective care (Eifert, Adams, Morrison, & Strack, 2016). Evidence of social change could manifest as engaged employees might improve the physical and social qualities of life for patients and their families.

Employee engagement in the healthcare industry may reduce treatment cost and federal and state tax burdens on a community (Poterba, 2016; Street, 2016). According to Poterba (2016), the intake of revenue required to fund Medicaid and Medicare is slower than the increasing rate of healthcare needs. Street (2016) submitted that agency expenses such as employee insurance drive the price of care and healthcare providers must look for alternative ways to lower operating costs. Based on the findings of this study, engagement strategies such as routine training and professional development can potentially reduce costs associated with medical errors and safety violations among long-term residential care workers. Kiser and Karceski (2017) identified aging populations and increasing healthcare costs as key determinants of economic taxation. Thus, data from this study may affect social change by easing the financial burdens of healthcare

professionals and reducing the amount of tax revenue needed to support the needs of aging U.S. citizens.

The findings derived from this study indicated that implementing strategies that increase meaningfulness could affect the quality of life for employees working in long-term residential care agencies. Phelan and McCormack (2016) argued that leader's reverence for the personal and professional needs of employees was critical for fulfilling the social responsibility of long-term residential care agencies. By utilizing best practices, leaders of long-term residential care agencies might increase employee engagement, producing a proficient workforce to meet the needs of an aging U.S. population.

### **Recommendations for Action**

Leaders have a significant role in the development of work environments that fosters engagement to enhance the quality of life for patients and their families (Gabel-Shemueli et al., 2015; Liu et al., 2013). Employee engagement requires that leaders search beyond the status quo to identify and organize rare, imitable, and value-adding resources (Barrick et al., 2015; Lin & Wu 2014; Schneider, 2015). Wernerfelt (2014) stated that the ability of leaders to identify and position resources is a dynamic component of leadership that leads to employee engagement. The results of this study may prove valuable to long-term residential care agencies and patrons by assisting healthcare leaders to increase employee engagement. Based on the research findings, I recommend the following actions:

- Long-term residential care leaders initiate direct interaction with staff, praise and provide encouragement to promote meaningful work experiences and ensure employee value for workplace engagement.
- Long-term residential care leaders enact practices and policies that allow employees to communicate their concerns without retaliation to ensure a safe work environment where employees are free to express themselves in work activities.
- Long-term residential care leaders must commit to providing organizational support that undergirds emotional resources to ensure the psychological availability of employees during role performance. Strategies, such as an open-door policy that allows employees of all positions to meet with senior leaders for personal and work-related discussions can stimulate trust in leadership.
- Long-term residential care leaders should build interpersonal relationships, and consistently validate staff member's ability to attract their attention and maintain prominence. A leader's reliable representation of staff can encourage trust and employee meaningfulness.
- Long-term residential care leaders must lead by example, trust staff members, and demonstrate a profound respect for staff members and their job role.
- Long-term residential care leaders should develop meaningful incentives and rewards programs to ensure a sense of return on investment for employees and employee value for workplace engagement.

- Long-term residential care leaders should conduct routine training and invest in the professional development of staff members as confidence building strategies to ensure employee investment in role performance and employee value for workplace engagement.

I intend to disseminate my research findings through industry publications, academic journals, conference presentations, seminars, and training. McDavitt et al. (2016) advocated for two-way communication via conference presentations, seminars, and training to achieve a deeper understanding of research results and ensure that viable constituents received the information. McVay, Stamatakis, Jacobs, Tabak, and Brownson (2016) examined the dissemination of research results within the healthcare industry and concluded that there is a gap in the distribution of information between researchers and public healthcare providers. To address the distribution gap, I intend to share the outcome of this study during workshops and seminars where leaders might benefit from the opportunity to discuss the research findings and the applicability of best practices into their specific work environments. Moreover, the circulation of the study findings via industry publications and academic journals might prove valuable for leaders in other fields that implement the recommendations as engagement strategies.

### **Recommendations for Further Research**

The results, inferences, and recommendations stemming from this study may contribute to the current body of knowledge, and future research regarding strategies healthcare leaders need to increase employee engagement for productivity. Information and strategies that promote a collaborative and decentralized view of engagement could

enhance service quality and increase productivity (Dobrzykowski et al., 2014; Pourabdollahian & Copani, 2014). The engagement of healthcare employees increases productivity, which has a wide-ranging effect on healthcare services, healthcare products, hospitals, transportation, and safety (Heckman et al., 2016; Nazir et al., 2013; Suter et al., 2014).

Limitations regarding the ability of study participants to articulate their knowledge and understanding of the study topic did not manifest. However, future researchers might consider increasing the inclusion criteria for participant experience from 3 to 5 years to identify participants that might provide the most relevant information and enhance the quality of interview data collected. Moreover, researchers could expand my study findings by collecting interview data from long-term residential direct-care workers to determine the efficacy of engagement practices.

### **Reflections**

Using a qualitative single case study, I explored strategies healthcare leaders use to engage employees for increased productivity. In reflection of my experiences during this research process, I discovered that the definition of employee engagement lacks clarity. Moreover, the preconceived ideas about what I thought to be subtle variances in opportunities to engage employees and their levels of engagement proved to be complex and ambiguous.

The processes within the DBA Doctoral Study challenged and enhanced my knowledge of employee engagement. The duty of having to search out what I did not know and reshape what I thought I knew about the study topic helped me to evolve as a

scholar in the area of leadership. The research skills applied throughout the development process improved my awareness of the commitment required to complete scholarly work. Moreover, conducting research using a qualitative approach has enhanced my understanding and respect for the sacrifices scholars have made to move society forward.

### **Summary and Study Conclusions**

The purpose of this qualitative single case study was to explore strategies healthcare leaders use to engage employees. In Section 1, I reviewed the body of literature regarding organizational leadership, organizational productivity, employee engagement, the business of healthcare, long-term residential care, and theories related to engagement. Section 2 was a presentation of the acute components of my qualitative case study and discussed the role of the researcher, participants, research method and design, population and sampling, ethical research, data collection and analysis, and reliability and validity of the research. The research methodology and design described was suitable to support the extraction and analysis of data as they pertain to healthcare leaders and engagement strategies. In Section 3 contained comments regarding the study findings' application to professional practice and the implications for social change. Ten senior leaders of a long-term residential care agency located in South Carolina provided the interview data, a training agenda, and incentive program information (archival documents) for my study. The six themes that emerged from my analysis were a need to (a) stimulate leadership attentiveness to promote workplace meaningfulness, (b) incorporate robust communication policies and procedures, (c) establish organizational support for employee engagement, (d) develop interpersonal relationships for increased



employee value, (e) integrate meaningful rewards and recognition, and (f) apply training and development for personal and professional growth. Healthcare leaders must incorporate strategies that yield meaningful work experiences and allow workers to immerse themselves physically and psychologically in their job roles safely to increase employee engagement.

## References

- Alagaraja, M. (2014). A conceptual model of organizations as learning-performance systems. *Human Resource Development Review, 13*, 207-233.  
doi:10.1177/1534484313495852
- Alagaraja, M., & Egan, T. (2013). The strategic value of HRD in lean strategy implementation. *Human Resource Development Quarterly, 24*(1), 1-27.  
doi:10.1002/hrdq.21155
- Al-Aufi, A., & Ahmed Al-Kalbani, K. (2014). Assessing work motivation for academic librarians in Oman. *Library Management, 35*(3), 199-212. doi:10.1108/LM-03-2013-0020
- Alfes, K., Shantz, A. D., Truss, C., & Soane, E. C. (2013). The link between perceived human resource management practices, engagement and employee behaviour: A moderated mediation model. *International Journal of Human Resource Management, 24*, 330-351. doi:10.1080/09585192.2012.679950
- Almutawa, Z., Muenjohn, N., & Jiaying, Z. (2015). Unlocking the black box of the conceptual relationship between HRM system and organizational performance. *Journal of Developing Areas, 49*, 413-420. Retrieved from <https://muse.jhu.edu/journal/258>
- Alonso, A., & Wang, M. (2014). Oh Canada! A different take on employee engagement. *The Industrial-Organizational Psychologist, 51*(3), 165-169.  
Retrieved from <http://www.siop.org/default.aspx>

- Andersen, J., & Samuelsson, J. (2016). Resource organization and firm performance-how entrepreneurial orientation and management accounting influence the profitability of growing and non-growing SMEs. *International Journal of Entrepreneurial Behavior & Research*, 22, 466-484. doi:10.1108/IJEER-11-2015-0250
- Andries, P., & Czarnitzki, D. (2014). Small firm innovation performance and employee involvement. *Small Business Economics*, 43(1), 21-38. doi:10.1007/s11187-014-9577-1
- Anitha, J. (2014). Determinants of employee engagement and their impact on employee performance. *International Journal of Productivity and Performance Management*, 63, 308-323. doi:10.1108/IJPPM-01-2013-0008
- Arnaboldi, M., Lapsley, I., & Steccolini, I. (2015). Performance management in the public sector: The ultimate challenge. *Financial Accountability & Management*, 31(1), 1-22. doi:10.1111/faam.12049
- Arslanagic-Kalajdzic, M., & Zabkar, V. (2015). The external effect of marketing accountability in business relationships: Exploring the role of customer perceived value. *Industrial Marketing Management*, 46, 83-97. doi:10.1016/j.indmarman.2015.03.002
- Arvanitis, A., & Hantzi, A. (2016). Equity theory ratios as causal schemas. *Frontiers in Psychology*, 7, 1257. doi:10.3389/fpsyg.2016.01257
- Aryee, S., Walumbwa, F. O., Seidu, E. Y., & Otaye, L. E. (2016). Developing and leveraging human capital resource to promote service quality testing a theory of

performance. *Journal of Management*, 42, 480-499.

doi:10.1177/0149206312471394

Ashford, S., Jackson, D., & Turner-Stokes, L. (2015). Goal setting, using goal attainment scaling, as a method to identify patient selected items for measuring arm function. *Physiotherapy*, 101(1), 88-94. doi:10.1016/j.physio.2014.04

Avery, R. E., Smillie, L. D., & Fife-Schaw, C. R. (2015). Employee achievement orientations and personality as predictors of job satisfaction facets. *Personality and Individual Differences*, 76, 56-61. doi:10.1016/j.paid.2014.11.037

Babaei, D., Rahimian, H., Ahmad, A., Omar, Z., & Idris, K. (2015). Ability mediation effects in the relationships between human resource practices and service quality. *Iranian Journal of Management Studies*, 8(1), 5-25. Retrieved from <http://scienceimpactfactor.com>

Baden-Fuller, C., & Haefliger, S. (2013). Business models and technological innovation. *Long Range Planning*, 46, 419-426. doi:10.1016/j.lrp.2013.08.023

Balakumar, P., Inamdar, M. N., & Jagadeesh, G. (2013). The critical steps for successful research: The research proposal and scientific writing: A report on the pre-conference workshop held in conjunction with the 64th annual conference of the Indian Pharmaceutical Congress-2012. *Journal of Pharmacology & Pharmacotherapeutics*, 4(2), 130-138. doi:10.4103/0976-500X.110895

Bamel, N., Kumar Bamel, U., Sahay, V., & Thite, M. (2014). Usage, benefits, and barriers of human resource information system in universities. *VINE: The Journal*

*of Information and Knowledge Management Systems*, 44, 519-536.

doi:10.1108/VINE-04-2013-0024

Bandura, P., & Lyons, P. (2014). Situations vacant fall where employees are engaged:

Involvement boosts various aspects of organizational performance. *Human*

*Resource Management International Digest*, 22(5), 22-25. doi:10.1108/HRMID-

07-2014-0099

Barrick, M. R., Thurgood, G. R., Smith, T. A., & Courtright, S. H. (2015). Collective

organizational engagement: Linking motivational antecedents, strategic

implementation, and firm performance. *Academy of Management Journal*, 58,

111-135. doi:10.5465/amj.2013.0227

Bartscht, J. (2015). Why systems must explore the unknown to survive in VUCA

environments. *Kybernetes*, 44, 253-270. doi:10.1108/K-09-2014-0189

Basit, A. A. (2017). Trust in Supervisor and Job Engagement: Mediating Effects of

Psychological Safety and Felt Obligation. *Journal of Psychology*, 1-21. Advanced

online publication. doi:10.1080/00223980.2017.1372350

Beeri, I., Dayan, R., Vigoda-Gadot, E., & Werner, S. B. (2013). Advancing ethics in

public organizations: The impact of an ethics program on employees' perceptions

and behaviors in a regional council. *Journal of Business Ethics*, 112(1), 59-78.

doi:10.1007/s10551-012-1232-7

Bekhet, A. K., & Zauszniewski, J. A. (2012). Methodological triangulation: An approach

to understanding data. *Nurse Researcher*, 20(2), 40-43.

doi:10.7748/nr2012.11.20.2.40.c9442

- Beliveau, J. (2013). Middle managers' role in transferring person-centered management and care. *Service Industries Journal*, *33*, 1345-1362.  
doi:10.1080/02642069.2013.815738
- Bennett, N., & Lemoine, G. J. (2014). What a difference a word makes: Understanding threats to performance in a VUCA world. *Business Horizons*, *57*, 311-317.  
doi:10.1016/j.bushor.2014.01.001
- Bernstein, S. L., & Feldman, J. (2015). Incentives to participate in clinical trials: Practical and ethical considerations. *American Journal of Emergency Medicine*, *33*, 1197-1200. doi:10.1016/j.ajem.2015.05.020
- Berta, W., Laporte, A., Deber, R., Baumann, A., & Gamble, B. (2013). The evolving role of healthcare aides in the long-term care and home and community care sectors in Canada. *Human Resources for Health*, *11*(1), 25. doi:10.1186/1478-4491-11-25
- Bertot, J., Estevez, E., & Janowski, T. (2016). Universal and contextualized public services: Digital public service innovation framework. *Government Information Quarterly*, *33*, 211-222. doi:10.1016/j.giq.2016.05
- Birt, L., Scott, S., Cavers, D., Campbell, C., & Walter, F. (2016). Member checking a tool to enhance trustworthiness or merely a nod to validation. *Qualitative Health Research*. Advanced online publication. doi:10.1177/1049732316654870
- Blomme, R. J., Kodden, B., & Beasley-Suffolk, A. (2015). Leadership theories and the concept of work engagement: Creating a conceptual framework for management implications and research. *Journal of Management & Organization*, *21*, 125-144.  
doi:10.1017/jmo.2014.71

- Boblin, S. L., Ireland, S., Kirkpatrick, H., & Robertson, K. (2013). Using Stake's qualitative case study approach to explore implementation of evidence-based practice. *Qualitative Health Research, 23*, 1267-1275.  
doi:10.1177/1049732313502128.
- Brees, J., & Martinko, M. J. (2015). Judgments of responsibility versus accountability. *Journal of Leadership & Organizational Studies, 22*, 443-453.  
doi:10.1177/1548051815603127
- Brem, A., Maier, M., & Wimschneider, C. (2016). Competitive advantage through innovation: The case of Nespresso. *European Journal of Innovation Management, 19*(1), 133-148. doi:10.1108/EJIM-05-2014-0055
- Brennan, M. D., & Monson, V. (2014). Professionalism: Good for patients and healthcare organizations. *Mayo Clinic Proceedings, 89*, 644-652.  
doi:10.1016/j.mayocp.2014.01.011
- Brent, M., & Perez, A. (2015). Career development at GM: Accelerating careers through core values and conversations. *Career Planning & Adult Development Journal, 31*(3), 10-16. Retrieved from <http://www.careernetwork.org/index.cfm>
- Brown, S. A., Martin, E. E., Garcia, T. J., Winter, M. A., García, A. A., Brown, A., . . . Sumlin, L. L. (2013). Managing complex research datasets using electronic tools: A meta-analysis exemplar. *Computers, Informatics, Nursing: CIN, 31*, 257-265.  
doi:10.1097/NXN.0b013e318295e69c

- Brownie, S., & Nancarrow, S. (2013). Effects of person-centered care on residents and staff in aged-care facilities: A systematic review. *Clinical Interventions in Aging*, 8, 1-10. doi:10.2147/CIA.S38589
- Brunnert, A., Vögele, C., Danciu, A., Pfaff, M., Mayer, M., & Krcmar, H. (2014). Performance management work. *Business & Information Systems Engineering*, 6, 177-179. doi:10.1007/s12599-014-0323-7
- Bugos, E., Frasso, R., FitzGerald, E., True, G., Adachi-Mejia, A. M., & Cannuscio, C. (2014). Practical guidance and ethical considerations for studies using photo-elicitation interviews. *Preventing Chronic Disease*. Advanced online publication. doi:10.5888/pcd11.140216
- Busch, V., Van Stel, H. F., De Leeuw, J. R. J., Melhuish, E., & Schrijvers, A. J. P. (2013). Multidisciplinary integrated parent and child centres in Amsterdam: A qualitative study. *International Journal of Integrated Care*, 13(2), e013. Retrieved from [www.ijic.org](http://www.ijic.org)
- Calheiros, M. M., & Patrício, J. N. (2014). Assessment of needs in residential care: Perspectives of youth and professionals. *Journal of Child and Family Studies*, 23, 461-474. doi:10.1007/s10826-012-9702-1
- Camillus, J. C. (2014). The business case for humanity in strategic decision-making. *Vilakshan: The XIMB Journal of Management*, 11, 141-158. Retrieved from <http://www.ximb.ac.in/research/journals/vilakshan>
- Campbell, J. L., Quincy, C., Osserman, J., & Pedersen, O. K. (2013). Coding in-depth semistructured interviews problems of unitization and intercoder reliability and



agreement. *Sociological Methods & Research*, 42, 294-320.

doi:10.1177/0049124113500475.

Campbell, T. A. (2014). What could have been done? Circuit city: A case study of management and employee performance failure. *Performance Improvement*, 53, 16-23. doi:10.1002/pfi.21405

Cappelen, A. W., Eichele, T., Hugdahl, K., Specht, K., Sorensen, E. O., & Tungodden, B. (2014). Equity theory and fair inequality: A neuroeconomic study. *Proceedings of the National Academy of Sciences*, 111, 15368-15372.

doi:10.1073/pnas.1414602111

Cardon, P. W. & Philadelphia, M. (2015). The role of motivational values in the construction of change messages. *Business and Professional Communication Quarterly*, 78, 215-230. doi:10.1177/2329490614558921

Carmeli, A., Dutton, J. E., & Hardin, A. E. (2015). Respect as an engine for new ideas: Linking respectful engagement, relational information processing, and creativity among employees and teams. *Human Relations*, 68, 1021-1047  
doi:10.1177/0018726714550256

Chabok, M., Javadi, M., Jafari, A., Yousefi, S., & Mousavi, S. (2013). New strategies for human resource development in organizations. *Interdisciplinary Journal of Contemporary Research in Business*, 5, 1122-1125. Retrieved from <http://www.ijcrb.com/>

- Chodorow-Reich, G. (2014). The employment effects of credit market disruptions: Firm-level evidence from the 2008–9 financial crisis. *The Quarterly Journal of Economics*, *129*(1), 1-59. doi:10.1093/qje/qjt031
- Choi, S. B., Tran, T. B. H., & Park, B. I. (2015). Inclusive leadership and work engagement: mediating roles of affective organizational commitment and creativity. *Social Behavior & Personality: An International Journal*, *43*, 931-943. doi:10.2224/sbp.2015.43.6.931
- Clarke, V. & Braun, V. (2013). Teaching thematic analysis: Overcoming challenges and developing strategies for effective learning. *The Psychologist*, *26*(2). 120-123. Retrieved from <http://www.bps.org.uk/>
- Clissett, P., Porock, D., Harwood, R. H., & Gladman, J. R. F. (2013). The challenges of achieving person-centred care in acute hospitals: A qualitative study of people with dementia and their families. *International Journal of Nursing Studies*, *50*, 1495-1503. doi:10.1016/j.ijnurstu.2013.03.001
- Cocowitch, V., Orton, S., Daniels, J., & Kiser, D. (2013). Reframing leadership development in healthcare an OD approach. *OD Practitioner*, *45*(3), 10-18. Retrieved from <http://www.odnetwork.org>
- Collier, S. L., Fitzpatrick, J. J., Siedlecki, S. L., & Dolansky, M. A. (2016). Employee engagement and a culture of safety in the intensive care unit. *Journal of Nursing Administration*, *46*(1), 49-54. doi: 10.1097/NNA.0000000000000292
- Cope, D. G. (2014). Methods and meanings: Credibility and trustworthiness of qualitative research. *Oncology Nursing Forum*, *41*, 89-91. doi:10.1188/14.ONF.89-91

- Corbin, J. & Strauss, A. (2014). Basics of qualitative research. (4thed.). Thousand Oaks: Sage Publications.
- Costa, L. A., Cool, K. & Dierickx, I. (2013). The competitive implications of the deployment of unique resources. *Strategic Management Journal*, 34, 445-463.  
doi:10.1002/smj.2018
- Cotteleer, M. J., & Wan, X. (2016). Does the starting point matter? The literature-driven and the phenomenon-driven approaches of using corporate archival data in academic research. *Journal of Business Logistics*, 37(1), 26-33.  
doi:10.1111/jbl.12114
- Crabtree, S. (2013). Worldwide, 13% of employees are engaged at work; Low workplace engagement offers opportunities to improve business outcomes. *Gallup Poll News Service*. Retrieved from <http://go.galegroup.com>
- Cridland, E. K., Jones, S. C., Caputi, P., & Magee, C. A. (2015). Qualitative research with families living with autism spectrum disorder: Recommendations for conducting semistructured interviews. *Journal of Intellectual & Developmental Disability*, 40(1), 78-91. doi:10.3109/13668250.2014.964191
- Csaszar, F. A. (2013). An efficient frontier in organization design: Organizational structure as a determinant of exploration and exploitation. *Organization Science*, 24, 1083-1101. Retrieved from <http://pubsonline.informs.org>
- Cutler, N. E. (2014). Job lock and the Affordable Care Act. *Journal of Financial Service Professionals*, 68(4), 19-24. Retrieved from [https://www.financialpro.org/pubs/journal\\_index.cfm](https://www.financialpro.org/pubs/journal_index.cfm)

- Dallinger, T. (2013). Staff development and support: A return on investment. *Nursing & Residential Care, 15*, 691-693. doi:10.12968/nrec.2013.15.10.691
- Dawson, P. (2014). Temporal practices: Time and ethnographic research in changing organizations. *Journal of Organizational Ethnography, 3*(2), 130-151. doi:10.1108/JOE-05-2012-0025
- Delahaye, B. (2015). Human resource development. Tilde Publishing.
- Dempsey, C. & Reilly, B. A., (2016). Nurse engagement: What are the contributing factors for success? *Online Journal of Issues in Nursing, 21*(1), C1-C11. doi:10.3912/OJIN.Vol21No01Man02
- Denzin, N. K. (2012). Triangulation 2.0. *Journal of Mixed Methods Research, 6*(2), 80-88. doi:10.1177/1558689812437186
- Dobrzykowski, D., Deilami, V. S., Hong, P., & Kim, S. C. (2014). A structured analysis of operations and supply chain management research in healthcare (1982–2011). *International Journal of Production Economics, 147*, 514-530. doi:10.1016/j.ijpe.2013.04.055
- Donate, M. J., & de Pablo, J. D. S. (2015). The role of knowledge-oriented leadership in knowledge management practices and innovation. *Journal of Business Research, 68*, 360-370. doi:10.1108/JKM-11-2012-0358
- Doody, O., & Noonan, M. (2013). Preparing and conducting interviews to collect data. *Nurse Researcher, 20*(5), 28-32. doi:10.7748/nr2013.05.20.5.28.e327
- Drabble, L., Trocki, K. F., Salcedo, B., Walker, P. C., & Korcha, R. A. (2015). Conducting qualitative interviews by telephone: Lessons learned from a study of

- alcohol use among sexual minority and heterosexual women. *Qualitative Social Work*, 15, 118-133. doi:10.1177/1473325015585613
- Edwards-Jones, A. (2014). Qualitative data analysis with NVIVO. *Journal of Education for Teaching*, 40(2), 193-195. doi:10.1080/02607476.2013.866724
- Ehlen, C., van der Klink, M., Roentgen, U., Curfs, E., & Boshuizen, H. (2013). Knowledge productivity for sustainable innovation: social capital as HRD target. *European Journal of Training and Development*, 38(1/2), 54-74. doi:10.1108/EJTD-10-2013-0119
- Ejaz, F. K., Bukach, A. M., Dawson, N., Gitter, R., & Judge, K. S. (2015). Examining direct service worker turnover in three long-term care industries in Ohio. *Journal of Aging & Social Policy*, 27(2), 139-155. doi:10.1080/08959420.2014.987034
- Eldor, L., & Vigoda-Gadot, E. (2016). The nature of employee engagement: Rethinking the employee-organization relationship. *The International Journal of Human Resource Management*, 1-27. doi:10.1080/09585192.2016.1180312
- Ellinger, A. E., & Ellinger, A. D. (2014). Examining the influence of strategic profit emphases on employee engagement and service climate. *Journal of Workplace Learning*, 26(3/4), 2-2. doi:10.1108/JWL-08-2013-0057
- Elman, C., Kapiszewski, D., & Kirilova, D. (2015). Learning through research: Using data to train undergraduates in qualitative methods. *PS, Political Science & Politics*, 48(1), 39-43. doi:10.1017/S1049096514001577

- Elo, S., Kääriäinen, M., Kanste, O., Pölkki, T., Utriainen, K., & Kyngäs, H. (2014). Qualitative content analysis: A focus on trustworthiness. *SAGE Open*, 4(1), doi:10.1177/2158244014522633
- Evans, J. (2014). Evolving leadership in healthcare design. *Health Environments Research & Design Journal*, 7(4), 9-12. doi:10.1177/193758671400700402
- Federal Interagency Forum on Aging Related Statistics. (2012). Older Americans 2012 final press note. Washington, DC: U.S. Government Printing Office.
- Ferreira de Lara, F., & Neves Guimarães, M. R. (2014). Competitive Priorities and Innovation in SMEs: A Brazil Multi-Case Study. *Journal of Technology Management & Innovation*, 9(3), 51-64. Retrieved from <http://www.jotmi.org>
- Findley-Musgrove, C., E. Ellinger, A., & D. Ellinger, A. (2014). Examining the influence of strategic profit emphases on employee engagement and service climate. *Journal of Workplace Learning*, 26(3/4), 152-171. doi:10.1108/JWL-08-2013-0057
- Finlay, L. (2013). Unfolding the phenomenological research process: Iterative stages of “seeing afresh.” *Journal of Humanistic Psychology*, 53(2), 172-201. doi:10.1177/0022167812453877
- Foley, D., & O’Connor, A. J. (2013). Social capital and networking practices of indigenous entrepreneurs. *Journal of Small Business Management*, 51, 276-296. doi:10.1111/jsbm.12017

- Fox, H. (2013). Strategic human resource development in small businesses in the United States. *Academy of Entrepreneurship Journal*, 19(1), 77-118. Retrieved from <http://www.alliedacademies.org>
- Franco, M., Tursunbayeva, A., & Pagliari, C. (2016). Social Media for e-Government in the Public Health Sector: Protocol for a Systematic Review. *JMIR Research Protocols*, 5(1). doi:10.2196/resprot.5421
- Franklin, A. L., & Rickard, V. A. (2016). The role of citizen advisory boards during times of fiscal stress. *Journal of Public Budgeting, Accounting & Financial Management*, 28(1). Retrieved from <http://www.pracademicspress.com/>
- Frels, R. K., & Onwuegbuzie, A. J. (2013). Administering quantitative instruments with qualitative interviews: A mixed research approach. *Journal of Counseling and Development*, 91(2), 184-194. doi:10.1002/j.1556-6676.2013.00085.x
- Fuchs, S., & Prouska, R. (2014). Creating positive employee change evaluation: The role of different levels of organizational support and change participation. *Journal of Change Management*, 14, 361-383. doi:10.1080/14697017.2014.885460
- Fugard, A. J., & Potts, H. W. (2015). Supporting thinking on sample sizes for thematic analyses: a quantitative tool. *International Journal of Social Research Methodology*, 18, 669-684, 1-16. doi:10.1080/13645579.2015.1005453
- Fusch, P. I., & Ness, L. R. (2015). Are we there yet? Data saturation in qualitative research. *The Qualitative Report*, 20, 1408-1416. Retrieved from <http://nsuworks.nova.edu/tqr/>

- Gabel-Shemueli, R., Dolan, S., & Suárez Ceretti, A. (2015). Being engaged: The multiple interactions between job demands and job resources and its impact on nurses' engagement. *International Journal of Nursing, 3*(2), 17-32. Retrieved from <http://www.ijn.in/index.php/ijn/article/view/155>
- Gagnon, M. P., Payne-Gagnon, J., Fortin, J. P., Paré, G., Côté, J., & Courcy, F. (2015). A learning organization in the service of knowledge management among nurses: A case study. *International Journal of Information Management, 35*, 636-642. doi:10.1016/j.ijinfomgt.2015.05.001
- Galperin, B. L., & Lituchy, T. R. (2014). Human resource development in service firms across cultures. *Human Resource Development Review, 13*, 336-368. doi:10.1177/1534484313511971
- Garavan, T., Shanahan, V., Carbery, R., & Watson, S. (2016). Strategic human resource development: Towards a conceptual framework to understand its contribution to dynamic capabilities. *Human Resource Development International, 19*, 289-306. doi:10.1080/13678868.2016.1169765
- Gazica, M. W., & Spector, P. E. (2015). A comparison of individuals with unanswered callings to those with no calling at all. *Journal of Vocational Behavior, 91*, 1-10. doi:10.1016/j.jvb.2015.08.008
- Geldenhuis, M., Łaba, K., & Venter, C. M. (2014). Meaningful work, work engagement and organisational commitment. *SAJIP: South African Journal of Industrial Psychology, 40*(1), 1-10. doi:10.4102/sajip.v40i1.1098



- Gentles, S. J., Charles, C., Ploeg, J., & McKibbin, K. A. (2015). Sampling in qualitative research: Insights from an overview of the methods literature. *The Qualitative Report*, 20, 1772-1789. Retrieved from <http://nsuworks.nova.edu/tqr/>
- Gerpott, F. H. (2015). The right strategy? Examining the business partner model's functionality for resolving human resource management tensions and discussing alternative directions. *Zeitschrift Für Personalforschung*, 29(3/4), 214-234. doi:10.1688/ZfP-2015-03-Gerpott
- Gibson, W., Webb, H., Lehn, V. D. (2014). Analytic affordance: Transcripts as conventionalised systems in discourse studies. *Sociology*, 48, 780-794. doi:10.1177/0038038514532876
- Gilbert, T. F. (1978). Human competence engineering worthy performance. *NSPI Journal*, 17(9), 19-27. doi:10.1002/pfi.4180170915
- Gill, P. S. (2013). Improving health outcomes: Applying dimensions of employee engagement to patients. *International Journal of Health, Wellness & Society*, 3(1), 1-9. doi:10.2147/IJGM.S42226
- Gilley, A., Gilley, J. W., Ambort-Clark, K. A., & Marion, D. (2014). Evidence of managerial malpractice: An empirical study. *Journal of Applied Management and Entrepreneurship*, 19(4), 24. doi:10.9774/GLEAF.3709.2014.oc.00004
- Girard, C., Ecalle, J., & Magnan, A. (2013). Serious games as new educational tools: How effective are they? A meta-analysis of recent studies. *Journal of Computer Assisted Learning*, 29, 207-219. doi:10.1111/j.1365-2729.2012.00489.x

- Glock, C. H., Grosse, E. H., & Ries, J. M. (2014). The lot sizing problem: A tertiary study. *International Journal of Production Economics*, *155*, 39-51.  
doi:10.1016/j.ijpe.2013.12.009
- Goertz, G., & Mahoney, J. (2013). Methodological Rorschach tests: Contrasting interpretations in qualitative and quantitative research. *Comparative Political Studies*, *46*, 236–251. doi:10.1177/0010414012466376
- Gould-Williams, J. S. (2016). Managers' motives for investing in HR practices and their implications for public service motivation: A theoretical perspective. *International Journal of Manpower*, *37*, 764-776. doi:10.1108/IJM-03-2016-0065
- Grant, J. (2014). Reflexivity: Interviewing women and men formerly addicted to drugs and/or alcohol. *The Qualitative Report*, *19*(38), 1-15. Retrieved from <http://nsuworks.nova.edu/tqr>
- Griffiths, M. A. (2014). Consumer acquiescence to informed consent: The influence of vulnerability, motive, trust, and suspicion. *Journal of Customer Behaviour*, *13*, 207-235. doi:10.1362/147539214X14103453768741
- Gupta, M., Ganguli, S., & Ponnampalath, A. (2015). Factors affecting employee engagement in India: A study on offshoring of financial services. *The Qualitative Report*, *20*, 498-515. Retrieved from <http://nsuworks.nova.edu/tqr/>
- Hackman, J. R., & Oldham, G. R. (1976). Motivation through the design of work: Test of a theory. *Organizational Behavior and Human Performance*, *16*, 250-279.  
doi:10.1016/0030-5073(76)90016-7

- Harris-Kojetin L., Sengupta M., Park-Lee E., & Valverde R. (2013). Long-term care services in the United States: 2013 overview (Report No. 1). Hyattsville, MD: National Center for Health Statistics. Retrieved from Centers for Disease control and Prevention website: <http://www.cdc.gov>
- Harvey, L. (2015). Beyond member-checking: A dialogic approach to the research interview. *International Journal of Research & Method in Education*, 38(1), 23-38. doi:10.1080/1743727X.2014.914487
- Hasson, H., Tafvelin, S., & von Thiele Schwarz, U. (2013). Comparing employees and managers' perceptions of organizational learning, health, and work performance. *Advances in Developing Human Resources*, 15(2), 163-176. doi:10.1177/1523422313475996
- Heckman, G. A., Boscart, V. M., D'Elia, T., Kaasalainen, S., McAiney, C., Kelley, M. L., ... & McKelvie, R. S. (2016). The role of unregulated care providers in managing heart failure patients in long-term care facilities. *Journal of Clinical Nursing*. Advanced online publication. doi:10.1111/jocn.13413
- Heldenbrand, L., & Simms, M. S. (2012). Missing link: Integrated individual leadership development, employee engagement, and customer value-added improvement. *Performance Improvement*, 51(2), 28-35. doi:10.1002/pfi.21247
- Henwood, B. F., Katz, M. L., & Gilmer, T. P. (2015). Aging in place within permanent supportive housing. *International Journal of Geriatric Psychiatry*, 30(1), 80-87. doi:10.1002/gps.4120

- Hermanowicz, J. C. (2013). The longitudinal qualitative interview. *Qualitative Sociology*, 36, 189-208. doi:10.1007/s11133-013-9247-7
- Herring, A. D. (2013). Oral history and Dalit testimonies: From the ordeal to speak to the necessity to testify. *South Asia Research*, 33(1), 39-55.  
doi:10.1177/0262728013475542
- Herron, R. V., & Skinner, M. W. (2013). Using care ethics to enhance qualitative research on rural aging and care. *Qualitative Health Research*, 23, 1697-1707.  
doi:10.1177/1049732313509893
- Hodgkinson, G. P., & Ford, J. K. (2015). What makes excellent literature reviews excellent? A clarification of some common mistakes and misconceptions. *Journal of Organizational Behavior*, 36S1-S5. doi:10.1002/job.1983
- Hoe, J., & Hoare, Z. (2013). Understanding quantitative research: Part 1. *Nursing Standard*, 27(15-17), 52-7; quiz 58. Retrieved from  
<http://journals.rcni.com/journal/ns>
- Houghton, C., Casey, D., Shaw, D., Murphy, K. (2013) Rigour in qualitative case-study research. *Nurse Researcher*, 20(4), 12-17. Retrieved from  
[www.nurseresearcher.co.uk](http://www.nurseresearcher.co.uk)
- Hsu, D. K., Shinnar, R. S., & Powell, B. C. (2014). Expectancy theory and entrepreneurial motivation: A longitudinal examination of the role of entrepreneurship education. *Journal of Business and Entrepreneurship*, 26(1), 121-140. Retrieved from <http://www.usasbe.org>

- Huang, Y. H., Lee, J., McFadden, A. C., Murphy, L. A., Robertson, M. M., Cheung, J. H., & Zohar, D. (2016). Beyond safety outcomes: An investigation of the impact of safety climate on job satisfaction, employee engagement and turnover using social exchange theory as the theoretical framework. *Applied Ergonomics*, *55*, 248-257. doi:10.1016/j.apergo.2015.10.007
- Hyett, N., Kenny, A., & Dickson-Swift, V. (2014). Methodology or method? A critical review of qualitative case study reports. *International Journal of Qualitative Studies on Health and Well-Being*, *9*. Advanced online publication. doi:10.3402/qhw.v9.23606
- Hvidman, U., & Andersen, S. C. (2014). Impact of performance management in public and private organizations. *Journal of Public Administration Research & Theory*, *24*, 35-58. doi:10.1093/jopart/mut019
- Irvine, A., Drew, P., & Sainsbury, R. (2013). Am I not answering your questions properly? Clarification, adequacy, and responsiveness in semi-structured telephone and face-to-face interviews. *Qualitative Research*, *13*, 87-106. doi:10.1177/1468794112439086
- Ishimaru, A. M., & Galloway, M. K. (2014). Beyond individual effectiveness: Conceptualizing organizational leadership for equity. *Leadership & Policy in Schools*, *13*(1), 93-146. doi:10.1080/15700763.2014.890733
- Jacob, J. D., Gagnon, M., & McCabe, J. (2014). From distress to illness: A critical analysis of medicalization and its effects in clinical practice. *Journal of*

*Psychiatric and Mental Health Nursing*, 21, 257-263.

doi:10.1177/1744987114536571

Jacob, S. A., & Furgerson, S. P. (2012). Writing interview protocols and conducting interviews: Tips for students new to the field of qualitative research. *The Qualitative Report*, 17(42), 1-10. Retrieved from <http://nsuworks.nova.edu/tqr>

Janssen, O., & Gao, L. (2015). Supervisory responsiveness and employee self-perceived status and voice behavior. *Journal of Management*, 41, 1854-1872.

doi:10.1177/0149206312471386

Johnson B. (2014). Ethical issues in shadowing research. *Qualitative Research in Organizations and Management: An International Journal*, 9(1), 21-40.

doi:10.1108/QROM-09-2012-1099

Johnson, R. B., Onwuegbuzie, A. J., & Turner, L. A. (2007). Toward a definition of mixed methods research. *Journal of Mixed Methods Research*, 1(2), 112-133.

doi:10.1177/1558689806298224

Kaczynski, D., Salmona, M., & Smith, T. (2014). Qualitative research in finance. *Australian Journal of Management*, 39(1), 127-135.

doi:10.1177/0312896212469611

Kahn, W. A. (1990). Psychological conditions of personal engagement and disengagement at work. *Academy Of Management Journal*, 33, 692-724.

doi:10.2307/256287

Kahn, W. A. (1992). To be fully there: Psychological presence at work. *Human Relations*, 45, 321-349. Retrieved from <http://journals.sagepub.com/>

- Kahn W. A., & Felton S. (2013). Employee engagement and meaningful work. In Dik B., Byrne Z., Steger M. (Eds.), *Purpose and meaning in the workplace* (pp. 105-126). Washington, DC: American Psychological Association.
- Kahn, W. A., & Heapy, E. D. (2014). Relational context of personal engagement at work. In C. Truss, R. Delbridge, E. Soane, K. Alfes, & A. Shantz (Eds.), *Employee engagement in theory and practice* (pp. 82-96). London, England: Routledge
- Karanges, E., Beatson, A., Johnston, K., & Lings, I. (2014). Optimizing employee engagement with internal communication: A social exchange perspective. *Journal of Business Market Management*, 7, 329-353. Retrieved from <http://www.jbm-online.net/>
- Karimi-Majd, A. M., Mahootchi, M., & Zakery, A. (2015). A reinforcement learning methodology for a human resource planning problem considering knowledge-based promotion. *Simulation Modelling Practice and Theory*. Advance online publication. doi:10.1016/j.simpat.2015.07.004
- Karnieli-Miller, O., Strier, R., & Pessach, L. (2009). Power relations in qualitative research. *Qualitative Health Research*, 19, 279-289. doi:10.1177/1049732308329306
- Kaiser, K. (2012). Protecting confidentiality. In J. Gubrium, J. Holstein, A. Marvasti, & K. McKinney (Eds.), *The Sage handbook of Interview Research* (pp. 457-464). Thousand Oaks, CA: Sage.

- Keating, L. A., & Heslin, P. A. (2015). The potential role of mindsets in unleashing employee engagement. *Human Resource Management Review*, 25, 329-341. doi:10.1016/j.hrmr.2015.01.008
- Kehoe, R. R., & Wright, P. M. (2013). The impact of high-performance human resource practices on employees' attitudes and behaviors. *Journal of Management*, 39, 366-391. doi:10.1177/0149206310365901
- Kemeny, M. E., & Mabry, B. (2015). Making meaningful improvements to direct care worker training through informed policy: Understanding how care setting structure and culture matters. *Gerontology & Geriatrics Education*. Advanced online publication. doi:10.1097/HMR.0b013e31828c8b8f
- Kerns, C. D. (2014). Fostering and managing engagement: A framework for managerial leaders. *Journal of Leadership, Accountability, and Ethics*, 11(1), 34-49. Retrieved from <http://na-businesspress.homestead.com/>
- Kiazad, K., Holtom, B. C., Hom, P. W., & Newman, A. (2015). Job embeddedness: A multifoci theoretical extension. *Journal of Applied Psychology*, 100, 641-659. doi:10.1037/a0038919
- Killawi, A., Khidir, A., Elnashar, M., Abdelrahim, H., Hammoud, M., Elliott, H., . . . Fetters, M. D. (2014). Procedures of recruiting, obtaining informed consent, and compensating research participants in Qatar: Findings from a qualitative investigation. *BMC Medical Ethics*. Advance online publication. doi:10.1186/1472-6939-15-9



- Kim, Y., & Han, S. (2015). Assessing the effects of learning organization characteristics in Korean non-profit organizations: Focusing on the association with perceived financial performance and employee satisfaction. *International Review of Public Administration, 20*(2), 177-193. doi:10.1080/12294659.2015.1007597
- Kim, J. H., & Callahan, J. L. (2013). Finding the intersection of the learning organization and learning transfer. *European Journal of Training and Development, 37*, 183-200. doi:10.1108/03090591311301680
- Kim, J., Wehbi, N., DelliFraine, J. L., & Brannon, D. (2014). The joint relationship between organizational design factors and HR practice factors on direct care workers' job satisfaction and turnover intent. *Health Care Management Review, 39*(2), 174-184. doi:10.1097/HMR.0b013e31828c8b8f
- Kihn, L. A., & Ihantola, E. M. (2015). Approaches to validation and evaluation in qualitative studies of management accounting. *Qualitative Research in Accounting & Management, 12*, 230-255. doi:10.1108/QRAM-03-2013-0012
- Kiser, E., & Karceski, S. M. (2017). Political Economy of Taxation. *Annual Review of Political Science, 20*, 75-92. doi:10.1146/annurev-polisci-052615-025442
- Koch, T., & Harrington, A. (1998). Reconceptualizing rigour: The case for reflexivity. *Journal of Advanced Nursing, 28*, 882-890. doi:10.1046/j.1365-2648.1998.00725.x
- Koelsch, L. E. (2013). Reconceptualizing the Member Check Interview. *International Journal of Qualitative Methods, 12*(1), 168-179. Retrieved from <http://journals.sagepub.com/doi/abs/10.1177/160940691301200105>

- Kolachi, N., & Akan, O. H. (2014). The role of HR managers in developing intellectual capital: A comparative case study and viewpoints on some selected companies. *Journal of Business Case Studies*. Advanced online publication. 10(2), 191-n/a. Retrieved from <http://www.cluteinstitute.com>
- Komarudin, De Feyter, T., Guerry, M. A., & Berghe, G. V. (2016). Balancing desirability and promotion steadiness in partially stochastic manpower planning systems. *Communications in Statistics-Theory and Methods*, 45, 1805-1818. doi:10.1080/03610926.2014.1001495
- Kotze, J., van der Westhuizen, S., & Nel, E. (2014). The relationship between employees' experience of performance management and work engagement within a South African organisation. *Journal of Psychology in Africa*, 24, 475-479. doi:10.1080/14330237.2014.997027
- Krizman, A. (2011). Methodology in research: How to assure reliability and validity of constructs in logistics research. *Transport Problems: An International Scientific Journal*, 6(2), 51-58. Retrieved from [http://www.oalib.com/journal/6003/1#.VdO-Q\\_IVhBc](http://www.oalib.com/journal/6003/1#.VdO-Q_IVhBc)
- Kumar, R. D., & Khiljee, N. (2016). Leadership in healthcare. *Anaesthesia & Intensive Care Medicine*, 17(1), 63-65. doi:10.1016/j.mpaic.2015.10.012
- Kwon, B., Farndale, E., & Park, J. G. (2016). Employee voice and work engagement: Macro, meso, and micro-level drivers of convergence. *Human Resource Management Review*, 26, 327-337. doi:10.1016/j.hrmr.2016.04.005

- Lahman, M. K., Rodriguez, K. L., Moses, L., Griffin, K. M., Mendoza, B. M., & Yacoub, W. (2015). A rose by any other name is still a rose. Problematizing pseudonyms in research. *Qualitative Inquiry*, *21*, 445-453. doi:10.1177/1077800415572391
- Lamas, D. A., & Luna, M. O. (2015). Talent strategies development in HR by stages: Developmental theory research through coaching. *Integral Leadership Review*. Advanced online publication. Retrieved from <http://integrallleadershipreview.com/>
- Lanford, D., & Quadagno, J. (2015). Implementing ObamaCare: The politics of Medicaid expansion under the Affordable Care Act of 2010. *Sociological Perspectives*, *1-21*. doi:10.1177/0731121415587605.
- Lavy, S., & Littman-Ovadia, H. (2016). My better self using strengths at work and work productivity, organizational citizenship behavior, and satisfaction. *Journal of Career Development*. Advanced online publication. doi:10.1177/0894845316634056
- Leedy, P. D., & Ormrod, J. E. (2014). *Practical research: Planning and design*. Harlow, Essex: Pearson Education.
- Leopold, R. S. (2010). A fresh perspective: Employee benefits as a strategic business investment. *Benefits Quarterly*, *26*(4), 21-24. Retrieved from <https://www.iscebs.org>
- Lewis, S. (2015). Qualitative inquiry and research design: Choosing among five approaches. *Health Promotion Practice*, *16*, 473-475. doi:10.1177/1524839915580941

- Li, A. N. & Liao, H. (2014). How do leader-member exchange quality and differentiation affect performance in teams? An integrated multilevel dual process model. *Journal of Applied Psychology, 99*, 847-866. doi:10.1037/a0037233
- Li, A. N., & Tan, H. H. (2013). What happens when you trust your supervisor? Mediators of individual performance in trust relationships. *Journal of Organizational Behavior, 34*, 407-425. doi:10.1002/job.1812
- Li, J. & Porock, D. (2014). Resident outcomes of person-centered care in long-term care: A narrative review of interventional research. *International Journal of Nursing Studies, 51*, 1395-1415. doi:10.1016/j.ijnurstu.2014.04.003
- Little, L. M., Gooty, J., & Williams, M. (2016). The role of leader emotion management in leader-member exchange and follower outcomes. *The Leadership Quarterly, 27*(1), 85-97. doi: 10.1016/j.leaqua.2015.08.007
- Lin, Y., & Wu, L. Y. (2014). Exploring the role of dynamic capabilities in firm performance under the resource-based view framework. *Journal of Business Research, 67*, 407-413. doi:10.1016/j.jbusres.2012.12.019
- Lincoln, Y. (1995). Emerging Criteria for Quality in Qualitative and Interpretive Research. In P. Atkinson, & S. Delamont (Eds.), *SAGE Qualitative Research Methods*. (Vol. 1, pp. 276-161). Thousand Oaks, CA: SAGE Publications, Inc. doi:10.1177/107780049500100301
- Lincoln, Y., & Guba, E. (1985). *Naturalistic Inquiry*. Newbury Park, California: SAGE.

- Liu, J., Wang, H., Hui, C., & Lee, C. (2014). Psychological ownership: How having control matters. *Journal of Management Studies*, *49*, 869-895.  
doi:10.1111/j.1467-6486.2011.01028.x
- Liu, Y., Norman, I. J., & While A. E., (2013). Nurses' attitudes towards older people: A systematic review. *International Journal of Nursing Studies*, *50*, 1271-1282.  
doi:10.1016/j.ijnurstu.2012.11.021
- Livitchi, O., Hacina, L., & Baran, T. (2015). Professional training: Effective element of management in achieving of the personnel policy. *Economy Transdisciplinarity Cognition*, *18*(1), 156-162. Retrieved from <http://etc.ugb.ro/>
- Low, L. F., Fletcher, J., Goodenough, B., Jeon, Y. H., Etherton-Beer, C., MacAndrew, M., & Beattie, E. (2015). A systematic review of interventions to change staff care practices in order to improve resident outcomes in nursing homes. *PloS One*, *10*(11). doi:10.1371/journal.pone.0140711
- Luo, X., Kanuri, V. K., & Andrews, M. (2014). How does CEO tenure matter? The mediating role of firm-employee and firm-customer relationships. *Strategic Management Journal*, *35*, 492-511. doi:10.1002/smj.2112
- Mackay, M., Allen, J., & Landis. R. (2016). Investigating the incremental validity of employee engagement in the prediction of employee effectiveness: A meta-analytic path analysis. *Human Resource Management Review*, *8*, 1391-1394.  
doi:10.1016/j.hrmr.2016.03.002
- Mackenzie, C. A., Ricker, B., Christensen, J., Heller, E., Kagan, E., Osano, P. M., . . . Turner, S. (2013). "Dear diary" revisited: Reflecting on collaborative

journaling. *Journal of Geography in Higher Education*, 37, 480-486.

doi:10.1080/03098265.2013.868080

Macon, J., & Heislitz, D. (2016). Is your agency prepared for the coming Medicare cuts? *Home Healthcare Now*, 34(3), 170-171.

doi:10.1097/NHH.0000000000000358

Madill, A. (2011). Interaction in the semi-structured interview: A comparative analysis of the use of and response to indirect complaints. *Qualitative Research in Psychology*, 8, 333-353. doi:10.1080/14780880903521633

Maerlender, A., Nelson, J., & Honaker, J. (2016). Developing a data repository of standard concussion assessment clinical data for research involving college athletes. *Journal of Clinical and Experimental Neuropsychology*, 38, 950-957, doi:10.1080/13803395.2016.1178214

Makó, C., Mitchell, B., & Illéssy, M. (2015). Developing dynamic, innovative capabilities: The growing role of innovation and learning in the development of organisations and skills in developed and emerging nations of Europe. *Journal of Entrepreneurship and Innovation in Emerging Economies*, 1(1), 18-38.

doi:10.1177/2393957514554983

Marshall, B., Cardon, P., Poddar, A., & Fontenot, R. (2013). Does sample size matter in qualitative research? A review of qualitative interviews in is research. *The Journal of Computer Information Systems*, 54(1), 11-22.

doi:10.1080/08874417.2013.11645667

- Martin, B. C., McNally, J. J., & Kay, M. J. (2013). Examining the formation of human capital in entrepreneurship: A meta-analysis of entrepreneurship education outcomes. *Journal of Business Venturing*, 28, 211-224.  
doi:10.1016/j.jbusvent.2012.03.002
- Martínez, P., Pérez, A., & Rodríguez del Bosque, I. (2014). Exploring the Role of CSR in the Organizational Identity of Hospitality Companies: A Case from the Spanish Tourism Industry. *Journal of Business Ethics*, 124(1), 47-66. doi:10.1007/s10551-013-1857-1
- Massey, K. B., & Campbell, N. (2013). Human resources management: Big problem for small business? *The Entrepreneurial Executive*, 18(2), 77-88. Retrieved from <http://www.alliedacademies.org/>
- Matei, S. (2013). Conceptual clarification of planning and strategic thinking in human resource management. *SEA–Practical Application of Science*, 2, 174-179.  
Retrieved from <http://sea.bxb.ro/>
- May, D. R., Gilson, R. L., & Harter, L. M. (2004). The psychological conditions of meaningfulness, safety and availability and the engagement of the human spirit at work. *Journal of Occupational and Organizational Psychology*, 77(1), 11-37.  
Retrieved from <http://www.wiley.com>
- Mazur-Wierzbicka, E. (2015). Implementing the work-life balance as a CSR tool in polish companies. *Research Papers of The Wroclaw University Of Economics / Prace Naukowe Uniwersytetu Ekonomicznego We Wroclawiu*, 387, 109-121.  
doi:10.15611/pn.2015.387.09

- McCray, J., Turner, H., Hall, B., Price, M., & Constable, G. (2014). Social care mentorship and employee engagement in the transformation of the social care workforce. *Journal of Workplace Learning, 26*, 267-280. doi:10.1108/JWL-08-2013-0055
- McDavitt, B., Bogart, L. M., Mutchler, M. G., Wagner, G. J., Green Jr, H. D., Lawrence, S. J., ... & Nogg, K. A. (2016). Dissemination as dialogue: Building trust and sharing research findings through community engagement. *Preventing Chronic Disease, 13*:E38. doi:10.5888/pcd13.150473
- McDermid, F., Peters, K., Jackson, D., & Daly, J. (2014). Conducting qualitative research in the context of pre-existing peer and collegial relationships. *Nurse Researcher, 21*(5), 28-33. doi:10.7748/nr.21.5.28.e1232
- McVay, A. B., Stamatakis, K. A., Jacobs, J. A., Tabak, R. G., & Brownson, R. C. (2016). The role of researchers in disseminating evidence to public health practice settings: A cross-sectional study. *Health Research Policy and Systems, 14*. doi:10.1186/s12961-016-0113-4
- McGinn, T., Taylor, B., McColgan, M., & McQuilkan, J. (2016). Social work literature searching current issues with databases and online search engines. *Research on Social Work Practice, 26*, 266-277. doi:10.1177/1049731514549423
- McGonagle, K. A., Brown, C., & Schoeni, R. F. (2015). The Effects of respondents' consent to be recorded on interview length and data quality in a national panel study. *Field Methods, 27*, 373-390. doi:10.1177/1525822X15569017



- Medlin, B., Green, K. W., & Wright, A. D. (2016). Comprehensive management practices and policies performance model. *Industrial Management & Data Systems, 116*, 1043-1060. doi:10.1108/IMDS-07-2015-0283
- Memon, M. A., Salleh, R., Baharom, M. R., & Harun, H. (2014). Person-organization fit and turnover intention: The mediating role of employee engagement. *Global Business & Management Research, 6*, 205-209. Retrieved from <http://www.gbmr.ioksp.com/>
- Menguc, B., Auh, S., Fisher, M., & Haddad, A. (2013). To be engaged or not to be engaged: The antecedents and consequences of service employee engagement. *Journal of Business Research, 66*, 2163-2170. doi:10.1016/j.jbusres.2012.01.007
- Mifsud, D. (2015). The fifty-year ethnographer: A review of Harry Wolcott's ethnography lessons: A primer. *The Qualitative Report, 20*, 557-559. Retrieved from <http://nsuworks.nova.edu/tqr/>
- Mikkelsen, A. C., York, J. A., & Arritola, J. (2015). Communication competence, leadership behaviors, and employee outcomes in supervisor-employee relationships. *Business and Professional Communication Quarterly, 78*, 336-354. doi:10.1177/2329490615588542
- Millar, G. (2012). Employee engagement. A new paradigm. *Human Resource Management International Digest, 20*(2), 3-5. doi:10.1108/09670731211208085
- Milliken, F. J., Schipani, C. A., Bishara, N. D., & Prado, A. M. (2015). Linking workplace practices to community engagement: The case for encouraging

employee voice. *Academy of Management Perspectives*, 29, 405-421.

doi:10.5465/amp.2013.0121

Mirabeau, L., & Maguire, S. (2014). From autonomous strategic behavior to emergent strategy. *Strategic Management Journal*, 35, 1202-1229. doi:10.1002/smj.2149

Mishra, K., Boynton, L., & Mishra, A. (2014). Driving employee engagement: The expanded role of internal communications. *Journal of Business Communication*, 51(2), 183-202. doi:10.1177/2329488414525399

Mitchell, G. (2015). Use of interviews in nursing research. *Nursing Standard*, 29(43), 44-48. doi:10.7748/ns.29.43.44.e8905

Mitchell, R., & Meacheam, D. (2011). Knowledge worker control: Understanding via principal and agency theory. *The Learning Organization*, 18(2), 149-160. doi:10.1108/09696471111103740

Mneimneh, Z., Tourangeau, R., Pennell, B., Heeringa, S. G., & Elliott, M. R. (2015). Cultural variations in the effect of interview privacy and the need for social conformity on reporting sensitive information. *Journal of Official Statistics*, 31, 673-697. doi:10.1515/jos-2015-0040

Moffat, B. M., Jenkins, E. K., & Johnson, J. L. (2013). Weeding out the information: An ethnographic approach to exploring how young people make sense of the evidence on cannabis. *Harm Reduction Journal*, 10, 34. doi:10.1186/1477-7517-10-34

- Morgan, G. (2013). Integration of health and social care: What can Wales learn and contribute? *Quality in Ageing and Older Adults*, 14(1), 47-55.  
doi:10.1108/14717791311311102
- Morse, J. M. (1994). *Critical issues in qualitative research methods*. Thousand Oaks, CA: Sage.
- Moustakas, C. (1994). *Phenomenological research methods*. Thousand Oaks, CA: Sage.
- Mulvaney, M. A. (2014). Leave programs/time off and work-stress family employee benefits programs, organizational commitment, and self-efficacy among municipal employees. *Public Personnel Management*, 43, 459-489 31p.  
doi:10.1177/0091026014529661
- Muscalu, E., & Muntean, S. N. (2014). Aspects regarding human resources management streamlining within national and international organizations. *Procedia Economics and Finance*, 16, 173-181. doi:10.1016/S2212-5671(14)00789-8
- Muscalu, E., & Muntean, S. N. (2013). Defining aspects of human resource management strategy within the general strategy of the modern organization. *Annals of the University of Oradea, Economic Science Series*, 22, 1526-1535. Retrieved from <http://anale.steconomieuoradea.ro/en/>
- National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research, Department of Health, Education and Welfare (1978). *The Belmont Report* (DHEW pub. no. (OS) 78-0012). Washington, DC: United States Government Printing Office.

- Nazir, A., Unroe, K., Tegeler, M., Khan, B., Azar, J., & Boustani, M. (2013). Systematic review of interdisciplinary interventions in nursing homes. *Journal of the American Medical Directors Association, 14*, 471-478.  
doi:10.1016/j.jamda.2013.02.005
- Ndimande, A. M., Chisoro, C., & Karodia, A. M. (2016). Investigating the internal factors affecting the training and development of sugar engineers: Case study of Tongaat Hulett Sugar (South Africa). *Kuwait Chapter of the Arabian Journal of Business and Management Review, 5*, 101-143. Retrieved from <http://www.arabianjbmr.com/>
- Neutens, J. J., & Rubinson, L. (2014). *Research techniques for the health sciences* (5th ed.). San Francisco, CA: Pearson Benjamin Cummings.
- Nimri, M., Bdair, A., & Al Bitar, H. (2015). Applying the expectancy theory to explain the motivation of public sector employees in Jordan. *Middle East Journal of Business, 10*(3), 70-82. Retrieved from <http://web.b.ebscohost.com>.
- Noble, H., & Smith, J. (2014). Qualitative data analysis: A practical example. *Evidence Based Nursing, 17*(1), 2-3. doi:10.1136/eb-2013-101603
- Noe, R. A., Wilk, S. L., Mullen, E. J., & Wanek, J. E. (2014). Employee development: issues in construct definition and investigation of antecedents. *Improving Training Effectiveness in Work Organizations*, ed. JK Ford, SWJ Kozlowski, K. Kraiger, E. Salas, and MS Teachout (Mahwah, NJ: Lawrence Erlbaum, 1997), 153-89. Retrieved from <http://www.ebscohost.com>

- Oertig, D., Schüler, J., Brandstätter, V., & Augustine, A. A. (2014). The influence of avoidance temperament and avoidance-based achievement goals on flow. *Journal of Personality, 82*(3), 171-181. doi:10.1111/jopy.12043
- Ombudsman, South Carolina Long Term Care (2012). Annual report, 2012. South Carolina State Documents Depository. Retrieved from <http://www.statelibrary.sc.gov>
- Onwuegbuzie, A. J., & Hwang, E. (2014). Interviewing successfully for academic positions: a framework for candidates for asking questions during the interview process. *International Journal of Education, 6*(2), 98. doi:10.5296/ije.v6i2.4424
- Onwuegbuzie, A. J., & Leech, N. L. (2007). Validity and qualitative research: An oxymoron? *Quality and Quantity, 41*, 233-249. doi:10.1007/s11135-006-9000-3
- O'Reilly, M., & Parker, N. (2013). 'Unsatisfactory saturation': A critical exploration of the notion of saturated sample sizes in qualitative research. *Qualitative Research, 13*, 190-197. doi:10.1177/1468794112446106.
- Orgambídez-Ramos, A., Borrego-Alés, Y., & Mendoza-Sierra, I. (2014). Role stress and work engagement as antecedents of job satisfaction in Spanish workers. *Journal of Industrial Engineering & Management, 7*, 360-372. doi:10.3926/jiem.992
- Ortman, J. M., Velkoff, V. A., & Hogan, H. (2014). An aging nation: The older population in the United States. Washington, DC: US Census Bureau, 25-1140.
- Oye, C., Sørensen, N. O., & Glasdam, S. (2016). Qualitative research ethics on the spot. *Nursing Ethics, 23*, 455-464. doi:10.1177/0969733014567023

- Papoulias, C., Robotham, D., Drake, G., Rose, D., & Wykes, T. (2014). Staff and service users' views on a "consent for contact" research register within psychosis services: A *Qualitative Study*. *BMC Psychiatry*, *14*, 377. doi:10.1186/s12888-014-0377-6
- Park, Y. K., Song, J. H., Yoon, S. W., & Kim, J. (2014). Learning organization and innovative behavior. *European Journal of Training and Development*, *38*(1), 75-94. doi:10.1108/EJTD-04-2013-0040
- Pashaki, N. J., Mohammadi, F., Jafaraghaee, F., & Mehrdad, N. (2015). Factors influencing the successful aging of Iranian old adult women. *Iranian Red Crescent Medical Journal*, *17*(7). Advanced online publication. doi:10.5812/ircmj.22451v2
- Paterson, T. A., Luthans, F. & Jeung, W. (2014). Thriving at work: Impact of psychological capital and supervisor support. *Journal of Organizational Behavior*, *35*, 434-446. doi:10.1002/job.1907
- Patton, M. Q. (2015). *Qualitative research & evaluation methods: Integrating theory and practice* (4th ed.). Thousand Oaks, CA: Sage
- Pendleton, A., & Robinson, A. (2011). Employee share ownership and human capital development: Complementarity in theory and practice. *Economic and Industrial Democracy*, *32*, 439-457. doi:10.1177/0143831X10387650
- Pentland, B. T., & Hærem, T. (2015). Organizational routines as patterns of action: Implications for organizational behavior. *Annual Review Organizational*

*Psychology Organizational Behavior*, 2(1), 465-487. doi:10.1146/annurev-orgpsych-032414-111412

- Peredaryenko, M. S., & Krauss, S. E. (2013). Calibrating the human instrument: Understanding the interviewing experience of novice qualitative researchers. *The Qualitative Report*, 18(43), 1-17. Retrieved from <http://nsuworks.nova.edu/tqr>
- Pfeifer, C., Janssen, S., Yang, P., & Backes-Gellner, U. (2013). Effects of training on employee suggestions and promotions: Evidence from personnel records. *Schmalenbach Business Review*, 65, 270-287. Retrieved from <http://sfxhosted.exlibrisgroup.com>
- Phelan, A., & McCormack, B. (2016). Exploring nursing expertise in residential care for older people: A mixed method study. *Journal of Advanced Nursing*, 72, 2524-2535. doi:10.1111/jan.13001
- Pike, E. (2015). Recovering from research: A no-fault proposal to compensate injured research participants. *American Journal of Law & Medicine*, 38(1), 7-62. doi:10.1177/009885881203800101
- Pokharel, M. P., & Choi, S. O. (2015). Exploring the relationships between the learning organization and organizational performance. *Management Research Review*, 38(2), 126-148. doi:10.1108/MRR-02-2013-0033
- Polit, D. F., & Beck, C. T. (2012). *Nursing research: Principles and methods*. Philadelphia, PA: Lippincott Williams & Wilkins

- Pommi-Biswas, D., & Mittar, S. (2015). Non-monetary incentives to motivate—a case of Garment Firm. *International Journal of Scientific Progress and Research (Ijspr)*, 8(1), 18-22. Retrieved from <http://www.ij spr.com/>
- Poon, J. L. (2013). Relationships among perceived career support, affective commitment, and work engagement. *International Journal of Psychology*, 48, 1148-1155. doi:10.1080/00207594.2013.768768
- Porteri, C., Togni, E., & Pasqualetti, P. (2014). The policies of ethics committees in the management of biobanks used for research: An Italian survey. *European Journal of Human Genetics: EJHG*, 22, 260-265. doi:10.1038/ejhg.2013.107
- Pourabdollahian, G. & Copani, G. (2014) Proposal of an innovative business model for customized production in healthcare. *Modern Economy*, 5, 1147-1160. doi:10.4236/me.2014.513107.
- Pournader, M., Tabassi, A. A., & Baloh, P. (2015). A three-step design science approach to develop a novel human resource-planning framework in projects: The cases of construction projects in USA, Europe, and Iran. *International Journal of Project Management*, 33, 419-434. doi:10.1016/j.ijproman.2014.06.009
- Prasad, V., & Berger, V. W. (2015). Hard-wired bias. *Mayo Clinic Proceedings*, 9, 1171-1175. doi:10.1016/j.mayocp.2015.05.006
- Price, C., & Whiteley, A. (2014). Corporate culture and employee identity: Cooption or commitment through contestation. *Journal of Change Management*, 14, 210-235. doi:10.1080/14697017.2014.896391



- Purvis, R. L., Zagenczyk, T. J., & McCray, G. E. (2015). What's in it for me? Using expectancy theory and climate to explain stakeholder participation, its direction, and intensity. *International Journal of Project Management*, 33(1), 3-14.  
doi:10.1016/j.ijproman.2014.03.003
- Ployhart, R. E., & Moliterno, T. P. (2011). Emergence of the human capital resource: A multilevel model. *Academy of Management Review*, 36(1), 127-150.  
doi:10.5465/AMR.2011.55662569
- QSR International. (2015). NVivo11. Retrieved from <http://www.qsrinternational.com/>
- Radnor, Z. J., & Noke, H. (2013). Conceptualising and contextualising public sector operations management. *Production Planning & Control*, 24, 867-876.  
doi:10.1080/09537287.2012.666884
- Rai, G. S. (2013). Job satisfaction among long-term care staff: Bureaucracy isn't always bad. *Administration in Social Work*, 37(1), 90-99.  
doi:10.1080/03643107.2012.657750
- Ramos, H. M., Man, T. W. Y., Mustafa, M., & Ng, Z. Z. (2014). Psychological ownership in small family firms: Family and non-family employees' work attitudes and behaviours. *Journal of Family Business Strategy*, 5, 300-311.  
doi:10.1016/j.jfbs.2014.04.001
- Ratui, P., & Suci L. (2013). Performance improvement strategies used by managers in the private sector. *Annals of the University of Oradea*, 1, 1613-1624. Retrieved from <https://ideas.repec.org>

- Rayton, B. A., & Yalabik, Z. Y. (2014). Work engagement, psychological contract breach and job satisfaction. *Internal Journal of Human Resource Management*, 25, 2382-2400. doi:10.1080/09585192.2013.876440
- Reader, T. W., Mearns, K., Lopes, C., & Kuha, J. (2016). Organizational support for the workforce and employee safety citizenship behaviors: A social exchange relationship. *Human Relations*. Advanced online publication. doi:10.1177/0018726716655863.
- Reason, P., & Rowan, J. (Eds.). (1981a). *Human inquiry: A sourcebook of new paradigm research*. New York: Wiley.
- Reeves, A., McKee, M., Basu, S., & Stuckler, D. (2014). The political economy of austerity and healthcare: Cross-national analysis of expenditure changes in 27 European nations 1995–2011. *Health Policy*, 115(1), 1-8. doi:10.1016/j.healthpol.2013.11.008
- Richards, L., & Morse, J. M. (2013). *Readme first for a user's guide to qualitative methods* (3rd Ed.). Thousand Oaks, CA: Sage.
- Roberts, T. (2013). Understanding the research methodology of interpretative phenomenological analysis. *British Journal of Midwifery*, 21, 215-218. Retrieved from <http://www.markallengroup.com/ma-healthcare>
- Robinson, O. C. (2014). Sampling in interview-based qualitative research: A theoretical and practical guide. *Qualitative Research in Psychology*, 11(1), 25-41. doi:10.1080/14780887.2013.801543

- Rodwell, J., McWilliams, J., & Gulyas, A. (2016). The impact of characteristics of nurses' relationships with their supervisor, engagement and trust, on performance behaviours and intent to quit. *Journal of Advanced Nursing*. Advanced online publication. doi:10.1111/jan.13102
- Romans, J., Tobaben, J., & Tobaben, J. (2016). Our take: Building engagement cultures. *Strategic HR Review*, 15(2), 76-82. doi:10.1108/SHR-02-2016-0010
- Sackett, C. R., & Lawson, G. (2016). A phenomenological inquiry of clients' meaningful experiences in counseling with counselors-in-training. *Journal of Counseling & Development*, 94(1), 62-71. doi:10.7459/ct/31.2.03
- Saks, A. M., & Gruman, J. A. (2014). What do we really know about employee engagement? *Human Resource Development Quarterly*, 25, 155-182. doi:10.1002/hrdq.21187
- Salehzadeh, R., Asadi, A., Khazaei Pool, J., Reza Ansari, M., & Haroni, A. (2014). The influence of perceived organizational support on dimensions of learning organization: An empirical study of SMEs in Iran. *The Learning Organization*, 21, 206-219. doi:10.1108/TLO-08-2013-0040
- Salmona, M., Kaczynski, D., & Smith, T. (2015). Qualitative theory in finance: Theory into practice. *Australian Journal of Management*, 40, 403-413. doi:10.1177/0312896214536204
- Sambrook, S., & Willmott, H. (2014). The rigor of management education and the relevance of human resource development: Natural partners or uneasy bedfellows

in management practice. *Management Learning*, 45(1), 39-56.

doi:10.1177/1350507612468422

Sarfaraz, A. H., Shariatmadari, M., Hedayat, P., & Vadoudi, K. (2013). Strategy formulating for semi-governmental companies, Case study: railway transportation in QODS NIROO. *Procedia-Social and Behavioral Sciences*, 99, 1082-1092.

doi:10.1016/j.sbspro.2013.10.582

Sattar, T., Ahmad, K., & Hassan, S. M. (2015). Role of human resource practices in employee performance and job satisfaction with mediating effect of employee engagement. *Pakistan Economic and Social Review*, 53(1), 81-96. Retrieved from <http://pu.edu.pk/home/journal/7/>

Scanlon, K. A., & Woolforde, L. (2016). Igniting change through an empowered frontline: A unique improvement approach centered on staff engagement, empowerment, and professional development. *Nurse Leader*, 14(1), 38-46.

doi:10.1016/j.mnl.2015.11.007

Schneider, A. (2015). Reflexivity in sustainability accounting and management: Transcending the economic focus of corporate sustainability. *Journal of Business Ethics*, 127, 525-536. doi:10.1007/s10551-014-2058-2

Schrems, B. M. (2014). Informed consent, vulnerability and the risks of group-specific attribution. *Nursing Ethics*, 21, 829-843. doi:10.1177/0969733013518448

Seidman, I. (2012) *Interviewing as qualitative research: A guide for researchers in education and the Social Sciences*. Teachers college press.

- Shanafelt, T., Gorringer, G., Menaker, R., Storz, K. A., Reeves, D., Buskirk, S. J., . . . & Swensen, S. J., (2015). Impact of organizational leadership on physician burnout and satisfaction. *Mayo Clinic Proceedings*, *90*, 432-440.  
doi:10.1016/j.mayocp.2015.01.012
- Sharp, J. L., Mobley, C., Hammond, C., Withington, C., Drew, S., Stringfield, S., & Stipanovic, N. (2012). A mixed methods sampling methodology for a multisite case study. *Journal of Mixed Methods Research*, *6*(1), 34-54.  
doi:10.1177/1558689811417133
- Sheehan, M., N. Garavan, T., & Carbery, R. (2014). Sustainability, corporate social responsibility, and HRD. *European Journal of Training and Development*, *38*, 370-386. doi:10.1108/EJTD-04-2014-0034
- Shenton, A. K. (2004). Strategies for ensuring trustworthiness in qualitative research projects. *Education for Information*, *22*(2), 63-75. Retrieved from <http://content.iospress.com/>
- Shindul-Rothschild, J., & Gregas, M. (2014). Patient turnover and nursing employment in Massachusetts hospitals before and after health insurance reform: Implications for the Patient Protection and Affordable Care Act. *Policy, Politics, & Nursing Practice*, *14*(3-4), 151-162. doi:10.1177/1527154414527829.
- Shweiki, E., Martin, N. D., Beekley, A. C., Jenoff, J. S., Koenig, G. J., Kaulback, K. R., . . . Cohen M. J. (2015). Applying expectancy theory to residency training: Proposing opportunities to understand resident motivation and enhance residency

training. *Advances in Medical Education and Practice*, 6, 339-346.

doi:10.2147/AMEP.S76587

Simons, J. C., & Buitendach, J. H. (2013). Psychological capital, work engagement, and organizational commitment amongst call centre employees in South Africa. *SAJIP: South African Journal of Industrial Psychology*, 39(2), 1-12.

doi:10.4102/sajip.v39i2.1071

Singhal, T. K., Garg, B., & Saxena, D. (2014). Organizational productivity through emotional intelligence. *Pranjana: The Journal of Management Awareness*, 17(1), 47-55. Retrieved from

<http://www.indianjournals.com/ijor.aspx?target=ijor:pr&type=home>

Smith, R. (2013). Death and dying in residential care: A matter of concern. *Quality in Ageing and Older Adults*, 14, 205-217. doi:10.1108/QAOA-01-2013-0001

Sohrab, K. S., Salimian, H., Nazemi, J., & Alborzi, M. (2013). Operations strategy and business strategy alignment model (case of Iranian industries). *International Journal of Operations & Production Management*, 33, 1108-1130.

doi:10.1108/IJOPM-12-2011-0467

Song, J. H., Chermack, T. J., & Kim, W. (2013). An analysis and synthesis of DLOQ-based learning organization research. *Advances in Developing Human Resources*, 15, 222-239. doi:10.1177/1523422313475995.

Song, Y., Son, Y. J., & Oh, D. (2015). Methodological issues in questionnaire design. *Journal of Korean Academy of Nursing*, 45, 323-328.

doi:10.4040/jkan.2015.45.3.323

- Sotiriadou, P., Brouwers, J., & Le, T. A. (2014). Choosing a qualitative data analysis tool: A comparison of NVivo and Leximancer. *Annals of Leisure Research, 17*(2), 218-234. doi:10.1080/11745398.2014.902292
- South Carolina Department of Health and Human Services (SCDHEC, 2017). Community Residential Care Facilities. Retrieved from <http://www.scdhec.gov/Health/Docs/LicensedFacilities/hrcrcf.pdf>
- Squires, J. E., Hoben, M., Linklater, S., Carleton, H. L., Graham, N., & Estabrooks, C. A. (2015). Job satisfaction among care aides in residential long-term care: A systematic review of contributing factors, both individual and organizational. *Nursing Research and Practice*. Advanced online publication. doi:10.1155/2015/157924
- Stake, R. E. (2010). *Qualitative research: Studying how things work*. New York, NY: Guilford Press.
- Steffens, N. K., Mols, F., Haslam, S. A., & Okimoto, T. G. (2016). True to what we stand for: Championing collective interests as a path to authentic leadership. *The Leadership Quarterly*. Advanced online publication. doi:10.1016/j.leaqua.2016.04.004
- Stromgren, M., Eriksson, A., Bergman, D., & Dellve, L. (2016). Social capital among healthcare professionals: A prospective study of its importance for job satisfaction, work engagement, and engagement in clinical improvements. *International Journal of Nursing Studies, 53*, 116-125. doi:10.1016/j.ijnurstu.2015.07.012

- Su, Z. X., Wright, P. M., & Ulrich, M. D. (2015). Going beyond the SHRM paradigm examining four approaches to governing employees. *Journal of Management*. Advanced online publication. doi:10.1177/0149206315618011
- Suter, E., Deutschlander, S., Makwarimba, E., Wilhelm, A., Jackson, K., & Lyons, S. W. (2014). Workforce utilization in three continuing care facilities. *Health Sociology Review, 23*(1), 65-76. doi:10.5172/hesr.2014.23.1.65
- Syed Harris, L., & Samreen Fahim, B. (2015). Learning organization as a strategy to improve performance of Pakistani hospitals. *Journal of Managerial Sciences, 9*(2), 256-266. Retrieved from <http://www.qurtuba.edu.pk/jms/current.html>
- Tanner, G., & Otto, K. (2015). Superior-subordinate communication during organizational change: Under which conditions does high-quality communication become important? *The International Journal of Human Resource Management, 1*-19. doi:10.1080/09585192.2015.1090470
- Terada, S., Oshima, E., Yokota, O., Ikeda, C., Nagao, S., Takeda, N., & Uchitomi, Y. (2013). Person-centered care and quality of life of patients with dementia in long-term care facilities. *Psychiatry Research, 205*(1), 103-108. doi:10.1016/j.psychres.2012.08.028
- Timming, A. R., & Johnstone, S. (2015). Employee silence and the authoritarian personality: A political psychology of workplace democracy. *International Journal of Organizational Analysis, 23*(1), 154-171. doi:10.1108/IJOA-06-2013-0685



- Tomazevic, N., Seljak, J., & Aristovnik, A. (2016). The interaction between occupational values and job satisfaction in an authoritative public administration organization. *Total Quality Management & Business Excellence*, 1-16. doi:10.1080/14783363.2016.1158078
- Tonvongval, S. (2013). Impact of transformational leadership development through organization development intervention on employee engagement and firm performance: A case study. *Social Research Reports*, 25, 34-49. <http://www.researchreports.ro>
- Torraco, R. J. (2016). Early history of the fields of practice of training and development and organization development. *Advances in Developing Human Resources*. Advance online publication. doi:10.1177/1523422316659898
- Tracy, S. (2013). *Qualitative research methods*. Wiley-Blackwell. Malden: MA
- Trochim, W.M. (2006). Reliability & validity. Retrieved from <http://www.socialresearchmethods.net/kb/sampon.htm>
- Trousset, S., Gupta, K., Jenkins-Smith, H., Silva, C. L., & Herron, K. (2015). Degrees of engagement: Using cultural worldviews to explain variations in public preferences for engagement in the policy process. *Policy Studies Journal*, 43(1), 44-69. doi:10.1111/psj.12083
- Truss, C., Shantz, A., Soane, E., Alfes, K., & Delbridge, R. (2013). Employee engagement, organisational performance, and individual well-being: Exploring the evidence, developing the theory. *International Journal of Human Resource Management*, 24, 2657-2669. doi:10.1080/09585192.2013.798921

- Udani, Z. S., Cuervo, J. C., & Rayo, E. N. (2015). Critical challenges of human resource development in Macao. *International Journal of Employment Studies*, 23(2), 57-80. Retrieved from [http://iera.net.au/ijes\\_14.html](http://iera.net.au/ijes_14.html)
- United States, Department of Health and Human Services, Office of Inspector General. (2014, February). *Adverse events in skilled nursing facilities: National incidence among Medicare beneficiaries*. Retrieved from <http://oig.hhs.gov/oei/reports/oei-06-11-00370.pdf>
- Unluer, S. (2012). Being an insider researcher while conducting case study research. *The Qualitative Report*, 17(29), 1. Retrieved from <http://www.nova.edu/ssss/QR/QR17/unluer.pdf>
- Urry, Y., Sanders, J., & Munford, R. (2015). The 'right time': Negotiating the timing of interviews with vulnerable young people. *Journal of Youth Studies*, 18, 291-304. doi:10.1080/13676261.2014.944120
- Vaismoradi, M., Turunen, H., & Bondas, T. (2013). Content analysis and thematic analysis: Implications for conducting a qualitative descriptive study. *Nursing & Health Sciences*, 15, 398-405 8p. doi:10.1111/nhs.12048
- van Dun, D., & Wilderom, C. (2016). Lean-team effectiveness through leader values and members' informing. *International Journal of Operations & Production Management*, 36(11). Retrieved from <http://www.emeraldgroupublishing.com>
- van Malderen, L., Mets, T., De Vriendt, P., & Gorus, E. (2013). The Active ageing concept translated to the residential long-term care. *Quality of Life Research*, 22, 929-937. doi:10.1007/s11136-012-0216-5

- Velu, C. (2015). Business model innovation and third-party alliance on the survival of new firms. *Technovation*, 35, 1-11. doi:10.1016/j.technovation.2014.09.007
- Venkatesh, A. N. (2014). Global talent management for sustainable competitive advantage. *International Journal of Engineering, Business, and Enterprise Applications*. Retrieved from <http://www.iasir.net/ijebeahome.html>
- Venkatesh, V., Brown, S. A., & Bala, H. (2013). Bridging the qualitative-quantitative divide: Guidelines for conducting mixed methods research in information systems. *MIS Quarterly*, 37(1), 21-54. Retrieved from <http://misq.org/>
- Venzon Cruz, E., & Higginbottom, G. (2013). The use of focused ethnography in nursing research. *Nurse Researcher*, 20(4), 36-43. doi:10.7748/nr2013.03.20.4.36.e305
- Vogl, S. (2013). Telephone versus face-to-face interviews mode effect on semistructured interviews with children. *Sociological Methodology*, 43(1), 133-177. doi:10.1177/0081175012465967
- Vosloban, R. I. (2013). Employee engagement concept: A theoretical and practical approach. *Contemporary Readings in Law & Social Justice*, 5, 759-765. Retrieved from <http://www.addletonacademicpublishers.com/>
- Vroom, V. H. (1964). *Work and motivation*. San Francisco, CA: Jossey-Bass.
- Vroomen, J. L. M., Boorsma, M., Bosmans, J. E., Frijters, D. H., Nijpels, G., & Van Hout, H. P. (2012). Is it time for a change? A cost-effectiveness analysis comparing a multidisciplinary integrated care model for residential homes to usual care. *PloS One*, 7(5), e37444. doi:10.1371/journal.pone.0037444

- Wallace, J., Johnson, P. D., Mathe, K., & Paul, J. (2011). Structural and psychological empowerment climates, performance, and the moderating role of shared felt accountability: A managerial perspective. *Journal of Applied Psychology, 96*, 840-850. doi:10.1037/a0022227
- Welch, M. J., Lally, R., Miller, J. E., Pittman, S., Brodsky, L., Caplan, A. L., & ... Wilfond, B. (2015). The ethics and regulatory landscape of including vulnerable populations in pragmatic clinical trials. *Clinical Trials (London, England), 12*, 503-510. doi:10.1177/1740774515597701
- Wernerfelt, B. (2014). On the role of the RBV in marketing. *Journal of the Academy Of Marketing Science, 42*(1), 22-23. doi:10.1007/s11747-013-0335-8
- Wertz, R. J. (2013). GE transportation: A case study of the potential to improve performance. *Performance Improvement, 52*(2), 31-36. doi:10.1002/pfi.21327
- Wiley, J. (2013). Using employee opinions about organizational performance to enhance employee engagement surveys: Model building and validation. *People & Strategy, 36*(4), 38-49. Retrieved from <http://go.galegroup.com>
- Williams, J., Brown, C., & Springer, A. (2012). Overcoming benchmarking reluctance: A literature review. *Benchmarking, 19*, 255-276. doi:10.1108/14635771211224563
- Williamson, S., Twelvetree, T., Thompson, J., & Beaver, K. (2012). An ethnographic study exploring the role of ward-based advanced nurse practitioners in an acute medical setting. *Journal of Advanced Nursing, 68*, 1579-1588. doi:10.1111/j.1365-2648.2012.05970.x

- Willig, C. (2013). *Introducing qualitative research in psychology*: Maidenhead, England: McGraw Hill/Open University Press.
- Winiecki, D. J. (2015). Comparing a few behavior engineering models. *Performance Improvement, 54*(8), 6-14. doi:10.1002/pfi.21501
- Witty, K., Branney, P., Bullen, K., White, A., Evans, J., & Eardley, I. (2014). Engaging men with penile cancer in qualitative research: Reflections from an interview-based study. *Nurse Researcher, 21*(3), 13-19. Retrieved from <http://www.nursing-standard.co.uk/>
- Xu, D., Kane, R. L., & Shamliyan, T. A. (2013). Effect of nursing home characteristics on residents' quality of life: A systematic review. *Archives of Gerontology and Geriatrics, 57*(2), 127-142. doi:10.1016/j.archger.2013.03.015
- Xu, M. A., & Storr, G. B. (2012). Learning the concept of researcher as instrument in qualitative research. *The Qualitative Report, 17*(21), 1-18. Retrieved from <http://nsuworks.nova.edu/tqr>
- Yalabik, Z. Y., Van Rossenberg, Y., Kinnie, N., & Swart, J. (2015). Engaged and committed? The relationship between work engagement and commitment in professional service firms. *The International Journal of Human Resource Management, 26*, 1602-1621. doi:10.1080/09585192.2014.953972
- Yilmaz, K. (2013). Comparison of quantitative and qualitative research traditions: Epistemological, theoretical, and methodological differences. *European Journal of Education, 48*, 311-325. doi:10.1111/ejed.12014

- Yin, R. K. (2014). *Case study research: Design and methods*. (5th Ed.). Thousand Oaks, CA: Sage.
- Yoon, J. Y., Roberts, T., Grau, B., & Edvardsson, D. (2015). Person-centered Climate Questionnaire-Patient in English: A psychometric evaluation study in long-term care settings. *Archives of Gerontology and Geriatrics*, *61*(1), 81-87.  
doi:10.1016/j.archger.2015.03.010
- Yoon, S., Probst, J., & DiStefano, C. (2015). Factors affecting job satisfaction among agency-employed home health aides. *Home Health Care Management & Practice*. Advanced online publication. doi:10.1177/1084822315603195
- Yorks, L. & Barto, J. (2013). Invited reaction: The strategic value of HRD in lean strategy implementation. *Human Resource Development Quarterly*, *24*, 29-33.  
doi:10.1002/hrdq
- Yukl, G., Mahsud, R., Hassan, S., & Prussia, G. E. (2013). An improved measure of ethical leadership. *Journal of Leadership & Organizational Studies*, *20*(1), 38-48.  
doi:10.1177/1548051811429352
- Zhang, G. Q., Tao, S., Xing, G., Mozes, J., Zonjy, B., Lhatoo, S. D., & Cui, L. (2015). NHash: Randomized n-gram hashing for distributed generation of validatable unique study identifiers in multicenter research. *JMIR Medical Informatics*, *3*(4), e35. doi:10.2196/medinform.4959
- Zhang, S., Zhang, Y., Liu, X., Zhang, H., & Liu, D. (2013). On the reliability of DNA sequences of ophiocordyceps sinensis in public databases. *Journal of Industrial Microbiology & Biotechnology*, *40*, 365-378. doi:10.1007/s10295-012-1228-4

- Zhong, L., Wayne, S. J., & Liden, R. C. (2016). Job engagement, perceived organizational support, high-performance human resource practices, and cultural value orientations: A cross-level investigation. *Journal of Organizational Behavior*. doi:10.1002/job.2076
- Zutlevics, T. L. (2016). Could providing financial incentives to research participants be ultimately self-defeating? *Research Ethics*, 12, 137-148.  
doi:10.1177/1747016115626756

## Appendix A: Human Subject Research Certificate of Completion





## Appendix B: Interview Protocol

Interview: Strategies to Increase Employee Engagement for Productivity in Long-Term Residential Agencies.	
What you will do	What you will say—script
<ul style="list-style-type: none"> <li>• Introduce the interview and set the stage</li> <li>• Give the applicant the opportunity to introduce themselves</li> </ul>	<p>My name is Corey Fair, and I am thankful that you have taken time out of your schedule to participate in this research project.</p> <p>I am studying the strategies that leaders use to increase employee engagement for productivity in long-term residential agencies. My central research question that will drive this study is: What strategies do healthcare leaders use to engage employees? I will ask you 9 questions.</p> <p>As an adjunct professor of business, I have facilitated several business courses. I also served as a Quality Assurance Reviewer contracted by the Department of Disabilities and Special Needs (DDSN) for 3 years. Prior to this I worked to coordinate healthcare services including residential long-term care for DDSN participants.</p> <p>Just to reiterate, you have consented to become part of this research project by agreeing to be interviewed.</p> <p>Remember, your participation in this project is voluntary, and you may withdraw from the study at any time prior to the completion of the member checking process.</p> <p>Do you have any questions about the informed consent form that I previously sent to you or the informed consent process?</p> <p>I will audio record this interview along with taking notes. Your participation along with this interview is a private matter, and I will keep these proceedings confidential.</p> <p>Do you have any questions or concerns about the confidentiality of your participation?</p> <p>Do you have any questions or concerns about anything that I have discussed with you thus far?</p> <p>Let us begin with the questions.</p>
<ul style="list-style-type: none"> <li>• Watch for non-verbal</li> </ul>	<ol style="list-style-type: none"> <li>1. What strategies do you use to ensure employee meaningfulness for workplace engagement?</li> </ol>

<p>queues</p> <ul style="list-style-type: none"> <li>• Paraphrase as needed</li> <li>• Ask follow-up probing questions to get more in-depth</li> </ul>	<ol style="list-style-type: none"> <li>2. What strategies do you use to ensure employee value for workplace engagement?</li> <li>3. What strategies do you use to ensure a sense of return on investment for employees?</li> <li>4. What strategies do you use to encourage a safe work environment where employees are free to express themselves in work activities?</li> <li>5. What strategies do you use to ensure a sense of trust in leadership?</li> <li>6. What physical resources do you use to ensure employee investment in role performance?</li> <li>7. What emotional resources do you use to ensure employee investment in role performance?</li> <li>8. What confidence building strategies do you use to ensure employee investment in role performance?</li> <li>9. What more can you add regarding this study?</li> </ol>
	<p>This concludes our interview session.</p> <p>I will transcribe this interview and provide a summary of your responses to each of the questions to you via email within 1 week from today so that you can make certain that I have captured the essence of your responses to the questions.</p> <p>If there are inconsistencies in my interpretation and the intended meaning of your responses, please respond/ contact me to provide clarification.</p> <p>Thank you for your time and I hope that you have a great rest of the day.</p>
<p>Wrap up interview thanking participant</p>	
<p>Schedule follow-up member checking interview</p>	

## Appendix C: Initial Letter to Executive Director

Walden University

Strategies to Increase Employee Engagement for Productivity in Long-Term Residential  
Agencies

{Residential Long-Term Care Agencies}  
{Residential Executive Directors}

{Date}

Dear Residential Executive Director,

My name is Corey Fair and I am a doctoral candidate at Walden University. I am working on completing my Doctor of Business Administration degree with a concentration in leadership. I am conducting a dissertation research study on the strategies organizational leaders need to increase employee engagement. My research will have two parts. The first part of this study will involve interviewing *the senior leaders*. The second part involves reviewing any archival data, such as employee handbooks, bylaws, or records of engagement training that your organization may have.

**Background Information:**

The purpose of this study is to explore strategies healthcare leaders use to engage employees for increase productivity. The findings of this study may address a gap in business practice regarding engagement strategies for increasing productivity. Moreover, an increase in productivity may result in improved quality of care and quality of life for the residents of long-term residential care facilities.

**Sample questions:**

- What strategies do you use to ensure employee meaningfulness for workplace engagement?
- What strategies do you use to ensure employee value for workplace engagement?
- What strategies do you use to ensure a sense of return on investment for employees?

I *respectfully request* permission to utilize your facility as a research site for the sole purpose of interviewing residential personnel. Additionally, I *respectfully request* that you forward the attached invitation letter to all of your nursing staff on my behalf. All employees will contact me directly to express interest in participation. All interviews will be conducted as not disrupt their workday or the operations of the facility.

**Contacts and Questions:**

Please contact the researcher directly via email or telephone with any questions via \_\_\_\_\_ or \_\_\_\_\_. For additional information or a private discussion about your rights as a participant, please contact, Walden University representative, at \_\_\_\_\_. Walden University's approval number for this study is **IRB will enter approval number here** and it expires on **IRB will enter the expiration date.**

Sincerely,

Corey Fair

## Appendix D: Introductory Letter to Participants

Hello,

My name is Corey Fair and I am a doctoral candidate at Walden University. I am working to complete a Doctor of Business Administration degree with a concentration in leadership. I am conducting a dissertation research study on strategies for increasing employee productivity through engagement.

***The executive director, director human resource, director of nurse, and directors of residential services, are invited to participate in this study.***

Participation consists of a face-to-face interview. I acknowledge the value of your time and propose that the questions will take approximately 20 and not exceeding 45 minutes to answer. Your participation and experiences will be essential to the success of the research study.

### **Background Information:**

The purpose of this study is to explore strategies healthcare leaders use to increase employee engagement.

### **Procedures:**

If you agree to be in this study, you will be asked to:

- Participate in a face-to-face interview not expected to exceed 45 minutes.
- Coordinate a mutually agreed upon time to be interviewed.
- Allow the researcher to audio record all interviews.
- Review the researcher's written summation of the interview for accuracy.

**Sample questions:** (Please review the attached document for a complete list of the interview questions)

- What leadership strategies do you use to pair the skills and strengths of employees with work-related tasks?
- What opportunities do employees have to share their opinions about the quality of the work environment?
- What career development programs or systemic trainings do you use to develop employee potential?

### **Voluntary Nature of the Study:**

Your participation in this study is voluntary. Should you choose not to participate your decision will be held in high regards without inquiry or penalty from the researcher or anyone at your agency. If you decide to join the study now, the option to withdraw from the study, prior to the completion of the member checking process, will remain in effect.

**Risks and Benefits of Being in the Study:**

The nature of this study involves some risks in terms of minor discomforts that are encountered in daily life, such as stress. Precautionary measures have been taken to insure that participation in this study would not pose risk to your safety, psychological or financial wellbeing. Because of this study, organizations may potentially benefit from understanding the effect of employee engagement on organizational productivity. The researcher will not falsify data or disclose private information to the public.

**Privacy:**

The information you provide will be kept confidential. The researcher will not use your personal information for any purposes outside of this research project. In addition, the researcher will not include your name or subsequent information that could be used to identify you in the study reports. The interview will be audio-recorded. Data will be kept secured in a locked safe, only accessible by the researcher. Data will be kept for at least 5 years, as required by the university after which, the data will be destroyed utilizing a forensic process.

If you are interested in participating in this study, please contact me directly at \_\_\_\_\_ or email at \_\_\_\_\_. Following confirmation of your participation, I will email you a consent form containing additional information about the study. Following the return of the consent form via email consent form, I will contact you to arrange a time and date for the interview.

I look forward talking with your further.  
Yours sincerely,

Corey O. Fair

### Appendix E: Interview Questions for the Participant

1. What strategies do you use to ensure employee meaningfulness for workplace engagement?
2. What strategies do you use to ensure employee value for workplace engagement?
3. What strategies do you use to ensure a sense of return on investment for employees?
4. What strategies do you use to encourage a safe work environment where employees are free to express themselves in work activities?
5. What strategies do you use to ensure a sense of trust in leadership?
6. What physical resources do you use to ensure employee investment in role performance?
7. What emotional resources do you use to ensure employee investment in role performance?
8. What confidence building strategies do you use to ensure employee investment in role performance?
9. What more can you add regarding this study?

## Appendix F: Training Agenda

## Welcome!

### *Pre-Service Orientation Training May-June 2017*

TUES. 5/30	9:00AM-12:00PM	<ul style="list-style-type: none"> <li>✓ WELCOME ABOARD               <ul style="list-style-type: none"> <li>○ [REDACTED]</li> <li>○ TIME TRACKING</li> <li>○ PERSONNEL ISSUES &amp; POLICIES</li> <li>○ MISSION STATEMENT</li> </ul> </li> <li>✓ MANAGEMENT MEET &amp; GREET</li> </ul>	—
TUES. 5/30	1:00PM-5:00PM	<ul style="list-style-type: none"> <li>✓ UNDERSTANDING DISABILITIES</li> <li>✓ PERSON CENTERED PLANNING</li> <li>✓ ABUSE PREVENTION (NEGLECT &amp; EXPLOITATION)               <ul style="list-style-type: none"> <li>○ REPORTING</li> <li>○ HIPAA &amp; CONFIDENTIALITY</li> <li>○ FALSE CLAIMS RECOVERY</li> </ul> </li> <li>✓ SEXUAL HARASSMENT</li> </ul>	—
WED. 5/31	9:00AM-12:00PM	<ul style="list-style-type: none"> <li>✓ CONSUMER RIGHTS &amp; DUE PROCESS/DIGNITY &amp; RESPECT</li> <li>✓ INCIDENT REPORTING               <ul style="list-style-type: none"> <li>○ CRITICAL INCIDENTS</li> </ul> </li> <li>✓ RECOGNIZING &amp; RESPONDING TO SUICIDAL BEHAVIOR</li> </ul>	—
WED. 5/31	1:00PM-5:00PM	<ul style="list-style-type: none"> <li>✓ PROFESSIONALISM</li> <li>✓ OSHA &amp; WORKPLACE SAFETY</li> <li>✓ LIFTING &amp; TRANSFERRING</li> <li>✓ FIRE SAFETY &amp; DISASTER PREPAREDNESS</li> </ul>	—
THUR. 6/1	9:00AM-5:00PM	<ul style="list-style-type: none"> <li>✓ STANDARD FIRST AID</li> <li>✓ CPR &amp; CHOKING PREVENTION</li> </ul>	—
FRI. 6/2	9:00AM-5:00PM	<ul style="list-style-type: none"> <li>✓ DEFENSIVE DRIVING</li> </ul>	—
MON. 6/5	9:00AM-5:00PM	<ul style="list-style-type: none"> <li>✓ MED TECH (ONE LITTLE PILL)</li> </ul>	—
TUES. 6/6	9:00AM-5:00PM	<ul style="list-style-type: none"> <li>✓ MED TECH (ONE LITTLE PILL)</li> </ul>	—
WED. 6/7	9:00AM-5:00PM	<ul style="list-style-type: none"> <li>✓ MED TECH (ONE LITTLE PILL)</li> </ul>	—
THUR. 6/8	9:00AM-5:00PM	<ul style="list-style-type: none"> <li>✓ NCI</li> </ul>	—
FRI. 6/9	9:00AM-5:00PM	<ul style="list-style-type: none"> <li>✓ NCI</li> </ul>	—
MON. 6/12	9:00AM-3:30PM	<ul style="list-style-type: none"> <li>✓ CYBER SAFETY</li> <li>✓ THERAP</li> </ul>	—
	3:30-4:30PM	<ul style="list-style-type: none"> <li>✓ CONSUMER FUNDS</li> </ul>	—



## Appendix G: Incentives

### ONE-TIME INCENTIVES

For

Staff Only

#### No "CALL OUT" April and May



Staff who do not "call out" from work during April 1, 2017 – May 31, 2017 will receive a \$50.00 incentive check in June 2017.

Rules: Annual and sick leave can be used during this period, but you have to give a 2 week notice submitted in Time Clock Plus in order to qualify for the incentive. Requests already in Time Clock Plus by March 29, 2017, meet the qualification. Leave taken that was not planned in advance will forfeit the incentive. In addition to the two weeks notice, a doctor's excuse must be turned in with the sick leave.



*Don't miss the opportunity to earn some extra spending money for your summer vacation.*

#### Med Tech



\$25.00 Check for staff successfully completing Med Tech Certification and passing the written and med pass on the first attempt during the month of April and May. If retesting is required (Written or med pass) then you will not qualify for the incentive.

#### New Hire

\$25.00 Check for new hires who complete all new hire training (to include on the job training and successfully passing Med Tech on first attempt) for the month of April/May.



*All checks will be issued on the June 9<sup>th</sup>, 2017, pay date and will be a separate direct deposit.*

## Appendix H: Harassment and Retaliation Policy

### Policy and Procedure Manual

Section: General Information  
 Policy: Harassment  
 Policy No.: 4.2.6  
 Replaces: Anti-Harassment Policy  
 Policy 1.4.1.8; Effective June 2002  
 Effective: June 2006

### HARASSMENT

The ' strives to maintain a workplace that fosters mutual employee respect and promotes harmonious, productive working relationships. Our agency believes that harassment in any form constitutes misconduct that undermines the integrity of the employment relationship. Therefore, the agency prohibits harassment that is sexual, racial, or religious in nature or is related to anyone's gender, national origin, age, sexual orientation, or disability as defined and protected by applicable law. This policy applies to all employees and all individuals who may have contact with any employee of this agency.

Conduct prohibited by this policy is unacceptable in the workplace and in an work-related setting outside the workplace, such as during business trips, business meetings, and business-related social events. Harassing conduct includes, but is not limited to: epithets, slurs or negative stereotyping; threatening, intimidating, or hostile acts; denigrating jokes; written or graphic material that denigrates or shows hostility or aversion toward another individual or group and that is placed on walls or elsewhere on agency premises or circulated in the workplace.

Sexual harassment does not refer to occasional compliments of a socially acceptable nature or consensual personal and social relationships without a discriminatory employment effect. It refers to behavior which is not welcome and which is personally intimidating, hostile, or offensive.

Sexual harassment can involve males or females being harassed by members of either sex. Although sexual harassment typically involves a person in a greater position of authority as the harasser, employees in positions of lesser or equal authority can be guilty of prohibited harassment.

There are basically two types of sexual harassment:

"Quid pro quo" harassment - where submission to harassment is used as the basis for employment decisions; i.e., when employee benefits such as raises, promotions, or better working hours, are directly linked to compliance with sexual advances. Therefore, only someone in a supervisory position can engage in quid pro quo harassment.

"Hostile work environment" - where the harassment creates an offensive and unpleasant working environment. A hostile work environment can be created by anyone in the working environment,

whether it be a supervisor or other employees. Hostile work environment harassment consists of verbiage of a sexual nature, unwelcome sexual materials, or unwelcome physical contact. Cartoons or posters of a sexual nature, vulgar or lewd comments or jokes, or unwanted touching or fondling all fall into this category.

The agency expects that everyone will act responsibly to establish a pleasant and friendly work environment. However, if an employee feels that he/she has been subjected to any form of harassment, the employee should firmly and clearly tell the person engaging in the harassing conduct that it is unwelcome, offensive, and should stop at once. If for any reason an employee does not wish to address the offender directly, or if such action does not stop the offensive conduct, the employee should notify his/her immediate supervisor, the program director, or the Human Resources Director who may, if the employee so requests, talk to the alleged offender in the individual's behalf. The employee should be aware that it may be necessary to take action to address such conduct beyond an informal discussion. The best course of action in any case will depend on many factors and, therefore, the informal procedure will remain flexible. Moreover, the informal procedure is not a required first step for the reporting employee.

**IMPORTANT NOTICE TO ALL EMPLOYEES:**

**Employees who have experienced conduct they believe is contrary to this policy have an obligation to take advantage of this complaint procedure. An employee's failure to fulfill this obligation could affect his or her rights in pursuing legal action. Also, please note, federal, state and local discrimination laws establish specific time frames for initiating a legal proceeding pursuant to those laws.**

Early reporting and intervention have proven to be the most effective method of resolving actual or perceived incidents of harassment. Therefore, while no fixed reporting period has been established, the agency strongly urges the prompt reporting of complaints or concerns so that rapid and constructive action can be taken. The agency will make every effort to stop alleged harassment before it becomes severe or pervasive, but can only do so with the cooperation of its employees.

Any reported allegation of harassment, discrimination, or retaliation will be investigated promptly, thoroughly, and impartially. The investigation may include individual interviews with the parties involved and, where necessary, with individuals who may have observed the alleged conduct or may have other relevant knowledge. Confidentiality will be maintained throughout the investigatory process to the extent consistent with adequate investigation and appropriate corrective action.

Retaliation against an employee for reporting harassment or for participating in an investigation of a claim of harassment is a serious violation of this policy and, like harassment itself, will be subject to disciplinary action. Acts of retaliation should be reported immediately and will be promptly investigated and addressed.

A timely resolution of each complaint will be reached and communicated to the complainant and

the other parties involved. Appropriate corrective action, up to and including termination, will be taken promptly against any employee engaging in harassment. Retaliation against any employee for filing a complaint or participating in an investigation is strictly prohibited. However, any employee who knowingly makes a false claim of harassment will be subject to correcting action, up to and including termination.

Occasionally, talking with a supervisor, program director, or someone in Human Resources about this conduct is not an option. If an employee feels that his/her complaint has not been or cannot be properly handled, he/she may forward the complaint to the Executive Director.

Harassment is considered a form of improper employee conduct. Disciplinary action, up to and including termination, will be taken against any employee engaging in this type of behavior. Any supervisor or member of management who has knowledge of such behavior, yet takes no action to end it, is also subject to disciplinary action.

Nothing in this policy shall prevent the complainant or the respondent from pursuing formal legal remedies or resolution through state or federal agencies or the courts.

### HARASSMENT COMPLAINT REPORT

This form may be given to your supervisor or any member of the Management Team. Please refer to Policy 4.2.6 Anti-Harassment Policy or contact the Director of Human Resources for guidance.

Name: \_\_\_\_\_ Date of report: \_\_\_\_\_

Date(s) of incident(s): \_\_\_\_\_

Name of individual(s) who harassed you: \_\_\_\_\_

Describe what happened: \_\_\_\_\_

Name(s) of witness(es): \_\_\_\_\_

\_\_\_\_\_  
Signature

Attachment to Policy 4.2.6  
revised 6/2006

## Appendix I: Employee Manual

## EMPLOYEE MANUAL

Issued August 1, 2005  
(Revised May 1, 2009)  
(Revised August 21, 2015)  
(Revised March 3, 2016)  
(Revised February 21, 2017)

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## DISCLAIMER

THIS POLICY MANUAL GENERALLY DESCRIBES THE PERSONNEL POLICIES AND PROCEDURES THAT GOVERN THE EMPLOYMENT RELATIONSHIP BETWEEN THE AND ITS EMPLOYEES. IT IS NOT A CONTRACT. THE POLICIES STATED IN THIS MANUAL ARE SUBJECT TO CHANGE AT THE SOLE DISCRETION OF THE MANAGEMENT. THESE POLICIES ARE NOT INTENDED TO BE ALL-INCLUSIVE. THERE MAY BE SITUATIONS WHICH ARISE THAT ARE NOT COVERED, EITHER DIRECTLY OR INDIRECTLY, BY THESE POLICIES. IN SUCH INSTANCES, 'S POLICY WILL BE DETERMINED BY IT ON A CASE-BY-CASE BASIS. THIS MANUAL SUPERSEDES AND REPLACES ALL PRIOR HANDBOOKS AND POLICY MANUALS OF . YOU MAY RECEIVE NOTICE THAT CHANGES HAVE BEEN MADE IN POLICIES FROM TIME TO TIME, AND THOSE UPDATES SHOULD BE KEPT WITH YOUR RECORDS. IF AT ANY TIME YOU HAVE QUESTIONS ABOUT THE POLICIES OF , PLEASE ASK YOUR SUPERVISOR OR HUMAN RESOURCES.

## ACKNOWLEDGMENT

This is to certify that I have been informed and understand that 's Personnel Policies are NOT A BINDING CONTRACT, either express or implied, but a set of guidelines. I understand that may modify any of the provisions of this manual at any time. I also understand that, notwithstanding any of the provisions of this manual, I AM EMPLOYED ON AN AT-WILL BASIS. My employment may be terminated at any time, either by me or by , with or without cause. I recognize that changes in these policies will in no way alter the "at-will" nature of my employment.

Employee Signature

Employee Name (Printed)

Date

## INTRODUCTION

Welcome to the . We're glad to have you on our team. , we believe that our employees are valuable assets. We hope that during the time of your employment with , you will become a productive and successful member of our team.

This employee manual generally describes the personnel policies and procedures that govern the employment relationship between and its employees. The policies stated in this manual are subject to change at the sole discretion of . These policies are not intended to be all-inclusive. There may be situations that arise that are not covered, either directly or indirectly, by these policies. In such instances, the agency's policy will be determined on a case-by-cases basis.

### THIS IS NOT A CONTRACT.

This manual supersedes and replaces all prior manuals and policies of the agency that are inconsistent with the policies contained in this booklet. You may receive changes in policy from time to time, and those updates should be kept with your copy of this booklet. If at any time you have questions about the policies of the agency, please ask your supervisor or the Human Resources Director.

## EMPLOYEE CREDO

### Applies to All Employees

As an employee of the I understand that my employer has a mission statement, values, and culture that are conducive to excellent consumer services.

As an employee of this agency, I (print name), agree to abide by the following conditions of employment.

### Code of Ethics

As an employee of this agency, I will:

- A) GIVE a full day's labor for a full day's pay; giving to the performance of my duties my earnest effort and best thought.
- B) NEVER discriminate by the dispensing of special favors or privileges to anyone, whether for remuneration or not, and never accept, for myself or my family, favors or benefits under circumstances which might be construed by reasonable persons as influencing the performance of my official duties.



- C) MAKE no private promises of any kind binding upon the duties of office since an employee or official of the agency has no private word that can be binding on public duty.
- D) ENGAGE in no business with the agency, either directly or indirectly, which is prohibited by law or which is inconsistent with the conscientious performance of my official duties.
- E) NEVER use for private gain, or disclose to unauthorized persons, any information coming to me confidentially in the performance of my official duties.
- F) UPHOLD freedom of choice for consumers and preference to professional responsibility over personal interests.
- G) EXPOSE corruption wherever discovered.
- H) UPHOLD these principles, ever conscious that public office is a public trust.
- I) BE HONEST in all communications, oral and written.

#### Code of Conduct

Employees are expected to conduct themselves, both on and off the job, in a manner that will reflect credit on the agency. Each employee is expected to:

- A) Comply with a proper request of an authorized supervisor.
- B) Report promptly to work in appropriate clothing and with required tools and equipment in a condition that will permit performance of assigned duties. A clean and neat personal appearance should be maintained during working hours.
- C) Refrain from any disorderly conduct.
- D) Exercise courtesy and tact in dealing with fellow workers, consumers, and the public.
- E) Safeguard public information and maintain client confidentiality.
- F) Conserve, properly utilize, and protect agency funds, property, equipment, and materials.
- G) Exercise watchfulness in the performance of duties to eliminate potential hazards and protect co-workers and clients. Comply with all agency safety procedures.

Employee Signature

Date

## WHERE TO BEGIN

### EMPLOYMENT STATUS POLICY

has three classes of employees:

Full-time - an employee who is normally scheduled to work forty (40) hours per week for fifty-two (52) weeks per year, but a minimum of thirty (30) hours per week. Full-time employees are eligible for all benefits offered by the agency.

Part-time - an employee who is normally scheduled to work a minimum of twenty (20) hours per week for fifty-two (52) weeks per year. Part-time employees are eligible for some of the benefits offered by the agency subject to the terms, conditions, and limitations of each benefit program.

Substitute - an employee who works on an as-needed basis to fill in for a regularly scheduled employee when that employee is ill, on vacation, etc. Substitutes may be eligible for some of the benefits offered by the agency subject to the terms, conditions, and limitations of each benefit program.

All employees are subject to all agency policies and procedures.

Under certain circumstances, it may be necessary to hire personnel on a contract basis for a specific period of time or for a specific project. Contract workers are not employees of the agency and as such, are not party to the terms and conditions of employment stated herein. They are paid strictly for time worked and are not entitled to any benefits of employment.

### ORIENTATION PERIOD POLICY

All employees of \_\_\_\_\_ are employed on an orientation basis until they have completed the first six (6) months of employment. The orientation period is designed to determine whether you are suited for the job and capable of satisfactorily performing the work assigned. It also provides you with the opportunity to decide if our agency is right for you, as we believe it is not only important for you to fit in with your co-employees, but for you to become a part of our team.

### EMPLOYMENT AT WILL

It is the desire of \_\_\_\_\_ that the employment relationship be a long and rewarding one. However, the agency recognizes that circumstances change with the passage of time. An employee may leave at any time with or without notice. In some instances, it may be necessary for the agency to end the relationship.

All employees of \_\_\_\_\_ are EMPLOYEES AT WILL. You may terminate your employment at any time for any reason. Likewise, the agency reserves the right to terminate your employment with or without notice and with or without cause.

An employee may be separated from employment by either voluntary resignation or involuntary termination. Notice of a voluntary resignation is not required. However, \_\_\_\_\_ would appreciate as much notice as practical under the circumstances.

An involuntary termination can result from any one of many factors. Some factors such as lack of work, may be beyond either the employee's or the agency's control. The agency exclusively controls other factors, such as organization or manning level, but the employee controls some of the most important factors, such as attitude and job performance.

#### LENGTH OF SERVICE

Length of service shall be determined by the employee's start date as shown in the agency's employment records. Length of service should be given consideration in such matters as scheduling of vacations and assignment of hours. It also may be considered in decisions regarding promotions, layoffs, and recalls where, in the agency's sole discretion, the employees' experience, training, education, prior work record, and other factors related to their ability to perform are equal.

#### BASIC AGENCY POLICIES

##### EQUAL EMPLOYMENT OPPORTUNITY POLICY

\_\_\_\_\_ is committed to providing equal employment opportunities for all employees and job applicants. Recruiting, promotion practices, and other conditions of employment shall be maintained and conducted in a manner that does not discriminate on the basis of age, disability, race, color, sex, gender, pregnancy, religion, or national origin.

\_\_\_\_\_ will recruit, hire, train, and promote persons in all job titles without regard to age, disability, race, color, sex, gender, pregnancy, religion, or national origin. The agency also will ensure that promotion decisions are based upon valid, nondiscriminatory requirements and are in accord with principles of equal opportunity employment. The agency will ensure that personnel decisions and actions, including but not limited to, compensation, benefits, transfers, promotions, layoffs, termination, job classification, and all other terms, conditions, and privileges of employment will be administered without regard to age, disability, race, color, sex, gender, pregnancy, religion, or national origin.

Unfavorable speech or actions by employees regarding the age, disability, race, color, sex, gender, pregnancy, religion, or national origin of other employees, consumers, agents, contractors, vendors, clients, or others affiliated with \_\_\_\_\_ will not be tolerated. This type of behavior can be grounds for discipline up to and including immediate discharge.

All employees are expected to comply with our Equal Employment Opportunity Policy. Directors, coordinators, and supervisors who are responsible for meeting business objectives are expected to cooperate fully in meeting our equal employment opportunity objectives and their overall performance will be evaluated accordingly.

### ANTI-HARASSMENT

The \_\_\_\_\_ strives to maintain a workplace that fosters mutual employee respect and promotes harmonious, productive working relationships. Our agency believes that harassment in any form constitutes misconduct that undermines the integrity of the employment relationship. Therefore, the agency prohibits harassment that is sexual, racial, or religious in nature or is related to anyone's gender, national origin, age, sexual orientation, or disability as defined and protected by applicable law. This policy applies to all employees and all individuals who may have contact with any employee of this agency.

Conduct prohibited by this policy is unacceptable in the workplace and in an work-related setting outside the workplace, such as during business trips, business meetings, and business-related social events. Harassing conduct includes, but is not limited to: epithets, slurs or negative stereotyping; threatening, intimidating, or hostile acts; denigrating jokes; written or graphic material that denigrates or shows hostility or aversion toward another individual or group and that is placed on walls or elsewhere on agency premises or circulated in the workplace.

Sexual harassment does not refer to occasional compliments of a socially acceptable nature or consensual personal and social relationships without a discriminatory employment effect. It refers to behavior which is not welcome and which is personally intimidating, hostile, or offensive.

Sexual harassment can involve males or females being harassed by members of either sex. Although sexual harassment typically involves a person in a greater position of authority as the harasser, employees in positions of lesser or equal authority can be guilty of prohibited harassment.

There are basically two types of sexual harassment:

“Quid pro quo” harassment - where submission to harassment is used as the basis for employment decisions; i.e., when employee benefits such as raises, promotions, or better working hours, are directly linked to compliance with sexual advances. Therefore, only someone in a supervisory position can engage in quid pro quo harassment.

“Hostile work environment” - where the harassment creates an offensive and unpleasant working environment. A hostile work environment can be created by anyone in the working environment, whether it be a supervisor or other employees. Hostile work environment harassment consists of verbiage of a sexual nature, unwelcome sexual materials, or unwelcome physical contact. Cartoons or posters of a sexual nature, vulgar or lewd comments or jokes, or unwanted touching or fondling all fall into this category.

The agency expects that everyone will act responsibly to establish a pleasant and friendly work environment. However, if an employee feels that he/she has been subjected to any form of harassment, the employee should firmly and clearly tell the person engaging in the harassing conduct that it is unwelcome, offensive, and should stop at once. If for any reason an employee does not wish to address the offender directly, or if such action does not stop the offensive conduct, the employee should notify his/her immediate supervisor, the program director, or the Human Resources Director who may, if the employee so requests, talk to the alleged offender in the individual’s behalf. The employee should be aware that it may be necessary to take action to address such conduct beyond an informal discussion. The best course of action in any case will depend on many factors and, therefore, the informal procedure will remain flexible. Moreover, the informal procedure is not a required first step for the reporting employee.

#### IMPORTANT NOTICE TO ALL EMPLOYEES:

Employees who have experienced conduct they believe is contrary to this policy have an obligation to take advantage of this complaint procedure. An employee's failure to fulfill this obligation could affect his or her rights in pursuing legal action. Also, please note, federal, state and local discrimination laws establish specific time frames for initiating a legal proceeding pursuant to those laws.

Early reporting and intervention have proven to be the most effective method of resolving actual or perceived incidents of harassment. Therefore, while no fixed reporting period has been established, the agency strongly urges the prompt reporting of complaints or concerns so that rapid and constructive action can be taken. The agency will make every effort to stop alleged harassment before it becomes severe or pervasive, but can only do so with the cooperation of its employees.

Any reported allegation of harassment, discrimination, or retaliation will be investigated promptly, thoroughly, and impartially. The investigation may include individual interviews with the parties involved and, where necessary, with individuals who may have observed the alleged conduct or may have other relevant knowledge.

Confidentiality will be maintained throughout the investigatory process to the extent consistent with adequate investigation and appropriate corrective action.

Retaliation against an employee for reporting harassment or for participating in an investigation of a claim of harassment is a serious violation of this policy and, like harassment itself, will be subject to disciplinary action. Acts of retaliation should be reported immediately and will be promptly investigated and addressed.

A timely resolution of each complaint will be reached and communicated to the complainant and the other parties involved. Appropriate corrective action, up to and including termination, will be taken promptly against any employee engaging in harassment. Retaliation against any employee for filing a complaint or participating in an investigation is strictly prohibited. However, any employee who knowingly makes a false claim of harassment will be subject to correcting action, up to and including termination.

Occasionally, talking with a supervisor, program director, or someone in Human Resources about this conduct is not an option. If an employee feels that his/her complaint has not been or cannot be properly handled, he/she may forward the complaint to the Executive Director.

Harassment is considered a form of improper employee conduct. Disciplinary action, up to and including termination, will be taken against any employee engaging in this type of behavior. Any supervisor or member of management who has knowledge of such behavior, yet takes no action to end it, is also subject to disciplinary action.

Nothing in this policy shall prevent the complainant or the respondent from pursuing formal legal remedies or resolution through state or federal agencies or the courts.

#### NON-FRATERNIZATION POLICY

While the \_\_\_\_\_ encourages amicable relationships between members of management and their subordinates, it recognizes that involvement in a romantic relationship may compromise or create a perception that compromises a member of management's ability to perform his/her job.

By its discouragement of romantic and sexual relationships, the agency does not intend to inhibit the social interaction, such as lunches or attendance at social events, that are or should be an important part or extension of the working environment; and this policy must not be relied on as justification or excuse for a director, coordinator, or supervisor refusal to engage in such social interaction with employees.

Individuals in supervisory relationships or other influential roles are subject to more stringent requirements under this policy due to their status as roles models, their access to sensitive information, and their ability to influence others. Any involvement of a romantic nature between a director, coordinator, or supervisor and anyone he/she supervises, either directly or indirectly, is prohibited. It is the responsibility and mandatory obligation of the director, coordinator, or supervisor to disclose the existence of the relationship to the Executive Director. The employee may make the disclosure as well, but the burden of doing so will be on the director, coordinator, or supervisor.

Violation of this policy will lead to corrective action, up to and including termination of the management individual involved in the relationship.

When a conflict or the potential arises because of a personal relationship between employees, even if there is no line of authority or reporting involved, the employees may be separated by reassignment or terminated.

During working time and in working areas, employees are expected to keep personal exchanges limited so that others are not distracted or offended by such exchanges and so that productivity is maintained.

During non-working time, such as lunch time, breaks, and before or after work periods, employees are not precluded from having appropriate personal conversations in non-work areas as long as their conversations and behaviors could in no way be perceived as offensive or uncomfortable to a reasonable person.

Employees are strictly prohibited from engaging in physical contact that would in any way be deemed inappropriate by a reasonable person while anywhere on agency premises, whether during working hours or not.

The provisions of this policy apply without regard to gender and without regard to the sexual orientation of the participants in a relationship of the kind described.

#### GENERAL RULES AND REGULATIONS POLICY

We believe that our employees are and will continue to be good citizens, both in the community and on their jobs, and that they ordinarily will not engage in acts contrary to the best interests of themselves, other employees, consumers, or the agency. Employees are expected to observe common sense rules of honesty and adhere to generally accepted standards of conduct. Employees shall conduct themselves in a manner, both on and off the job, which brings credit to themselves and . Employees should not engage in any conduct that will in any way reflect adversely upon himself/herself or .

In instances in which \_\_\_\_\_ believes that an employee has engaged in conduct contrary to these interests, the employee will be disciplined. The degree of discipline in each case, up to and including discharge, will be determined by \_\_\_\_\_ based upon its perception of the severity of the situation involved. Discipline can take many forms. It may be something as simple as a counseling session between you and your supervisor, or it may be something as severe as immediate termination.

**HAS NO OBLIGATION TO USE ANY PARTICULAR FORM OF DISCIPLINE. NOTHING HEREIN CONSTITUTES A CONTRACT OF EMPLOYMENT OR GUARANTEES THAT YOUR EMPLOYMENT WILL CONTINUE FOR ANY SPECIFIED PERIOD OF TIME.**

The following set of rules and regulations is intended to serve as a general guideline in governing appropriate employee behavior. The list is not intended to include all offenses for which an employee may be disciplined or discharged.

#### Performance Rules

Always put forth your best effort.

You are expected to meet the assigned standards of efficiency, productivity, and performance. You should never intentionally fail to perform your assigned duties.

Be at your assigned workstation ready to work at the start of your shift and at the end of your break and lunch periods. You also are expected to work until the end of your shift or the beginning of your break and lunch periods.

You must call in to your immediate supervisor if you are going to be absent or late.

#### Behavior Toward Others

Insubordination is prohibited. Insubordination includes the failure or refusal to obey the orders or instructions of a supervisor or management, the use of abusive or threatening language toward such individuals, or any conduct that undermines supervisory authority.

Do not threaten, intimidate, coerce, provoke, interfere with, or fight with employees, supervisors, management, consumers, visitors, or suppliers at any time.

Do not make false or malicious statements about employees, supervisors, management, the agency or its services, consumers, suppliers, or visitors at any time.

The use of profane or abusive language is not permitted.



Do not engage in any act that may result in danger or injury to yourself, your fellow employees, consumers, or visitors.

#### Property of Others

Do not abuse, misuse, damage, destroy, sabotage, or steal agency property or the property of employers, supervisors, consumers, suppliers, or visitors.

The use of agency property for personal purposes is not permitted.

#### Honesty

Do not falsify or fail to completely disclose all information requested or recorded on any employment, personnel, or any other record of the agency or its suppliers, consumers, or insurance carriers.

Do not alter, misuse, or remove from agency premises, without proper authorization, employee lists, agency records, checks, or confidential information of any nature.

Do not falsify employee time records by recording hours as worked that are not actually worked. Do not complete any employee time records other than your own.

It is the responsibility of all employees to safeguard agency information. Unauthorized access to confidential information by employees or others will not be tolerated.

#### Other Rules

Gambling on agency premises is strictly prohibited.

The possession of weapons of any type, including handguns, on agency premises is strictly prohibited.

Do not post or remove notices, signs, or any written or printed material on or from bulletin boards or elsewhere on agency property at any time without advance permission.

Always report any mistakes by yourself or another person that could affect the agency's operations or the quantity or quality of its products or services.

Sleeping on duty is strictly prohibited.

Possession or consumption, while at work on the agency's premises, of alcohol or drugs that were not prescribed for you by a physician is prohibited. Likewise, reporting to work while under the influence of alcohol or drugs will not be tolerated.

Conviction for the manufacture, distribution, or sale of illegal drugs will not be tolerated. You may be indefinitely suspended without pay upon being criminally charged and pending resolution of the matter.

#### Parking and Access to Premises

Park only in designated parking areas; not in visitors' spots or handicapped spots unless permitted by law.

Parking areas on agency premises are restricted to employees and visitors to the agency.

Persons who are not agency employees shall be permitted to enter work areas and administrative offices only through the main reception area or with advance permission from a supervisor, coordinator, or program director. Do not otherwise permit or invite non-employees to enter buildings or work areas.

#### ATTENDANCE POLICY

Punctual and regular attendance is an essential function of each employee's job at . Any tardiness or absence causes problems for fellow employees and supervision. When an employee is absent, others must perform his/her work.

Employees are expected to report to work as scheduled, on time, and prepared to start work. Employees also are expected to remain at work for their entire work schedule, except for break periods or when required to leave on authorized agency business. Late arrival, early departure, or other absences from schedules hours are disruptive and must be avoided.

In all cases of absence or tardiness, employees must provide their supervisor with an honest reason or explanation. Documentation of the reason may be required. Employees also must inform their supervisor of the expected duration of any absence. An employee must call his/her supervisor in advance of his/her regular starting time on any day on which the employee is scheduled to work and will not report to work. If you cannot personally telephone, you should have a reliable person do so.

Excessive absenteeism (excused or not) may be grounds for discipline up to and including discharge. Each situation of excessive absenteeism or tardiness will be evaluated on a case-by-case basis. However, even one unexcused absence may be considered excessive, depending on the circumstances.

Any employee who fails to report to work without notification to his/her supervisor for a period of three (3) or more consecutive work days will be considered to have voluntarily terminated the employment relationship.

#### SOLICITATION/DISTRIBUTION POLICY

Any solicitation or distribution by agency employees must be pre-approved in writing by the Program Director and the Executive Director.

#### No Solicitation/No Distribution by Non-employees

Non-employees are prohibited from soliciting or distributing any written or printed material of any kind for any purpose on agency premises at any time.

#### DRUG-FREE WORKPLACE AND SUBSTANCE ABUSE

is committed to providing a safe, healthy, and effective working environment for all employees. The agency is a drug-free workplace. As such, the use of illegal drugs or alcohol during work hours is prohibited.

Drug test will be conducted as a routine part of the pre-employment physical examination. Applicants must satisfactorily pass the drug screen prior to reporting to work. Offers of employment may be made contingent upon satisfactorily meeting this requirement. If the drug screening procedures indicate the presence of drugs or controlled substances, the applicant will not be considered further for employment.

All employees who are involved in a traffic accident involving an agency vehicle, regardless of fault, or who sustain a work-related injury or illness, must submit to a drug and/or alcohol test immediately if at all possible, but no later than the end of the current work period.

An employee who refuses screening for the presence of illegal drugs and/or alcohol will be subject to immediate termination.

If there is reason to suspect that an employee is working while under the influence of an illegal drug or alcohol, the employee will be suspended without pay until the results of a drug and alcohol test are made available to the agency by the testing facility.

The agency's policy is intended to comply with all state laws governing drug testing and is designed to safeguard employee privacy rights to the fullest extent of the law. While the agency has no intention of intruding on the private lives of its employees, the agency does expect its employees to report to work in a condition to perform their assigned duties. To help achieve this goal, employees are prohibited from:

possessing, distributing, transferring, selling, manufacturing, or being under the influence of any illegal substance while on the job or on agency property;

consuming alcoholic beverages while on agency premises, in agency vehicles, or while on agency business or time, or bringing alcohol onto agency premises; and

abusing prescription drugs or possessing prescription drugs that have not been prescribed for the employee by a physician.

If we are to fulfill our responsibility to provide reliable and safe service to our consumers and a safe working environment for our employees, employees must be physically and mentally fit to perform their duties safely and efficiently.

An employee who violates this policy is subject to corrective action, up to and including termination of employment. Use of some drugs is detectable for several days. Detection of such drugs or the presence of alcohol will be considered being “under the influence.” Refusal to submit to a drug and/or alcohol screen is grounds for immediate termination. If an employee is discharged for violation of this policy, he/she will not be eligible for rehire.

Employees using prescription drugs according to a physician’s instructions or using over-the-counter drugs for medicinal purposes should, in the event of such drugs would impair their physical, mental, emotional, or other faculties, notify their immediate supervisor.

The agency’s substance abuse program includes several components to support its efforts to remain drug-free, including:

- supervisor training;
- employee awareness program;
- drug testing of all applicants
- drug testing following any work-related injury or accident or after any accident involving an agency vehicle, regardless of fault
- drug testing when a supervisor suspects that an employee is “under the influence” during working hours;
- drug testing on a random basis; and
- an Employee Assistance Program.

All information relating to drug and/or alcohol screens is to be kept strictly confidential. The information will be kept in each employee’s medical file, which will be maintained separately from the employee’s personnel file. These medical files will be kept locked and secured, and access will be limited. Under no circumstances will the results of a drug and/or alcohol screen be discussed with individuals who do not have a work-related need to know.

If a supervisor suspects that an individual is at work and under the influence of drugs and/or alcohol, the supervisor should notify the program director and the Human Resource Director to seek authorization to test the employee. The supervisor will be granted permission to have the employee tested if sufficient objective symptoms exist to indicate that the employee may be under the influence of drugs and/or alcohol. At least two symptoms must be present in order to authorize the tests. Symptoms would include slurred speech, uneven gait, impaired mental functions, extremely dilated pupils, smell of alcohol present, etc. The authorizing person should make a written record of the employee's name, the date, the time and the symptoms present. This documentation should be attached to the test results and kept in the confidential medical file as justification as to why the tests were performed. The person in authority will coordinate transportation for the employee to and from the testing facility.

An employee who fails a random drug test will be being given the opportunity to enter a substance abuse treatment program. The employee will be given 14 days to present proof that he/she is enrolled in a substance abuse treatment program. If the employee does not enroll in a substance abuse treatment program, he/she will be terminated from this agency. The employee will be placed on administrative leave without pay while in the substance abuse treatment program. The employee will be allowed a maximum of ninety (90) days to complete the treatment program and return to work.

While the agency does not condone the abuse of alcohol and/or use of illegal drugs, the agency does recognize that addiction to drugs and/or alcohol can be treated. If an employee recognizes a personal addiction or abuse problem and voluntarily seeks assistance from management in advance of detection, the agency will assist the employee in seeking treatment. The confidential nature of the employee's counseling and rehabilitation for drug and/or alcohol abuse will be preserved to the extent possible.

The Employee Assistance Program (EAP) is a confidential resource designed to assist employees and their eligible dependents in dealing with challenges and problems such as substance abuse. Treatment for substance abuse may be covered by the employee's health plan. Alternatively, employees and/or eligible dependents can contact New Alternatives at 775-5080 for information.

## HOURS OF WORK AND OVERTIME

### POLICY ON HOURS OF WORK

The agency administrative offices are normally open for business between the hours of 8:00 a.m. and 4:30 p.m., Monday through Friday. normally operates between the hours of 8:00 a.m. and 4:00 p.m., Monday through Friday. Residential facilities are

staffed when consumers are present, which is normally seven (7) days per week. Since the primary objective of this agency is to serve its consumers, overtime may occasionally be necessary. Every effort will be made to keep additional work requirements to a minimum, but when such additional work is necessary, cooperation of all employees is expected.

Work hours may only be modified with supervisory consent. All employees are expected to be at their desks or work stations at the start of their scheduled shifts, ready to perform their work.

#### OVERTIME POLICY

Non-exempt employees shall receive one-and-half times the employee's hourly rate for all hours worked over 40 in any workweek. Time for which employees receive pay, but do not actually work (i.e., vacation pay, holiday pay, etc.) will not be counted as time worked for purposes of the 40 hours per workweek required to receive overtime pay.

When overtime work is required by the agency, the employee performing that job at the conclusion of his/her normal work hours normally will be expected to continue to perform the job on an overtime basis. Occasionally, the agency may need work performed on Saturday, Sunday, or a holiday in areas other than residential.

Employees may volunteer for overtime; however, the agency will select which employee(s) shall perform the overtime based on the work to be performed and the skills and abilities of the employee(s). Failure to work required overtime may lead to discipline up to and including discharge.

An hourly employee may not work overtime unless specifically authorized by supervision or management. Any violation of the policy may lead to discipline up to and including discharge.

#### COMPENSATION AND PROMOTION

##### POLICY ON PERFORMANCE APPRAISALS

will attempt to give each employee, insofar as is practical, a performance review following his/her orientation period and on an annual basis thereafter. The frequency and timing of the performance reviews may vary depending upon length of service, job position, past performance, changes in job duties, or recurring performance problems.

The performance appraisal will include such factors as the quality and quantity of your work, attendance record, and employee attitude. If a review is given, you will be asked to

sign the appraisal simply to acknowledge that it has been presented to you and discussed. Failure to sign the appraisal may result in discipline. Space is provided on the form for your comments, if any.

If at any time you have questions about the job or your performance, do not hesitate to speak with your immediate supervisor.

#### POLICY ON PROMOTIONS AND TRANSFERS

It is the policy of \_\_\_\_\_ to fill all positions with the best-qualified personnel. The agency prefers to promote from within whenever possible. As positions become available, the agency will, at its discretion, either directly promote or transfer a qualified employee or open the position for application by internal and external candidates. Full-time employees are not eligible to transfer to another position within the agency until they satisfactorily complete the initial probationary period, unless otherwise approved by the executive director.

If a position is opened for applications, it will be posted for at least five (5) workdays. The required qualifications for each open job will be indicated on the listing. Frequently, job vacancies will be advertised with outside sources during the same week they are posted on the bulletin boards. This is done to speed up the screening process and to aid in ensuring that the most qualified persons fill vacancies.

To apply for a position, you should submit a resume or employee application to Human Resources referencing the position.

#### TIME SHEET POLICY

Non-exempt employees must accurately record time worked on a time sheet for payroll purposes. Employees are required to record their own time at the beginning and end of each workday, including before and after the lunch break. Employees must also record their time whenever they leave the building for any reason other than agency business. Filling out another employee's time card, allowing another employee to fill out your time card, or altering any time card will be grounds for discipline up to and including discharge.

Exempt employees also may be required to record their time on a time sheet for purposes of monitoring staffing levels for safety of consumers or other management studies.

#### POLICY ON PLACE AND TIME OF PAYMENT

pays its employees every other Friday. Each paycheck represents wages earned by the employee during the two-week period ending on the previous Monday.

For the sake of convenience and efficiency for both the employee and the agency, all employees are required to participate in the direct deposit program. Pay is guaranteed to be in the employee's account at 9:00 am on the designated payday. All paystubs will be sent by e-mail only, in lieu of a printout.

If you feel that an error has been made in your paycheck, you should notify your supervisor to verify that you were paid for the correct number of hours. If you feel an error has been made, then contact the Payroll Office.

Payroll advances are not permitted. Payroll checks cannot be issued before the direct deposit is scheduled to be made.

#### WAGE DEDUCTIONS

There are certain items that must be deducted from gross wages: (1) Federal Insurance Contribution Act (FICA or Social Security) taxes; (2) federal withholding tax; (3) state withholding tax; and (4) other deductions required by law, if any. In addition, you may elect to have one or more deductions from your gross wages: (1) your portion of the health and/or dental insurance costs; (2) the premium for any other group benefit you elect; (3) 401(k) plan contributions; and (4) other deductions as authorized in writing, if any.

If your employment ends and you fail to return agency equipment or otherwise fail to reimburse the agency for amounts owed, such sums will be deducted from your final paycheck.

#### EMPLOYEE BENEFITS

##### ANNUAL LEAVE POLICY

Annual leave for eligible employees begins accruing on the third pay period following the first day of full-time status. One-half of the accrued amounts will be added to the employee's total accumulation each payday beginning the third pay date following the month of accrual. Example: An employee who becomes full time on March 5, 2012 (1st pay date-3/23, 2nd pay date 4/6, 3rd pay date 4/20) would begin accruing annual leave April 20 and every pay thereafter, for a total of 24 pay periods per calendar year. Annual leave accrues to the employee's account every month he/she is in a pay status for the entire month. Annual leave shall not be granted in advance of accrual.



a. Employees who became full-time or were hired in a full-time position before May 16, 2000, shall earn annual leave for each calendar month in service in full-pay status according to the following schedule:

0 – less than 15 years	12.7 hours per month – 19 days per year
15+ years	15.33 hours per month – 23 days per year

b. Employees who become full-time or are hired in a full – time position on or after May 16, 2000, shall earn annual leave for each calendar month in service in full – pay status according to the following schedule:

0 – less than 3 years	6.66 hours per month – 10 days per year
No annual leave can be taken until initial six – month probation is completed	
3 – less than 6 years	8.66 hours per month – 13 days per year
6 – less than 10 years	10.66 hours per month – 16 days per year
10 – less than 15 years	12.66 hours per month – 19 days per year
15+ years	15.33 hours per month – 23 days per year

c. Part- time employees and substitute employees are not eligible for annual leave.

The charge for one day of annual leave will be eight (8) hours. When less than one full day of annual leave is used, hours worked plus annual leave time used must equal eight (8) hours. Employees may carry up to 256 hours of unused annual leave into the following year. Any annual leave at the end of a calendar year in excess of this amount will be forfeited.

Request for annual leave must be made using the Time Clock Plus Leave Request and submitted to the supervisor at least two weeks if at all possible in advance. The supervisor will have five working days (Monday through Friday) after receiving the request to approve/disapprove the request. If the leave request is disapproved, the supervisor must indicate the reason(s) notated in the note area of the electronic Leave Request in Time Clock Plus. After approval/disapproval, the employee requesting leave will be notified through Time Clock Plus Leave Request electronically. This Leave Request is kept on an electronically file system.

A residential direct care staff that is unable to make an advance request will be responsible for notifying his/her supervisor or the on-call supervisor of the absence and the reason therefore at least two hours prior to scheduled duty to allow for alternative coverage to be arranged. All other staff must notify their supervisor no later than 8:00 a.

m. on the scheduled duty day. If the leave is approved, the employee will submit a Leave Request through Time Clock Plus for supervisor approval immediately upon his/her return to work, if the annual leave is not approved, the absence will be charged to leave without pay.

No annual leave will be granted until the completion of the initial six-month probation period. All supervisors are responsible for the duty status of employees under their supervision. Granting leave at any specific time is an administrative determination which must be based on the work requirements of the program. It may not be possible at times to authorize leave; however, every reasonable effort will be made to allow an employee to take the time of his/her choice. Leave will be granted on a first – come, first – served basis when possible with consideration being given to the reason for the leave request, such as family situations or other conditions which would contribute to a reasonable decision.

If an employee is on leave under the Family and Medical Leave Act, annual leave must be used in conjunction with the FMLA leave after all sick leave has been used. When the employee has no more accrued sick or annual leave, the remaining period of FMLA leave will be charged to leave without pay.

#### DISPOSITION OF ANNUAL LEAVE

a. Upon separation of employment with proper two week notice for all staff, except Directors and Executive Director who will require a 30 day notice, the employee shall receive a lump sum payment for unused annual leave not to exceed 256 hours. If a notice is not given annual leave will be forfeited. Annual leave in excess of the payable maximum shall be forfeited. In the death of an employee, the lump sum payment shall be paid to the survivors or the estate of the deceased employee upon the establishment of valid claim.

b. Final payment for accrued annual leave will be computed using the employee's hourly rate rounded to the nearest cent.

#### HOLIDAYS

Holidays will be adopted each November for the next calendar year, as designated by the Executive Director. All full-time employees shall be entitled to receive holiday pay, provided they are in a pay status (on duty or on pre-approved leave) the full work period the day preceding and the next regularly scheduled work day immediately following the holiday.

Full-time employees who work in the residential program as Direct Support Staff (DSS) are required to work during the holidays to provide needed supports.

Full-time DSS scheduled to work on a holiday will be paid regular time and will have the option of taking another day off as their alternate holiday, within 60 days of the scheduled holiday. Alternate holidays must be requested and approved in advance by their supervisor.

## SICK LEAVE

Sick leave for eligible employees begins accruing on the third pay period following the first day of full-time status. One-half of the accrued amounts will be added to the employee's total accumulation each payday beginning the third pay date following the month of accrual. Example: An employee who becomes full time on March 5, 2012 (1st pay date-3/23, 2nd pay date 4/6, 3rd pay date 4/20) would begin accruing annual leave April 20 and every pay thereafter, for a total of 24 pay periods per calendar year.

Sick leave accrues to the employee's account every month he/she is in a pay status, provided he/she is in a full-time pay status for the entire month. Sick leave shall not be granted in advance of accrual.

a. Employees who became full-time or were hired in a full-time position before May 16, 2000, shall earn sick leave for each calendar month in service in full-pay status according to the following schedule:

0 – less than 15 years	12.7 hours per month –19 days per year
15+ years	15.33 hours per month –23 days per year

b. Employees who become full-time or are hired in a full – time position on or after May 16, 2000, shall earn sick leave for each calendar month in service in full – pay status according to the following schedule:

0 – less than 3 years	6.66 hours per month –10 days per year
No annual leave can be taken until initial six – month probation is completed	
3 – less than 6 years	8.66 hours per month –13 days per year
6 – less than 10 years	10.66 hours per month –16 days per year
10 – less than 15 years	12.66 hours per month –19 days per year
15+ years	15.33 hours per month –23 days per year

c. Part- time employees and substitute employees are not eligible for sick leave.

The charge for one day of sick leave will be eight (8) hours. When less than one full day of sick leave is used, hours worked plus sick leave time used must equal eight (8) hours. Employees may carry up to 770 hours of unused sick leave into the following year or donate to the sick leave pool according to the sick leave transfer pool policy 1.4.6.4. Any sick leave at the end of a calendar year in excess of this amount will be forfeited.

Employees are eligible for sick leave under the following conditions:

- a. When incapacitated for duty by sickness or injury.
- b. Upon exposure to a contagious disease which may be transferred to others by contact. A physician must determine whether the employee should remain off duty and the length of such absence.
- c. For injury, illness, medical, dental, or optical examinations or treatment by licensed physicians or other recognized practitioners.
- d. Employees may use accumulated sick leave to care for ill family members. For purposes of this policy, "family member" is defined as the employee's parents, spouse, and children (including custodial children) up to age 19; up to age 25 if a full-time student; any age if deemed to be disabled.

If a holiday is observed by the agency while an employee is out on sick leave, the employee will not be charged with sick leave for the holiday, but will be paid for the holiday at the appropriate rate of pay, with the exception of residential direct support staff, who will be charged for the sick leave.

If an employee is on leave under the Family and Medical Leave act, sick leave must be used in conjunction with the FMLA leave.

#### Residential Staff

Residential direct support staff must notify his/her immediate supervisor or the on-call supervisor as early as possible, but no later than four (4) hours before the beginning of the assigned shift that he/she will not be able to work because of illness. Calling the assigned residence and/or notifying other staff is not acceptable. The employee must also inform the supervisor if the absence is expected to last more than one day and give an anticipated date of return to work.

#### All other staff

All other staff must notify their supervisor no later than 8:00 a. m. when they are not able to report to work as scheduled because of illness. If a message is left on the supervisor's voice mail, the employee must also speak directly with the supervisor as soon as possible during the duty day. The employee must also inform the supervisor no later than 4:00 p.m. that same duty day if they expect to be out the next day and give an anticipated day of return to work.

It is the employee's responsibility to call his/her supervisor. In an emergency, someone may notify the supervisor on behalf of the employee. The employee must contact his/her supervisor personally as soon as possible afterward. Failure to notify the supervisor within a reasonable time may result in the absence being charged to leave without pay.

When an illness exceeds two (2) consecutive work days, employees must furnish a medical statement from their healthcare provider detailing the duration of the illness and the physician's diagnosis. However, the agency reserves the right to require documentation from the physician verifying that any absence using sick leave was caused by a medical situation. The agency also reserves the right to require documentation for the physician authorizing the employee to return to work.

An employee who is absent for more than three (3) consecutive work days must contact the Human Resource Office to determine if the Family Medical Leave Act policy applies. Federal law requires that thirty (30) days' notice be given when at all possible; i.e., pregnancy or a planned surgery.

In cases when a specific diagnosis is not noted, the physician's statement that the employee is unable to perform required duties must be specific as to which duties are affected by the medical condition and the estimated time that these duties cannot be performed. The statement should specify the conditions upon which the individual is release to return to work and under what restrictions, if any. Physicians' notes without the required information may result in denial of sick leave with the absence treated as leave without pay. A certification form is available from the Human Resource Office

Advance request for sick leave must be made using the Time Clock Plus Leave Request as soon as the employee knows he/she will be out; i.e., for a doctor's appointment, surgery, etc. In emergency situations, the employee must submit a Leave Request through Time Clock Plus to his/her supervisor for approval immediately upon his/her return to work, If the sick leave is not approved, the absence will be charged to leave without pay.

When possible, employees are expected to schedule planned medical appointments in a manner that minimizes disruption of workflow. Further, employees must use sick leave for its intended purpose. The use of sick leave will be subject to verification. Supervisors will monitor employee use of sick leave for patterns of abuse. Abuse of paid sick leave may result in disciplinary action being taken. If an apparent pattern of abusing sick leave can be documented, the supervisor may require a doctor's excuse for each future sick leave absence, even if for less than two consecutive work days.

A period of illness which continues beyond the employee's accumulated sick leave will be charged to annual leave. If the leave qualifies as FMLA leave, when the employee has no more accrued sick or annual leave, the remaining period of FMLA leave will be charged to leave without pay. Sick leave should be treated as a form of insurance and not as extra days off from work.

## SEPARATION

Employees are not paid for unused sick leave upon termination of employment.

## FAMILY AND MEDICAL LEAVE ACT

It is the intention of \_\_\_\_\_ to fully comply with the Family and Medical Leave Act (FMLA). Under the FMLA, eligible employees are entitled to certain rights and have certain obligations with respect to unpaid leave for certain family and medical reasons.

### FMLA Leave Eligibility

In order to be eligible to receive leave under the FMLA, an employee must: (1) have been employed by the agency for a total of 12 or more months; (2) have worked a minimum of 1,250 hours during the 12-month period preceding the requested leave; and (3) be employed at a location where 50 or more employees are employed by the agency within 75 miles of his/her work site.

### Reasons for FMLA Leave

There are four types of leave. They include leave for: (1) the birth of your child and in order to care for that child; (2) the placement with you of a child through adoption or foster care; (3) to care for your spouse, son, daughter, or parent who has a serious health condition; or (4) your own serious health condition that causes you to be unable to work.

Your child must be either under age 18, or if older than 18, your child must be incapable of self-care because of a mental or physical disability. Your in-laws are not considered your parent, but under certain circumstances, your legal guardian might be.

### Military Family Leave Entitlements

Eligible employees with a spouse, son daughter, or parent on active duty or call to active duty status in the National Guard or Reserves in support of a contingency operation may use their 12-week leave entitlement to address certain qualifying exigencies. Qualifying exigencies may include attending certain military events, arranging for alternative childcare, addressing certain financial and legal arrangements, attending certain counseling sessions, and attending post-deployment reintegration briefings.

FMLA also includes a special leave entitlement that permits eligible employees to take up to 26 weeks of leave to care for a covered service member during a single 12-month period. A covered service member is a current member of the Armed Forces, including member of the National Guard or Reserves, who has a serious injury or illness incurred in

the line of duty on active duty that may render the service member medically unfit to perform his or her duties for which the service member is undergoing medical treatment, recuperation, or therapy; or is in outpatient status; or is on the temporary disability retired list.

#### Duration of Leave

Under most circumstances, you can receive up to 12 weeks of leave within any 12-month period. There are, however, some conditions.

#### Intermittent or Reduced Leave

Intermittent or reduced leave will be granted for a serious health condition when it is both: (1) medically necessary; and (2) the need is best accommodated through on intermittent or reduced leave schedule. Intermittent leave means that you are off work for separate blocks of time. An example of intermittent leave would be taking every Monday and Friday off in order to undergo prescribed treatment. Reduced leave means that the numbers of hours in a day or week are reduced in order to give you the necessary time off. An example of reduced leave would be taking off every Monday, Wednesday, and Friday at 1:00 p.m. in order to attend required physical therapy. We may transfer you in order to accommodate your request for intermittent or reduced leave, or possibly place you on part-time status.

Intermittent or reduced leave will not be granted for the birth or placement of a child.

#### Leave Year

The agency uses a rolling 12-month period in order to determine your eligibility for leave on any given date. The 12-month period is measured backward from the date you want to use your FMLA leave.

#### Is Leave With or Without Pay?

You must use any accumulated sick leave and annual leave time to the extent available during this leave period. Absences in excess of these accumulated days will be treated as leave without pay.

#### Benefits During FMLA Leave

Employees shall continue to receive health insurance on the same basis during FMLA leave as they would if they were actively working. This means, however, that you must pay for that portion of your coverage that you currently are required to pay. Your portion

of the insurance premium is due on or before the 1st day of each month you are on leave. You will not accrue benefits, such as holiday pay, during your leave.

#### Notice and Reporting Requirements

An employee must, under most circumstances, give 30-days' notice of his/her intention to utilize leave. Sometimes, 30-days' notice will not be possible. If this is the case, you should give the agency notice of the requested leave as soon as is practicable.

Notice should be given in writing and provide the following information: (1) the reason for the requested leave; (2) the anticipated starting date for the leave; and (3) the expected duration of the leave.

#### Health-Care Provider Certificate

In order to qualify for leave based on a serious health condition, either your own or that of your spouse, son, daughter, or parent, you will need to provide the agency with a medical certification issued by a healthcare provider (generally your doctor) regarding the necessity for the leave.

#### Employment Rights Upon Return

Generally, upon your return to work, you will be returned to your former position if it is still available. If your former position is no longer available, the agency will provide you with an equivalent position with equivalent benefits, pay, and other terms and conditions of employment.

#### BEREAVEMENT LEAVE

Any full-time employee suffering the misfortune of a death in his/her immediate family may request bereavement leave. In the event of the death of a spouse or great-grandparents, grandparents, parents, brothers, sisters, children, grandchildren, great-grandchildren of either the employee or the spouse, the employee may be granted up to three (3) days off from work with pay.

Part-time employees will, if business needs and staffing requirements permit, be granted one (1) day of leave without pay to attend the funeral of an immediate family member.

This leave is conditioned upon the employee attending the funeral or memorial service, or otherwise using the time to handle arrangements arising from the death. Annual leave may be requested if additional time off is needed. Requests for bereavement leave should be made to the employee's immediate supervisor. The agency reserves the right to deny any request for leave as it deems appropriate.



## MILITARY / RESERVE LEAVE

provides compensation for up to two weeks for annual reserve and National Guard military training for full-time employees who have completed the orientation period. Part-time and substitute employees do not qualify for military leave compensation.

The amount of the military leave compensation paid is the difference between military pay and regular pay based on a 40-hour work week. Time spent on military leave normally will not be counted as annual leave used. However, if an employee's military training exceeds two weeks, the employee may elect to use paid annual leave for the additional leave. Otherwise, the employee will not be compensated by for the additional time off.

will abide by all of the provisions of the Uniformed Services Employment and Re-Employment Act (USERRA) regarding leave due to military service and the employee's rights upon return. Generally, military reservist employees and those volunteering for or called to active duty with the military are entitled to re-employment with the agency upon their return to duty. The employee also may elect to continue coverage under the agency's healthcare plan in accordance with the law and the plan's terms.

An employee must provide advance notice to his/her supervisor as soon as he/she is aware of the military obligation and must provide appropriate documentation.

## JURY DUTY

will grant full-time employees paid time off for mandatory jury duty for a maximum of one (1) week. A copy of the court notice must be submitted to the employee's supervisor to verify the need for such leave.

The employee is expected to report to work when doing so does not conflict with court obligations. It is the employee's responsibility to keep his/her supervisor informed about the amount of time required for jury duty.

If the employee receives pay for jury duty, this amount will be endorsed to the because the employee is being paid his/her regular wages by the agency. If the employee desires to keep the compensation for jury duty, the employee will be charged for annual leave for the number of hours absent from duty.

## HEALTH INSURANCE

provides health and dental insurance for all of its full-time employees. Employees pay a portion of the total premium depending on the coverage choices they select. Part-time and substitute employees are not eligible for health or dental insurance coverage.

Included in the health insurance package is group life insurance in the amount of \$3,000 and basic long-term disability insurance.

The Insurance Benefits Guide issued to covered employees sets out the terms and conditions of the health and dental insurance plans. This document governs all issued relating to employee health and dental insurance. Additional copies are available from Human Resources.

The agency reserves the right to unilaterally modify, terminate, change, or otherwise alter the benefit plan as it, in its sole discretion, deems necessary. Likewise, the amount the agency contributed may change from time to time.

#### CONTINUATION OF GROUP HEALTH INSURANCE

offers employees and their dependents that are covered under our group health plan the opportunity for a temporary continuation of health and/or dental coverage (called continuation coverage) at group rates in certain instances where coverage under the plan otherwise would end. Continuation coverage is available if you or a covered dependent become ineligible for coverage under the plan due to the occurrence of one of the following qualifying events:

The covered employee's voluntary or involuntary termination (other than gross misconduct) of employment or loss of eligibility to participate in the plan due to reduced hours;

The covered employee's death;

The covered employee's divorce or legal separation;

The covered employee's child ceases to be a dependent (as defined by the plan); or

The covered employee becomes eligible to receive Medicare benefits.

You must inform Human Resources upon the occurrence of one of the above listed events. There are deadlines for electing continuation coverage and limitations regarding the duration of such coverage. More specific information about continuation coverage is available by contacting Human Resources.

## CAFETERIA PLAN (MONEYPLUS)

Full-time employee may elect to participate in flexible benefits plan. The cafeteria plan allows you to pay for family coverage under the agency health insurance plan with pretax dollars. The cafeteria plan also allows employees to obtain reimbursement for medical expenses and child-care expenses with pretax dollars. In general, in order to participate, you must elect which benefits you want and agree to reduce your compensation. In the case of the healthcare and dependent daycare spending accounts, the employee will specify the amount to be deducted on a biweekly basis.

In order for a qualified participant to obtain reimbursement from the spending accounts, the employee must incur a covered expense and submit a paid receipt to the plan administrator. The plan administrator will reimburse each allowable claim directly to the employee in an amount not to exceed the employee's account balance.

The terms of the cafeteria plan are set out in the Insurance Benefits Guide issued to eligible employees. There are very stringent requirements regarding enrolling, changing elections, allowable expense reimbursement, and withdrawal once you are a participant. You should carefully study the plan documents before you elect to participate.

## SAFETY AND HEALTH

### SAFETY AND HEALTH POLICY

**SAFETY IS EVERYBODY'S BUSINESS.** Every employee is responsible for his/her own safety as well as for others in the workplace. Safety must be a primary concern in every aspect of planning and performing all Board activities. We want to protect our employees and consumers against preventable injury or illness in the workplace to the greatest extent possible.

All injuries (no matter how slight) must be reported to management immediately. Failure to do so may disqualify you from receiving workers' compensation benefits or an excused absence and may result in disciplinary action. Employees are also expected to report promptly to management any apparent health or safety hazards. Below are some general safety rules. Each supervisor, coordinator, or program director also may post other safety procedures in specific programs or work areas:

Avoid overloading electrical outlets with too many appliances or machines.

Use flammable items, such as cleaning fluids, with caution.

Report to your supervisor if you or a co-worker becomes ill or is injured in the workplace.

Ask for assistance with lifting heavy objects or moving heavy furniture.

Smoke only in designated smoking areas.

Keep cabinet doors and file and desk drawers closed when not in use.

#### USE OF AGENCY MOTOR VEHICLES

Vehicles that are provided by the agency shall only be used for business-related purposes with the exception of occasional minimal personal use such as stopping for lunch during working hours. No one is permitted to operate an agency vehicle other than those employees who have been expressly approved by the agency.

The following procedures apply when an employee is involved in an accident with an agency vehicle or while otherwise performing services for the agency:

Employees should immediately render first aid and help to the injured.

An appropriate law enforcement officer should be contacted immediately.

An effort should be made to secure the names, addresses, and telephone numbers of any witnesses.

Employees should not admit, make statements about, or express opinions regarding liability.

The employee involved should contact his/her supervisor or someone in administration immediately to report the incident.

The employee must turn in the "Verification of Insurance" report required by state law to Human Resources.

When requested to do so, the employee will submit a written accident report to his/her supervisor.

#### CELLULAR AND DIGITAL TELEPHONES

Employees are not permitted to use cellular or digital phones while operating a moving motor vehicle in their capacity as an employee of \_\_\_\_\_ at any time regardless of location.

No camera-equipped telephones or other devices are to be taken into any agency restroom or other area where privacy would normally be expected.

#### DRIVER QUALIFICATIONS

An employee will be deemed unqualified to operate agency vehicles if the employee: was involvement in more than two at-fault accidents in the last three (3) years; or has accumulated more than six (6) current violation points.

If an employee who is already qualified commits any of the above infractions within a three-year period, he/she will no longer be qualified to operate agency vehicles. Employees who are not disqualified by the above criteria must still complete the agency's driver qualification process in order to be deemed qualified. The agency reserves the right to disqualify current or potential drivers for any other reason it deems appropriate.

#### CONFIDENTIALITY

It is the responsibility of all Board employees to safeguard sensitive agency information. The nature of our business and the economic well-being of the agency and its employees are dependent upon protecting and maintaining proprietary information. Continued employment with the agency is contingent upon compliance with this policy. Sensitive agency information is defined as confidential information related to consumers, salary information, business plans and strategies, negotiations and contracts, and personnel information. Unless otherwise identified by management, all employees shall assume that such information is confidential.

#### AGENCY INTEGRITY

#### CONFLICTS OF INTEREST

It is the objective of \_\_\_\_\_ to maintain an organization guided and governed by the highest standards of conduct and ethics. The reputation of the agency is a direct reflection of the business conduct of all who work for it.

To protect and enhance our reputation, the agency requires that all employees be guided by the highest standard of conduct in their business contacts and relationships. The following examples have been deemed to involve a conflict of interest that violates agency policy:

Serving as an employee, officer, director, or consultant of a supplier of materials or services, or competitor of the agency.

Holding by an employee or an immediate family member of an employee (parent, sibling, child, or spouse) any financial interest in the business of a supplier of materials or services, or a competitor of the agency. This generally does not include a financial interest in widely held corporations that are quoted and sold on the open market.

Borrowing money from or lending money to any consumer, supplier of materials or services, or competitor of the agency other than recognized financial institutions; i.e., banks, credit unions, etc.

Accepting gifts, entertainment, or anything of value from any consumer, supplier of materials or services, or competitor of the agency.

It is important to avoid not only any situation that is an obvious conflict of interest such as those listed above, but also any situation that might give the appearance of being a conflict of interest.

#### OUTSIDE EMPLOYMENT

Outside employment generally is discouraged. If you decide to accept outside employment, you must promptly notify Human Resources. Outside employment for a competitor, or that might otherwise present a conflict of interest, is strictly prohibited.

#### COMPLAINT PROCEDURE

is concerned with any situation affecting the employment relationship. The agency is committed to attempting to correct any condition or situation that may cause problems or misunderstandings. It is inevitable that problems and misunderstandings may occur. Therefore, the agency has provided an orderly manner for an employee to voice an opinion or discuss a problem with management without prejudice or fear of retaliation.

If an employee has a problem or complaint, the employee should discuss it with his/her immediate supervisor as soon as possible.

If the problem is not satisfactorily resolved or the problem is with the supervisor, the employee should discuss it with his/her program director.

If the problem still is not satisfactorily resolved, the employee should discuss it with the Human Resources Director.

In the event the problem still has not been satisfactorily resolved, the employee should discuss it with the Executive Director. Human Resources will assist the employee (if requested) in the presentation of the problem to the Executive Director.

Not all complaints can be resolved to everyone's satisfaction. However, in each case, the reason for the decision will be explained to the employee. Also, the Human Resources Director is available, at any time, to discuss and/or provide assistance with any complaint, problem, or concern that an employee may have.

## OTHER MATTERS

### SUGGESTION POLICY

We welcome your ideas and suggestions, no matter how unimportant they may seem to you. Sometimes the most unusual or even the simplest suggestions are excellent cost-saving ideas. Anything that will help to do the job better or more productively, improve working conditions, provide better public relations, or eliminate unnecessary expenses will receive thorough consideration. Please give any suggestions you might have to your supervisor or, if you prefer, place them in one of the Suggestion Boxes located in the SWE I and SWE II break rooms. Although not all ideas can be adopted, an effort will be made to consider and utilize any practical suggestions.

### EMPLOYEE RECORDS

Each employee is responsible for keeping current the information contained in his/her personnel file. Personal information, such as address, telephone number, name change, number of dependents, insurance beneficiaries, tax withholding information, and the person(s) to be contacted in an emergency, should be both accurate and up to date. Human Resources should be informed of changes as soon as reasonably possible.

Personnel files are the property of \_\_\_\_\_ and will be treated as confidential agency information. This information will only be available to agency personnel, other than the employee, on an as-needed basis. An employee may periodically review his/her personnel file.

#### Examination of Pay Records

An employee may examine time cards and any other records relevant to proper computation of his/her pay or benefits at any reasonable non-working time during regular business hours.

#### Examination of Personnel Records

An employee may examine the records of his/her personnel file relating to the employee's wages, hours, benefits, discipline, or other terms and conditions of employment at any reasonable non-working time during regular business hours.

#### Arrangements for Examination of Records

For the protection of all, and to maintain employee privacy, records may be examined only in accordance with the following safeguards:

An employee's records may be examined only by the employee.

Records may be examined by appointment and prior arrangement with Human Resources

Records may be examined only in Human Resources and in the presence of a designated agency representative

No record may be removed from Human Resources, even temporarily.

The agency reserves the right to adopt reasonable rules concerning the frequency of file inspections to prevent potential abuses.

#### Examination of Medical Records

The Occupational Safety and Health Act (OSHA) provides that employees exposed to toxic substances or harmful physical agents have a right of access to medical records, exposure records, and analysis prepared from such records. Copies of all medical records, exposure records, and each analysis produced from the records may be obtained upon written request from Human Resources.

#### Furnishing Information to Third Parties

The agency assumes no obligation to furnish information about any employee to any third party (other than to verify his/her current employment). An employee who desires that the agency furnish information to a third party (such as wage or salary information) may provide a written request to Human Resources. The employee may be required to execute a release before the agency will disclose any information to third parties.

#### Reference Requests

All requests for a reference must be directed to Human Resources. No supervisor, other member of management, or other employee is authorized to provide a reference for current or former employees. The agency's general policy regarding references for employees who have left the agency is to disclose the dates of employment, the title of the last position held, pay level, and wage history.



Generally, no further information will be disclosed to third parties without an executed release holding the agency and the third party harmless for such disclosure and its use. Indeed, since reference requests are not a matter of right, the agency, in its discretion, may or may not respond to such a request.

#### EMPLOYMENT OF RELATIVES

While the agency has no prohibition against hiring relatives of current employees, close relatives will not be hired or transferred if it would:

Create a supervisor/subordinate relationship with a family member;

Have the potential for creating an adverse impact on work performance; or

Create either an actual conflict of interest or the appearance of a conflict of interest.

For purposes of this policy, close relatives, whether established by blood, marriage, or other legal action, are defined as parent, spouse, child, brother, sister, grandparent, grandchild, mother-in-law, father-in-law, son-in-law, daughter-in-law, and includes any other person with whom the employee has a close personal relationship such as a domestic partner, romantic partner, or co-habitant.

Employees who become immediate family members may continue employment as long as it does not involve any of the above. If one of the conditions outlined should occur, attempts will be made to find a suitable position within the agency to which one of the employees will transfer. The agency will make reasonable efforts to assign job duties so as to minimize problems of supervision, safety, security, or morale. If accommodations of this nature are not feasible, the employees will be permitted to determine which of them will resign. If the employees cannot make a decision, the agency will decide in its sole discretion who will remain employed.

The agency reserves the right to determine in all cases if a close enough familial relationship exists to prohibit a supervisory relationship.

Close family members of a consumer in the care of the agency cannot work in the same program location, with the exception of the community-based rehabilitation supports program.

Board members and close family members of Board members or the Executive Director will not be considered for employment.

#### SMOKING POLICY

Smoking is prohibited throughout the agency except in specifically designated areas. Smoking is also prohibited in public areas and restrooms. Smoking generally is limited to employee breaks and lunch. Please be especially attentive to the sensitivities of

consumers or fellow employees who may object to smoking. Excessive smoking breaks will not be tolerated.

## WEAPONS

The carrying of weapons and firearms is prohibited on the premises of \_\_\_\_\_, including office space, residential facilities, work shops, parking lots, and grounds. The carrying of weapons and firearms, concealed or otherwise, also is prohibited in agency-owned vehicles at any time, and in personal vehicles immediately before, during, or immediately after work. No weapon or firearm shall be kept in a locker, lunch box, purse, or other personal property.

This policy is intended to reduce the potential for violent behavior in the workplace. Therefore, failure to comply with this policy will result in immediate termination of employment.

\_\_\_\_\_, on behalf of itself and its consumers, reserves the right to inspect an employee's personal property, including, but not limited to, packages, purses, clothing, and vehicles based upon a suspicion that this policy has been or is being violated. Refusal to consent or to cooperate in the search of personal property may be grounds for discipline up to and including discharge.

## Dress Code

While it is the intent of the \_\_\_\_\_ that employees dress for their own comfort during work hours, the professional image of our agency is maintained, in part, by the image that our employees present to consumers, vendors, and visitors. Employees also serve as role models for the individuals served by the agency.

Professional appearance will vary according to the assigned work area and current job function. For all employees, professional appearance means that the agency expects you to maintain good hygiene and grooming while working. All clothing must be clean, neat, and fit properly. Employees are expected to practice common sense rules of neatness, good taste, and comfort.

Extreme fashions are not appropriate business attire and are prohibited. Facial hair is permitted as long as it is neat and well trimmed. Earrings are acceptable; however, no more than three (3) earrings may be worn on each ear while working, none longer than 1" below the earlobe. Rings are acceptable; however, no more than two (2) rings may be worn on each hand while working. Piercings through the nose, eyebrow, tongue, or other body part (other than the ear lobe) visible to the public may not be worn while working. Tattoos/brandings must not be offensive in nature and must be small in size (no larger

than a quarter) or covered while working. Shoes should be clean and neat with heel height appropriate for the assigned work area and current job function.

The appropriateness of employee apparel will be determined by the immediate supervisor. Supervisors may take into consideration whether there is direct contact with the public sector and the work environment.

The agency wishes to provide a work environment that is free of safety hazards, offensive behavior, and harassment of any kind. Therefore, the following are NOT ACCEPTABLE in any work area: strong perfumes, colognes, etc.; spandex or excessively tight clothing; bare feet; shorts or skirts more than two (2) inches above the knee; bare midriffs; strapless, halter, or cropped tops; tops with spaghetti straps; tank tops; sexually provocative clothing; hats; clothing with profanity, nude or semi-nude pictures, sexually suggestive slogans, cartoons, or drawings; T-shirts with offensive wording on them; the observable lack of undergarments and exposed undergarments.

#### Administration /Management:

While the agency observes a casual dress environment, there may be situations requiring more formal attire. If you are conducting or attending meetings, seminars, etc., where you come in contact with other business professionals, you are expected to represent the agency in a professional business manner and dress appropriately for conducting such business. Jeans will be allowed on Fridays unless you are conducting professional business; at which time business attire should be worn. Jeans must not be faded, frayed, or have rips and/or holes.

#### Work Activity/Residential Areas:

A standard of dress is required to promote a safe and productive working environment. Jewelry should be kept to a minimum for safety reasons. Unacceptable items include: expensive, designer clothes where the possibility of damage by individuals is likely to occur; shoes inappropriate for the task being performed; shoes with a heel higher than 1"; shoes with open toes; sandals or flip-flops; fingernails that are pointed and/or more than one-fourth (1/4) inch longer than the fingertip.

#### Nursing:

Scrubs are required for all staff. All nurses must have a clearly legible identification badge at least one inch by three inches in size with the nurse's name and title as officially licensed or recognized. Unacceptable items include: shoes inappropriate for the tasks being performed; shoes with a heel higher than 1"; shoes with open toes; sandals or flip-flops; fingernails that are pointed and/or more than one-fourth (1/4) inch longer than the fingertip.

### Lawn Crews:

Clothing should be appropriate for the weather. Sleeveless tops may be worn if approved by the supervisor. Jewelry and loose clothing must be kept to a minimum for safety reasons. Shoes should be sturdy and provide protection for the feet. Unacceptable shoes include sandals and shoes with open toes.

The agency will NOT be responsible for jewelry, clothing, shoes, etc., damaged by individuals or the work situation that do not meet the guidelines of this policy. The agency will pay up to \$25.00 for damaged clothing and \$50.00 for a damaged watch. Reimbursement for damaged glasses will be made on a case-by-case basis with the approval of the Executive Director.

The agency reserves the right to determine appropriate dress at all times and in all circumstances and may send employees home to change clothes should it be determined that their dress is not appropriate. Non-exempt employees will not be compensated for this time away from work. Exempt employees will be required to use annual leave to cover their absence.

### TELEPHONE USAGE

Courtesy and thoughtfulness in using the telephone are not only key elements in good public relations, but serve as indicators of an employee's attitude and competence. The following guidelines are offered for good telephone manners:

Answer the telephone promptly within the first three rings. The caller will appreciate the promptness.

A good way to answer the telephone is to give the name of the program, then the identification of the speaker.

It is better to offer to take a message and have the call returned than to keep the caller waiting for an indefinite period of time.

Avoid needless transfer of calls; return a call rather than transfer the call when uncertain of the person to whom the caller should speak.

When a caller leaves a name, number, and/or message, be sure it is recorded correctly and give it to the appropriate individual.

All employees should receive and place their own calls.

Since it is the goal of the \_\_\_\_\_ to serve its consumers, it is important that the telephone lines be kept as free as possible so as to not interrupt the daily flow of business. Thus, personal telephone calls should be limited to those that are necessary and should be brief. Personal long distance calls are not permitted on agency telephones.

#### INSPECTION OF PROPERTY

Vehicles, desks, and file cabinets are agency property and must be maintained according to agency rules and regulations. They must be kept clean and are to be used only for work-related purposes. To ensure compliance with its rules and regulations, the agency reserves the right to inspect all agency property without prior notice to the employee and/or in the employee's absence.

Prior authorization must be obtained before any agency property may be removed from the premises.

An employee's personal property, including, but not limited to, packages, purses, clothing, and vehicles, may be inspected upon a suspicion of unauthorized possession of agency property or property of another employee or consumer, weapons, or illegal drugs. Refusal to give consent or to cooperate in the search of personal property may be grounds for discipline up to and including discharge.

#### TEAMWORK

\_\_\_\_\_ is committed to the team concept. Through teamwork, the whole becomes greater than the sum of its parts. In other words, the agency believes one employee should help another and vice versa.

Supervisors are considered as team leaders. Each program of the agency is divided into teams and employees report to a team leader.

At times, you may be asked to perform duties other than those to which you are regularly assigned. You should handle these duties with your usual promptness, diligence, a spirit of teamwork, and a good attitude. Your cooperation will be appreciated by all, but particularly by your fellow employees.

#### SERVICE

Our employees are the key to meeting our most important responsibility that of assisting individuals with mental retardation, autism, and head and spinal cord injuries to achieve their outcomes through person centered services. The success or failure of \_\_\_\_\_ will, in large part, rise or fall with the quality of the service that you and your fellow

employees render to consumers. Always remember that, and try to treat consumers how you would want to be treated.

## ELECTRONIC COMMUNICATIONS

The agency's computer, electronic, telephone, and voice mail systems are intended for the sole purpose of supporting the agency's management, information, and operational needs. Accordingly, the agency's computers should be used only for business-related purposes.

Business-related information contained in the agency's computer system, including electronic mail, is considered confidential. Consequently, information contained within the system should be disclosed only to authorized employees.

Employees do not have a personal privacy right to any matter created, received, or sent through electronic or voice mail. Employees should have no expectation of privacy regarding files and data residing on their assigned computer, disks, computer system, or voice mail.

The agency will monitor the computer, electronic, and voice mail systems to assure that the system is being used for business purposes. The agency may inspect the computer files on any computer or terminal at any time, with or without notice, at its sole discretion. The responsibility and authority to inspect computer files, computer terminals, electronic mail, and voice mail is vested in the Executive Director or his/her designate.

Only agency-authorized software is permitted in the agency's computers. The installation of non-agency computer programs is not allowed without the express permission of the information systems manager. Any software, files, and/or data loaded into the agency's computer network become the property of the agency. Any such files or software may be used only in ways that are consistent with their licenses or copyrights and should be restricted to those that have a particular business purpose.

No games of any type, other than those that were included on the system when installed, are permitted. To prevent computer viruses, all disks of any type should be scanned.

System users shall not abuse the privilege of access to the Internet. Sexually explicit images or documents may not be downloaded, displayed, stored, or otherwise accessed using the agency's information systems. Likewise, the agency's systems shall not be used to violate the law or download or distribute pirated information. Improper usage of the agency's information systems can lead to discipline up to and including discharge.

## ACCESS

\_\_\_\_\_ is a web-based service that provides for documentation and communication needs of the \_\_\_\_\_ in providing support to people with intellectual disabilities. It offers an easy and efficient alternative to the immense amount of paper work that is currently done by hand.

Permitted use of the \_\_\_\_\_ computer network: The computer network is the property of \_\_\_\_\_. Services and the equipment and information are the property of the \_\_\_\_\_. The computer network, equipment and information are to be used for legitimate business purposes. Users are provided access to the computer network to assist them in the performance of their jobs. Additionally, certain employees ("Users") may also be provided with access to the Internet through the computer network. All employees have a responsibility to use company computer resources, \_\_\_\_\_ and the Internet in a professional, lawful and ethical manner. Abuse of the computer network or the Internet may result in disciplinary action, including possible termination and civil and/or criminal liability. Each employee who is a designated user of \_\_\_\_\_ will sign a copy of this policy to be kept in his/her personnel file.

The following responsibilities are necessary for all employees that use the \_\_\_\_\_ system:

1. Electronic signature - Each employee shall choose a password of their choice to enable access to the system and to review activity tracking. The electronic signature tracks time and date stamps all your entries within \_\_\_\_\_. Employees shall NEVER give this password to any other employee. Violation of this policy shall result in immediate discipline up to and including termination.
2. Communication through \_\_\_\_\_ must be professional, accurate, sensitive, and respectful. If communication is not professional it will be considered an employee performance concern and is subject to disciplinary action.
3. The use of Secure Communication in sharing of sensitive information is strictly confidential. Any unauthorized sharing of such information may be considered a breach of confidentiality.
4. Users are given access to computers and \_\_\_\_\_ to assist them in the performance of their jobs. Users should have no expectation of privacy in anything they create, store, send or receive using the company's computer equipment. The computer network is the \_\_\_\_\_ property of the company and may be used only for company purposes.

5. The \_\_\_\_\_ has the right to monitor and log any and all aspects of its computer system including, but not limited to monitoring Internet sites visited by users, monitoring \_\_\_\_\_ access, monitoring chat and newsgroups, monitoring file downloads and all communications sent and received by users.

6. Hourly employees are prohibited from signing onto \_\_\_\_\_ during their unpaid time \_\_\_\_\_ unless authorized by their manager. Hourly employees are prohibited from signing onto \_\_\_\_\_ at a location other than one considered company property unless authorized by their supervisor. Violations of the above shall result in immediate discipline up to and including termination.

7. All employees with direct support responsibilities are required to clear the First Page or \_\_\_\_\_ Dashboard of their \_\_\_\_\_ account each day at the beginning of their shift of all numbers, \_\_\_\_\_ which are notifications of new information about the individuals in their care or important communications from the agency.

This policy is to establish the use of \_\_\_\_\_. The policy is intended to provide the \_\_\_\_\_ with the ability to comply with CMS Electronic Signature Guidance, Health Insurance Portability & Accountability Act of 1996 (HIPAA), Uniform Electronic Transactions Act (UETA) and E-SIGN (The Electronic Signatures in Global and National Commerce Act), and compliance guidelines and requirements for the use and storage of electronic data records for the agency. The agency's electronic data records in \_\_\_\_\_ will be made available via a special access account for review and will be retrievable for authorized state survey team members, auditors and investigative staff. All \_\_\_\_\_ modules will be made available for review, including activity tracking, secure communications, archive data, management reports, GER (Incident Reports), behavior data, eMAR, personal finance, IP and ISP Data and health tracking, billing information, staff training records, T-Log notes, periodic reports, etc.

Procedures:

Agency staff will be trained in the following procedures:

1. Protected Health Information (PHI) of individuals should always be communicated securely, for example using secure HTTPS, a cryptographically secured protocol and \_\_\_\_\_ interfaces.

2. Staff will be instructed in the authorized use of PHI for the individuals in their care and not to discuss confidential information outside of their place of employment.



3. Users need to proceed with caution when they are saving electronic files containing PHI \_\_\_\_\_ or files exported from \_\_\_\_\_ to Excel or PDF in a shared computer.
4. Users should not share their personal login information with others.
5. Users should not write down their login information on paper or save them in an electronic file that can be accessed by other users.
6. Provider Administrators will establish a password policy for the agency.
7. While accessing the system from a shared computer or a public place, users should not leave the computer screen unattended, and delete all information from those computers, including clearing caches, cookies and temporary files.
8. All agency employees are advised to not store data on agency or personal computers, laptops or other storage devices; the files containing PHI should be deleted after the work has been completed.
9. Management Reports, Behavior Information, Nursing, Summary Reports and other \_\_\_\_\_ reports containing PHI may be printed or copied for use as required for agency business, as provided in state or federal regulation and agency policy.

Provider administrators will be trained by \_\_\_\_\_ staff in the use and management of electronic data within the secure database. These selected Provider Administrators are the persons responsible for proper assignment of access privileges to users, setting up password policies and activating/deactivating user accounts. They will be required to have a clear understanding and sound knowledge about the various application capabilities and the underlying HIPAA regulations and E-sign policy. These include:

**Access Control:** Administrators are responsible for assigning proper roles and privileges to users to grant them access to the system while at the same time restricting that access only to the information they are authorized to see. Provider Administrators are also responsible for updating these access privileges assigned to users in accordance with their changing job responsibility and authority.

**Implement Password Policy:** Provider Administrators are able to set up and implement a suitable password policy for the agency by specifying a number of properties including the minimum length, number of letters, digits, and special characters required and the policy regarding the expiration period of passwords. The Agency shall not record, inquire of any employee or assign passwords to employees. The agency may reset a temporary password at the request of an individual employee who has been locked

out of the system. The employee will be prompted and requested to reset their temporary password by the \_\_\_\_\_ System.

**Managing User Accounts:** Provider Administrators are responsible for creating and activating \_\_\_\_\_ accounts for employees and providing them with the login information they need to access these accounts. Provider Administrators will instruct new account holders to choose a new password for themselves once they start using the system. If a user forgets his password, login name or provider code, they will have to go to their respective Provider Administrators to collect this information (\_\_\_\_\_ Customer Support will not alter or supply users' login information, except for agency Provider Administrators.) Providers Administrators may also disable an employee's user account when they are leaving the organization, on extended leave, or administrative leave.

**Assignment of Roles and Caseloads:** \_\_\_\_\_ implements a multilevel access mechanism based on roles and individuals. Providers can specify the level of access available to a particular user of the system and grant permission accordingly. This only allows users to have access to information they are authorized to work with. Provider Administrators shall assign each user a specific list of roles for access privileges as well as access to a specific caseload(s) of individuals based upon their need to know access and level of responsibility for those individuals.

**Access to \_\_\_\_\_ during Non-Work hours:** All Non-Exempt and Direct Care Employees shall be instructed not to access \_\_\_\_\_ during non-scheduled work hours. Employees are not required by the agency and are not authorized to access the Web-Based Electronic Data Management System during non-scheduled work hours.

**Message Integrity:** All communications between end users browser and the \_\_\_\_\_ application is carried over HTTPS, a cryptographically secured protocol. No third party can modify the data transferred. No user can modify the data stored in \_\_\_\_\_, without going through the application. The data is stored in multiple secured locations, guaranteeing its safety from natural and manmade disasters.

**Secure Sockets Layer (SSL):** SSL is the international standard used to ensure protection of data during transmission over the Internet. SSL provides endpoint authentication and communications privacy over the Internet using cryptography. The protocols allow client/server applications to communicate in a way that is designed to prevent eavesdropping, tampering and message forgery. Called communications from the user to the \_\_\_\_\_ system use SSL and thus are secure during transmission.

**Non Repudiation:** As the data is stored securely, no user can access the data without proper privilege and audit trail (activity tracking) and no user can deny the association of his/her identity with a document stored in \_\_\_\_\_.

User Authentication: All users, including \_\_\_\_\_ staff, must authenticate with a unique login name and a secret password to gain access to the system.

Session Expiration: \_\_\_\_\_ has a session expiration mechanism such that a session expires when a user has not used the system (i.e., has not hit any key on the keyboard or clicked on a button on the form) for half an hour before starting to enter information again. The system displays a countdown message for 5 minutes before the session actually expires; if the user wants to resume work they can cancel the expiration by simply clicking a button on the countdown message. This is a security feature that prevents unauthorized people from using your login in cases where users may have left the program without logging out.

Altering over Non-Secure Media. One challenge to security is the use of non-secure media, such as email, text messaging, and paging. The \_\_\_\_\_ system assures that no Protected Health Information is transmitted over these media, while still providing a flexible alerting mechanism. For example users may configure their notification properties to receive email or text messages that would let them know about critical incident reports being filed without revealing any Protected Health Information.

Tracking User Activities: Provider Administrators are able to track all users' activities by using the \_\_\_\_\_ Activity Tracking module. The module is equipped with the capability to record and report on activities of all user accounts within an agency. The Activity Tracker shall record all Users accessing the system, time, date, login name, User Name, IP address used to access the system, all activity, including viewing of information, creation or modification of any and all data or records. Provider Administrators with this role or option can detect any attempts to breach the system security (failed login attempts) and other misuse. The \_\_\_\_\_ system is monitored by security systems and staff for unusual activity within the accounts. \_\_\_\_\_ Services will provide training and support materials for Provider Administrators to learn about these and other HIPAA compliant \_\_\_\_\_ features, as needed.

Staff Training: The agency will provide training of all new employees in the use of \_\_\_\_\_, methods and requirements for documentation and the use of searches, summary data and reports for all modules. Online training, "walkabouts", automated training, webinars, a User Guide, online help, Feedback, FAQs, etc., are available for all users on: [www.\\_\\_\\_\\_\\_.Services.net](http://www._____.Services.net)

Clear to Zero: All employees with direct support responsibilities are required to clear the First Page or Dashboard of their \_\_\_\_\_ account each day at the beginning of their shift of all numbers, which are notifications of new information about the individuals in their care or important communications from the agency. The employee's First Page or Dashboard can be cleared by opening and reading all information contained in these links. The employee is responsible for all information contained in these

communications and the \_\_\_\_\_ system does record that these items that have been viewed and acknowledged by the employee.

**Printable Format or Record Access:** All information contained with The Electronic Data Management System (\_\_\_\_\_) is printable and can be reproduced upon request for any quality monitor, licensing staff, survey team, auditor or guardian upon request.

**Readily Accessible:** The Electronic Data Management System (\_\_\_\_\_) shall be accessible to any authorized person including licensing staff, investigators, surveyors, auditors and monitors upon request, twenty-four hours per day. The Provider Administrator of the agency can provide immediate and complete access to the electronic records of all individuals to an authorized person, through online access and remote approval. The list of Provider Administrators for the agency is available to all employees under their "My Account" section located on their First Page or Dashboard.

**Deletion of Information:** The Electronic Data Management System (\_\_\_\_\_) shall maintain all data submitted by the Users, in the original form, and as approved, updated or modified, all versions of reports, data and information shall be archived and retrievable. Any sensitive or confidential documents (Abuse, Neglect, Unlawful Acts, etc.) shall be available upon request by authorized persons to review and may be accessed online with restricted access. Records and data shall not be deleted from the system; any such requests for the deletion of any information shall be recorded and accessible to auditors,

investigators and appropriate authorities. This information shall be recorded in the Provider Administrators' Secure Communications, and shall contain a written explanation of the request, with identification of the User making the request, date and time, data information, and Form ID number.

**Electronic Communications Systems:** Computers owned, leased or otherwise maintained by \_\_\_\_\_ are intended for use by qualified and authorized personnel and only in the conduct of official business.

It is important that every employee understand that all electronic communication systems used while at work, including but not limited to the Internet, telephone systems and e-mail, as well as all information transmitted, received or stored in these systems are the property of \_\_\_\_\_. The agency needs to be able to access and/or disclose any information in the electronic communication system, even those protected by your personal password, at any time, with or without notice to the employee. Employees have no expectation of privacy in connection with the use of these systems or the transmission, receipt or storage of information in such systems. Therefore, employees should not use

these electronic communication systems to store or transmit any information that they do not want management and/or other employees to see, hear or read.

Employee's communication through these electronic communication systems must be handled in a professional and ethical manner since it reflects on \_\_\_\_\_ and the people we support. Nothing should be communicated through the electronic communication system that would be inappropriate in any other medium or form of business communication. Specifically, the electronic communications systems are not to be used in a way that may be disruptive, illegal, offensive to others or harmful to morale. Each employee is responsible for abiding by copyright and trade secret laws in the use and transmission of information.

The use of derogatory, inappropriate, discriminatory and/or non-professional communication, including but not limited to slander, harassment of any type (sexual, racial, etc.) or obscenity is prohibited. Similarly, there is to be no display or transmission of sexually explicit images, messages or cartoons.

All data contained in this system is Company property and should not be disclosed, accessed or manipulated for any purposes other than official business. No attempt should be made to override or deceive any security precautions assigned to the computer system. Employees are required to keep their passwords confidential, change them on a regular basis and to comply with all security procedures. The unauthorized use of a password or the unauthorized access to or retrieval of information transmitted or stored in the electronic communications system is prohibited.

**PURPOSE:** The purpose of this policy is to provide guidance in the access of \_\_\_\_\_, an \_\_\_\_\_ electronic data management system for documentation and file management.

\_\_\_\_\_ is a web-based service that provides for documentation and communication needs of the \_\_\_\_\_ in providing support to people with intellectual disabilities. It offers an easy and efficient alternative to the immense amount of paper work that is currently done by hand.

Permitted use of the \_\_\_\_\_ computer network: The computer network is the property of \_\_\_\_\_ Services and the equipment and information are the property of the \_\_\_\_\_. The computer network, equipment and information are to be used for legitimate business purposes. Users are provided access to the computer network to assist them in the performance of their jobs. Additionally, certain employees ("Users") may also be provided with access to the Internet through the computer network. All employees have a responsibility to use company computer resources, \_\_\_\_\_ and the Internet in a professional, lawful and ethical manner. Abuse of the computer network or the Internet may result in disciplinary action, including possible termination and civil and/or criminal

liability. Each employee who is a designated user of \_\_\_\_\_ will sign a copy of this policy to be kept in his/her personnel file.

The following responsibilities are necessary for all employees that use the \_\_\_\_\_ system:

1. Electronic signature - Each employee shall choose a password of their choice to enable access to the system and to review activity tracking. The electronic signature tracks time and date stamps all your entries within \_\_\_\_\_. Employees shall NEVER give this password to any other employee. Violation of this policy shall result in immediate discipline up to and including termination.

2. Communication through \_\_\_\_\_ must be professional, accurate, sensitive, and respectful. If communication is not professional it will be considered an employee performance concern and is subject to disciplinary action.

3. The use of Secure Communication in sharing of sensitive information is strictly confidential. Any unauthorized sharing of such information may be considered a breach of confidentiality.

4. Users are given access to computers and \_\_\_\_\_ to assist them in the performance of their jobs. Users should have no expectation of privacy in anything they create, store, send or receive using the company's computer equipment. The computer network is the property of the company and may be used only for company purposes.

5. The \_\_\_\_\_ has the right to monitor and log any and all aspects of its computer system including, but not limited to monitoring Internet sites visited by users, monitoring \_\_\_\_\_ access, monitoring chat and newsgroups, monitoring file downloads and all communications sent and received by users.

6. Hourly employees are prohibited from signing onto \_\_\_\_\_ during their unpaid time unless authorized by their manager. Hourly employees are prohibited from signing onto \_\_\_\_\_ at a location other than one considered company property unless authorized by their supervisor. Violations of the above shall result in immediate discipline up to and including termination.

7. All employees with direct support responsibilities are required to clear the First Page or Dashboard of their \_\_\_\_\_ account each day at the beginning of their shift of all numbers, which are notifications of new information about the individuals in their care or important communications from the agency.

EFFECTIVE: FEBRUARY 23, 2015

REFERENCE: TIME CLOCK PLUS POLICY  
POLICY: 1.3.2.4

PURPOSE: The purpose of this policy is to provide guidance in the access of Time Clock Plus, an electronic time keeping system for documentation and file management.

Time Clock Plus is a web-based service that provides time keeping and the leave request needs of the \_\_\_\_\_ in providing support to people with intellectual disabilities. It offers an easy and efficient alternative to the immense amount of paper work that is currently done by hand.

Permitted use of the Time Clock Plus computer network: The computer network is the property of Time Clock Plus Services and the equipment and information are the property of the \_\_\_\_\_. The computer network, equipment and information are to be used for legitimate business purposes. Users are provided access to the computer network to assist them in the performance of their jobs. Additionally, certain employees ("Users") may also be provided with access to the Internet through the computer network. All employees have a responsibility to use company computer resources, Time Clock Plus and the Internet in a professional, lawful and ethical manner. Abuse of the computer network or the Internet may result in disciplinary action, including possible termination and civil and/or criminal liability. Each employee who is a designated user of Time Clock Plus will sign a copy of this policy to be kept in his/her personnel file.

The following responsibilities are necessary for all employees that use the Time Clock Plus system:

1. Electronic signature - Each employee shall choose a password of their choice to enable access to the system and to review activity tracking. The electronic signature tracks time and date stamps all your entries within Time Clock Plus. Employees shall NEVER give this password to any other employee. Violation of this policy shall result in immediate discipline up to and including termination.
2. Communication through Time Clock Plus must be professional, accurate, sensitive, and respectful. If communication is not professional it will be considered an employee performance concern and is subject to disciplinary action.
3. The use of Secure Communication in sharing of sensitive information is strictly confidential. Any unauthorized sharing of such information may be considered a breach of confidentiality.
4. Users are given access to computers and Time Clock Plus to assist them in the performance of their jobs. Users should have no expectation of privacy in anything they

create, store, send or receive using the company's computer equipment. The computer network is the property of the company and may be used only for company purposes.

5. The \_\_\_\_\_ has the right to monitor and log any and all aspects of its computer system including, but not limited to monitoring Internet sites visited by users, monitoring Time Clock Plus access, monitoring chat and newsgroups, monitoring file downloads and all communications sent and received by users.

6. Hourly employees are prohibited from signing onto Time Clock Plus during their unpaid time unless authorized by their manager. Hourly employees are prohibited from signing onto Time Clock Plus at a location other than one considered company property unless authorized by their supervisor. Violations of the above shall result in immediate discipline up to and including termination.

#### TERMINATION OF EMPLOYMENT

We hope you will be with us for a long time, but if you choose to terminate your employment, please give your supervisor as much notice as possible - preferably a minimum of two weeks. When giving your two-weeks notice, annual leave or sick leave should not be used in lieu of notice. If you do not give two weeks notice of your intent to leave the agency, you may not be eligible for re-employment at a later date.

If the employee's decision to terminate is based on a situation that could be corrected, the employee is encouraged to discuss it with his/her supervisor or Human Resources before making a final decision.

At the time of your employment termination, a representative from Human Resources will meet with you to conduct an exit interview. At that time, the details of your leaving will be discussed, arrangements for your final paycheck will be made, and information regarding your insurance coverage and other information relative to your employment will be explained to you.

Employees must return all agency property, including identification badges, keys, and manuals to their supervisor or Human Resources on or before their last day at work. Failure to do so will result in such sums being deducted from your final paycheck.