

# The Meaning of the Employee Engagement of Thai Public Hospitals under the Ministry of Public Health (MOPH)

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## Abstract

The objectives of this study are to explore the meaning of the employee engagement of Thai public hospitals in the Thai context and to investigate the factors that promote the employee engagement of Thai public hospitals under the Ministry of Public Health (MOPH). This study employed a qualitative phenomenological approach. The data were collected through semi-structured interviews and participatory observations with 13 medical doctors, 15 general support employees, 15 medical support employees, and 15 nurses from three different hospitals across MOPH-owned hospitals, including community, general, and regional hospitals. Conventional content analysis, the frequency count occurrences of words, along with the five stages of inductive data analysis were applied for the analysis of the data.

The findings revealed 5 common components of the meaning of employee engagement, including positive emotion, wholehearted effort, organization accomplishment, desired behavior, and stay. The findings explored 16 factors that promoted employee engagement, which were categorized into 3 levels, including individual, group, and organization levels. The five factors at the individual level were personal resources, feeling important, relationship with colleagues, prolonged stay, and patient well-being. The three factors at the group level were collaboration, perceived supervisor support, and team work. The eight factors at the organization level included hospital image, job characteristics, family-like work climate, job security, leader, compensation, welfare, and learning and development opportunity.

**Keywords:** Employee engagement, Factor of employee engagement

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## ความหมายของความผูกพันของพนักงานในโรงพยาบาล สังกัดกระทรวงสาธารณสุขในประเทศไทย

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### บทคัดย่อ

วัตถุประสงค์เพื่อ หาความหมายของความผูกพันของพนักงานในโรงพยาบาลรัฐบาลในบริบทของคนไทย และหาปัจจัยที่ส่งเสริมความผูกพันในโรงพยาบาลสังกัดกระทรวงสาธารณสุข โดยใช้การวิจัยเชิงคุณภาพเชิงปรากฏการณ์วิทยา ใช้ข้อมูลจากการสัมภาษณ์แบบกึ่งโครงสร้างและการสังเกต จากกลุ่มตัวอย่างที่เป็นแพทย์ 13 คน พนักงานสนับสนุนทั่วไป 15 คน พนักงานสนับสนุนการแพทย์ 15 คน และพยาบาล 15 คน ใน 3 โรงพยาบาลสังกัดกระทรวงสาธารณสุข ได้แก่ โรงพยาบาลชุมชน โรงพยาบาลทั่วไป และโรงพยาบาลศูนย์ การวิเคราะห์ข้อมูลใช้วิธีวิเคราะห์เนื้อหาแบบดั้งเดิม การนับความถี่ของคำ และ 5 ขั้นตอนการวิเคราะห์ข้อมูลแบบอุปนัย

ผลการวิจัยพบว่าความหมายของความผูกพันของพนักงานมี 5 องค์ประกอบคือ ความรู้สึกเชิงบวก ความมุ่งมั่นอย่างเต็มที่ ความสำเร็จขององค์กร พฤติกรรมที่ต้องการในองค์กร และการอยู่กับองค์กร และพบ 16 ปัจจัยที่ส่งเสริมความผูกพันของพนักงานซึ่งจำแนกเป็น 3 ระดับ ได้แก่ บุคคล กลุ่ม และองค์กร ปัจจัยระดับบุคคลมี 5 ปัจจัย คือ คุณสมบัติส่วนบุคคล ความรู้สึกว่าเป็นบุคคลสำคัญ ความสัมพันธ์กับเพื่อนร่วมงาน การอยู่กับองค์กรมาเป็นเวลานาน และความอยู่ดีมีสุขของคนไข้ ปัจจัยระดับกลุ่มมี 3 ปัจจัย คือ ความร่วมแรงร่วมใจ การรับรู้การสนับสนุนจากหัวหน้า และการทำงานเป็นทีม ปัจจัยระดับองค์กรมี 8 ปัจจัย คือ ภาพลักษณ์ของโรงพยาบาล ลักษณะงานบรรยากาศการทำงานที่เหมือนครอบครัว ความมั่นคงในหน้าที่การงาน ผู้นำ ค่าตอบแทน สวัสดิการ และโอกาสในการเรียนรู้และพัฒนา

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## Introduction

For over decades, employee engagement has been at the lead of management research and practice, and continues to be of interest to practitioners, consultants, researchers, and organizations due to its potential to contribute to an organization's competitive advantage (Saks, 2019). Many have claimed that employee engagement is a key driver for an organization's success (e.g. Anitha, 2014; Harter, Schmidt, & Hayes, 2002; Ram & Prabhakar, 2011). Employee engagement is an effective tool for helping hospitals for example gain a competitive advantage over others because employee engagement is linked to how employees contribute to the quality improvement of hospitals. Healthcare organizations that have highly-engaged employees provide quality and timely care, which reveals greater value for their clients and better financial performance (Lowe, 2012; Spurgeon, Mazelan, & Barwell, 2011).

In response to Thailand's 4.0 initiative, the Thai government has set a strategy to reform itself to become a Government 4.0 with the "Better Governance, Happier Citizens" slogan (Office of the Public Sector Development Commission Thailand, 2017). Correspondingly, the Ministry of Public Health has targeted Value-Based Healthcare 4.0, and one of the change strategies is to become an excellent service organization. Improving the quality of the health service system has become a major priority for hospitals under the MOPH (Strategy and Planning Division, 2017a). Hospital accreditation (HA) is a healthcare facility accreditation system awarded to publically-owned and privately-owned hospitals by The Healthcare Accreditation Institute (Public Organization) or the HAI in Thailand. The HA process is creating collective organizational commitment to quality improvement (The Healthcare Accreditation Institute, n.d.).

Employee engagement plays a significant role in the quality improvement of hospitals in Thailand as employee engagement has been set as one of the seven areas for self-assessment and continuous improvement of hospital quality under the I-5 Human Resource Focus (HRF) of the Hospital Accreditation (HA) standard, which has been used to drive quality improvement for hospitals in Thailand since 1997.

Employee engagement under the HA process focuses on how the hospital conducts organization engages, and compensates and motivates its employees to achieve organizational and personal success (Akaraborworn, Rurkkhum, & Yodrakang, 2014; The Healthcare Accreditation Institute, n.d.). Therefore, it is essential for hospitals to have engaged employees in driving hospital quality.

Although employee engagement has gained importance over the past two decades, a consistent understanding of employee engagement remains unclear, and two problems can be seen to have emerged. First is the variety of its definitions. To date, there has been ongoing debate, confusion, lack of consensus, and no unified definition of employee engagement (Macey & Schneider, 2008; Saks, 2019; Saks & Gruman, 2014; Schaufeli & Salanova, 2011; Shuck, Osam, Zigarmi, & Nimon, 2017; Shuck & Wollard, 2010). Different definitions of employee engagement are explained by different protocols (Kumar & Swetha, 2011), and how Thai employees define employee engagement has never been explored. Second is the dearth of knowledge about the individual antecedents of employee engagement. Wollard and Shuck (2011) have stated that the variables that contribute to the overall development of employee engagement are in doubt. Moreover, the focus of previous studies has not been directed on how employee engagement applies in the publically-owned, hospital-specific setting where the attitudes of employees are likely to directly affect the quality of the hospital (West & Dawson, 2012). Additionally, there is relatively little healthcare-specific evidence regarding the antecedents of engagement. The definition and measurement of employee engagement in healthcare then are still poorly understood (Simpson, 2009).

Lack of a common meaning, language, and understanding of employee engagement could lead Thai public hospitals under the MOPH to potential misinterpretation, misunderstanding, and sometimes misuse of the concept. Little knowledge of the individual antecedents of employee engagement and what variables contribute to the overall development of employee engagement have made it difficult for hospitals to find correct strategies to promote employee engagement.

## Objectives of This Study

- 1) To explore the meaning of the employee engagement of Thai public hospitals in the Thai context
- 2) To investigate the antecedent factors that promote the employee engagement of Thai public hospitals under the Ministry of Public Health in Thailand

## Literature Review

### Hospital sector in Thailand

In Thailand, there are 1,355 hospitals, comprising 1,047 publically-owned hospitals and 308 privately-owned hospitals. The MOPH owns 943 of the publically-owned hospitals, which accounting for about 70% of the total hospitals in Thailand (Strategy and Planning Division, 2017c). For privately-owned hospital, there are 23 hospitals that are listed in the Stock Exchange of Thailand (The Stock Exchange of Thailand, 2019).

Publically-owned hospitals in Thailand can be categorized into three main groups based on location and level of medical care, including community hospitals, general hospitals, and regional hospitals. Community hospitals provide primary medical care, which serves local populations in provincial districts or communities. General hospitals or provincial hospitals provide secondary medical care, and are located in major districts of provincial capitals. Regional hospitals provide tertiary medical care in four regions across Thailand that covers specialized consultative care, and usually on referral from primary or secondary medical care (Pagaiya & Noree, 2009; Strategy and Planning Division, 2017c).

Employees in the MOPH-owned hospitals can be grouped into four main occupations: medical doctors, general support employees, medical support employees, and nurses (Strategy and Planning Division, 2017b).

### The concepts and definitions of employee engagement

Kahn's (1990) study of personal engagement and disengagement at work was the first article in the engagement literature, and is one of the most influential

studies that introduced the employee engagement concept grounded in the organizational setting (Saks & Gruman, 2014; Shuck & Wollard, 2010). Kahn undertook two ethnographic studies simultaneously to examine the moments in which people bring or remove themselves from particular task behaviors, as well as the psychological conditions in which people are personally engaged with or disengaged from their work. Kahn found that when employees are engaged, they bring themselves cognitively, emotionally, and physically to their role performance. Moreover, employees employed and withdrawn their preferred-self based on three psychological conditions; namely, meaningfulness, safety, and availability (p. 705). Kahn defined engagement as “the simultaneous employment and expression of a person's ‘preferred self’ in task behaviors that promote connections to work and to others, personal presence (physical, cognitive, and emotional), and active, full role performances” (p. 700).

Contrary to the burnout literature, Schaufeli, Salanova, González-Romá, and Bakker (2002) viewed engagement and burnout as two different coins, rather than two different sides of the same coin. Schaufeli et al. claimed that engagement should be operationalized and should be measured independently with a different instrument. From this view, Schaufeli et al. defined engagement as “a positive, fulfilling, work-related state of mind that was characterized by vigor, dedication, and adsorption” (p. 74). Vigor was described as a high level of energy which employees invested in work, and dedication was described as a sense of enthusiasm and pride in one’s work. Finally, absorption was described as being entirely concentrated on one’s work.

Harter et al. (2002) were the first to examine employee engagement at the business unit level (Shuck & Wollard, 2010). They suggested that engagement occurred when individuals are connected to others emotionally and cognitively under certain conditions, and they defined employee engagement as “the individual’s involvement and satisfaction with as well as enthusiasm for work” (p. 269) and have further indicated that an engaged employee is the person that answers “yes” to all 12 questions on Gallup’s workplace questionnaire, known as

the Q12, or the Gallup Workplace Audit (GWA). The Q12 consists of a 12-item questionnaire that measures employees' perception of work characteristics and a five-point item scale that assesses overall satisfaction (Shuck & Wollard, 2010).

Saks (2006) was the first academic researcher that conceptualized and tested the antecedents and consequences of employee engagement (Eldor & Vigoda-Gadot, 2017). According to Saks, there are meaningful differences between job engagement and organizational engagement, as there are distinctions in the antecedents and consequences between them. For example, job characteristics were seen to affect job engagement but not organizational engagement. On the other hand, organizational engagement predicted organizational citizenship behavior directed toward the individual (OCBI), while job engagement did not. Saks defined employee engagement as "a distinct and unique construct that consists of cognitive, emotional, and behavioral components that are associated with individual role performance" (p. 602).

Through the process of synthesizing definitions, including examining the historical context and conceptual framework of engagement studies from 1990, Shuck and Wollard (2010) defined employee engagement as "an individual employee's cognitive, emotional, and behavioral state directed toward desired organizational outcomes" (p. 103). Shuck and Wollard highlighted that the proposed definition comprises the behavioral, cognitive, and emotional aspects of engagement derived from the employee's experience of engagement. Shuck and Wollard further claimed that the proposed definition is well-defined and suits business, organization leader, and scholarly research.

Finally, grounded in a systematic review of engagement literature and an interpretation of the common themes found in a literature review, Shuck et al. (2017) defined employee engagement as "a positive, active, work-related psychological state operationalized by the maintenance, intensity, and direction of cognitive, emotional, and behavioral energy" (p. 269).

### **Antecedent factors of employee engagement**

Job demands-resources (JD-R) model is one of the models that have been widely used to understand employee engagement. The JD-R model consists of three elements—the job demands, job resources, and personal resources that influence engagement (Xanthopoulou, Bakker, Demerouti, & Schaufeli, 2007). The basic principle of the JD-R model is that high job demands lead to stress, health damage processes, and disengagement. High job resources on the other hand lead to an increase in the work motivation process, productivity, and engagement. Personal resources mediate the relationship between job resources and engagement (Bakker, Demerouti, de Boer, & Schaufeli, 2003; Xanthopoulou et al., 2007).

Job demands refer to job aspects, including physical, psychological, social, or organizational aspects, which required sustained effort and skills of both physical and/or psychological (cognitive and emotional), which related with certain physiological and/or psychological cost. Job demands may turn into stress when these demands are imposed on employees (Bakker et al., 2003). Job demands include physical workload, time pressure, recipient contact, the physical environment, and shift work (Demerouti, Bakker, Nachreiner, & Schaufeli, 2001); workload and emotional demands (Schaufeli & Bakker, 2004); and workload, emotional demands, emotional dissonance, and organization change (Xanthopoulou et al., 2007).

Job resources refer to job aspects, including physical, psychological, social, or organizational aspects that are functional in achieving work goals, reducing the job demands that are associated with physiological and psychological costs, and stimulating personal growth, learning, and development (Bakker & Demerouti, 2007). Job resources may support either an intrinsic or an extrinsic motivation role. As intrinsic motivators, they fulfill basic needs, such as the need for autonomy. As extrinsic motivators, they are an instrument in achieving work goals. For these reasons employees became motivated, which leads to high engagement, low cynicism, and excellent performance because of the fulfillment of their job resources (Schaufeli & Taris, 2014). Job resources include feedback, rewards, job



control, participation, job security, and supervisor support (Demerouti et al., 2001); feedback, social support, and supervisory coaching (Schaufeli & Bakker, 2004); and autonomy, social support, supervisory coaching, and professional development (Xanthopoulou et al., 2007).

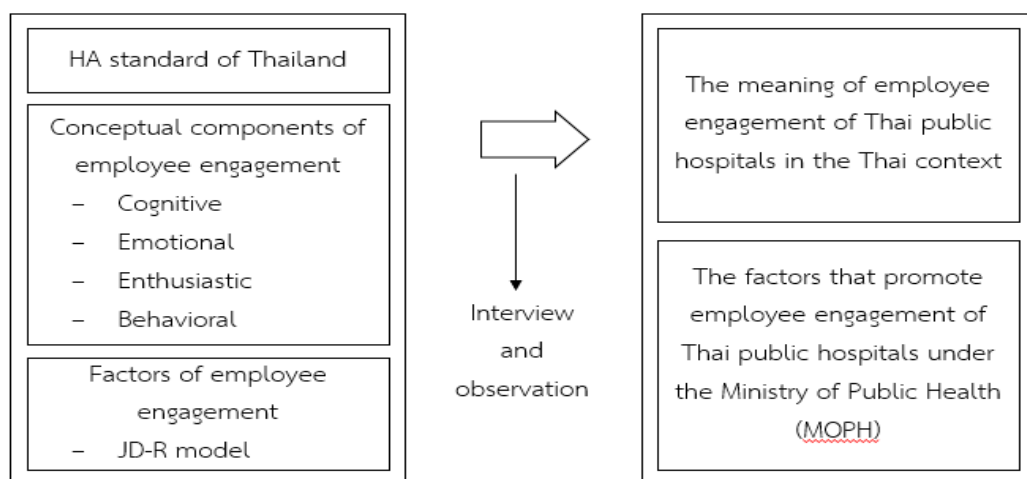
Personal resources refer to the aspects of an individual that are linked to resiliency, including an individual's sense of ability to control and impact his or her environment successfully. Personal resources include self-efficacy, organizational-based self-esteem, and optimism (Xanthopoulou et al., 2007).

## Conceptual Framework

In Thailand, Hospital Accreditation (HA) is a healthcare facility accreditation awarded to hospitals by the Healthcare Accreditation Institute (Public Organization) or HAI. The main purpose of the HAI is to promote a research mechanism that can improve the quality of the hospital standard system. The HA program emphasizes on-going self-assessment and continuous improvement, which eventually results in quality and safety in patient care. Employee engagement has been set as one of the seven areas for self-assessment and continuous improvement of hospital quality under the I-5 Human Resource Focus (HRF) of the HA standard of Thailand since 1997. Employee engagement under the HA standard of Thailand focuses on how a hospital engages, compensates, and motivates its employees to achieve organizational and personal success. A hospital can access employee engagement by using formal and informal methods that are appropriate for different groups of employees and hospital segments (The Healthcare Accreditation Institute, n.d.). In light of the literature review, the researchers found four common components of employee engagement that are shared in most of the definitions in seminal works, including cognitive, emotional, enthusiastic, and behavioral aspects. Moreover, a review of the literature suggested that the Job Demand-Resources (JD-R) model (Xanthopoulou et al., 2007) has been widely used to understand employee engagement. However, the focus of previous studies has not been directed to how employee engagement is applied in the publically-owned hospitals setting, and the

measurement of engagement in healthcare is still poorly understood (Simpson, 2009).

Therefore, the researchers proposed four common components of the employee engagement construct, including cognitive, emotional, enthusiastic, and behavioral aspects, and the JD-R model, the antecedent factors of employee engagement, as a foundation for further investigation. Subsequently, the researchers conducted interview sessions and performed participant observations in order to collect additional information and to verify the data from the Thai public hospitals in the MOPH context. The conceptual framework of the study is shown in Figure 1.



**Figure 1** The conceptual framework of the study

## Research Methodology

### Research method

Based on the nature of the topic and the objectives of the study, a qualitative phenomenological approach was applied as the research methodology (Maxwell, 2013). According to Jasper, “[t]he task of phenomenological research is to investigate and describe all phenomena, including human experience, in the way these phenomena appear” (Jasper, 1994, p. 309). The qualitative phenomenological

approach provides an opportunity for researchers to explore the meaningful, rich, in-depth, and specific-context meaning of employee engagement, as well as the antecedent factors of the employee engagement of Thai public hospitals under the MOPH explored from the employees' own voice.

### **Site and participant selection**

The researchers employed purposive sampling in this study. Hospital C was selected to represent community hospitals, hospital G was selected to represent general hospitals, and hospital R was selected to represent regional hospitals. These hospitals have been certified with HA accreditation. Through the HA National Forum arranged by HAI in 2014, the representative hospitals were recognized as hospitals that devoted high importance to the development of employee engagement.

In order to gain meaningful, rich, and in-depth information regarding the employee engagement phenomenon, the researchers considered highly-engaged employees. The key participants were recommended by the hospitals, and the researchers employed the snowball technique for the rest of the participants. Moreover, in order to ensure that the participants were familiar with the publically-owned hospital work climate, the researchers considered five years of service or more as one of the selection criteria.

Follow Dworkin (2012), who suggested that 5 to 50 participants are adequate for a qualitative study, the researchers involved 13 medical doctors (3 from hospital C, and 5 each from hospital G and R), 15 general support employees (5 each from hospital C, G, and R), 15 medical support employees (5 each from hospital C, G, and R), and 15 nurses (5 each from hospital C, G, and R). The total participants were 58 persons. Form 58 participants, there were 38 females and 20 males. The majority of the participants have worked in the current hospital for more than 20 years. A summary of the numbers of the participants, the representative hospitals, and the characteristics of the participants of this study can be seen in Table 1 and Table 2.

**Table 1** A Summary of the numbers of the participants and the representative hospitals

Hospital		Location	No. of beds	Employees			No. of participants
Type	Code			Occupations	Code	Numbers	
Community	C	Nakorn Ratchssima	60	Medical doctor	DR	19	3
				General support	GS	36	5
				Medical support	MS	118	5
				Nurse	NR	76	5
General	G	Khon Kean	250	Medical doctor	DR	32	5
				General support	GS	137	5
				Medical support	MS	107	5
				Nurse	NR	100	5
Regional	R	Bangkok	4,130	Medical doctor	DR	468	5
				General support	GS	1,152	5
				Medical support	MS	1,427	5
				Nurse	NR	1,083	5

**Table 2** Characteristics of the participants

Characteristics	Details	Numbers			
		Hospital C	Hospital G	Hospital R	Overall
Gender	Female	14	12	12	38
	Male	4	8	8	20
Years of service	5-10 years	3	4	3	10
	More than 10 up to 15 years	4	4	1	9
	More than 15 up to 20 years	5	4	4	13
	More than 20 years	6	8	11	26

### Research instrument and data collection

In this study, the researcher was the primary research instrument for the data collection, including the data analysis of the study findings (Creswell, 2012). The researcher's efforts in terms of bias mitigation were as follows.

First, the researcher applied the same interview protocol for all participants in order to prevent personal bias during the interview process (Pannucci & Wilkins, 2010). Second, the researcher implemented bracketing in order to eliminate personal bias by putting aside the researcher's own beliefs about the research topic (Creswell, 2012). The researcher went into the field with no pre-conceived attitudes or opinions, and looked at the exploratory factors that promoted or prevented

employee engagement with fresh eyes and never “jumped to a conclusion.” The researcher had no connection with the leader of the hospitals, so she had no influence on the participants in terms of providing information. Finally, the researcher was new to the public hospital environment, so she had no assumptions due to personal experiences (Pannucci & Wilkins, 2010).

The researchers collected data using semi-structured interviews and participatory observation. The data collection phase lasted from 28<sup>th</sup> June 2018 to 1<sup>st</sup> February 2019.

All 58 participants were interviewed face-to-face, one-on-one at the hospital at which the participants worked, and the average time of each interview was 41 minutes. An interview protocol was used for all participants, which consisted of 3 main questions connected to the objectives of the study, including: 1) the meaning of employee engagement; 2) the factors that promote employee engagement; and 3) a broad question for recommendations.

In this study, the role of the researchers’ role of observation was the observer as participant (irregular observation alongside interviewing, and the role of the researchers is known) approach. The researchers utilized field notes to record the data.

### **Data analysis**

In this study, the researchers applied an inductive approach, as well as conventional content analysis, as methods for analyzing the data (Thomas, 2006). Moreover, the researchers followed the five steps of inductive data analysis and reduction suggested by Creswell (2012), which included data transcription, reading through all of the data, data coding, theme identification, and reporting the findings. For the data coding, the researchers utilized open coding as it suited the inductive research approach (Heath & Cowley, 2004).

For the theme identification, the researchers applied the frequency count occurrences of a word (Hannah & Lautsch, 2011; Miles & Huberman, 1994). Bengtsson (2016) suggested that it is also possible for a researcher to add quantification information in which themes and sub-themes are counted. By combining

quantification with a qualitative approach, the degree of the individual phenomena studied appeared more clearly.

Regarding the report of the findings, the researchers also included interview quotes in order to capture the feeling, emotions, and ways that the participants talked about employee engagement.

In order to promote content validity, during the interview, the researcher performed member checking by restating or summarizing the information that the researcher received from the participant and asked him or her to determine the accuracy (Creswell, 2012). Moreover, after transcribing the data, the researcher presented the data to the participants and received their agreement on the correctness of the data.

## Research Findings

### The meaning of employee engagement

After analyzing the data described by the 58 participants, there were 143 clauses referring to the meaning of employee engagement, which were gathered according to 5 major themes, listed in frequency order: 1) positive emotion, 2) wholehearted effort, 3) organization accomplishment, 4) desired behavior, and 5) stay.

#### 1) Positive emotion

Positive emotion refers to a positive feeling that an employee has toward the surroundings in the workplace. Out of 143, 72 clauses or an equivalent of 50.35% were allocated to the positive emotion theme. For example, G-MS1 (personal communication 11<sup>th</sup> September 2018) defined employee engagement as follow: “It is a feeling that I work happily. For me, work is professionalism. Therefore, my employee engagement comes from love that I have toward my job, honor that I have toward my job. To do your best is the way that we give honor to our profession.” Moreover, there were 10 sub-themes explored from the data, including the following: 1) love, 2) happiness, 3) profound relationship, 4) understanding, 5) goodwill, 6) heart giving, 7) positive feeling, 8) pride, 9) satisfaction, and 10) sense of belonging.

Regarding the sub-themes, love refers to a strong feeling of profound affection of an employee toward something in the hospital. Happiness refers to the extent of an employee being content. Profound relationship refers to a positive feeling, as well as a state of being connected intensely with an employee. Understanding refers to a perception or judgment of a fact. Goodwill refers to a generous opinion of an employee. Heart giving refers to the extent that an employee does something for the organization wholeheartedly. Positive feeling refers to the pleasant emotional state of mind of an employee. Pride refers to a deep pleasure resulting from achievements. Satisfaction refers to a pleasurable emotional state of mind, or the fulfillment of the needs or expectations of an employee. The sense of belonging refers to the extent that an employee feels that he or she is part of the organization's success.

## **2) Wholehearted effort**

Wholehearted effort refers to the intention of an employee to complete his or her duty completely and efficiently, and the extent to which an employee works beyond his or her duty unconditionally. Out of 143, 28 clauses or an equivalent of 19.58% were denoted as belonging to the wholehearted effort theme. For example, R-DR1 (personal communication 28<sup>th</sup> June 2018) defined employee engagement as follows: "It is the extent that employees in the organization work efficiently with happiness."

Moreover, the wholehearted effort theme was supported by observation. The research observed that one of the medical doctors arrived at the meeting room and asked loudly if the chairperson had arrived. Once he knew that the chairperson had not yet arrived, he told the meeting coordinator that he would go back to his room to continue the examination. He mentioned that there were a few patients remaining. He asked the meeting coordinator to call him if the chairperson arrived. He said, while he was waiting for the chairperson, it would be great if he could clear up the remaining patients; otherwise they would have to wait one more hour or until the meeting was completed. He insisted to the meeting coordinator that he would come back to the meeting room immediately once the chairperson arrived—just let him know.

### 3) Organization accomplishment

Organization accomplishment refers to the organizational outcomes as well as the reputation of the organization that an employee cares about and is willing to achieve. Out of 143, 17 clauses or an equivalent of 11.89% fit the organization accomplishment theme. For example, C-GS3 (personal communication 17<sup>th</sup> July 2019) defined employee engagement as follows: “It is something that I always think about our organization, compares like I desired to see the accomplishment and sustainability of my organization...”

The organization accomplishment theme was also supported by observation. During an observation in the out-patient section of the hospital R, the researcher heard a cashier call for a queue on a microphone for patients to make payments by using a sweet voice. The researcher had never heard this in any public-owned hospitals or not even in privately-owned hospitals. From the researcher’s viewpoint, the tone that the cashier used was similar to an announcement in a luxury hotel or department store which is intended to satisfy the listener. This observed event supported the employee engagement phenomenon, where engaged employees care about the reputation of the hospital and desire to contribute to the hospital’s accomplishments.

### 4) Desired behavior

Desired behavior refers to the chosen behavior that an employee exhibits in the workplace that promotes employee engagement. Out of 143, 14 clauses or an equivalent of 9.79% belonged to desired behavior theme. For example, G-GS2 (personal communication 12<sup>th</sup> September 2018) defined employee engagement as follows: “Employee engagement is dedication and sacrifice, which is not limited to only my team, but also for other sections. I do whatever I can to make people think of me the first when they have a problem.” Moreover, there were 6 sub-themes explored from the data, including 1) altruism, 2) harmony, 3) consciousness, 4) honesty, 5) sacrifice, and 6) team work.

Again regarding the sub-themes, altruism refers to the extent that an employee interpersonally helps and cares for other employees. Harmony refers to being in unity and in a balanced interrelationship with an employee. Consciousness



refers to the awareness of an employee in performing his or her job and being focused on the job. Honesty refers to the extent that an employee performs his or her work straightforwardly. Sacrifice refers to the extent that an employee does things for the benefit of the organization rather than his or her own benefit. Team work refers to the extent that employees work together as one group.

### 5) Stay

Stay refers to the willingness of an employee to work in the organization continuously and happily. Out of 143, 12 clauses or an equivalent of 8.39% referred to the stay theme. For example, C-DR2 (personal communication 19<sup>th</sup> July 2018) defined employee engagement as follows: “The first thing is the willingness to stay with the organization and never want to move. The second thing are love and faith toward the organization.”

Moreover, in this study, the participants stated that they experienced positive emotion, especially love and happiness, toward their surroundings in the workplace. Moreover, they employed the desired behaviors that promoted employee engagement, such as altruism, consciousness, harmony, honesty, sacrifice, and team work. Additionally, they performed their duty efficiently and exerted effort to work beyond their duty wholeheartedly. In addition, they cared about their organization’s reputation and desired to drive and be a part of the organization’s accomplishment, so they were willing to stay with the organization. Furthermore, they indicated that employee engagement was embedded in themselves and manifested in the form of love and happiness, so they enjoyed their work life. Therefore, they stayed with the organization happily, had no intention to leave it, and every day they desired to come to work.

In this study, the researcher defined the employee engagement of Thai public hospitals under the MOPH in terms of affective relations in one’s work life operationalized by the degree of positive emotion, wholehearted effort, the ambition to see that the organization achieves its goals, desired behavior employment, and the willingness to stay happily with the organization.

## **The factors that promoted employee engagement of Thai public hospitals under the MOPH**

After analyzing the data described by the 58 participants, there were 222 clauses referring to the factors that promoted employee engagement, which were categorized into 3 levels—the individual level, group level, and organization level.

### **1) Factors at the individual level that promoted employee engagement**

Out of 222 clauses, 85 or an equivalent of 39.28% referred to the factors at the individual level, which were grouped according to 5 themes, listed in frequency order: 1) personal resources, 2) feeling important, 3) relationship with colleagues, 4) prolonged stay, and 5) patient well-being.

#### **(1) Personal resources**

Personal resources refer to the aspects of an employee's self, which were a major element of an employee's adaptability, or a sense of the ability of an employee to control and have an effect upon his or her environment effectively. Out of 85, 26 clauses or an equivalent of 30.59% mentioned the personal resources theme. For example, C-NR5 (personal communication 18th July 2018) stated that she was flexible, and had no problem with any job assigned to her. As a result, she was happy, which ultimately built her employee engagement. Moreover, there were 3 sub-themes explored from the data: 1) flexibility, 2) self-esteem, and 3) self-actualization.

#### **(2) Feeling important**

Feeling important refers the extent to which an employee feels valued and visible to the organization. It includes the extent to which an employee is involved in important projects, so that an employee is praised and proud of his or her achievements. Out of 85, 24 clauses or an equivalent of 28.24% mentioned the feeling important theme. For example, R-NR1 (personal communication 28th June 2018), who received second honor for the best employee award, shared the idea that she was proud of the unexpected prize. As a result, she perceived that she was an important person for the hospital.

### **(3) Relationship with colleagues**

Relationship with colleagues refers to a positive emotion or a mental connection that an employee has toward his or her colleagues. Out of 85, 18 clauses or an equivalent of 21.18% fit the relationship with colleagues theme. For example, G-NR5 (personal communication 14th September 2018) mentioned that she could talk to her colleagues about anything, and she felt that her colleagues loved her. As a result, she was happy and wanted to come to work.

### **(4) Prolonged stay**

Prolonged stay refers to the long years of service that an employee has given to the organization. The participants described that their employee engagement developed gradually over time. Out of 85, 9 clauses or an equivalent of 10.59% denoted the prolonged stay theme. For example, C-DR3 (personal communication 19th July 2018) mentioned prolonged stay when he was asked about a factor that promoted his employee engagement. C-DR3 shared the following: "I have been working here for a long time. I feel like the longer I work the more engagement...it is gradually increased and increased."

### **(5) Patient well-being**

Patient well-being refers to the extent that a hospital's employee has an appreciation for the patient's physical health, happiness, and prosperity, including mental health, being comfortable, and life satisfaction due to the quality care that the employee provides to the patient. Out of 85, 8 clauses or an equivalent of 9.41% referred to the patient well-being theme. For example, R-DR3 (personal communication 9th August 2018) stated the following: "The factor that promotes my employee engagement is my patient. I feel good to see that they recovered and be healthier. They can live their life with their family as a normal person. Each time of the following up session, I am so glad to see them again, some patients make up, dress up, which means that their morale is also healthy."

Moreover, the patient well-being was supported by observation. One day early in the morning, the researcher was in the out-patient section, and it was a crowded day. The researcher saw one of the hospital employees standing in front of the patients, talking on a microphone to entertain them while they were waiting for

a doctor. She shared the experience of her illness, how she recovered, and how to prevent it. Moreover, she sang songs and led a stretching exercise. She also provided information about the examination procedures so that the patients could be relaxed. The researcher learnt later that this event was arranged on a voluntary basis. This event supported the patient well-being factor, which according to the interview promoted employee engagement.

## **2) Factors at the group level that promoted employee engagement**

Out of 222, 32 clauses or an equivalent of 14.41% referred to the factors at the group level, which were grouped into 3 themes, listed in frequency order as follows: 1) collaboration, 2) perceived supervisor support, and 3) team work.

### **(1) Collaboration**

Collaboration refers to the extent that an employee provides full support and helps others enthusiastically to complete individual tasks, and the department's and the organization's goals effectively. Out of 32, 19 clauses or an equivalent of 59.38% denoted the collaboration theme. For example, C-DR1 (personal communication 17th July 2018) was surprised and impressed when he saw employees of all levels, rather than the head of departments only, helping each other wholehearted to complete the HA accreditation.

### **(2) Perceived supervisor support**

Perceived supervisor support refers the extent that an employee feels that his or her immediate supervisor provides sponsorship and guidance, helps in problem-solving, and values the ideas and efforts of an employee. Out of 32, 8 clauses or an equivalent of 25.00% fit the perceived supervisor support theme. For example, R-GS1 (personal communication 7th August 2018) stated that her supervisor encouraged her to keep learning, developing, and to try with new things. She perceived that her supervisor cared about her career development.

### **(3) Team work**

Team work refers to the extent to which an employee helps others and works with others as one party. Out of 32, 5 clauses or an equivalent of 15.63% belonged to the team work theme. For example, R-DR1 (personal discussion 28th

June 2018) indicated the following: “It is different than the previous hospital that I worked with, in this hospital we work as a team. For example, if one of the doctors is absent, another doctor can take care of this patient continuously. I believe that this factor promotes my employee engagement, which I found short of it when I worked in the previous hospital.”

### **3) Factors at the organization level that promoted employee engagement**

Out of 222, 105 clauses or an equivalent of 47.30% referred to the factors at the organization level that promoted the employee engagement of the participants, which were categorized according to 8 themes, listed in frequency order as follows: 1) hospital image, 2) job characteristics, 3) family-like work climate, 4) job security, 5) leader, 6) compensation, 7) welfare, and 8) learning and development opportunity.

#### **(1) Hospital image**

Hospital image refers to a characteristic, or an inherent part of the hospital. Out of 105, 22 clauses or an equivalent of 20.95% belonged to the hospital image theme. For example, R-DR3 (personal communication 9th August 2018) shared the following idea: “I believe that there is a spirit embedded in an institution that is nearly 70 years old. I feel that I engaged with that. It is the identity of this hospital.”

#### **(2) Job characteristics**

Job characteristics refer to the aspects specific to a job or the task itself. Out of 105, 20 clauses or an equivalent of 19.05% fit the job characteristics theme. Moreover, there were 4 sub-themes explored from the data, including 1) responsibility, 2) challenging job, 3) autonomy, and 4) task variety. For example, R-GS4 (personal communication 20th September 2018) stated that “[i]t is my responsibility that makes me engaged. It compares like I carry the entire hospital with me. In the middle of the night, if I get a call from my team as they cannot solve the problem, I come to the hospital to help them solve the problem. I did all that because I love the hospital, I am engaged with the hospital, so I do things for the hospital.”

### (3) Family-like work climate

A family-like work climate refers to an employee's perception of the workplace's atmosphere. The participants felt as though they were at home when they were at work. Out of 105, 19 clauses or an equivalent of 18.10% fit the family-like work climate theme. For example, G-GS3 (personal communication 13th September 2018) shared the following: "When I am here, I feel like I am at home. It is warm, compare like we have parents, children, husbands who look after each other. Being here, my colleagues are like my family that I live my life with them. This is how I see my employee engagement."

### (4) Job security

Job security refers to the level of certainty an employee perceives about his or her job continuity. In this study, job security refers to the civil servant occupation. Out of 105, 11 clause or an equivalent of 10.48% belonged to the job security theme. For example, R-GS2 (personal communication 9th August 2018) expressed the notion that "[j]ob security is one of the factors that promotes my employee engagement. Being a civil servant is secured, no one want to fire you if you don't do anything wrong. Regardless of how high your salary, they will not fire you. On the contrary, if you work in the private sector, when your salary is high, they will throw you out. In that instance, you stay with the organization without engagement although your salary is high."

### (5) Leader

Leader refers to the head of the hospital that manages and leads the hospital in the desired direction. Out of 105, 11 clause or an equivalent 10.48% referred to the leader theme. For example, G-DR1 (personal communication 11th September 2018) stated the following: "Employee engagement here is a matter of how well of the hospital's leader in developing it. For example, when we have problems do upper levels see that? If they don't see that, it is comparable to a house that lack of parents to take care of the family member, to help to solve problems."

### **(6) Compensation**

Compensation refers to resources in financial form, such as basic salary, incentives, and overtime payment, which are paid to an employee in return for the work done. Out of 105, 9 clauses or an equivalent of 8.57% fit the compensation theme. For example, G-NR1 (personal communication 10th September 2018) was satisfied with the compensation that she receives. She perceives that it is aligned with her education level as well as her hierarchy in the hospital.

### **(7) Welfare**

Welfare refers to resources in financial and non-financial forms arranged by the organization and provided to an employee on top of compensation for reasonably comfortable, healthy, and secure living purposes. Out of 105, 8 clauses or an equivalent of 7.62% referred to the welfare theme. For example, R-GS1 (personal communication 28th June 2018) shared the following idea: “Welfare packages provided by the hospital are so good, especially the medical care service. It is very convenient, I can see a doctor any time. When I am healthy my moral is also good. All of these contribute to my employee engagement.”

### **(8) Learning and development opportunity**

Learning and development opportunity refers to the extent that an employee perceives that the employer provides enough and relevant learning and development opportunities. Out of 105, 5 clauses or an equivalent of 4.76% mentioned the learning and development opportunity theme. For example, G-NR1 (personal communication 10th September 2018) explained that the hospital set a budget for learning and development for all employees, and it was up to an individual to take a chance to develop themselves.

During the interview sessions, the researcher had lunch at the hospital’s canteen and observed that there were occasionally announcements from the pager system of the canteen. Most of the announcements were about training and development classrooms and events. Moreover, at the main information boards of the hospital, there was one big board devoted to training and development information. The letters and training brochures were neatly organized on the board, which was easy to read and attracted the readers. This observation supported the

interview findings—that learning and development opportunities promote employee engagement.

## Discussion

### The meaning of employee engagement

In this study, the researcher defined the employee engagement of Thai public hospitals under the MOPH in terms of affective relations in one's work life operationalized by the degree of positive emotion, wholehearted effort, the ambition to see that the organization achieves its goals, desired behavior employment, and the willingness to stay happily with the organization. As such, the meaning of employee engagement explored in this study consisted of 5 common components: 1) positive emotion, 2) effort, 3) organization accomplishment, 4) desired behavior, and 5) stay.

The positive emotion component is consistent with the concept of employee engagement proposed by Kahn (1990) and Saks (2006). In Kahn's study, he stated that engaged employees brought alive self and obligatory role, they physically involved in tasks cognitively, vigilant, and empathically connected to others. Correspondingly, May, Gilson, and Harter (2004) developed a measurement tool to access employee engagement defined by Kahn, and the items of measurement included the following: "I really put my heart into my job," and "My own feelings are affected by how well I perform my job."

The wholehearted effort component is consistent with the concept of dedication or effort defined by Macey and Schneider (2008), and Schaufeli, Salanova, González-Romá, and Bakker (2002), and the concept of cognitive and intellectual proposed by Kahn (1990) and Saks (2006). For example, Schaufeli et al. defined employee engagement as "a positive, fulfilling, work-related state of mind that is characterized by vigor, dedication, and adsorption" (p. 74).

The organization accomplishment component is consistent with the concept of employee engagement proposed by Macey and Schneider (2008); they defined employee engagement as "a desirable condition, has an organizational purpose, and connotes involvement, commitment, passion, enthusiasm, focused effort, and energy" (p. 4).



The desired behavior component is consistent with the concept of employee engagement proposed by Saks (2006), who defined employee engagement as “a distinct and unique construct that consists of cognitive, emotional, and behavioral components that are associated with individual role performance” (p. 602). However, from occupational perspective, among four occupation, there was none of a medical doctor mentioned desired behavior theme. This leave room for further studies of employee engagement among medical doctor occupation.

Regarding the stay component, the researchers found a shortage of previous study that included this component in the definition of employee engagement. This reflects a gap in employee engagement literature.

### **The factors that promoted employee engagement of Thai public hospitals under the MOPH**

#### **1) Factors at the individual level that promote employee engagement**

There were 5 factors at individual levels that promoted employee engagement explored in this study: 1) personal resources, 2) feeling important, 3) relationship with colleagues, 4) prolonged stay, and 5) patient well-being.

The personal resources factor is well connected to the personal resources dimension of the JD-R model (Xanthopoulou et al., 2007). Moreover, there were 3 sub-themes explored from the data: 1) flexibility, 2) self-esteem, and 3) self-actualization. The flexibility factor is consistent with the work of Pitt-Catsoupes and Matz-Costa (2008), who found that employees that can act flexibly match the organization's changes are significantly more engaged. The self-esteem factor is consistent with the concept of the organizational based self-esteem of Xanthopoulou, Bakker, Demeroutia, and Schaufeli (2009), who stated that employees with high organizational based self-esteem feel more capable in controlling the work environment, and they perceive themselves as important and worthwhile in their organization. Consequently, they are more confident in and proud of the work that they do, which in turn, engages them. The self-actualization factor is consistent with the fifth level of Maslow's (1943) hierarchy of needs. This level of needs refers to the realization of one's full potential, or the desire to accomplish everything that one can or become the most that one wants to be. Consequently, a person feels

worthwhile, useful, and valuable, so he or she chooses to be engaged (Shuck & Wollard, 2010).

The feeling important factor is comparable to the notion of meaningfulness of Kahn (1990). Kahn highlighted that employees are fully engaged when their “preferred self” (p. 700) is shown in the workplace, which identified as meaningfulness as individual was closely tied to self and identity. The empirical evidence of May et al. (2004) reported a positive relationship between Kahn’s dimension of meaningfulness and employee engagement.

The relationship with colleagues factor is consistent with the work of Kahn (1990), who explained that the interpersonal relations among employees that are supportive and trusting foster psychological meaningfulness. According to Kahn, meaningfulness should emerge to the extent to which employees’ interactions encourage a sense of belonging and a stronger sense of social identity. The empirical evidence of May et al. (2004) found that the relationships in the workplace, with respect to interpersonal interactions, had a significant impact on the meaningfulness components of Kahn’s engagement.

Regarding the prolonged stay factor, the researchers found contradictory findings in the literature. Jaupi and Llaci (2015) found a positive relationship between both years of experience in the organization and years of experience in the position with employee engagement, while Bentein, Vandenberghe, Vandenberg, and Stinglhamber (2005) found that engagement declined over time. Bentein et al. argued that with the increase of years of service in the organization, employees had more opportunities to experience disappointment and contract breaches. These contradictory findings leave room for further investigations of this factor within specific contexts.

The patient well-being factor is comparable to the concept of affective commitment in relation to employee engagement of Rhoades, Eisenberger, and Armeli (2001), who indicated that affective commitment refers to a sense of belonging and emotional connection with one’s job, or organization, or both. In relation to employee engagement, affective commitment emphasizes the emotional connection that employees have with their work in parallel to the emotive qualities of employee engagement. Accordingly, Shuck, Reio, and Rocco (2011) have advised

that emotional fulfillment is an important component of being engaged at work, and emotional fulfillment is an indication of an engaged employee, and they found that affective commitment is significantly related to employee engagement.

## **2) Factors at the group level that promote employee engagement**

There were 3 factors at the group levels that were seen to promote employee engagement explored in this study: 1) collaboration, 2) perceived supervisor support, and 3) team work.

The collaboration factor is consistent with the ideas of Joseph (2016), who stated that employees that experience a high degree of collaboration in their jobs are more likely to be engaged. The empirical evidence of Joseph showed that employee engagement is significantly positively related to nine antecedents of employee engagement, which include collaboration.

Regarding the perceived supervisor support factor, the researchers found contradictory findings. Based on Kahn's (1990) employee engagement concept, May et al. (2004) found a positive correlation between supportive supervisor relations and employee engagement, and this relationship was mediated by psychological safety. On the other hand, the empirical evidence of Saks (2006) found no relationship between perceived supervisor support and employee engagement. As there are conflicts regarding the relationship between perceived supervisor support and employee engagement, it leaves room for further investigations of this factor.

The team work factor can be explained according to the work of West, Brodbeck, and Richter (2004), who suggested that team-based work has gained popularity in the healthcare setting as a way to improve patient care and can be regarded as an effective method of improving hospital performance. The empirical evidence in previous studies revealed a positive relationship between team-based work and employee well-being (e.g. Ahmed, 2019; So, West, & Dawson, 2011) but not the employee engagement construct. This again leaves room for further investigation; in this case, investigation of the team work factor in relation to employee engagement.

### 3) Factors at the organization level that promote employee engagement

There were 8 factors at the organization level that were seen to promote employee engagement explored in this study: 1) hospital image, 2) job characteristics, 3) family-like working climate, 4) job security, 5) leader, 6) compensation, 7) welfare, and 8) learning and development opportunity.

The hospital image factor is connected with the work of Davies, Mete and Whelan (2018) and Dhir and Shukla (2019), as the organization's image is a function of organizational communication, or signals the overall operation that determines the perception of all stakeholders, including customers and employees. Davies, Mete, and Whelan (2018), and Dhir and Shukla (2019) found a positive relationship between employer brand image, as well as perceived organization image and employee engagement.

The job characteristics factor is associated with the job resources dimension of the JD-R model of Schaufeli and Bakker (2004), who found a positive relationship between job characteristics and employee engagement. According to Schaufeli and Bakker, every job has a specific motivational potential that depends on the presence of five core dimensions of job characteristics: skill variety, task identity, task significance, autonomy, and feedback. Moreover, job characteristics are linked to critical psychological states and are related to positive outcomes, such as high quality of work performance, job satisfaction, and engagement.

The family-like working climate factor is consistent with the qualitative study of Shuck, Rocco and Albornoz (2011), who found that the "feeling like home" theme is a driver of employee engagement. Moreover, this finding is also consistent with the notions of Kahn (1990), who suggested that climates that were supportive can promote positive emotions, and enhanced available emotions and psychological resources, which are linked to basic human needs that employees have when they are at work.

The job security factor can be explained according to the safety needs presented by Maslow (1970), who explained that humans need security and protection from harm. Safety needs include protection from physical and emotional harm and economic threats, and also include job security. For Kahn (1990), safety

needs can be described as feeling protected, being free from fear, and having a feeling of control over one's life. In this instance, an individual is free to engage once his or her safety needs are met (Shuck et al., 2011).

The leader factor is linked to the concept of the idealized influence component, one of the four components of the transformation leader Bass (1997), who stated that the concept of transformational leadership has four components—idealized influence, inspirational motivation, intellectual stimulation, and individualized consideration—and that these leadership behaviors have clear links to employee engagement.

The compensation factor is allied to the tenets of hygiene factors (Herzberg, 1968). Schaufeli and Bakker (2004) suggested for example that hygiene factors are extrinsic drivers of the organization that drive potential conditions for engagement. According to Shuck et al. (2011), hygiene factors are operationalized, including basic employee or human needs (such as pay), and when hygiene factors are not met, engagement is not likely to develop.

The welfare factor is consistent with the work of Mani (2011), who found a positive relationship between employee engagement and four predictors (out of 21 factors) of employee engagement, including employee welfare, empowerment, employee growth, and interpersonal relationships. Moreover, the coefficient values of Mani's study revealed that among the four predictors, employee welfare had the maximum influence on employee engagement.

The learning and development opportunity factor is supported by the ideas of Shuck, Twyford, Reio, and Shuck (2014), who stated that training and development fall into the boundary of human resource development (HRD), and found a significant relationship between employee engagement and perceived support for participation in HRD practices. According to Shuck and Wollard (2010), perception of HRD practice is thought to send a powerful message to employees concerning their value to the organization, and encourages employees to devote more energy toward the organization, and therefore engages employees.

## Limitations

In this study, the data were obtained from Thai public hospitals under the MOPH. As such, the meaning of employee engagement, as well as the factors that were seen to promote employee engagement, might differ from other types of hospitals. Therefore, the results of this study are limited to the employee engagement of Thai public hospitals under the MOPH. Moreover, although the researchers tried to minimize bias in this study, questions about the subjectivity issue should not be ruled out.

## Recommendations for Future Research

Regarding the meaning of employee engagement, more research that examines the stay component of employee engagement is required. Moreover, in this study, none of the medical doctors mentioned the desired behavior component of employee engagement, which was different from other occupations in the hospitals. Therefore, more research that focuses on the employee engagement of medical doctors is highly recommended.

Regarding the factors that promoted employee engagement, there are several factors explored in this study that were seen to promote employee engagement that were found to be different than those in previous studies in the field. First, the prolonged stay factor, where previous research found no agreement on whether it could promote employee engagement or not, which leaves room for further investigation. Second, the patient well-being factor, although it is comparable with the notion of affective commitment studied by various researchers, however, the term affective commitment was broadly defined, which might not fit the hospital context. Therefore, more research on this factor within the hospital-specific context is required. Finally, regarding the team work factor, the researchers found that most of the previous research examined its relationship with employee well-being, not the employee engagement construct. This reflects a gap in the literature, and therefore more research in this area is recommended.

## Recommendations for Practice

For the hospitals under the investigation, the findings of this study reflect the true meaning of employee engagement, as well as the factors that promote

employee engagement explored from the employee's own voice. It is important for hospitals to pay attention to the employees' experience of engagement, and the real needs of employees so that hospitals can design appropriate intervention programs or management strategies to enhance employee engagement.

For HROD practitioners, it is important to develop employee engagement from a holistic view. The findings of this study suggest that HROD practitioners give importance to the development of employee engagement at all levels throughout the organization. Regarding the individual level, focus should be placed on the self-development of the employee so that he or she will feel valued by the organization. For the group level, emphasis should be placed on arranging activities that promote relationships between the functions across the organization. At organization level, it is highly recommended that a work climate be created that is flexible so that employees will feel as if they are at home when they work, which ultimately will promote employee engagement.

It is highly recommended that the HAI develop or modify its standards and evaluation criteria so that they suit the Thai context.

The MOPH is encouraged to redesign policy at the department level that inspires the affiliated hospitals to examine employee engagement within their own context. By doing so, the hospitals will fully understand the meaning and the factors that promote employee engagement and they will have their own ways to develop employee engagement, which ultimately will benefit the development of employee engagement of the MOPH as a whole.

Finally, it is essential for other departments in the hospital sector in Thailand to recognize the unclearness of the employee engagement construct if it is to become a significant indicator against certain organizational decisions. It is important to listen to employees' voices rather than adopt a one-size-fit-all employee engagement development package and assume that it is the best package that promotes employee engagement.

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