JOB PERFORMANCE IN THE MALAYSIAN PUBLIC SERVICE:

THE ROLES OF JOB DEMANDS-RESOURCES AND

SUBJECTIVE WELLBEING

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DECLARATION

To the best of my knowledge and belief this thesis contains no material previously published by any other person except where due acknowledgment has been made.

This thesis contains no material, which has been accepted for the award of any other degree or diploma in any university.

Signature: *Fatimah hanum*

Date: 11 FEBRUARY 2020

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In retrospect, the pursuit in this life path as a PhD student, a wife, a mother to five teenage and school-going children, and a typical office-going worker for the final 2 years of my PhD has been an arduous yet satisfying challenge. Keeping sanity and putting on "the calm face" everyday covering up the whirlwinds that is going in this head has been nothing short of a miracle that God has endowed on me.

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DEDICATION

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In loving memories

Haji Mohamad Hajari bin Ahmad

Haji Ngah bin Yusoff

With love and respect

My Husband – Haji Mohd Hakimi bin Ngah

My Mother – Hajjah Hasmah binti Hussin

and all my family members

ABSTRACT

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For many years the Malaysian Public Service (MPS) has placed a huge emphasis on the job performance of its civil servants. Various initiatives and programs such as the Excellent Work Culture, National Integrity Plan and Clean, Efficient and Trustworthy Campaign have been put in place by the government to improve the performance of its civil servants and public image of its healthcare provision. Nevertheless, poor job performance manifested in delays in receiving treatment, negligence during treatment, poor diagnosis and errors in the delivery of medication remain widespread and as such, the MPS has been subject to much public criticism in recent times. Because the severity of the problem has not been systematically investigated, the current situation warrants a more detailed and evidence-based investigation into job performance in the MPS and the factors related to it. The present research was conducted in order to investigate the issue of poor job performance in Malaysian public hospitals by identifying the factors that enhance or hinder job performance and testing these inter-relationships using an evidenced-based framework of job demands, job/personal resources, subjective well-being and performance. A mixed methods approach with a sequential exploratory design was employed. In Study 1, interview sessions

were carried out with participants at selected hospitals. The data collected from the interviews were used to create additional items for a larger-scale survey used in the Study 2. Study 1 found that job performance in the MPS was at a 'moderate and acceptable level' according to participants of the study. Majority participants were very enthusiastic about their work and workplace and believed that the reporting of incidents of poor job performance by the Malaysian Public Complaints Bureau and newspapers were grossly exaggerated largely based on isolated incidents. Nevertheless, participants did acknowledge that some employees did not perform as well as they could because of problems such as work overload and negative attitudes. Study 1 revealed that six factors affected job performance in the MPS: 1) work overload, 2) civil servants' attitudes, 3) leadership and monitoring, 4) religious and spiritual beliefs, 5) training, knowledge and experience and 6) personal issues. Based on the moderated mediation analyses conducted in Study 2, it was found that job resources predicted work engagement and a particularly positively impacted when job demands were at moderate and high levels. Work engagement in turn, positively impacted job performance. The analyses also revealed a significant relationship between personal resources and job performance through job demands and organisational commitment. The moderated mediation between personal resources, organisational commitment and job performance can be seen at all level of job demands. The findings largely appear to be consistent throughout

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the study in that job resources are significantly related to work engagement and personal resources with organisational commitment, which in turn affects job performance. The implications of these findings are discussed in terms of existing literature and suggestions for further research are also included.

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PREFACE

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The present research was conducted in order to investigate the issue of poor job performance in Malaysian Public Service hospitals by identifying the factors that enhance or hinder job performance and testing these inter-relationships using an evidenced-based framework of job demands, job/personal resources, subjective well-being and performance.

This thesis is organised into 8 chapters. Chapter 1 [*Introduction*] gives a broad overview of the research reported in this thesis. It describes the background of the study, the definition and factors affecting job performance. It then continues to explain about Malaysia, the Malaysian Public Service and the motivation for pursuing this line of research. Afterwards, the measure of job performance, the practical rationale, the empirical rationale and the objectives of the research are explained to conclude the chapter.

Chapter 2 [*Job Performance: A Review of Literature*] discusses the organisational theories related to job performance, the relationship between JD-R and job performance, the theoretical framework underpinning the research, the objectives, questions and hypotheses of the research. The chapter then proposes

the theoretical framework for the research project; defines key terminology and identifies gaps in knowledge that this research project aims to fill. This is then followed by detailing the research aims, research questions and hypotheses of the present study. The chapter concludes by highlighting the importance and contribution of the study to the MPS and the body of literature.

Chapter 3 [*Research Methodology*] details the rationale for the research design and methodology chosen for this investigation, followed by the sampling strategy adopted, description of the participants and a detailed description of the instruments used and adapted. The last section of the chapter is devoted to explain about the ethical consideration and the data analysis techniques adopted in the study.

Chapter 4 [*Perception on Job Performance in the Malaysian Public Service*] describes in details the qualitative study done for this research. The chapter starts with the overview of the study objectives and data collection techniques, follows by the participants' demographic review and data analysis approach of the study. The results of the study are described in details and theoretical implication are reported.

Chapter 5 [*Confirmatory Factor Analysis (CFA) For Study 2 - Job Performance in the Malaysian Public Service: The Roles of Job Demands-Resources and*

Subjective Wellbeing] presents a detailed description of the quantitative study (Study 2) that was carried out after the qualitative study. The details explanation on the first part of the statistical analysis is presented in this chapter. The Confirmatory Factor Analysis (CFA) and measurement model for all constructs is explained under this chapter.

Chapter 6 [*Structural Model Analysis and Hypotheses Testing For Study 2 -- Job Performance in the Malaysian Public Service: The Roles of Job Demands-Resources and Subjective Wellbeing*] presents the structural model for all constructs of Study 2 and follows by the results of hypotheses testing's. The discussion of the findings is then presented in this chapter.

Chapter 7 [*Moderated Mediation Analysis of Job Demands-Resources, Subjective Wellbeing and Job Performance*] discusses the findings on moderation and mediation analysis of the empirical data of the study. It is the extension of the findings from the qualitative findings in Study 1 and quantitative findings in the first phase of Study 2 reported in chapters four, five and six. The main part of the discussion is on the evaluation of the findings based on the literature and its relationship to the findings of Study 1 and findings of the first phase of Study 2.

Chapter 8 [*Discussion, Implication and Future Research*] summarises the research findings of the present investigation and discusses the theoretical and practical implications of these findings. It then proceeds with a discussion of the limitations of the study and suggestions for future research. The chapter then concludes with a summary of the overall contribution of the present study to MPS and JD-R research.

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LIST OF ABBREVIATIONS AND ACRONYMS

AGFI	Adjusted Goodness-of-Fit Indices
AMOS	Analysis of Moment Structures
ASEAN	Association of Southeast Asian Nations
CI	Confidence Interval of the mean
CFA	Confirmatory Factor Analysis
CFI	Comparative Fit Index
COR	Conservation of Resources
DV	Dependent Variable
EG	Electronic Government
FMS	Federated Malay States Civil Service
GFI	Goodness of Fit
GTP	Government Transformational Program
ICT	Information Communication Technology
IV	Independent Variable
JD	Job Demands
JD-C	Job Demand-Control
JD-R	Job Demands-Resources
JP	Job Performance

JR	Job Resources
KPI	Key Performance Indicators
TLI	Tucker Lewis Index
M	Mediating Variables
MAMPU	Malaysian Administrative Modernisation Planning Unit
MCS	Malay Civil Service
MPS	Malaysia Public Service
MSC	Multimedia Super Corridor
NFI	Normed Fit Index
N	Number of cases
PAC	Public Accounts Committee
PE Fit	Person Environment Fit
PR	Personal Resources
RMSEA	Root Mean Square Error of Approximation
SET	Social Exchange Theory
SEM	Structural Equation Modelling
SWB	Subjective Wellbeing
UNDP	United Nation Development Programme
W	Moderating Variable
YPA	Yearly Performance Appraisal

CHAPTER 1 - INTRODUCTION

1.0 Chapter Overview

This chapter presents an overview of the research reported in this thesis. It provides the background of job performance in organisations, its importance, definitions and factors affecting it. The chapter subsequently contextualizes the study within Malaysia and the Malaysian Public Service. Further discussion is then embarked on the Malaysian healthcare system to explain the motivation for pursuing this line of research. Thereafter, the measure of job performance, the practical rationale, the empirical rationale and objectives of the research are delineated to conclude the chapter.

1.1 Background of the Study - Job Performance in Organisations

Job performance is crucial for those in organisational settings and those in the field of research. There are two main reasons why job performance is important for organisations (Gilboa et.al., 2008; Webber & Donahue, 2001). Firstly, high job performance increases productivity and improves the quality of service provided to customers. An organisation with high performing individuals is an organisation that is able to compete at the local as well as global level. Top performing employees are considered as "lubricants" in an organisation. Just as

lubricants are used in a machine or a device to prevent its deterioration and increase its shelf life, an employee who can perform well in the organisation will be able to prevent and solve problems as well as assist the organisation in the production of goods or delivery of services. Employees can also act as a source of motivation to colleagues and become positive agents for the organisation. Therefore, organisations are right to be concerned about job performance and pay close attention to improving the performance of its employees.

Secondly, for employees in organisations, the end product of their work is their own performance. Being able to perform one's duties properly and efficiently can be a source of satisfaction, pride, and increased motivation (Van Scotter et.al., 2000). While poor job performance might cause discontentment and be considered as a mark of failure, high job performance can lead to positive returns and recognition for the individual. In addition to recognition through promotion and monetary rewards, good job performance often reflects a positive image of the individual. Therefore, it is not surprising that organisations and individuals are so concerned about good performance (Van Scotter et al., 2000).

The effects of job performance, the factors affecting job performance and the definition of job performance are areas that have attracted the attention of researchers in organisational behaviour field (Cochrum-Nguyen, 2013; Gilboa et al., 2008; Kahya, 2007; Yuningsih, 2012). Researchers have used a range of

quantitative, qualitative, experimental and mixed methodologies to study job performance. In the early 1900s, names such as Yerkes, Thorndike, Lovett Hull, Bird and Pond conducted many experimental studies to expand the job performance literature related to stressors, attitudes, motivation, personality, job characteristics and job demands. For example, Robert Yerkes and John Dillingham Dodson introduced the Yerkes-Dodson Law in 1908 to describe the relationship between performance and arousal (Yerkes & Dodson, 1908). Their experiment on rats in a maze found that, when given mild electric shocks, the rats were motivated to complete the maze. However, when the shocks were too strong, the rats ran around in unspecified directions in an attempt to escape the shocks. This experiment confirmed that increasing stress and arousal levels help rats to focus on the task, but that this only works at certain levels of shock. Similar observations in the workplace showed that, when given a certain amount of work with limited amount of time a worker might be able to finish the job as expected, but at a certain level, one's capability to cope with the stress will ultimately diminish or adversely affect performance. According to Selye, the first stage of coping with stress involves accepting the level of stress and combating it with available resources such as knowledge and experience (Selye (1946) as cited in Whitfield & Cachia, 2015). In the end, exhaustion will set in and the individual will not be able to cope and have to face the negative consequences.

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One of the earliest studies on the relationship between attitudes and job performance was the Hawthorne studies conducted between 1920 to early 1930s (Wright & Cropanzano, 2004). The experiment took place in 1924 in Hawthorne, Chicago at the Western Electric's factory in collaboration with the National Research Council. The company decided to continue the experiment in 1927 and involved the participation of Turner, a biologist from MIT and Elton Mayo, an Australian sociologist. The purpose of the experiment was to study the effects of physical conditions on productivity. Two groups of workers were involved in the study. In the control group, working conditions remained unchanged whilst the experimental group were given better lighting. They found that workers in well illuminated areas were more productive compared to the control group with unchanged working conditions. The researchers later changed other aspects related to the working conditions such as payment/incentives, type of supervision and working hours. They found that productivity increased with each change, including when the lights were dimmed and even when the work environment reverted to its initial condition before the experiment. The conclusion was that workers' performance improved not only because of better pay, more rest time or types of supervision, but their belief that someone was watching and cared about their work and workplace. The experiments gave rise to the term "the Hawthorne effect", which implies a change in behaviour as a consequence of being observed.

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In addition to the effects of various factors that have been studied, the definition of job performance itself is another area that has been discussed by scholars. The next section will explain in detail the definition of job performance.

1.2 Definition of Job Performance

The definition of job performance as a concept is an evolving process. In 1990, Campbell described the process of defining job performance as a "virtual desert" in which it is difficult to marry the theory and the reality of the process. However, more recently, scholars such as Motowidlo, Borman and Schmit (1997) as well as Campbell (1993) have agreed that the definition of job performance can vary, but, two of the most important features in defining job performance are "action" (behaviour) and "outcome" (Sonnentag & Frese, 2002). The action or behavioural aspect represents those activities performed by the worker in a work setting. The outcome is the result of the worker's behaviour or action. The relationship between action and outcome however is not always direct because certain activities might not lead to expected outcomes and some outcomes do not necessarily derive from the intended activities (Sonnentag & Frese, 2002). For example, a gardener might plant a seedling with the expectation that it will grow into a tree, but sometimes the seedling may not grow into a tree because of poor soil. In short, the relationship between action and outcome in job performance is not always direct, nor easy to explain. For a seedling to grow into a tree, other

activities need to occur, such as watering, weeding, and fertilizing the soil. Similarly, a single factor might not able to explain or define job performance.

However, not all behaviours are considered performance; only those behaviours that contribute to organisational goals are regarded as job performance. According to Campbell (1993) performance is "what the organisation hires one to do and do well" (as cited in Sonnentag & Frese, 2002, p. 5). These behaviours must also be judged by the organisation as job-related and lend themselves measurement in order to be considered as job performance.

It is difficult to describe job performance as a single aspect because action and outcome come together to form performance. Therefore, in this study, job performance will be described as a multidimensional concept. Motowildo, Borman and Schmit (1997) delineated job performance features into two components; task performance and contextual performance (Luo et al., 2008). Task performance includes all the core tasks related to the organisation's goals or in-role behaviours such as treating a patient in the case of a doctor and teaching for a teacher. Campbell (1993) on the other hand, introduced eight factors of performance. Out of the eight factors introduced by Campbell, five of the factors refer to task performance. These factors are: task specific behaviour, non-task specific behaviour at work, written and oral communication, supervision and management. Task specific behaviours are behaviours that an

employee demonstrates as part of his/her job. These behaviours distinguish one job from another. For example, a doctor treats the patients, while a teacher teaches the students. Conversely, non-task specific behaviours are those that the employee undertakes which are not specific to a certain job. In the case of a doctor, a senior doctor might train another doctor how to treat aged patients while a teacher might train a younger teacher how to write a report. Another type of task-performance introduced by Campbell (1993) is written and oral communication in which employees are expected to be proficient in oral and written communication. They are evaluated based on their proficiency and expertise while communicating and not on the content per say. Campbell also explained that there is also some task performance executed by individuals in supervisory or leadership roles. Supervisory performance is achieved when a person is able to oversee his or her subordinates and carry out disciplinary or reward actions (Rotundo, 2002). Administration or management performance is the last task performance introduce by Campbell and it refers to one's ability to help others to achieve the organisational goals.

Motowildo, Borman and Schmit (1997) refer to contextual performance as those activities that support the organisation as a whole, not only in terms of core tasks, but through extra activities or extra-role behaviour (Griffin et al., 2000). Extra-role behaviour refers to any self-initiated or proactive activity of an individual in

the organisation. For example, a baker at the bakery might occasionally help the cashier while a doctor might become involved in training programs for nursing staff. These behaviours are also in line with three of Campbell's domains mentioned above, which are effort, personal discipline and teamwork. Effort implies that employees are expected to show some degree of determination, exertion and willpower at work whereby the job in the organisation can be assessed. Personal discipline is a performance indicator in which employees are expected to comply with company rules and regulations. Teamwork is the ability of a person to work closely with other people or in groups. Performance is assessed based on how far an individual helps his or her work colleagues and how he or she performs as a group member.

Therefore, we can conclude that contextual performance comprises a broad range of activities, such as, supporting co-workers, motivating subordinates and suggesting future goals for the organisation in order for the organisations to function smoothly (Daniels & Harris, 2000; Sonnentag & Frese, 2002).

In addition to the two facets of job performance explained above, there is another performance facet which is more responsive to change called adaptive performance. Adaptive performance is one's ability to adapt to changes in work systems and work environments and it involves both cognitive and non-cognitive abilities (Shoss, Witt, & Vera, 2012; Jundt, Shoss, & Huang, 2015). Adaptive

performance is best exemplified during crises and stressful situations, unpredictable moments and during problem solving tasks that involve creativity and learning. Adaptability can be demonstrated interpersonally, physically and culturally (Allworth & Hesketh, 1999).

Task performance and adaptive performance may look similar, but they actually have distinct features. Task performance focuses on specified daily performance, whereas the emphasis of adaptive performance lies in one's responsiveness to changes in specified tasks (Allworth & Hesketh, 1999). Task and contextual performance demonstrate the abilities and competencies in completing a task, while adaptive performance reveals the extent or the degree to which a task is completed differently or under a different situation (Shoss et al., 2012). The situation is easily explained using the analogy of a baker who is supposed to bake a cake but runs out of eggs. For the baker to be able to sell any cake on that day, the baker will need to respond by adapting to the current situation. One response could be to order for eggs and wait for the delivery, or he or she could choose to bake an eggless cake. To be able to respond proactively to such an unforeseen change in the bakery, the baker would need to have the requisite foreknowledge and competencies of baking various types of cakes.

All three facets of job performance; task performance, contextual performance and adaptive performance are equally important in organisations. They provide

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a holistic perspective of behaviour and the outcome of the behaviours in the organisation. Thus, this study will test for all three types of job performance.

1.3 Factors Affecting Job Performance

Over the last ten years, researchers have continued to study factors which affect job performance. Within this time, they have confirmed previous findings and made new discoveries. Studies have found that positive attitude, work commitment, personality, supportive leadership, job training, job security, job design and autonomy have a positive relationship with high job performance (Awases, Bezuidenhout, & Roos, 2013; Buttigieg & West, 2013; Mrayyan & Al-Faouri, 2008; Selvanathan, Ali, Balasubramaniam, & Thanaraju, 2013). Selvanathan et al. (2013) study on three government agencies in Malaysia found that positive attitudes such as responsiveness and accountability were related to high job performance and crucial elements that the Malaysian government should focus on. Hunter and Thatcher (2007) in their study on the effects of stress, commitment and job experience found that commitment was strongly related to performance for employees with more job experience. Apart from commitment and positive attitudes, studies by Butt, Khan, Md. Rasli and Iqbal (2012), Dawson, Stasa, Roche, Homer and Duffield (2014), Gabel-shemueli, Dolan and Ceretti (2014) and Long, Jusoh, Ajagbe and Ghee (2013), found that factors such as job satisfaction and engagement strengthen employees' intentions

to deliver high job performance, whereas work overload, poor work environment and stress were among the factors that negatively affect job performance.

These factors are studied at various levels; the individual, team and organisational levels. A factor that could negatively affect individual job performance might elicit contrary effects when imposed on a team. For example, work overload if distributed amongst a team might help in reducing poor performance. If for example, ten tasks were equally distributed to a team of five, then each team member would only have to complete two tasks, thereby reducing the workload of each team member, which could in turn result in reduced stress levels and increased job performance. Costa et al., (2014), study on the role of teamwork and positivity among healthcare professionals in 9 European countries found that back-up behaviour (team) mediates job demands and quality of care.

Studies on the various factors affecting job performance (i.e. attitudes, commitment, engagement, and training) at the individual, team and organisational levels have given rise to new perspectives to understand job performance. The insight from these perspectives can be used by organisations to increase the performance of their employees (Gilboa et al., 2008; Webber & Donahue, 2001). From these studies, many theoretical frameworks have emerged which could be used to explain job performance, such as, the Job Demands-Resources (JD-R) model, Job Demand-Control (JD-C) model,

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Conservation of Resources (COR) theory, Person Environment Fit (PE Fit) theory and Social Exchange Theory (SET). These theories, and the work-related variables affecting job performance will be discussed in more detail in Chapter 2.

1.4 Malaysian Public Service and Job Performance

This section will introduce Malaysia in a glance and explains the Malaysia Public Service (MPS) agenda in enhancing civil servants job performance. It continues to describe the complaints issue in MPS and how it is related to job performance and performance management in MPS.

1.4.1 An Introduction to Malaysia and the Malaysian Public Service

Malaysia, is one of eleven countries in the Association of Southeast Asian Nations (ASEAN). It is bordered by the neighbouring countries of Singapore in the south, Thailand in the north, Vietnam in the northeast, and Indonesia and Brunei in the west. Malaysia is divided into two regions, the Peninsular Malaysia and the West Malaysia. The former consists of eleven states and two federal territories while the latter comprises two states and one federal territory. With a population of 32 million, Malaysia is a multiracial country with three main ethnic groups - Malay, Chinese and Indian and numerous indigenous people such as *Orang Asli* in Peninsular Malaysia, *Dayak* in Sarawak and *Kadazan-Dusun* in

Sabah (Department of Statistics Malaysia Official Portal, 2017; Ministry of Health Malaysia, 2013). Article 3 (1) of the Malaysia Federal Constitution states that "…Islam is the official religion of the Federation; but other religions may be practised with peace and harmony in any part of the Federation" (*Federal Constitution*, 2010, p. 20). In July 2017, out of 31,382,000 Malaysia population, 61.3 % are Muslim, 19.8% Buddhist, 9.2% Christian, 6.3% Hindu, 1.3% Confucian, Taoist and other Chinese religions, 0.4% other religion and 1.7% reported as unspecified or do not have any religion (U.S. Commission on International Religious Freedom, 2018).

Malaysia operates within a constitutional monarchy and representative democracy under the Westminster Parliamentary System. Article 127 of the Malaysia Federal Constitution, stipulates the principle of separation of power between the Executive, Legislature and Judiciary branches of government. The legislative body consists of House of Representatives (Lower House) with members elected by the people and the Senate (Upper House), whose members are elected by the State Assembly and the King (Federal Constitution, 2010). The Executive body is led by the Prime Minister and its cabinet members consists of the head of government and elected ministers. The judicial system in Malaysia operates at the state and federal levels with the Federal court being the highest court in Malaysia.

British colonial rule played an important role in shaping the Malaysian Public Service (MPS). The British Colony of Malaysia was dubbed *Malaya* in the 17th Century when Francis Light came to Penang and leased the State from the Kedah Malay Royalty on behalf of the British East India Company (Jabatan Perkhidmatan Awam Malaysia, 2010). The British appointed scholars from England to become administrative officers of the Malay States and form the Federated Malay States Civil Service (FMS) in the late 1800. The service then started to appoint Malaysians as administrative officers under the name Malay Civil Service (MCS). The officers still follow the code of conduct provided in Northcote-Trevelyan Report which stipulates that public service officers should be politically neutral, loyal to the government of the day and provide non-biased advice in the interest of the public, while being obedient to the cabinet members. MCS continued to govern the country and assisted in securing Malaya independence in 1957. The other services under the colonial administrative service such as health, education, the legal system and the police were incorporated into the Malay Civil Service which now forms the MPS. Initially, the MCS comprised solely of Malay officers and in 1953 the government announced the implantation of a 4:1 ratio of Malays to non-Malays (Lim, 2007). This decision undoubtedly had an effect on the ethnic landscape of MPS today.

1.4.2 The Malaysian Public Service Agenda to Enhance Job Performance for Service Delivery

After more than 60 years of independence, the administrative system of government has evolved due to various influences from Malaysian culture and the Asian region. Since then, the MPS has played a vital role in fulfilling the needs and aspirations of the people. The Malaysia government sought to enhance the governance of the public service by introducing various initiatives and programs. The Clean, Efficient and Trustworthy Campaign (*Kempen Bersih Cekap dan Amanah*), Leadership Through Example Campaign (*Kempen Kepimpinan Melalui Teladan*), Implementation of Pure Values (*Penerapan Nilai-Nilai Murni*), Excellent Work Culture (*Budaya Kerja Cemerlang*), National Integrity Plan (*Pelan Integriti Nasional),* The Vision 2020 (*Wawasan 2020*) and Government Transformational Program (*Program Transformasi Kerajaan*) are among the government policies and initiatives introduced to serve the people.

The Clean, Efficient and Trustworthy Campaign and Leadership through Example Campaign were the first two administrative policies introduced by the Malaysian Prime Minister in 1982 and 1983 respectively. These policies are underpinned by the belief that the development and the success of the nation is contingent on the morality and attitudes of the people, including leaders, civil

servants and private sector workers (Henry, 2018; Omisore & Adeleke, 2015; Ssonko, 2010; UNDP Global Center for Public Service Excellence, 2014) . Everyone is expected to hold the same principles at work. Thus, these two campaigns kick started the drive for a better nation through positive attitude. The Clean, Efficient and Trustworthy Campaign required civil servants to focus on productivity and the quality of their work by being "clean, efficient and trustworthy". "Clean" refers to upholding morality, integrity and free from corruption. "Efficient" involves being brave and quick in decision making, being able to face crisis calmly, firm in one's principles, productive, confident, proactive, knowledgeable and proficient in specific areas. "Trustworthy" refers to the willpower and inclination to carry out one's duty in accordance with the rules, mandate and power vested. These three attributes of the Clean, Efficient and Trustworthy campaign were also the basic principles for the next campaign introduced by the fourth Prime Minister, Tun Mahathir Mohamad, The Leadership Through Example campaign. At the launch of the campaign on 19 March 1993, Tun Mahathir pledged to increase the sense of responsibility to the nation, race and religion. Civil servants are expected to cultivate effective leadership qualities that apply the values of accountability and ethics at work (Abdul Rahman & Ahmad Sabri, 2017). In 1985, the campaign was then followed by another initiative to nurture Islamic values in the public service through the implementation of Pure Values (*Penerapan Nilai-Nilai Murni*)

initiative (Jabatan Penerangan Malaysia, 2016). The initiative is in line with the Malaysian constitution that Islam is the official religion of Malaysia. The pure values brought about by Islam parallels universal positive values practiced worldwide, including being trustworthy, responsible, sincere, dedicated, simple, diligent, clean, disciplined, collaborative, virtuous and thankful (Jabatan Penerangan Malaysia, 2016). Trustworthiness, responsibility, cleanliness and discipline were carried forward from previous initiatives due to their perceived importance in the work environment.

The Excellent Work Culture policy was introduced to the MPS in 1989 to inculcate a positive work culture not only through the provision of excellent public service but also in the processes involved in the conduct of work. Excellent Work Culture emphasizes consistent behaviour at work that leads to good service delivery. Efficiency, responsibility, trustworthiness, dedication and commitment are among the core characteristics of Excellent Work Culture (Syed Ismail Al-Qudsy, 2008).

These initiatives which were carried out from 1980 to 1989 were deemed to be very important in cultivating positive values among civil servants in particular and the people in general. It was deemed necessary in order to form a nation of people with principles, identity and work ethics that everyone could be proud of. The 1980s, was the time that MPS focused more on the development of positive

values of civil servants and in the 1990s the focus shifted to Information Communication Technology (ICT). Work using computers and ICT was first implemented in the 1980s and efforts were enhanced in the 1990s. Beginning with the publication of the Public Service Computing Guidelines by Malaysian Administrative Modernisation Planning Unit (MAMPU) in 1988, the public service began to transform their work processes through the use of ICT. The highpoint of ICT as a national agenda was the establishment of the Multimedia Super Corridor (MSC) in 1996. This mega initiative of Malaysia to become a globally competitive country served as the catalyst for Electronic Government (EG) in various sectors in the public service, including the health sector (Malaysia Administrative Modernisation Planning Unit, 2015).

In the 1990s, various national development agendas manifested in the Malaysia Plan (*Rancangan Malaysia*) which was implemented in order to elevate Malaysia's status from a developing country to a developed country. The plan was geared towards empowering civil servants with the requisite knowledge, technology and positive attitudes to help in developing Malaysia. It was introduced in 1965 as a rolling 5-year developmental plan which continues till date. The current Eleventh Malaysia Plan will end in 2020. Under the Sixth Malaysia Plan, a forward agenda called Vision 2020 was proposed by the Prime Minister Mahathir Mohamad. It is a 30 year plan to develop Malaysia into a self-

sufficient industrialised nation by the year 2020 through economic prosperity, political stability and through citizens who are well educated, positive wellbeing and psychologically balanced (Islam, 2011).

For the past 15 years, several more initiatives to enhance service delivery in public service were introduced such as the National Integrity Plan in 2004 and the Government Transformational Program (GTP) in 2010. The National Integrity Plan was announced by the Fifth Prime Minister Tun Abdullah Ahmad Badawi in April 2004 to fulfil the Ninth Malaysia Plan agenda of human capital development which prioritized strong moral and ethical values as well as knowledge, skills and progressive attitudes. It also sought to realize the ideals set out in Vision 2020 which is "…to establish a fully moral and ethical society whose citizens are strong in religious and spiritual values and imbued with the highest ethical standards…"(Mohamad, 1991, p. 2). Among the targets of the National Integrity Plan was to increase efficiency of service delivery in public sector and at the same time reduce corruption, malpractice, abuse of power and bureaucracy (red tape). The effort to improve service delivery was continued with the implementation of the Government Transformational Program (GTP). The GTP objectives were to contribute to the Vision 2020 in achieving high income, developing the country as well as supporting the slogan of 1Malaysia: People First, Performance Now.

These various efforts by the Malaysia government and the MPS, especially in instilling positive values in civil servants were implemented to ensure that civil servants' performance is at an optimal level to serve the people of the country. Currently, there are 1.6 million civil servants with various posts and ranks. Out of that number 917,210 are military, police, teaching and medical personnel all over Malaysia and the remainder are civil servants working at various government ministries and departments including engineers, lawyers, accountants and management officers.

1.4.3 Public complaints about the Malaysian Public Service

The implementation of initiatives and programs for service reforms and good governance policies in the MPS that have been mentioned above have received positive feedback from the public. However, this is only the first step in the long journey towards improving the delivery of public services in Malaysia. There is still negative perception towards the civil servants despite all the efforts done by the government. Issues of poor service delivery, unfriendly officers as well as lack of integrity have continued to make the headlines in newspapers (Berita Harian, 2013; New Straits Times, 2012; Sinar Harian, 2015; The Star, 2010; Utusan Online, 2010; Utusan Malaysia, 2008).

The number of complaints has also shown an alarming pattern over the years. According to Malaysian Public Complaints Bureau (2013), 12, 582 complaints were filed in the year 2012. Although the figure is 5.7% less than the previous year (13,356 complaints in 2011), the number of complaints has increased by 39.6% since 2008 when 8,066 complaints were made.

Among the complaints received were delays or no action (5,877: 46.7%), unsatisfactory quality of service (1,842:14.6%), unfair action (1,410:11.2%), misconduct and abuse of power (382: 3.1%) and failure to adhere to set of procedures (317:2.5%). Most of the complaints were related to civil servants' attitudes or conduct related to their performance (Malaysian Public Complaints Bureau, 2013). In 2013, the overall number of reported complaints decreased by 21.48% to 9,879 (Malaysian Public Complaints Bureau, 2014) and decreased further to 7,199 in 2014 (Malaysian Public Complaints Bureau, 2015). The decrease in the overall number of reported complaints seems to be a good indicator of better service delivery by the civil servants. However, analysis of the reported complaints compiled by Ministry of Health found an alarming trend in the health sector. The percentage of public complaints for the health sector compared to other sectors increased from 7.76% in 2013 to 8.15% in 2014 and 11.98% from January to October 2015 (Malaysian Public Complaints Bureau, 2016).

The State Health Department had the third highest number of reported cases out of eight agencies under ministries with the highest number of reported cases from 2013 to 2015. The percentage of reported cases for the State Health Department compared to the overall number of complaints was 14.05% (363 cases out of 2583) in 2013, 15.33% (259 cases out of 1689) in 2014 and 17.26% (228 cases out of 1321) from January to October 2015 (Malaysian Public Complaints Bureau, 2016).

In addition, other statistical data that was produced by the Ministry of Health has also conveyed an alarming message. The Ministry recorded 5,416 complaints in 2013, which is more than 50% of all public service complaints recorded by the Malaysian Public complaint Bureau (Corporate Communication Unit, Ministry of Health Malaysia, 2014). Last year, the New Straits Times reported that annually the Ministry of Health received on average 7,000 complaints and paid RM20 million for compensation due to negligence (Ili Shazwani, 2017). Some of the complaints were related to poor services given by the medical personnel or lack of communication skills, long waiting time for treatment and insufficient equipment.

Given the reports by the Malaysian Public Complaint Bureau and the Ministry of Health Malaysia, it is imperative that the MPS takes serious action to improve service delivery among civil servants especially in the health sector, as such

complaints serve as an indication of underlying issues of job performance in the MPS.

1.4.4 Performance Management issues in the Malaysian Public Service

Why is the public so concerned about civil servants' job performance? One of the reasons could be that civil servants are the frontline of the government. They are expected to facilitate and serve the public diligently. Civil servants have a great responsibility to the people and the country because their performance is the image of the government. Their roles are very important to the social and economic development of the country (Johari & Yahya, 2016). Efficient and reliable public servants reflect the stability of the country, which will thus lead to increased investment in Malaysia.

To understand the performance management in the MPS, one needs to understand the posts in MPS. In the MPS, there are three main groups of civil servants. The first group is the top management group which comprises the *JUSA* and the *Gred Utama*. The *JUSA* is selected because of the leadership qualities, whereas the *Gred Utama* is based on the knowledge and expertise. Most civil servants under the top management group are the heads of ministries and departments. The second group is the management and professional group. This group consists of civil servants with grades of 41 to 56 and to be selected for this

grade, a person must have at least a degree in a related field. Civil servants in this group can be promoted to the top management group. The third group is the support group, consisting of two groups with grade 27 to 40 in group I and grade 1 to 26 in group II. To work in group II, a candidate must have at least Malaysian Education Certificate (*Sijil Pelajaran Malaysia*) and for group I, a candidate needs to have at least Certificate of Low Secondary Assessment (*Penilaian Menengah Rendah*).

Performance in the MPS is monitored through Key Performance Indicators (KPI) report and Yearly Performance Appraisal (YPA) report. The KPI report is only used for few top posts called *Turus*, whereas, Yearly Performance Appraisal (YPA) reports are used to evaluate other officers. Promotion, pay increments and employee excellence awards weigh heavily on YPA (Pekeliling Perkhidmatan Bilangan 14 Tahun 2011: Sistem penilaian prestasi pegawai perkhidmatan awam di bawah saraan baru perkhidmatan awam, 2011). YPAs consist of six important evaluation aspects which are leadership, work output, knowledge and expertise, knowledge and skills, personal quality and contribution in extra activities. Weightage score for top management groups differ from the other two groups. For top management groups there is more weight on leadership and knowledge aspects, whereas for the other groups the weighting is on work output (Kassim, 2016). Table 1 shows the weighting of key evaluation criteria.

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Each criterion will in turn have its own points to be met. For example, the work output aspects have four criteria which are the work quantity, work quality, timeliness and effectiveness of work. The assessors would need to award points on a scale of 1 to 10, with 10 being the highest score and 1 the lowest score. The cumulative marks from each criterion will be added to obtain a percentage score, with 100 being the highest possible score. Each person will be assessed by two superiors and the average of both percentage scores is the score for that person.

Table 1: Weightage Performance Score

Weightage Score (%)					
Evaluation Aspects	Top Management Groups		Management & Professional Group Grade (41-54)	Supporting Groups	
	Top Post Public Service	Special Grade		I Grade (27-40)	II Grade (1-26)
Leadership	60	15	-		-
Work Output	-		50	50	50
Knowledge & Expertise	-	50	-	-	-
Knowledge & Skills	-	-	25	25	25
Personal Quality	35	30	20	20	20
Activities & Contributions	5	5	5	5	5

Although the method of scoring the yearly appraisal is objective, there are still loopholes in terms of the marks awarded by the immediate superior of the civil servant. The extent to which the marks truly represent the performance of the civil servants is unknown. A civil servant is considered an average performer when he or she receives a mark below 75 out of 100 points. These individuals are then selected for training to increase their motivation at work and others will attend the trainings to enhance their job skills. Since 2015, all underperforming civil servants with 60 points and below could be placed under the exit policy program (Pekeliling perkhidmatan bilangan 7 tahun 2015: Pelaksanaan dasar pemisah (Exit Policy) bagi pegawai yang berprestasi rendah dalam perkhidmatan awam, 2015). This exit policy program is a program whereby, the individual will be monitored by the Human Resource Development Panel of the department for one year before further action is taken. One possible action is termination of work. A civil servant is also considered to be underperforming when there are reasonable complaints reported by customers or by the department where he or she works. The complaints could be regarding the quality of service, misconduct, failure to adhere to set of procedures or abuse of power.

Under-performance is managed differently in the public sector compared to the private sector due to their divergent policies and work environments. In the private sector, problems related to under-performance are normally resolved

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quickly, as private companies are unwilling to risk declines in productivity and profit. In sharp contrast, issues of under-performance in the public sector are resolved less quickly and civil servants often reckon that they are employees for life. Moreover, the main objective of most public organisations is to provide social services at reduced costs (Agus et al., 2007). Terminating employment means increased hiring costs and longer processing time to resolve a disciplinary case compared to issuing an administrative warning letter. The process of gathering evidence for disciplinary action is tedious and time consuming as one needs to ensure strong evidence is in place before disciplinary action is taken (Jabatan Perkhidmatan Awam, 2009). This is because the government's reputation is at stake if cases are brought to court and the government is unable to defend their actions. In some cases, when the head of department or the person leading the workplace has failed to follow procedures, or when there is a lack of strong evidence, the case could drag on for many years (Jabatan Perkhidmatan Awam, 2009). For example, the Minister of education revealed the case of a civil servant in a rural school who was absent from work for 2,002 days, yet, was only recently fired (Free Malaysia Today, 2017). This case makes one wonder, what action, if any, was taken by the head of the school, and why the case had been left for so long before action was taken.

The management of underperforming employees is difficult and disciplinary action often leads to issuance of a warning letter, reduction in salary or payment of a fine. The same problematic employees are often allowed to remain in service, thereby affecting service delivery. As reported by the Malaysian Insider, the Public Accounts Committee (PAC) Chairman once said *"Currently, government officers who had committed offences were not afraid as nothing is being done to them. There is no accountability. So, what the Auditor-General's Department is doing is to go with a performance audit with the aim to change that culture."* (The Malaysian Insider, 2013).

1.5 The Malaysian Healthcare System

In the past, the Malaysia health care sector provided primary health care to government employees, the tin mining and the plantation workers, but overtime, it has been extended to serve the needs of the general public (Ministry of Health Malaysia Portal, 2013). The Malaysian Healthcare System has developed rapidly compared to other countries in the region and is considered as a successful health system model internationally (Ministry of Health Malaysia & Havard T.H Chan School of Public Health, 2016). A systematic review has shown that over the years Malaysia has a higher than average life expectancy at birth, due to its commendable efforts in maternal and child health care, and the control of communicable diseases. In 2013, Malaysia had the second highest average life

expectancy after Singapore at 74.3 years, compared to other neighbouring countries; Thailand, Vietnam, Philippines and Indonesia (Lee, 2015). In 2015, the average life expectancy increased to 74.95 years with males at 72.5 years and females at 77.4 years. Compared to the 1965 record of average life expectancy of 62.4 years for males and 64.0 years for females, this is an impressive achievement for the healthcare system of a developing country. Due to the latter, together with its comprehensive services provided at a low-cost, the World Health Organization concluded that the Malaysian healthcare system has made impressive health gains for its citizens (Ministry of Health Malaysia & Havard T.H Chan School of Public Health, 2016).

Malaysia has two types of healthcare services; the private and the public. There are 2,871 Ministry of Health clinics and 150 public hospitals managed by the Ministry of Health and two other Ministries; Ministry of Education and Ministry of Defence (Ministry of Health Malaysia & Havard T.H Chan School of Public Health, 2016). These public health facilities are distributed throughout Malaysia and the government of Malaysia has subsidized the public clinics and hospital services for better access to the public. The public only pay nominal fees for treatment compared to the private clinics or hospitals whose costs must be borne by patients, employers or insurance providers. As of 2014, there were 6,978 private clinics and 267 private hospitals throughout the country, which shows

that the private health services have also blossomed alongside the public health services (Ministry of Health Malaysia & Havard T.H Chan School of Public Health, 2016).

The Malaysian health care system is monitored by the Ministry of Health led by the Minister of Health. The overall functions of the Ministry are under the supervision of the Secretary General who oversees all eight programs at the Ministry level, which are two management programs and six technical programs. The management program consists of all management arms which are divided into Finance and Management. The technical programs are public health, medical, research and technical support, oral health, pharmaceutical services and lastly the food safety and quality. The technical programs are also under direct supervision of the Director General of Health. All the State Health Departments and Institutions report directly to the Secretary General and Director General of Health.

The Public Health program is aimed at both the population levels and personal levels. At the primary level, individuals have access to preventive, promotive and curative services. At the national level, the ministry focuses on educating the public on disease control, health promotion, nutrition and family health development. The services are provided at both clinics and hospitals. Other

programs such as oral health and food safety and quality also play an important role in public health services.

The Ministry of Health is the biggest provider of secondary and tertiary levels of health care with about 142 hospitals supervised directly by the Minister of Health (Ministry of Health Malaysia & Havard T.H Chan School of Public Health, 2016). Other ministries such as the Ministry of Education supervises three university hospitals while the Ministry of Defence supervises five military hospitals. All 150 public hospitals report directly to the Director General of Health with decentralization of power to the State health departments. State Health Departments follow the Ministry of Health structure of both management and technical programs, with the exception of Research and Technical Support Program that operates at federal level. District Health Offices manage the districts level of public health care by providing health services through their critical service delivery units (clinics) and the secondary and tertiary levels services at the district hospitals (Ministry of Health Malaysia & Havard T.H Chan School of Public Health, 2016).

The provision of health services in Malaysia has grown tremendously in the last four decades with increasing numbers of clinics, hospitals and doctors. In 1970 there were 1,167 clinics and 72 public hospitals nationwide, while in 2014, there were 2,871 clinics, an increase of 40.65% and 150 public hospitals an increase

of 48% (Ministry of Health Malaysia & Havard T.H Chan School of Public Health, 2016). Health facilities in Malaysia have reached many urban and rural areas in the last four decades. Although mainly private clinics and hospitals existed in urban areas, the government has ensured that the clinics and *flying doctor* services have reached the rural and remote areas including Sabah and Sarawak.

As of 2014, the number of public and private health workers in Malaysia (doctors, dentists, nurses, pharmacists and assistant medical officers) was 181,287, with 132,364 in public facilities and 48,923 in private facilities (Ministry of Health Malaysia & Havard T.H Chan School of Public Health, 2016). The number of doctors per 1000 people has also increased from 0.22 in 1970 to 1.47 in 2014. These figures do not include trainee doctors which would increase the proportion to 1.72 doctors per 1000 people.

Malaysian public clinics and hospitals are mostly patronized by the low-income citizens due to its affordable fees and free services. Thus, they are typically overcrowded with long waiting queues. According to a report produced in 2012 by the Department of Statistics Malaysia, there are 147 public hospitals in Malaysia serving 19.4 million patients per year. In addition, based on health facts provided by the Ministry of Health Malaysia, there were 18,884,002 outpatient attendances and 2,264,019 admissions in all Malaysian public hospitals in the

year 2013 (Health Informatics Centre, 2014). These figures highlight the volume of work that Malaysian health care employees have to contend with. Previous studies on stress management also found that some of the highest stress rates are found in the hospital, thus making it one of the most stressful workplaces (Buttigieg & West, 2013). Studies on the sources of stress among the healthcare employees in Malaysian public and private hospitals found that among major contributors to job stress in hospitals were job condition, job autonomy, work overload, repetitive work and the working environment (Haslinda & Tsyuey Tyng, 2016; Ismail, Mohd Ali, Muhtazaruddin, & Khalid, 2016; Beh & Loo, 2012; Nuruddin, 2000).

Working in hospital settings is indeed challenging. The demands of working in hospitals are unbearable to some and might affect their performance (Buttigieg & West, 2013). Job demands affect the quality of care given to the patients (Costa et al., 2014). Some of the hindrances to high job performance in hospitals are work overload, uncomfortable work environment and work system, ineffective supervision and high emotional demands (Kath et al., 2013).

Work overload is defined as the employee's own perception that they are given tasks beyond their capability to manage. Having overload of work might affect their job performance because they will feel overwhelmed and unable to finish the job. The hospital's employees normally work under time pressures, long

hours or shifts, high demands and for some, less social experience (Abd. Razak et al., 2011). In some cases, they are too tired and are unable to focus on the job. In this case, the patients' safety will be compromised. Studies on nurses have shown that, work overload may lead to job dissatisfaction, which in turn will lead to poor job performance and absenteeism (Long et al., 2013).

Ineffective or lack of supervision is another hindrance to job performance. Previous studies have found that supervision helps employees obtain better direction on the job. It also avails them support during difficult times and even acts as buffer for them. Effective supervision leads to job satisfaction, engagement and eventually high job performance. A study by Dawson, Stasa, Roche, Homer, and Duffield (2014) on turnover in Australian hospitals have found that, among the reasons for turnover among nurses are poor support, lack of recognition, feeling undervalued and disempowered. Godfrey (1978) in Mottaz (1988) has found that the major problems of supervision in hospitals is absence of management and leadership skills, abuse of power, lack of support as well as inability to respond to complaints. Poor and ineffective supervision; which is either too lenient, over supervision or abusive supervision might lead to low job satisfaction, poor job performance and high intention to leave (Apenteng, 2012; Mor Barak, Travis, Pyun, & Xie, 2009; Omisore, 2014; Reynolds, 2009).

On top of work overload and ineffective supervision, work environment, be it the physical or general environment, also has a role in affecting the job performance of hospital employees. The work environment is defined by the physical setting of the workplace, ambience, privacy, crowdedness and sense of control of the workspace. Butt, Khan, Md. Rasli, and Iqbal's (2012) study on nurses in public hospital, suggests that there is a relationship between quality of patient areas, safety, and quality of workspace with nurses' commitment. Djukic, Kovner, Brewer, Fatehi, and Greene (2014) have also found an indirect effect of physical work environment on nurses' job satisfaction. Thus, it is important for the hospital to provide comfortable work environment for the employees to ensure employees' satisfaction and commitment, which will lead to better performance. In Malaysia, the public hospitals have the best medical facilities, yet, in some old hospitals they lack of comfortable work areas, administrative equipment and efficient working systems. The situations need to be addressed immediately.

The hospital is also an emotionally challenging workplace. Every day, hospital employees attend to several patients, some with minor cases while others may have severe illnesses which sometimes results in death. Such working conditions, coupled with demanding patients, work overload, poor working environment and unsupportive supervisors will affect the employees' emotions,

become the stressor, cause burnout and impair the employees' performance. Bakker & Heuven's (2006) study on nurses and police officers found that demanding interactions resulted in emotional dissonance, which then led to job burnout and poor performance. Thus, employees' need to face their emotional demands and be able to cope with it to maintain an amiable facial expression and behaviour at work. In some cases, the force "absorption" of the demands might cause emotion overload and lead to an unwarranted outburst (Gabel-shemueli et al., 2014). They need to have strong emotional support from the management, their co-workers and family members. Without the support, the emotional conflict will become a demand that affects their performance at the workplace.

The demands of working in the hospital could be reduced if the hospital management is aware of the resources that could reduce the effects of such demands. For example, several studies have shown that resources provided at workplace will act as the buffer and diminish the demands. AbuAlRub's (2004) research on nurses, has found that perceived support from co-workers might increase job performance among the nurses and decrease their reported stress level. A number of researchers have also reported that leaders play the roles of motivator, supporter and driver for high job performance in organisations (Bass & Avolio, 1993; Buttigieg, Sandra, & West 2013; Eisenberger, Armeli, Rexwinkel, Lynch, & Rhoades, 2001; Rhoades & Eisenberger, 2002).

Supervisor's support is also related to job engagement and supportive leaders act as the buffer for the employees at stressful times (Othman & Nasurdin, 2013). As such, the employees will be able to perform their job at full capacity (Buttigieg & West, 2013).

In Malaysia, those who are employed by the government are considered fortunate. They only receive a moderate salary, but, they and their family members enjoy many benefits from the government. For example, they are entitled to free medical treatment, housing and car loan with special low interest, scholarship and loan to further studies for various level of employees. Their family members are entitled to medical benefits even after the employees' death. Thus, civil servant positions in MPS are considered as secured jobs. Such jobs are viewed as lifelong employment or as the Chinese proverb terms it *iron rice bowls* (Chen, 2007). The security of working for the government is considered a resource for those working in the hospital. The secured feeling will reduce any worries of losing their job, thus increase motivation, work engagement and retention rate (Lucky et al., 2013).

Training, career advancement and job autonomy are other job resources that could boost satisfaction, engagement, commitment and performance (Mrayyan & Al-Faouri, 2008; Awases, Bezuidenhout, & Roos, 2013). Dawson et al., (2014) also have found from their study on nurses in Australia, that lack of

recognition and limited career advancement opportunities are among the reasons for nurses' turnover. Moreover, the work environment does not support knowledge and skills transfer, lacks effective supervision and has low job autonomy. With ample training and knowledge transfer among hospital employees, various career advancement opportunities and autonomy in decision making at work; the effects of job demands might be reduced and job engagement and performance might increase (Bakker et al., 2007).

Given the importance of running a smooth, reliable and efficient hospital, the management of the hospital needs to ensure that their employees perform at optimal level to deliver high quality service. Failing to do so will result in complaints by the public. Based on a report by the Corporate Communication Unit, Ministry of Health Malaysia in 2014, there are various types of public complaints recorded such as delayed or no action, unfair treatment, lack of public facilities, abuse of power, failure to follow procedures, unsatisfactory service quality and failure of enforcement (Corporate Communication Unit Ministry of Health Malaysia, 2014). Public complaints mean that a lot has to be done by the management to ensure that patients are treated properly and with care.

1.6 The Measurement of Job Performance in the Malaysian Public Service

After defining and establishing the importance of job performance in the MPS, the discussion will now turn to the measurement of job performance. There are two ways of measuring job performance - through objective measures and subjective measures (Bommer et al., 1995). According to Wall et al. (2004) job performance can be measured by relative judgment or absolute value. Absolute value or objective measures are direct measures or countable behaviours such as the financial indicators or profit gains in the organisation. However, in the public service, absolute value is difficult to use since most public service organisations are non-profit organisations and appropriate financial records are thus difficult to gather because of reasons of confidentiality (Johari & Yahya, 2012). Thus, subjective measures are chosen because they are cost effective and because such data can be collected using questionnaires or interviews which tap into the current practice in organisations (Bommer et al., 1995).

Subjective measures or relative judgement is the type of measurement often used to explain job performance when objective measures are unavailable. Examples of subjective measures are job analysis, performance appraisals and disciplinary reports. Job analysis is used to measure job performance because it explains in detail the tasks of the employees and certain criteria set to analyse whether the task is fulfilled or not. Performance appraisals are also used in many

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organisations to measure job performance as it can incorporate all elements of individual and team effort. It is also a good means for collecting third party evaluation, because job performance is related to customer satisfaction and not employers and employees alone. Supervisory ratings have a better predictive rating of job performance compared to self or peer ratings (Van Dyne & LePine, 1998).

Nevertheless, for research purposes, job performance is often captured by using self-reported measures because it is cost effective and convenient (Al-Homayan, Shamsudin, Subramaniam, & Islam, 2013; Bakker et al., 2004; Islam & Al-Homayan, 2013; Jabroun & Balakrishnan, 2000; Kahya, 2007; Nabirye, Brown, Pryor, & Maples, 2011; Shaw & Gupta, 2004). According to Paulhus & Vazire (2005) self-reported measures are chosen by researchers because of the practicality, the potential for gathering vast information and ease in interpretation of data collected. The self-report is practical because it is cost effective and efficient to use. For a research that covers a large area of a target population, self-report can help to reduce the time spent on data collection and reduce the cost incurred during the process. For example, a session with hundreds of participants can be done at once compared to a one-on-one session of interviews. Even if participants are in their thousands, they can be reached online over a short period of time. During the session, many variables for testing

can also be collected in real time. For some constructs that require self-perception such as self-esteem, self-efficacy or motivation, self-report data method is one of the best ways to collect the data. This aspect of practicality has also helped researchers to gather vast information including the sensitive information. For example, certain behaviours are not always revealed or exposed to the public, such as behaviours related to sexual desire and criminal activities. Only those engaged in those private behaviours can share such information about themselves. Thus, self-report has helped researchers to gather vital information from their respondent's perception and contextualization. Despite these advantages, the disadvantages of self-reported measures must not be ignored. Thus, it is important that, the researcher understands the disadvantages and tries to find a remedy to minimize the effects. Some of the disadvantages of self-reports and the pre-emptive steps that can be taken by a researcher are discussed below.

Self-reports have been described as biased and prone to several validity issues such as participants' honesty and the introspective nature of answering questions (Korb, 2011). It is difficult to know whether participants answer the questions truthfully, especially about sensitive issues such as sexuality and criminal activities (Siegel et al., 1998). To overcome this issue, the researcher can instruct participants to put their completed questionnaires in a box instead of returning

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them to the researcher personally. This will ensure that the identities of the participants remain anonymous and their responses remain confidential. With this procedure in place, the participants will know that their responses cannot be singled out and as such they are protected from being exposed. Thus, the researcher has encouraged honest response from the participants.

Self-report questionnaires also have issues with response bias and rating scales. Different participants have different views on certain things regardless of the actual experiences they have faced (Donaldson & Grant-Vallone, 2002; Kormos & Gifford, 2014). Therefore, the answer "yes" or "no" to a question might carry a different meaning. For example, I might answer "yes" based on a single experience of an issue, while other respondents may answer "yes" only if they have experienced the same or a similar issue several times. This is also similar to the problem of rating scales. It is difficult to assess the different opinions of participants who answer a "5" or "6" in 1 to 7 scales. Some participants like to answer at the extreme end of a scale, whereas others like to choose the midpoint answers (Kormos & Gifford, 2014). This issue could be reduced by reversing several questions and later scoring the positive and negative questions separately to cater to the response bias problem. The researcher could also use the mean response of participants to address the problems of participants who answered only to the extreme end or the midpoint of the scale.

All types of measures have their limitations and it is the researcher's job to control and minimize their drawbacks by using validated and reliable questionnaires (Barker, Pistrang, & Elliott, 2015; Saidon, 2012). Therefore, we should not eliminate the usefulness of self-report assessment in behavioural studies, but, should bear in mind that any measure does have limitations and we need to minimize it.

1.6.1 Determinants of Job Performance in the Malaysian Public Service

There are various determinants or factors affecting job performance in the MPS. One of the determinants is human characteristics. According to the Public Complaints Bureau report, unfair actions and delay of work are the major complaints stated. The unfair actions and delay of work might be due to bias and procrastination of the employees.

Human characteristics in job performance can be explained by looking at the subjective measures of job performance. In job analysis and performance appraisals, the determinants are the task specific and non-task specific performance of the employees. Task specific performance is determined by certain factors, namely the skills and ability of the worker. An organisation hires its workers based on their abilities and skills to do what they are supposed to do in the organisation. Returning to the examples of the bakery and the hospital, the

baker is chosen because he or she has the ability to bake and the doctor is hired because he or she has the skills to treat patients (Sonnentag & Frese, 2002).

Apart from task performance, job performance can also be based on non-task behaviours (Johari & Yahya, 2012). Smiling, being polite and showing an interest in customers' requests are among these non-task behaviours. For example, some nurses while administering medication to patients may converse with the patient and try to put them at ease. Alternatively, nurses can also administer medication without talking to the patient. While, their job or task specific requirement is to administer medicine, a nurse who does not converse with a patient or try to put them at ease will have performed the task specific requirement well but not the non-task performance requirements. These non-task behaviours play an important role in interactions with customers. In their study on the relationship between customers' satisfaction and smiling, Soderlund and Rosengren (2008), found that customers were more satisfied when they received services from smiling workers compared to neutral service workers. For the nurse-patient relationship, smiling is a non-verbal behaviour to build rapport with the patients because smiling is an indicator of warmth, good humour and immediacy between two persons (Caris-verhallen, Kerkstra, & Bensing, 1999; Wang, Mao, Li, & Liu, 2017). In a study done by Caris-verhallen et al., (1999) of non-verbal behaviour between nurses and elderly patients, they found that

nurses often smile, nod and gaze at their patients in order to establish good rapport with them, which in turn makes them feel comfortable and helps in facilitating service delivery.

In addition to human characteristics, job characteristics is another determinant of job performance. The bureaucratic (red tape) nature of working in the MPS has made it even more difficult for civil servants to work efficiently (Tjiptoherijanto, 2012). Civil servants in Malaysia view their work as having too much bureaucracy and regulations that have to be complied with each time they complete a task (Bahari, 1999; Tjiptoherijanto, 2012). For example, there are several levels in the hierarchy of decision making that the civil servants have to go through before action can be taken. There are also few outdated and irrelevant regulations for performing tasks or making decisions. These bottlenecks as well as other job characteristic factors such as work overload, physical environment and supervision will be examined as determinants of job performance.

Changes in work roles and the work environment occur in most organisations including the public service. Civil servants in Malaysia have had to deal with many changes in policies and reform programs (Beh, 2014; Hassan, 2010; Siddiquee, 2014). Thus, civil servants need to adapt to new roles, new superiors, new co-workers and new work systems (Lim, 2007; Manan et al., 2015). In the last ten years, most hospitals in Malaysia have been refurbished or moved to new

premises. Thus, changes in the work environment has been inevitable. The ability to adapt to these changes is expected of all the workers. This study will investigate their adaptive performance in terms of facing new challenges at work.

1.6.2 Job Performance and Types of Job in Malaysian Public Hospitals

Job performance in a hospital setting is quite difficult to determine given the vast range of jobs that exists there. This research will not focus on a specific job type in hospitals but will examine different kinds of performance behaviours, such as task performance, contextual performance and adaptive performance of individual employees. Task performance will include the quantity of work, quality of work, the job skills and knowledge (Koopmans et al., 2013). Contextual performance will include behaviours that support the organisation as a whole especially on the extra activities or extra-role behaviour (Griffin et al., 2000). Adaptive performance, which is a recent addition to the measurement of individual job performance and relates to the employees' ability to adapt to work roles and environmental change will also be included (Koopmans et al., 2013).

There are various types of jobs in hospitals and this research tried to include as many as possible different types of jobs in the public hospitals. There are four categories of jobs in Malaysian hospitals. The first category is the physician or

the doctor, followed by the medical support group, the allied health professionals and the hospital management group. The medical support team mainly consist of nursing and pharmacy staff. The allied health professionals comprise those professionals that are different from the medical support team such as medical assistants, attendants, nutritionist, occupational therapist and radiographers. Last but not the least, the management group comprises hospital executives, information technologists and clerks.

1.7 Practical Rationale for the Research

This research has been motivated by the current landscape of the Malaysian Public Service which has shown a trend of decreasing job performance. Although various initiatives and programs such as the Excellent Work Culture (*Budaya Kerja Cemerlang*), the National Integrity Plan (*Pelan Integriti Nasional),* Vision 2020 (*Wawasan 2020*) and the Government Transformational Program (*Program Transformasi Kerajaan*) have been put in place by the government to improve the standard and image of public services, complaints from the public indicate the need to resolve issues surrounding service delivery and job performance among civil servants.

The health sector is one of the most important sectors in the MPS and public expectations demand that employees in this sector function at the highest level

of performance. Any complaints should be promptly attended to and treated appropriately and any wrongdoing such as delays in treatment delivery or inadequate standards in treatments should be resolved quickly. Therefore, it is essential that these poor performance issues are studied at both levels; the macro level (health system and organisation) and micro level (individuals) in which the causes and remedies can be well taken care of (Dieleman & Harnmeijer, 2006).

1.8 Empirical Rationale and Objectives of Research

Current research examines the relationship between JD-R, Subjective Wellbeing (SWB - work engagement, organisational commitment and negative personal wellbeing) with Job Performance. Job Demand-Resources model was introduced more than 18 years ago to understand and explain the behaviour at the workplace such as burnout, psychological stress and workplace efficiency. Work engagement was then introduced in the model to enhance the understanding of workplace behaviour (Schaufeli, 2017).

According to the JD-R model, every job has its own risk factors associated with job-related stress. These factors can be classified into two general categories, namely, job demands and job resources (Bakker & Demerouti, 2012; Bakker & Demerouti, 2007). Job demands (JD) refer to any physical, psychological, social and continuous organisational aspect of the job that requires emotional and

cognitive strength. Job demands drain the employee's energy such that the employee may require constant physical and emotional strength to adequately perform their job. Whereas, job resources (JR) are aspects of the job that could stimulate positive behaviour and efficiency at work as well as reduce the job demands and the associated physiological and psychological stressors. According to Schaufeli (2017), the JD-R model incorporates two different psychological processes, namely, the health impairment process (exhaustion, stress) and the motivational process. In the former, the presence of high job demands such as work overload may cause exhaustion of the employees' mental and physical resources, and lead to burnout and health problems. While in the latter, the presence of high job resources such as organisational support can increase motivation, induce work engagement and heighten high job performance (Schaufeli, 2017).

The JD-R model also proposes an interaction between job demands and job resources. For example, job resources may buffer the effect of high job demands and influence employees' motivation (Bakker et al., 2010; Xanthopoulou et al., 2007; Hakanen et al., 2006). Previous studies have extended the JD-R model by including personal resources. Xanthopoulou et al. (2013) in their study on personal resources (self-efficacy and optimism) found that self-efficacy was positively related to work engagement when the job demands such as emotional

demands were high. On the relationship between JD-R and job performance, previous studies found that the motivational aspects of JD-R have positive effects on job performance. Contrastingly, job strains such as burnout and exhaustion could negatively impact job performance. The premise for this conclusion is that workers with high job resources were more likely to be motivated and engaged to perform better on job tasks. While workers that have high exhaustion or health problems would likely experience depleted energy that may affect their concentration on the tasks given and their performance at work (Schaufeli, 2017).

Researchers in recent times have found evidences of causal and reversed causal effects between JD-R and wellbeing. The interaction between job demands, job resources, personal resources, work engagement and job performance, and the spiral effects between the variables have emerged and attracted researchers to explore more. The work environment has changed over the years to accommodate the demands and challenges that emerge. Employees now create their own resources which enable them to stay motivated, engaged, and to perform well at work (Tims et al., 2013; Bakker et al., 2012).

The JD-R model continues to be used to explain wellbeing and behaviours at work; and researchers have become more intrigued with the findings over time. The interaction between JD-R, wellbeing and job performance, which is the main

interest of this study, has been studied extensively by researchers. However, most of these studies have been carried out in western contexts, thus, it is important to examine whether these theories are applicable and acceptable in the Asian region and workplace especially in Malaysia. The current research incorporates the JD-R model in a demographically different condition and tests whether it can be generalised to the Malaysia context.

The current research is among the few studies that have examined the relationship between JD-R and job performance in the Malaysian workplace. In addition, this is the first study that examines JD-R and job performance of health care workers in the MPS hospitals. As explained previously, there has been tremendous improvement in the availability of health services in Malaysia, as evidenced by the increase in the numbers of clinics, hospitals and doctors. The rise in the number of health facilities has resulted in an increase in patients and services provided. For example, in 2013, public hospitals in Malaysia is reported to have served 18.9 million outpatients and admitted 2.3 million patients (Health Informatics Centre, 2014). These figures show the enormous volume of work that Malaysian health care workers undertake. Thus, previous researchers acknowledge that the hospital is indeed one of the most stressful workplaces (Buttigieg & West, 2013). High workload might affect health workers psychologically and physically which in turn might affect their performance at

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work. Taking the working condition in the MPS hospitals into consideration, it is understandable why the complaints received from the MPS healthcare ranks among the highest recorded complaints among the ministries and departments in the MPS. As explained in section 1.4.3, the State Health Department had the third highest number of reported cases compared to other agencies under the ministries (Malaysian Public Complaints Bureau, 2016). The volume of public complaints in the MPS hospital means that the management has to promptly act in order to ensure that proper services are provided to patients and any shortcomings are rectified.

To be able to run a proper improvement activities and programs, the MPS needs to have empirical supports and evidences, thus, the researcher as a government employee intends to provide the supports for MPS. The researcher in current study intends to explore the status job performance in MPS and test whether the JD-R proposed model could explain job performance in MPS hospitals using the mixed method study.

The mixed method used in the current research is also the first in JD-R study in the MPS context. Study 1 used the qualitative method to investigate the status of job performance in the MPS. In Study 1, the researcher explored the perception of healthcare employees regarding job performance status, the issues that prompted complaints on job performance and the factors affecting job

performance in the MPS. Most previous studies collected data on JD-R and job performance from third parties such as the clients or the supervisors of health workers rather than the civil servants themselves. Likewise, these studies were mostly conducted in office settings and not the hospital. For instance, studies done by Johari & Yahya (2016), Yunus (2011) and Wan Mohd Amin et al.(2006) were conducted on civil servants who work in the office setting. Even the JD-R model was used by Panatik (2012) and Idris et al. (2011) in their studies, the respondents were among the Malaysian technical workers from the private sectors and not MPS healthcare workers. Chye Wah (2014) study on nurses in the MPS hospital sector did focus on job demands and job resources, but not on the job performance of the health workers.

In the current study, civil servants in MPS hospitals were the direct respondents. They provided data about their perception of job performance as employees in MPS hospitals. Study 1 also explored the factors affecting job performance in the MPS. The identified factors were used to form additional items for the JD-R model in Study 2. By incorporating the new items, the researcher intended to propose a new model of JD-R that may be suitable and applicable in the MPS and other work settings similar to the MPS.

For Study 2, quantitative method was applied to test for the relationship between JD-R, Subjective Wellbeing (SWB) and Job Performance (JP). It examines the

moderating effects of job demands (JD) on the relationship between job resources (JR) and personal resources (PR) with subjective wellbeing (SWB). Moderator variables are the variables that affect the strength or direction of the relationship between independent variables (IV) and dependent variables (DV) (Baron & Kenny, 1986). This study explains when job resources (IV) and personal resources (IV) would affect subjective wellbeing (DV) in the presence of job demands (Moderator).

Subjective wellbeing is the term used in this study to explain the positive or negative effects of the employees (Diener, Sandvik, & Pavot, 1991). For the current study, there are three constructs that represent SWB, namely, work engagement, organisational commitment and negative personal wellbeing. JD-R in the current research consists of sixth sub-constructs for job demands: work overload, emotional load, general work environment, work privacy, work control and policy and leadership. The job resources have four sub-constructs; job autonomy, organisational support, job security as well as job growth, and advancement. Personal resources consist of existing personal resources (self-efficacy, organisational-based self-esteem and optimism), religiosity and spirituality.

The present study also tested the mediating effects of subject wellbeing constructs; work engagement, organisational commitment and negative personal

wellbeing on the relationship between job resources and personal resources with job performance. The mediator variable explains the relationship between IV and DV. The mediators can explain how and why there is a relationship between the IV and DV and can be a tool to help an IV to produce changes on a DV (Baron & Kenny, 1986). In the present study, the researcher aimed to test how and why the subjective wellbeing variables (Mediator) were able to affect the relationship between job resources and personal resources (IV) with job performance (DV).

The present study also focused on the personal resources (PR) construct in JD-R. Personal resources such as self-esteem, self-efficacy and optimism were proposed by Bakker and Demerouti (2017) as constructs that can play similar roles as job resources. Personal resources refers to how an individual perceive that they can control their surroundings. People with high optimism, self-esteem and self-efficacy normally view their life positively and believe that they are able to control unexpected incidents in the future. Bakker and Demerouti (2017) proposed that personal resources have a positive relationship with work engagement and can buffer the impact of demands at work. The limitation of studies on these relationship; personal resources, job demands and work engagement, motivated the researcher to investigate more on the relationship between these constructs.

In addition to the three existing constructs of personal resources (self-efficacy, organisational based self-esteem and optimism), the current study proposed two variables as personal resources: religiosity and spirituality. These two variables were added in order to acknowledge the fact that Malaysia is a multiracial nation where religion plays an important role. Majority of the Malaysian population profess a religious belief and Malaysians view religion and spirituality highly (U.S. Commission on International Religious Freedom, 2018; *Federal Constitution*, 2010). Even in the MPS many programs related to religion and spirituality are used to instil positive values and enhance job performance. Thus, it was appropriate for the current study to include religiosity and spirituality as additional sub-constructs for personal resources. Religiosity is an organized belief to bring one close to God, while spirituality is the positive values sought after to find meaning in life (Osman-gani et al., 2013). The two constructs have their own strengths to affect the belief system of an individual in a manner which is similar to the existing personal resources. According to previous researchers, religiosity and spirituality do affect behaviour at work (Neyrinck, Vansteenkiste, Lens, Duriez, & Hutsebaut, 2006; Adams, 2008; Osman-gani et al., 2013; Rahim & Omar, 2017; Zahrah et al., 2017). Several researchers also found that faith and prayer play an important role in the workplace and can positively affect motivation (Neyrinck, Vansteenkiste, Lens, Duriez, and Hutsebaut, 2006; Adams, 2008). A study on executives by McGee and Delbecq (2003) also found

that the respondents believed that prayer inspired them to make appropriate decisions and help them maintain their mental and emotional capabilities (Osman-gani et al., 2010). Alkhathran (2011) study on spirituality and religiosity among bank workers in Saudi Arabia also found that spirituality and religiosity have positive effects on job performance. However, only a few studies have been conducted in hospital settings to examine the relationship between religion and an employee's behaviour at work. Thus, the current research set out to fill this gap.

Job performance in this study comprised four sub-constructs; task performance, contextual performance, adaptive performance and overall performance. There were several studies found on job performance and JD-R in the MPS. The work environment, work overload, work system, supervision and leadership were among job demands that were identified in those studies. A study on three Malaysian agencies by Selvanathan et al., (2013), has found that there is a relationship between positive attitude and job performance among civil servants and a study on the Malaysian education staff by Hamzah and Abdullah (2010), has found that workload has an impact on job performance.

However, there is minimal empirical evidence that relate the job performance with JD-R among the civil servants in the MPS. Previous research has also primarily focussed on the customer's perspective of civil servants' job

performance. This research intends to study the issue of job performance from the civil servants' perspective and give voice to their own issues and concerns. It is hoped that the findings from this research will offer insight into how the MPS might better overcome the issue of poor job performance in hospital settings.

Therefore, the **first objective** of the empirical study in this thesis is to explore the status of job performance in Malaysian Public Service (MPS) from the civil servants' perspective and identify the main issues that caused the complaints of the public service job performance. The **second objective** of the study is to investigate the factors affecting job performance in the MPS. Both investigations will be done through qualitative interviews with the hospital staff in Study 1.

The **third objective** of this research was to test the relationship between the JDRS, SWB and job performance in a new proposed model for JD-R. The new items found in Study 1 will be added to the existing JD-R questionnaire which is the Job Demands-Resources Scale (JDRS) by Jackson and Rothmann (2005) to form a new JD-R questionnaire. Malaysia is a democratic nation with Islam as its official religion, albeit non-Muslims are free to practice their religious faiths (*Federal Constitution*, 2010; Ministry of Health Malaysia & World Health Organisation, 2013). Thus, it is appropriate that values derived from Islam are

integrated into the workplace. Civil servants are expected to follow their respective religious teachings and uphold some form of spiritual belief. Spirituality and religiosity were included in the JD-R model as new components of personal resources to test for the relationship between personal resources and job performance via subjective wellbeing. Thus, the **fourth objective** of the study was to examine whether spirituality and religiosity are part of personal resources sub-constructs and to test whether spirituality and religiosity directly affect job performance. Another model was tested using structural equation modelling to test for the fourth research questions.

1.9 Chapter Summary and Conclusion

This chapter has provided the importance and the definition of job performance in organisations especially in the context of Malaysian Public Service and Malaysian Public Health Care as well as the practical and empirical rationale for the current research that lead to the main research objectives. Current research found that the JD-R model was mainly tested in western countries with different work setting, thus, current research was tested in MPS hospitals setting. The mixed method used to test in current study is also the first in MPS hospitals studies. Current research has also included new sub-constructs for the personal resources variable in the proposed research framework. Current research has four objectives; 1) to study the status of job performance in MPS, 2) to find the factors

that could affect job performance in MPS, 3) to propose and test the new proposed model of interaction between JD-R, subjective wellbeing and job performance and 4) to study religiosity and spirituality as part of personal resources and to test for the direct effects of religiosity and spirituality on job performance. The following chapter provides a systematic review of the theories and the literature underpinning the current research, the conceptual framework, followed by the objectives, research questions and hypotheses of the research.

CHAPTER 2 – JOB PERFORMANCE: A REVIEW OF LITERATURE

2.0 Chapter Overview

This chapter discusses the organisational theories related to job performance, the relationship between JD-R and job performance, the theoretical framework underpinning the research, the research questions and hypotheses of the research. In the first section of the chapter the theories related to job performance are elaborately discussed. The second section explains in detail the relationship between job performance and JD-R theories, followed by a description of job demands, job resources and personal resources constructs. The third section considers job demands as the moderating factor of the relationship between JD-R and job performance and Subjective Wellbeing (SWB) as the mediating factor of the relationship between JD-R and job performance. Subsequently, the theoretical and conceptual framework of the study, the four research questions and hypotheses of the study are discussed. The chapter concludes by highlighting the importance and contribution of the study to the Malaysian Public Service and the body of literature.

2.1 Theories Explaining Job Performance

In the last decade, job performance has been a recurrent topic in the fields of management, business and applied psychology. Researchers in these fields have studied various topics on job performance such as its definition, the measures and the predictors of job performance. For applied psychologists, specifically those in industrial and organisational psychology, job performance is a popular theme to study. Based on a bibliometric review of empirical studies on job performance that appeared on journal of management and psychology, the researchers have found that the Journal of Applied Psychology and four other psychology related journals have published the most job performance articles compared to other journals (Fogaca et al., 2018). This finding is an indication that the psychology field views job performance as an important element in the study of workplace behaviour.

This section discusses five selected theories under organisational psychology that are related to job performance. These theories use the occupational stress model and the employee wellbeing model to explain job performance. They are the Person-Environment Fit Theory (PE Fit), Social Exchange Theory (SET), Conservation of Resources (COR), Job Demand-Control Model (JD-C) and Job Demands-Resources Theory (JD-R). The conception and foundation of the theories will be discussed and previous research using these theories to explain

job performance and other factors related to job performance in this study will be reviewed.

2.1.1 Person-Environment Fit Theory (PE Fit)

Most of the researchers who study job performance tend to focus on personality or attitude as the drivers of job performance. However, other scholars argue that our behaviour is the interaction between the individual inner self and the environment. We act like we do in response to our environment, similarly, we attempt to shape ourselves according to the environment in order to survive (Cavanaugh, 2011). A plethora of studies have investigated the relationship between fit and behaviour, attitudes at work, decision to work in an organisation and intention to quit (Cable, Daniel & Judge, Timothy, 1996; Gregory, Albritton, & Osmonbekov, 2010; Greguras & Diefendorff, 2009; Karakurum, 2005; Kristof, 1996; Oh et al., 2014; O'Reilly III, Chatman, & Caldwell, 1991; Westerman & Cyr, 2004).

The match between the individuals' characteristics and the environment is known as Person-Environment Fit (PE fit). Studies suggest that fit emerges because individuals have needs that require fulfilment, and in order to fulfil these needs, people will act accordingly. It therefore follows that at work, people will do their job in accordance with their own needs. Person-Environment Fit is

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subdivided into Person-Organization Fit (PO Fit) and Person-Job Fit (PJ Fit). Kristof (1996) has defined PO Fit as "the compatibility between people and organisations that occurs when: (a) at least one entity provides what the other needs, or (b) they share similar fundamental characteristics, or (c) both" (p.4-5). The PJ Fit refers to the match between the employees characteristics and the specific job (Kristof-Brown & Guay, 2011). When employees fit with the organisation and their job, they will value the organisation and the job more, thus creating congruence between themselves and the organisation. The high degree of congruence can result in increased organisational commitment, decreased turnover rate and increased organisational citizenship behaviour (Gregory, Albritton, & Osmonbekov, 2010; Kimura, 2011).

A meta-analytic study of PE-fit by Oh et al. (2014) compared the relationship of Person–Environment Fit dimensions with work attitudes and job performance across East Asia, Europe, and North America. They found person-supervisor fit as the most important fit dimension for job performance in North America (Oh et al., 2014), albeit this finding was not part of their initial hypotheses. They attributed the peculiarity of this finding to second order sampling error and subjective job performance rating by the supervisors. Thus, they suggest that if performance is measured objectively, person-job fit is the best predictor of the job performance.

Complementary fit and supplementary fit are two other forms of Person-Environment Fit that have been identified by Muchinsky and Monahan (1987). Complementary Fit means that the environment is defined by the work demands, while Supplementary Fit is defined by the individuals who occupy the environment. For Complementary Fit, Muchinsky and Monahan (1987) have described it as "the weaknesses or needs of the environment are offset by the strength of the individual, and vice-versa" (p.271). This relates to the ability of employees to perform in the organisation and the ability of the organisation to offer the rewards that employees want (Muchinsky & Monahan, 1987). Therefore, Complementary Fit can explain how the attitudes of employees at work can be affected when there is or isn't a fit between their desires and the supplies provided by organisations (Cable & Edwards, 2004).

The studies highlight that environment fit does occur and could considerably affect the employees' attitude, performance and the organisation. However, the degree of the relationship is dependent on many factors and how the studies are designed. As suggested by Oh et al. (2014), if the performance is measured objectively, this theory could be the best predictor of the job performance. However, since the current study measures job performance based on the perception of the respondents, the Person-Environment Fit Theory (PE Fit) was found to be an unsuitable theory for the current study.

2.1.2 Social Exchange Theory (SET)

Social Exchange Theory (SET) is a theory that was first developed by George C. Homans in 1958. Based on B. F. Skinner's experiments and findings on pigeons, Homans proposed a theory of social behaviour as an exchange and expanded it to human interaction (Homans, 1958). He explained the interaction as an exchange between parties after considering the rewards and costs resulting from the interaction. Peter Blau (as cited in Redmond, 2015) then extended this exchange concept to social context in which he explained that social exchange is not only in terms of economic exchange but also in other types of returns depending on the agreement between the parties.

SET is regarded as a resource theory because anything that has value and can be transmitted from one party to another is a resource (Foa & Foa, 2012). If people smile and say thank you to us, it will make us happy and we will take that as a resource for us to keep going in life. Promotion and increment of wages are also considered as valuable resources in the workplace. SET combines and categorizes resources which are normally exchanged in a relationship or social behaviour into six groups: money, love, status, information, goods and service (Cropanzano, 2005; Karatepe, 2012; Rupp & Cropanzano, 2002).

The most important aspect of SET is how individual behaviours of give and take occur as a way of retaining resources. People give something to other people because they want something in return. The reaction of the other person is either to return something or take away something. For example, a boy tidies his room because he wants his mother to praise him and to avoid being scolded. His behaviour of tidying his room gives him the desired approval (i.e. praise) from his mother, whereas, if he does not tidy his room, his mother's response might be unfavourable. He could be scolded and his mother may also take away some of his privileges.

In organisations, employees always seek for balance in their work environment by having the required resources to do their jobs, adequate salary or allowance, good facilities, good support and supervision. Employers would then expect the employee to work hard, finish their job on time and follow the rules and procedures of the organisation (Rupp & Cropanzano, 2002). This social exchange will foster a harmonious work environment. Employees in a harmonious and positive work environment will return the goodwill of the organisation through their level of engagement and commitment (Andrew & Sofian, 2012). On the other hand, an imbalanced relationship will cause disengagement, reduced effort and commitment (Tourigny et al., 2013).

According to Cropanzano's (2005) early review of SET, not all of these resources have been studied extensively and it remains unknown, which rules apply to which resources. Cropanzano (2005) also argued that this vagueness causes misinterpretations and multiple interpretations in studies using SET as their framework. For example, SET assumes that people act rationally while deciding on an exchange. However, people differ in their ways of reciprocity. Some people want their act of goodness to be reciprocated while others may not be bothered (Cropanzano, 2005). It is also difficult to explain some issues using SET such as altruism or humanitarian acts. Cropanzano, Anthony, Daniels, and Hall's (2017) latest reviews on SET have discussed four areas of concern for SET which are: 1) SET has overlapping constructs that need to be explained clearly, 2) the construct's lack of further clarification on the definition of positive and negative component of behaviour, 3) SET has confusing uni-dimensional of what is to be considered as desirable action or undesirable action 4) SET's behavioural prediction is vague. Therefore, it is difficult for researchers to explore SET in their studies before working on the remedies to these issues discussed by Cropanzano and colleagues.

2.1.3 Conservation of Resources (COR)

Conservation of Resources (COR) Theory was introduced by Steven Hobfoll in 1989 to explain stress coping (Hobfoll, 1989). According to Hobfoll, people

acquire, maintain and protect their resources but stress occurs when they sense that they might lose their resources. The COR theory is in line with most psychology theories which postulate that people strive to obtain positive reinforcement in life and seek pleasure by acquiring social, physical and psychological resources for their life (1989).

There are four categories of resources suggested by Hobfoll (1989): objects, conditions, personal characteristics and energies. Object resources such as houses or cars are sought after due to their rarity and high cost to obtain. While condition resources are wanted by most individuals because of their value. For example, employment and marriage are two things that can change an individual's outlook in life. A good job will help them acquire a bigger house and a good marriage will result in a happy life. Personal characteristics, which include personal traits, skills and self-esteem, can aid an individual to resist stress. Lastly, resources such as time, money and knowledge are required to obtain other resources.

COR theory explains that when resources are not threatened, people will accumulate them to prepare for future loss of resources (Hobfoll, 1989). This surplus of resources will lead to positive wellbeing and can help them to cope with stress as well as change stress to eustress. On the other hand, those who are

unable to accumulate resources will be prone to stress and may resort to being self-protective.

People do all kinds of things to obtain and protect their resources. Some people obtain resources from their environment while some may exchange their resources with others. For example, to be loved, one needs to love others and to be paid for a job, a worker has to invest energy and time to do the job properly. Resources-job performance relationship according to COR researchers is explained based on resources losses or resources gains (Hobfol, 2001; Wheeler, Harris, & Sablynski, 2012). Loss of resources affects the employees' motivation and in turn affects their job performance. Therefore, it is important that employees sustain or keep replenishing their resources in order to perform well at work. In addition to this finding, a review of COR theory on burnout and engagement suggests that burnout and work engagement process can be activated or sustained depending on the resource level (Gorgievski & Hobfoll, 2008). A top performing employee who does not gain resources will not be very engaging. Therefore, in order to overcome this and continue to perform better on the job, an employee needs to acquire resources from time to time.

Since 1989, the COR theory has been cited by many scholars in organisational behaviour research, however, critics of the theory have argued that its definition of resources is debatable and how people decide the value of the resources is

unspecified. In a review of the COR theory, Ungerath (2012) found six areas that needed to be addressed. One of his main criticisms was that the four categories suggested by Hobfoll are not exhaustive. Ungerath (2012) argues that Hobfol (2001) did not include social support in any of the categories due to the claim that social support is ambivalent, and yet other fields of study such as clinical psychology found that social support is one of the factors that could affect health and wellbeing. Halbesleben, Neveu, Paustian-Underdahl, & Westman's (2014) share the same view with Ungerath (2012) that the conceptualization, the process of conservation and the acquisition of resources in COR theory are actually vague. Researchers need to understand how the resources are defined and how they help in attaining goals, how the resources are valued by individuals and a further clarification on the process of conserving and acquiring the resources. It is pertinent that the uncertainties of the COR theory have to be resolved before it can be used in the current study.

2.1.4 Job Demand-Control Model (JD-C)

Job Demand-Control Model (JD-C) is one of the leading models of stress theory introduced by Karasek (1979). The model suggests two important aspects of work stress factors, which are job demands and job control. When the demands are beyond the control, stress will occur. Working under stress will affect the health and performance of the employee. Job demands or psychological stressors

are related to work overload, role ambiguity, personal conflict and time constraints. Job control or decision latitude is the ability or leeway in making decision by the employee. In the environment of high job demands and lack of power in decision making most likely stress will occur and affect the performance (De Bruin & Taylor, 2006).

Karasek divided the JD-C into four quadrants of job demands and job control working environments (De Bruin & Taylor, 2006). The first quadrant is the high job demands and low job control work environment, which results in high strain job. A high strain job is defined by intense physical and psychological demands but is low in decision-making ability. Therefore, it is quite difficult for an employee in a high strain job to act and control their job. In the end, high strain job causes illness and stress to the employee and affects performance.

The second quadrant is the high job demands and high job control environment, which is called active work environment. An active work environment offers the employee a challenging and demanding job environment which is also high in the decision-making latitude. This give the employee an opportunity to work and solve his or her problems. Healthy workers will perform excellently.

The third work situation is the low job demands and high job control environment. The jobs under this quadrant are defined as low in physical and

psychological demands, and high in control and decision latitude. The workers are normally happy and healthy.

The last quadrant is the low job demands and low job control environment which refers to passive jobs. A passive environment is a low job demands and low job control environment where a worker faces unchallenging and sometimes irrelevant work that leads to boredom and lack of interest. Workers in this situation can become unhappy and unhealthy, which in turn, can have a negative influence on their job performance.

Despite this model being widely used by researchers, many findings of the studies were not able to find the so called *interaction effects* between demand and control as suggested in the model (Bakker, Veldhoven, & Xanthopoulou, 2010). Hence critics of the JD-C model have argued that it lacks depth and is not sensitive to the workplace surroundings (Bakker, Veldhoven, & Xanthopoulou, 2010; Ibrahim & Ohtsuka, 2012). Johnson and Hall (1988) presented an additional facet to the Job Demand-Control Model by including social support as a moderating factor. This was to counter the argument that job control was not the only resource available to cope with demands at work. Other resources such as support from leaders and other colleagues also play an important role. In a sense, this revised model, paved the way for the Job-Demands-Resources (JD-R) Model, which serves as the theoretical foundation for the current study. The

JD-R by Demerouti, Bakker, Nachreiner, and Schaufeli (2001) incorporates these two categories of job characteristics: the job demands and job resources.

2.1.5 Job Demands-Resources Theory (JD-R)

The JD-R Model has been used to explain and predict employees' wellbeing and performance for more than 18 years. Job burnout, job motivation, work engagement, job enjoyment, absenteeism and organisational commitment are among the areas that have been studied by various researchers using this model. The model has been meta-analysed and new ideas were proposed to improve the JD-R model until it became a theory.

Job Demands-Resources Theory suggests that every job has its own risk factors that lead to work stress (Bakker & Demerouti, 2012; Bakker & Demerouti, 2007). The risk factors are called job demands and job resources. Job demands refer to any physical, psychological, social and continuous organisational aspects of a job that requires emotional and cognitive strength. Examples of professions with heavy physical demands are nursing, construction and law enforcement. Professions with high cognitive demands are academics and scientists, whereas, customer service is the type of work with high social demands.

Job resource is the other domain of the JD-R theory. Job resources are important for attaining work targets, building personal strength and development at work,

and most importantly, they can help in countering the job demands, which may lead to job stress and other psychological problems. Examples of job resources are power, job expertise and interpersonal relationships with co-workers and supervisors. According to Demerouti and Bakker (2011) while job demands can reduce energy and might cause job strain, job resources on the other hand can ease or release the burden of doing the job. In some cases, job resources can moderate job demands to produce positive outcomes at work. For instance, work overload can make the worker feel tired and stressed, but with a little help from a co-worker, that person might be able to complete the job at hand. Job resources are also important in their own right because they contribute to changing employees' behaviour or attitude by stimulating their motivation. Job resources can come from all levels of work such as the task itself (through task significance and task clarity), the organisation of work (participation in decision making), social interactions with co-workers (interpersonal relationship, team work) or the organisational policy (pay system, career advancement or job security) (Bakker & Demerouti, 2007).

Bakker and Demerouti (2012) contend that job demands and resources are also the two important components for nursing the employee's wellbeing because they can trigger the health impairment process and/or a motivational process. In most cases, by consuming effort and energy from job resources, job demands

will cause exhaustion and psychosomatic health complaints (Bakker & Demerouti, 2012; Bakker & Demerouti, 2007; Hakanen, Bakker, & Schaufeli, 2006). Alternatively, job resources predicts work enjoyment, motivation, and engagement by fulfilling the basic need for autonomy, relatedness, and competence (Bakker, 2011; Bakker, Hakanen, Demerouti, & Xanthopoulou, 2007).

Bakker, Demerouti, and Schaufeli's (2003) study on absenteeism and turnover intentions using the JD-R Model in the Dutch Telecom industry has found that job demands such as work pressure, computer problems, emotional demands, and changes in tasks cause health problems among workers, resulting in absenteeism due to sickness. Absenteeism and sickness will in turn affect job performance. Job resources such as social support, supervisory coaching, performance feedback, and time control on the other hand reduce intention to quit (turnover) by increasing dedication and commitment.

Bakker, Demerouti, and Verbeke (2004) have found similar results that JD-R initiates two distinctive psychological processes in which job demands such as work pressure and emotional demands cause exhaustion and in turn predict role performance. On the other hand, job resources such as autonomy and social support lead to high levels of work engagement and influence extra-role behaviour (Rodriguez-Munoz et al., 2012).

Another resources in the JD-R model in personal resources. Personal resources such as self-efficacy, self-esteem and optimism have been found to have similar effects to job resources. Xanthopoulou et al., (2013) study on employees in the electronic company in Netherland found that self-efficacy but not optimism buffered the effect of emotional demands on work engagement. This study provides an insight on how employees with emotional demands at work could stay engaged with the presence of personal resource such as self-efficacy. The next subsequent sections will discuss further on job performance and JD-R to highlight the best features of JD-R that become the reason why JD-R is chosen over other theories to be the backbone of this thesis.

2.2 Job Performance and Job Demands-Resources Theory

The following section reviews several studies that examined the relationship between job performance and the JD-R Theory. The section has three sub-sections that cover the literature on job demand, job resources and personal resources and how these relate to job performance.

2.2.1 Job Performance and Job Demands

In this section, the relationship between job demands constructs and job performance will be explained in detail. The relationship will be discussed based on the findings of previous research in the field.

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2.2.1.1 Work Overload

Work overload or excessive work demands compared to the resources available to complete one's work is a stressor or threat to job performance. Too much work can be a problem when one is racing against time. When given a task, an effective employee will do it immediately, however, the accumulation of one task after another might be an obstacle to effective job performance. Work overload can also be due to unforeseen circumstances such as when employees are given tasks that exceed their ability and capability (Abd. Razak, Yeop Yunus, & Mohd Nasurdin, 2011; Gilboa et al., 2008; Jensen, Patel, & Messersmith, 2013).

Folkman and Lazarus works have proposed two dimensions of stressor-performance relationship to explain how work overload affects performance (Folkman, Lazarus, Richard, Dunkel-Schetter, DeLongis, & Gruen, 1986). The first dimension is when a task is considered a hindrance or a threat, the employee utilises the available resources and personal energy to cope with the job demands. Doing so might cause anxiety and discomfort, which perhaps detracts them from performing their job effectively. The second dimension concerns the challenge perspective where a job demand can be considered as a challenge to be better, and thus motivate the employee to perform well (Gilboa et al., 2008).

Work overload is not always a hindrance to job performance. Tasks which are given to employees who have a sense of responsibility might increase their motivation and invigorate high performers (Gilboa et al., 2008). In certain cases, high job demands stimulate employees to employ all the resources available, which in turn creates task enjoyment and commitment. High job demands (such as work overload) along with sufficient resources (such as ample time) will not be detrimental to all employees. Bakker & Demerouti, (2007) have proposed that job resources and job demands will interact to achieve work goals or basic needs (Bakker et al., 2010).

2.2.1.2 Emotional Demands

Emotional demands are the type of demands that involve those who have to work with people or those who work in the service sector. Previous literature called this type of demand *emotional labour* or *emotional work*. It was introduced by Hochschild in 1983 after studying flight attendants who found that their job could not be described by mere physical and cognitive demands as an extensive amount of their job involved managing emotions and attending to the passengers (Zapf, 2002).

For certain type of jobs, employees are expected to show appropriate emotion while dealing with customers or clients. Their jobs require them to tend to

customer enquiries and needs as well as provide emotional support. Doctors and nurses, for example, are expected to show empathy to their patients. Counter services staff need to smile and be ever ready to greet and tend to customers. The need to show appropriate emotions even to arrogant and fussy clients can sometimes be unbearable and lead to tiredness and burn-out (Santos et al., 2015). Thus, it causes them to behave inappropriately (i.e. ignoring, cursing) while handling the customers or clients.

2.2.1.3 Work Environment (General Work Environment, Work Privacy and Work Control)

Environmental constraints especially the physical environment at work can affect employee's performance. Limited space at work, uncomfortable ambient conditions, as well as an inability to access outside view can be detrimental to job satisfaction and engagement, which in turn, could hinder optimal levels of performance. Ambient conditions are the aspect of work environment where noise, light, air and view in the office are considered essential to some employees. Noise is one of the physical work environment features that is most studied by researchers. Noise is normally referred to as unwanted sound and it can come from many sources: the conversations of co-workers, a telephone ringing or even noise from the photocopy machine can distract an employees' concentration. A lot of research have found that controlling the level of noise in

an office is imperative because it can affect employees' level of satisfaction and performance (Sundstrom, 1991). Good lighting system can help employees perform their job in a pleasant environment and might affect job satisfaction and performance. Most studies also suggest that light intensity affects employees' performance through the visibility on the details of work (Sundstrom, 1991). Comfortable ambience is essential especially in a hospital setting, where health is the concern for both patients and workers.

Open plan offices are presumed to be more favourable and conducive environments for work, on the grounds that they help in improving the flow of work, increasing motivation, productivity, social facilitation and communication among employees (Allen & Gerstberger, 1973). However, many recent researchers have refuted those claims because there is no apparent evidence demonstrating that it can increase morale, efficiency or work habit (Brennan et al., 2002). In practice, employees occupying an open plan office often report that they experience less enthusiasm in their office mostly due to lack of privacy; both conversational and visual privacy (Brennan et al., 2002).

Privacy and control while working is needed by individuals for many reasons. Privacy for some people means a time of seclusion from others and avoidance of interaction, while others accentuate on the sense of control on one's personal accessibility (Duvall-Early & Benedict, 1992). It is clear from the foregoing that

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employees may prefer to work in a traditional private office compared to an open plan office or an office which they have to share with others (Vischer, 2007). The ability to control the work environment is often suggested by research to be a mediating effect of the environment itself. For example, if an employee perceives that he or she is able to control the distraction of other co-workers by closing the door, it will increase the level of privacy which may in turn lead to satisfaction in the workplace (Evans & Cohen, 1987).

2.2.1.4 Policy and Leadership

When working under close supervision, employees will have little latitude on decision making. Close supervision in the workplace may be deemed by an employee to be intrusive and can lead to distrust and negative feelings toward the supervisor. On the other hand, supervision that is too flexible or unstructured can lead to laziness and disrespect as employees may take advantage of the situation and fail to perform as expected. A study on restaurant workers has found that workers who work under close supervision and high workload, experienced high job strain (Kain, 2010). Conversely, however, in a study on the effects of work environment on productivity by Taiwo (2010) the employees indicated that strict supervision helped them improve productivity (Taiwo, 2010). These contradictory findings make it more interesting to explore the effects of supervision on job performance. In the MPS, the issues of leadership

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and supervision have been examined in many studies and it was found that leadership plays and important role in guiding employees to perform well (Beh, 2014; Hamzah, Othman, Hashim, & Abd, 2013; Hassan, Silong, & Muslim, 2009; Wan Mohd Amin, Muda, & Omar, 2006). However, in some cases the supervision and action were not taking place due to constraints in rules and regulations in taking corrective action and disciplinary action towards underperforming and deviant employees (Alias, 2012; Brahim, 2004; Hassan, Silong, & Muslim, 2009; Jabatan Perkhidmatan Awam, 2009; Mohtar Abas, 2006; Syed Ismail Al-Qudsy, Ab. Rahman, & Mohd Zain, 2009). Thus, based on the findings found in Study 1 the items of policy and leadership were added to be part of job demands construct.

2.2.2 Job Performance and Job Resources

2.2.2.1 Job Autonomy

Hackman and Lawler ((1971) as cited in Bakker and Demerouti, 2012) have defined job autonomy as the "degree to which a job provides substantial freedom, independence, and discretion in determining goal-directed behaviour at work" (p. 4). Employees feel more satisfied and useful if they are given meaningful jobs and high autonomy (Bahari, 1999). A study on academics in Malaysian public universities also discovered that academics demand more

autonomy and control at work (Nik Mat & Zabidi, 2010). In a report on engagement by Macleod and Clarke (2009) in the United Kingdom, they found that several companies and a college, which entrusted their employees with autonomy, control and flexibility to improve on service delivery, were rated more favourably by clients and the employees were more engaged and satisfied. Several other studies have shown that job resources such as job autonomy can moderate the impact of job demands such as work overload, emotional demand and burnout (Bakker & Demerouti, 2012). Only individuals who have good time management skills are able to perform well in jobs with high demands and low autonomy (Xanthopoulou, Bakker, Demerouti, & Schaufeli, 2007). Nevertheless, the relationship between job autonomy and job performance is actually asymmetrical. In a study by Jex (1998) as cited in Daniels and Haris (2000) weak relationship was found between job autonomy and job performance.

2.2.2.2 Organisational and Social Support

Apart from job autonomy, organisational and social support is another sub-construct of job resources that could be the predictor of job performance. An organisation would like its employees to be dedicated to their job and at the same time the employees want the employers to support them in decision making, information sharing and leadership. Employees would also like to have social support from their co-workers and superiors. Support from an organisation to it

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employees could increase performance, increase commitment and reduce turnover (Abou-Moghli, 2015). Organisational support is also a positive predictor of future engagement and can reduce absenteeism due to sickness and in turn, increase job performance (Bakker, 2011). Johnson and Hall (1988) have found that highly demanding jobs, with low social support and low job control, coupled with a lack of rewards could lead to stress for employees. Thus, in order to reduce the negative effects, Karasek, (1979) suggests that employers should be more open to giving their employees less demanding jobs and more power over decision-making When employees have more power in decision-making, less demanding jobs and high support from superiors and peers, they are more likely to show high levels of engagement with their work and perform their job well (Chung & Angeline, 2010).

2.2.2.3 Job Security

Job security has been discussed widely within organisational settings due to increased global competition. According to Probst (2003), job security is defined as "the perceived stability and continuance of one's job as one knows it" (p. 452). Job security is very important because it can influence work outcomes such as job satisfaction, job performance, turnover, absenteeism, retention, commitment and engagement. Organisations are concerned with their ability to provide secure jobs in order to retain employees and attract future candidates (Chen, 2007).

In Malaysia, working in the public service is considered as *the iron rice bowl.* This reference is drawn from a traditional Chinese proverb to describe work in the public service as a job for life. However, over time, the meaning of job security has changed. People are not only looking for job security, but also, a good paying job and conducive work environment.

Chen (2007), in his research of the JD-R model in China, has found that job security is the only job resource that is not correlated with turnover intentions and other dependent variables. This suggests that, nowadays employees see job security differently and job security may no longer be the top priority in deciding on and accepting offers for jobs.

2.2.2.4 Growth and Advancement

Growth and advancement in the workplace are the benefits given by employers to the employees. Among the benefits is the opportunity to go for training to increase their knowledge and skills as well as the opportunity to advance in their career. These opportunities will help them to perform better at work.

A classic theory of learning and performance suggests that "Performance is bounded by learning" (Hunter, 1986, p.348). The positive correlation between learning and performance indicates that by learning, employees will know how to act or react appropriately in certain situations (Hunter, 1986). Training

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programmes are designed by organisations as the platform for employees to learn and acquire knowledge related to their job. Appropriate training given to employees will help them update the job related knowledge and skills to perform better (Zumrah, 2012). Employees with the requisite knowledge and skills are able to work under minimal supervision and feel more confident in performing their work (Markos & Sridevi, 2010).

Increase of knowledge and skills also contributes to personal resources such as self-efficacy, resilience, and optimism (Bakker & Demerouti, 2012). In their study of personal resources and training, Luthans, Avey, Avolio, and Peterson (2010) gave one group of respondents a two-hour training intervention with a series of exercises and group discussions designed to inculcate respondents with various personal resources such as efficacy, hope, optimism, and resilience. They have found that the intervention group did indeed show an increase in personal resources, increase in efficacy, hope, optimism, and resilience, which, in turn, led to increased work engagement and job performance (Luthans et al., 2010). According to another study on cognitive ability, job knowledge, and job performance by Hunter (1986) job knowledge is correlated with job performance for civilian jobs, underling the importance of job knowledge and training to job performance.

The employees should also be given the opportunity to grow and advance in their career to motivate them. Career advancement is considered an appreciation of the organisation towards the employees' effort and contribution. Career advancement means that the employees are valued and under normal circumstances, the feeling of being valued will be reciprocated by better job performance and high levels of commitment and engagement (De Jonge, Bosma, Peter, & Siegrist, 2000). Career opportunities are also one of the resources under Job Demands-Resources Model that enable employees to work in a healthy atmosphere (Bakker & Demerouti, 2007; Giauque, Anderfuhren-Biget, & Varone, 2012). Siegrist (1996) posits that if employees are not satisfied with their rewards or are not being duly recognized, they would experience stress, which could, affect their performance and inevitably the performance of the organisation as a whole. Thus, the present research aims to investigate the issue of career advancement as a job resource and its influence on job performance.

2.2.3 Job Performance and Personal Resources

2.2.3.1 Existing Personal Resources (Self-Efficacy, Organisational Based Self-Esteem and Optimism)

Initially, the JD-R mainly investigated the effects of work characteristics on job performance and outcomes. However, an extension of the model has included personal resources as supporting factors of work behaviour (Bakker & Demerouti, 2014). Personal resources are the building blocks of one's belief in their ability to act, react and control their surroundings and in this case i.e. the job environment. Personal resources are aspects of self-control and resilience towards the demands of the surrounding (Tremblay & Messervey, 2011; Xanthopoulou et al., 2007).

Xanthopoulou et al., (2007) have studied three personal resources: self-efficacy, organisational-based self-esteem (OBSE) and optimism. They have defined self-efficacy as "…individuals' perceptions of their ability to meet demands in a broad array of contexts" (p. 124). The individual's prior success and positive experiences helps in enhancing self-efficacy. Organisational-based self-esteem is defined as "the degree to which organisational members believe that they can satisfy their needs by participating in roles within the context of an organisation"

and optimism is the "…tendency to believe that one will generally experience good outcomes in life" (Xanthopoulou et al., 2007, p.124).

Studies have found that, being short of personal resources might lead to stress and even worse, to depression (Tremblay & Messervey, 2011). For instance, organisation-based self-esteem is found to buffer role ambiguity and negative behavioural outcomes, while self-efficacy reduces the effects on health related outcomes and optimism buffers mental distress (Makikangas & Kinnunen, 2003; Tremblay & Messervey, 2011). However, conflicting findings with respect to the buffering effects of personal resources in the JD-R model can also be found. In their study of the JD-R Model on military chaplains, Tremblay and Messervey (2011) have found that the personal resource of compassion satisfaction did not moderate the relationship of role conflict, role ambiguity and role insufficiency on symptoms of anxiety and depression. Similarly, Xanthopoulou et al., (2007) have found that personal resources (self-efficacy, organisational-based self-esteem and optimism) did not moderate the relationship between job resources and exhaustion or engagement.

Most studies on personal resources using the JD-R model have focused on three resources namely, self-efficacy, organisational based self-esteem and optimism. Only recently did Tremblay and Messervey (2011) study compassion satisfaction as a personal resource. Therefore, it can be concluded that much

more research on personal resources using the JD-R model is needed. The present research hopes to contribute to the literature on personal resources in the context of the JD-R, by exploring the role of religiosity and spirituality as personal resources.

2.2.3.2 Religiosity and Spirituality as Personal Resource

With more than 98.0% of Malaysia's population professing a religious belief and the fact that religious practice is embedded in the Federal Constitution, Malaysians view religion and spiritual belief highly (U.S. Commission on International Religious Freedom, 2018; *Federal Constitution*, 2010). Thus, it is important that this study also includes religiosity and spirituality as personal resources that could affect behaviour at work, specifically behaviour that relates to job performance at work.

Previous research on personal resources focused on existing personal resources such as self-efficacy, organisational based self-esteem and optimism. However, in the current study, the researcher investigates religiosity and spirituality as personal resources constructs. The existing personal resources relate to the inner strength and will to strive to achieve something that one desires by believing that they have the abilities to achieve it (Tremblay & Messervey, 2011; Xanthopoulou et al., 2007). This concept is similar to religiosity and spirituality

which have the components of belief, values and inner strength geared towards achieving betterment in life (Valasek (2009) and Koenig, McCullough, & Larson (2000) as cited in Osman-gani, Hashim, and Ismail, 2013). Thus, religiosity and spirituality could be personal resources that affect job performance.

For some researchers, religiosity and spirituality are related in which religiosity is part of the spiritual practices and spirituality is part of religious practices (Abdul Ghani & Subhan, 2009). Religiosity according to Koenig, McCullough, and Larson (2000) is:

> "An organized system of beliefs, practices, rituals and symbols designed (a) to facilitate closeness to the sacred or transcendent (God, higher power, or ultimate truth/reality), and (b) to foster an understanding of one's relation and responsibility to others in living together in a community. Spirituality is the personal quest for understanding answers to ultimate questions about life, about meaning, and about relationship with the sacred or transcendent being, which may (or may not) lead to or arise from the development of religious rituals and the formation of community (p.361, as cited in Osman-gani et al., 2013)."

Researchers describe religiosity as a devotion to the practice of religion. According to social researchers, religiosity is a combination of belief and

knowledge of religion (cognition), emotional affection toward religion (affect) and behaviour resulting from cognition and emotion. For example a religious person is likely to attend church or pray at a Mosque (Elçi et al., 2011). Each religion has its own set of commandments to be followed. For Islam, an individual is considered religious when he or she follows Allah's order of the Five Pillar of Islam; profession of faith (*Shahadah*), pray, fast, almsgiving (*Zakat*) and pilgrimage to Makkah (*Hajj*). Moreover, he or she follows the Six Pillars of Faith; belief in God, belief in prophets, belief in angels, belief in God's revealed books (*Al Quran*), belief in the day of judgment and belief in divine predestination (*Al Qadar*) (Osman-gani et al., 2010).

Spirituality, on the other hand is the concept that is used to explain positive values adopted by an individual in search of the meaning and purpose of life. Searching for the meaning and purpose of life are part of the seven categories of spirituality introduced by Valasek (2009) which includes harmonious life with others, personal wholeness, personal growth, value-based life, belief in the divine and sense of justice or fairness (as cited in Osman-gani et al., 2013)

In his extensive review of 140 articles on workplace spirituality, Karakas (2009) has identified three factors on how spirituality positively affects employees and organisational performance. Spirituality benefits employees by improving their

lives and wellbeing, by instilling a sense of purpose and meaning at work and lastly, by nurturing a sense of connection with other people in the community.

A study of spirituality in the workplace conducted on top executives from the USA by Mitroff & and Denton (1999), has found that majority of respondents believed in a higher power or God and their belief then translated to increase in spirituality which in turn influenced their work. Oler (2004) study on the religiosity and spirituality effects has found that attending worship services regularly would result in specific ritual action and attitudes at work.

Several researchers have found that faith and prayer do play an important role in the workplace. Neyrinck, Vansteenkiste, Lens, Duriez, and Hutsebaut (2006) and Adams (2008) have found that prayer has a positive correlation with motivation. Executives in McGee and Delbecq's (2003) study as cited in Osman-gani et al., (2010) believed that prayer inspired them to make appropriate decisions and help them maintain their mental and emotional capabilities at a high level. Similarly, managers were of the belief that prayer helped them make decisions with increased accuracy and less error as stated by Biberman and Tischler (2008) in Osman-gani et al. (2010).

Although the effects of spirituality and religiosity on human life have been studied somewhat extensively, few studies have related these concepts to job

performance especially in the Malaysian context (Campbell & Hwa, 2014; Osman-gani et al., 2013; Rahim & Omar, 2017; Rani, Abidin, & Ab Hamid, 201; Zahrah, Abdul Hamid, Abdul Rani, & Mustafa Kamil, 2016; Zahrah, Abdul Hamid, Abdul Rani, & Mustafa Kamil, 2017). For example, Zahrah et al. (2017) studied the relationship between religiosity and job performance via work engagement, Rahim and Omar (2017) investigated the role of religiosity as moderator in the relationship between working environment and integrity with job performance and Osman-gani et al. (2013) studied the linkages between spirituality, religiosity and job performance. These studies, however, did not cover the hospital employees in MPS, thus, current research intends to expand the study on spirituality and religiosity as the components of personal resources and to test their relationship with subjective wellbeing and job performance in MPS. Thus, the current research intends to study spirituality and religiosity as components of personal resources relied upon to face demand at workplace.

2.3 Moderating and Mediating Factors of the Relationship between Job Demands-Resources and Job Performance

Over the years, research questions have become more complex, thus, research no longer dwells on investigating the relationship between independent variables (IV) and dependent variables (DV), but focus more on how the relationship is explained. To do this, researchers have begun to ask questions such as: how a

phenomenon occurs, in what ways it occurs and under what circumstances it occurs. Researchers were no longer satisfied on a simple relationship or effects between variables (Judd, C. M., Yzerbyt, V. Y., & Muller, D., 2014).

Moderator variables are the variables that affect the strength or direction of the relationship between IV and dependent variables DV. For example, studies have found that there is a relationship between job resources such as organisational support and job performance (Abou-Moghli, 2015). The higher the support, the higher the job performance. However, certain variables such as work overload might affect the relationship positively or negatively, which can in turn cause an increase or decrease in job performance. Work overload in this case is the moderator variable.

Mediator variables explain the relationship between IV and DV. The mediators can explain how and why there is a relationship between the IV and DV and can be a tool to help an IV to produce changes on a DV. An example of a mediator variable is work engagement in a relationship between physical work environment and job performance. Physical work environment can influence work engagement and work engagement can influence job performance. The current research explores how job demands moderate the effects of job resources and personal resources on variables of Subjective Wellbeing, which in turn mediates the effects on job performance.

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For JD-R model, previous researchers did not exactly specified the relationship between job demands and job resources except for the findings that in most cases the relationship between the two is negative. Thus, analysis by Bakker and Demerouti (2017) on the JD-R model suggested that the relationship between job demands and job resources are complex and in certain situation such as different types and levels of occupation might produce positive effects. Thus, the moderated mediation analysis of JD-R and the other constructs in present studies might reveal a new knowledge on job demands and job resources relationship.

2.3.1 Job Demands as the Moderating Factor of the Relationship between Job and Personal Resource with Job Performance

Job Demands as the moderating factor was suggested by Bakker and Demerouti (2008b) in their work engagement model in Figure 1.

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┌─────────────────────────────┐
│ Job Demands                 │
│ - Work Pressure             │
│ - Emotional Demands         │
│ - Mental Demands            │
│ - Physical Demands          │
│ - Etc                       │
└─────────────────────────────┘

┌ ─ ─ ─ ─ ─ ─ ─ ─ ─ ─ ─ ─ ┐
   ┌───────────────────────┐
│  │ Job Resources         │  │
   │ - Autonomy            │
│  │ - Performance Feedback│  │
   │ - Social Support      │
│  │ - Supervisory Coaching│  │
   │ - Etc                 │
│  └───────────────────────┘  │

│  ┌───────────────────────┐  │
   │ Personal Resources    │
│  │ - Optimism            │  │
   │ - Self-efficacy       │
│  │ - Resilience          │  │
   │ - Self-esteem         │
│  │ - Etc                 │  │
   └───────────────────────┘
└ ─ ─ ─ ─ ─ ─ ─ ─ ─ ─ ─ ─ ┘

┌──────────────┐      ┌──────────────────────┐
│ Work         │      │ Performance          │
│ Engagement   │      │ -In-role performance │
│ - Vigour     │      │ -Extra-role Performance│
│ - Dedication │      │ -Creativity          │
│ - Absorption │      │ -Financial turnover  │
│              │      │ -Etc                 │
└──────────────┘      └──────────────────────┘
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Figure 1: JD-R Model of Work Engagement

In the model, job resources and personal resources as a combination or independently are the predictors of work engagement. The model explains that the presence of job demands will enhance the positive impact of job resources and personal resources on work engagement and in turn affect job performance. The relationship creates a spiral of effects in which engaged employees who perform well will be able to create their own resources and maintain the positive effects over time (Bakker, 2011). Job demands in this case "enhance" the positive impact of job resources and personal resources by becoming the

challenging job demands instead of *hindrance job demands*. According to Bakker and Demerouti (2017) *hindrance job demands* are the high constraints work situations that deplete the energy and affect one's abilities to achieve goals at work, whereas *challenging job demands* are seen as "good stressors" that not only consume energy but at the same time could potentially promote personal achievement at work for the employees. The more demands that the employees have to face at work couple with ample resources might change the hindrance mode to challenging mode, thus the employees become more motivated to overcome the demands by using the resources that they have. Job demands enhance the positive effects of job and personal resources on work engagement could also be explained using resources theory. Individuals will protect their resources and work toward increasing resources. A greater pools of resources will reduce susceptibility of resources loss and reduce the negative effects of job demands.

In this study the researcher replicates the study and tests the model with additional constructs of organisational commitment and negative personal wellbeing. Several studies on job and personal resources found that job resources such as organisational support and job autonomy, and personal resources such as self-efficacy and spirituality affected the organisational commitment and

work engagement (Bakker & Demerouti, 2007; Golden & Veiga, 2008; Wainaina, Iravo, & Waititu, 2014; Zeb & Nawaz, 2016). Job demands are predicted to have negative relationship with organisational commitment. As for the relationship between job and personal resources with wellbeing, studies have found that support at work and job security did affect health and wellbeing of employees (Moen et al., 2016). Job demands such as pressure at work and emotional demands have also being found to cause health impairment as they negatively affect the wellbeing of employees (Bakker & Demerouti, 2007). These findings show that there is a direct relationship between job demands, personal resources and organisational commitment with negative personal wellbeing.

However, the findings do not explain the other angle of both demands and resources with organisational commitment and negative personal wellbeing which is the job demands as the moderator between job resources and the constructs. Few researchers have studied job demands as the moderator variable for organisational commitment and negative personal wellbeing. One of the studies found was by Bon and Shire (2017) on job resources and organisational commitment with job demands as the moderator. It was found that job resources were related to affective commitment, however, job demands did not play any significant role in the relationship. The few studies that investigated job demands

as moderator for the relationship between job and personal resources with organisational commitment and negative personal wellbeing motivated the researcher to study the relationship in present research.

2.3.2 Subjective Wellbeing as a Mediating Factor of the Relationship between Job Demands-Resource and Job Performance

Subjective Wellbeing (SWB) is a term coined by Diener, Sandvik, and Pavot (1991) to describe the two processes by which a person might experience wellbeing. Firstly, when he or she is satisfied with his or her life and secondly, when he or she experiences more positive emotions than negative emotions. This means that people evaluate their wellbeing level based on their own judgement of satisfaction and affection reactions (Diener et al., 1991). According to Bakker (2010), by using the Circumplex Model of Affect by Russell, SWB is divided into two types, which are positive SWB and negative SWB. Examples of Positive SWB are work engagement, job happiness and job satisfaction, while negative SWB includes workaholic tendencies and burnout. In this study, two mediator variables were chosen; organisational commitment and work engagement to explain positive SWB and negative personal wellbeing to explain negative SWB. In this research, SWB consists of organisational commitment (positive), work engagement (positive) and negative personal wellbeing (negative). The sub-sections below discuss the three components:

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2.3.2.1 Job Performance and Work Engagement

Schaufeli and Bakker (2003) have defined work engagement as "…a positive, fulfilling, work related state of mind that is characterized by vigour, dedication, and absorption" (p. 4). Engaged employees contemplate work as a stimulating and energizing experience, whereby they feel that the work is meaningful and significant to them. They are fascinated with their work and they dedicate their time and effort to it (Bakker et al., 2011).

Vigour refers to the high level of energy and mental resilience that an individual has while working. It characterises a worker's readiness to devote energy or effort to work and the determination that he or she demonstrates when facing difficulties (Bakker et al., 2007). Dedication refers to "a sense of significance, enthusiasm, inspiration, pride and challenge" (Schaufeli & Bakker, 2003, p. 5). Absorption is a state of intense focus when one is delightedly occupied with work.

Bakker (2011) suggested that engaged employees performed better at work. Engaged workers are full of positive vibes, thus, they will enthusiastically do their job, think positively and can control their emotion well. Their positivity could also be transferred to other people around them, which could help in creating positive working environment (Bakker & Demerouti, 2008a). The

engaged employees also have a healthy life, thus, the focus is more on work rather than thinking about their sickness or poor wellbeing. Those with poor health are normally busy tending to their physical and emotional needs and in the end affect their work.

Various studies have shown that job resources and personal resources are positively correlated with work engagement. When employees have decision making power, less demanding jobs and high social support from superior and peers, they are more likely to be engaged and perform their job well (Chung & Angeline, 2010). High social support from co-workers, ample learning opportunities, continuous performance feedback and high job autonomy will predict work engagement and reduce absenteeism (due to sickness). These job resources set off the motivational process and lead to job performance. The significant effects of job resources on work engagement will be higher for employees with high job demands (Bakker & Demerouti, 2007b; Bakker, 2011). Personal resources such as self-efficacy, organisational based self-esteem and optimism are also strongly related to work engagement. Employees will be more engaged if personal resources and job resources are combined together (Xanthopoulou et al., 2009a). Besides the relationship between organisational commitment and work engagement relationship with job performance, this study

looks at negative personal wellbeing as the mediator variable between job demands-resources and job performance.

2.3.2.2 Job Performance and Organisational Commitment

Organisational commitment is one of the important components for predicting behaviour in the workplace. According to Meyer and Allen (1991), organisational commitment is the psychological state that characterizes an employee's relationships with the organisation and has implications on the employee's decision to continue membership in the organisation. Employees who are high in organisational commitment will conform to the organisation's missions because they believe in the goals and values of the organisation. They are very positive and motivated in their work (Zincirkiran et al., 2015).

There are three types of organisational commitment; affective commitment, continuance commitment and normative commitment (Chen & Francesco, 2003; Meyer et al., 2012). Affective commitment is the emotional attachment and involvement of an individual in the organisation. Continuance commitment is the understanding of an individual of the cost that he or she has to pay for leaving the organisation and normative commitment refers to the individual's feeling of obligation to continue working in the organisation.

According to Shaw, Delery, and Abdulla (2003) there is no strong relationship between commitment and performance. Nevertheless, there are conflicting views on the relationship between commitment and performance. Some researchers did find evidence that commitment affects performance (Guleryouz, Guney, Miski, & Asan, 2007; Mathieu & Zajac, 1990). Lum, Kervin, Clark, Reid, and Sirola (1998) have found that lack of organisational commitment relates to turnover intentions and poorer performance, which in turn, has a negative effect on organisational efficiency and effectiveness. These conflicting views indicate that the relationship between commitment and performance is questionable. Therefore, more research is needed to identify the precise role of organisational commitment in the context of the JD-R model.

2.3.2.3 Job Performance and Negative Personal Wellbeing

Ulrich (1997), asserts that "the employee contribution becomes a critical business issue because in trying to produce more output with less employee input, companies have no choice but to try to engage not only the body but the mind and soul of every employee" (as cited in Bakker, 2010, p. 3). In order to be an effective and high performing employee, one needs the body, mind and soul to be congruent. A quick thinker without a fit and healthy body might not be able to use his or her ability at work.

Since the positive aspects of SWB have been highlighted in the previous sections on organisational commitment and work engagement, this section discusses the negative aspects of SWB. Negative personal wellbeing in this study refers to the presence of negative signs of wellbeing issues in an individual such as boredom, annoyance, fatigue, indecision, insomnia and forgetfulness (Cox et al., 2006). Based on Baptiste's (2008) study, negative symptoms can affect a person physically, emotionally and socially, and thus, reduce the overall wellbeing of the person. Wellbeing indicators relate to an individual's symptoms of stress in the work environment. Previous research has indeed shown a positive relationship between wellbeing and job performance; and employees with poor wellbeing are unlikely to give satisfactory performance (Alvi, 2017; Baptiste, 2008; Bryson, Forth, & Stokes, 2015). Barker (2009), in her study on the effect of fatigue on nursing performance, has found that registered nurses reported high levels of fatigue in all dimensions (mental, physical, total) and that these dimensions were negatively correlated with performance. Fatigue may decelerate response times, thus increasing the risk of errors. It also had negative effects on nurses motivation, energy, attention to details and problem solving ability (Barker, 2009). Employees in the healthcare setting should be very attentive and always prepared to work because they have a vital role in the hospital. Thus, it is very important that this current research investigates the

negative personal wellbeing aspect of hospital employees as one of the mediating factors of job demands and job performance.

2.4 Research Gap and Introduction to the Theoretical Model of the Research

Present research was done in two phases; Study 1 and Study 2. The aim of the research, firstly is to explore on the level of job performance in MPS hospitals setting (Study 1). As mentioned in chapter 1, MPS received a lot of complaints as reported by the Malaysian Public Complaints Bureau and media, thus, raise the question whether the job performance in MPS is worrying and need to be improved. It is also questionable whether the healthcare employees agree with the perception by the public and the complaints reported by the bureau and media and what are their opinion about the factors that could affect job performance in MPS. By gathering the data from Study 1, the researcher aimed to investigate the relationship between the JD-R model, job performance and SWB components as the mediators (work engagement, organisational commitment and negative personal wellbeing). Based on the literature review the researcher found that JD-R is the best model that could explain job performance in MPS, thus, proposed a framework for Study 2. However, the focuses of previous studies that used the JD-R were more on the relationship between job demands and job resources with job performance and work engagement as a mediating factor. Only few studies were found between JD-R, organisational commitment

and negative personal wellbeing. These two constructs are equally important in workplace setting especially in hospitals. As explained in chapter 1, hospital is indeed a stressful workplace, however, the healthcare employees continue working on hospitals for several reasons. Among the reasons are health and their commitment toward their work and organisation that have help them to stay and keep working performance (Alvi, 2017; Butt et al., 2012; Baptiste, 2008; Bryson, Forth, & Stokes, 2015). In order to be an engaged and committed person, one needs to also have physical and psychological wellbeing. Furthermore, healthcare workers are required to ensure their wellbeing are taken care of in order to take care of others. Thus, it is pertinent to explore the relationship and find more factors that could affect organisational commitment and wellbeing. What would increase or decrease their commitment and wellbeing, especially in their high demands work condition. With this study, the researcher hope to understand whether the employees organisational commitment and wellbeing would maintain or decrease under the conditions of high demands and increase with abundant resources.

Based on the literature review, practical rational, empirical rational and research objectives mentioned in previous and current chapters, present research were done to fill in the gap of previous studies as follow;

i. to expand studies using JD-R focussing on civil servants in Malaysia, specifically civil servants in public hospital settings by including specific new items for job demands that are in line with MPS;

ii. to expand the methodology of JD-R study by using mixed method approach;

iii. to model the moderators of job demands-job/personal resources relationship and theoretically explain the expected types of effects;

iv. to model the mediators of job demands—job/personal resources with additional constructs under SWB (work engagement, organisational commitment and negative personal wellbeing); and

v. to explore additional constructs under personal resources by including spirituality and religiosity as part of grand personal resources construct.

The current research will widen the body of knowledge of the JD-R Model and contribute to the Malaysian civil servant's context, specifically that of healthcare employees in Asian workplaces. The findings will facilitate in introducing the interventions and development programmes in the Malaysian public service.

Figure 2 is the proposed theoretical model of the current research that shows the hypothesised relationships of job performance, subjective wellbeing with job demands and job/personal resources. The model was adapted from Bakker & Demerouti, (2008b).
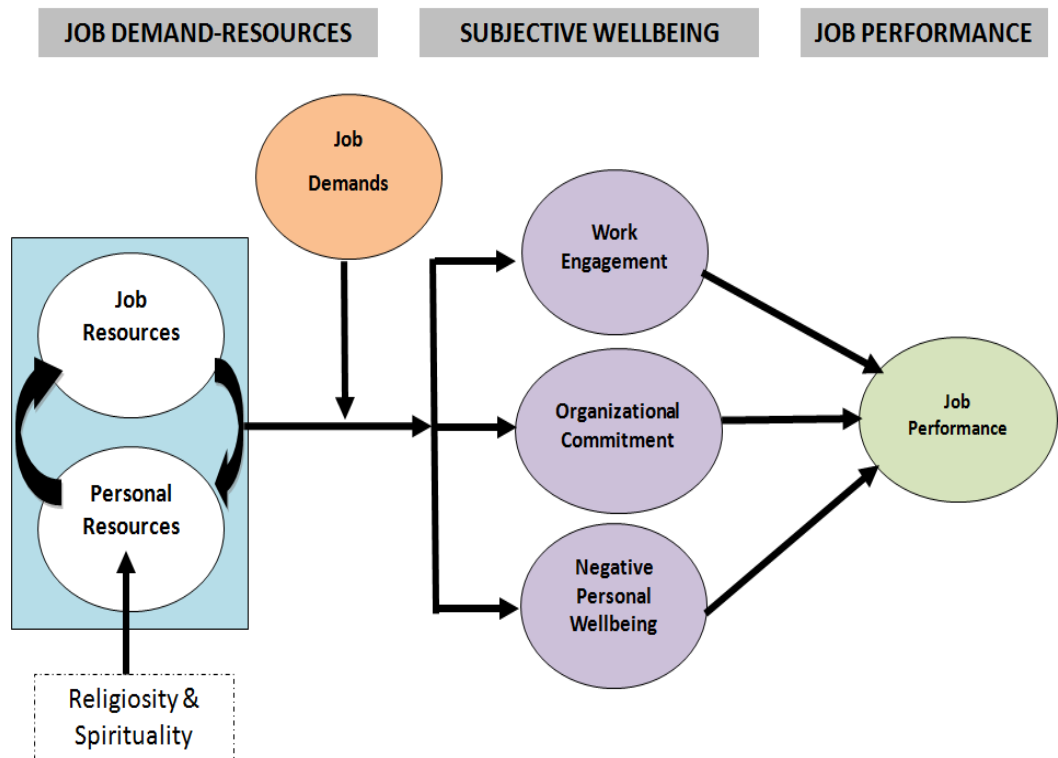
Figure 2: Theoretical Model adapted from Bakker & Demerouti, (2008b). The hypothesised relationships of job performance, subjective wellbeing with job demands and job/personal resources

2.5 Conceptual of Framework

This section will describe the conceptualization of all the constructs and sub-constructs of the theoretical framework as summarized in Figure 3.

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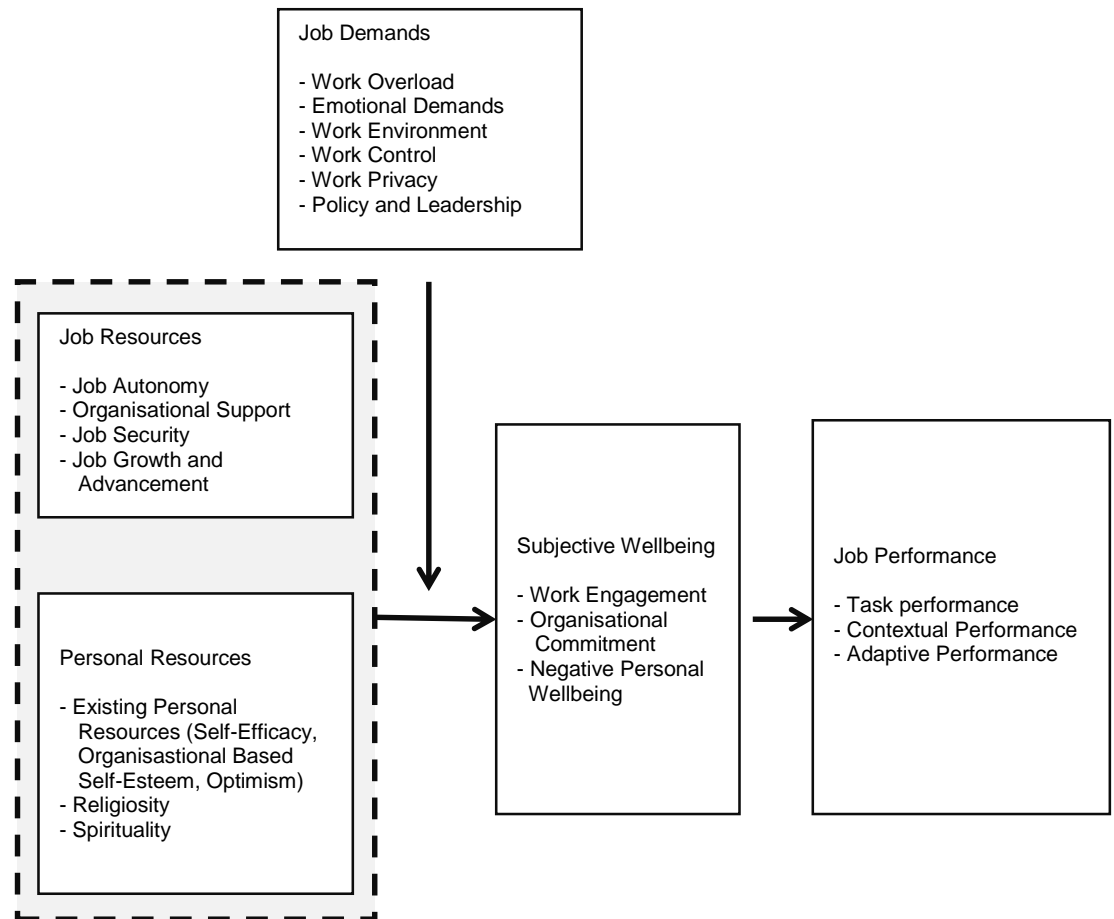
Figure 3: Constructs and Sub-Construct of the Study

2.5.1 Conceptualisation of Job Demands and Job Resources

The indicators of job demands in this study are work overload, emotional demand, general work environment, work privacy, work control as well as policy and leadership. Work overload is defined as too much work assigned to an individual and work assigned to complete within a short period of time. Emotional demands in this study refer to how the employees react to emotional

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situations while working (Jackson & Rothmann, 2005). The work environment in this study is defined as the environment of the workplace including, the work area, equipment, window, ambience, sense of control and privacy (Veitch et al., 2002). The work environment items are divided into three sub-constructs; general work environment, work privacy and work control. Lighting, air quality, atmosphere, facilities provided and cleanliness of the facilities were selected to measure the general work environment. Private activities while working such as wearing headphones, leaving early or taking sudden leave from work because the employee does not want to work that day, keeping personal thought and pretending to be extremely busy are the items that measure work privacy in this study. Work control refers to how employees control work space organisation and personalization as well as the work space comfort. The job demands in this study also included the policies governing the employees, especially the monitoring aspects and actions taken by the leaders towards employees' negative behaviours. Policy and leadership are defined as whether there existed policy regarding job performance, whether the leaders monitor the workers at MPS and take strict action on those who do not perform. Previous researchers found that leadership plays and important role in guiding employees to perform well (Beh, 2014; Hamzah, Othman, Hashim, & Abd, 2013; Hassan, Silong, & Muslim, 2009; Wan Mohd Amin, Muda, & Omar, 2006). Study by Taiwo (2010) on workers in Nigeria also found that employees agreed that strict supervision

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helped them in improving productivity. In the absence of good policy to monitor the employees and leaders that do not monitor or taken strict action on non-performer may lead to laziness and disrespect as employees take advantage of the situation, and thus do not perform as expected. The situation is not only a hindrance for better performance on the problematic employees but also affect the other employees. The other employees would think that, it is not fair and it is acceptable to not perform at work. While for those who perform would feel the burden of doing their colleagues job and feel demotivated and angry at the same time. Thus, the items are included as job demands sub-construct of policy and leadership.

Job resources in this study included job autonomy, organisational support, job security and growth and advancement. Job autonomy in this study refers to the amount of power and latitude given to the employees for task completion and decision-making processes. Organisational support is the extent to which the organisation (management, supervisors and colleagues) is willing to support the employees economically and socially. Job security is defined as the secured feeling of being employed as well as the conviction that one's future endeavours related to the job are assured. Growth and advancement refer to the propensity for an organisation to provide opportunities for its employees to attend skill and

knowledge acquisition trainings, as well as attain higher positions in the organisation. (Bakker, 2011; Bakker & Demerouti, 2007)

This research used the existing JD-R questionnaires taken from the Job Demands-Resources Scale (JDRS) by Jackson and Rothmann (2005). It is used to measure specific job demands and job resources and comprises 42 items. The new items that were compiled from the interview in study 1 and additional items from Physical Work Environment Questionnaires (PWESQ) and Ratings of Environment Features (REF) were incorporated into the JDRS. The new JDRS questionnaire is based on the Malaysian public service environment.

2.5.2 Conceptualisation of Personal Resources

Personal resources in this study included resources from existing literature such as self-efficacy, organisational based self-esteem and optimism. Self-efficacy is the employees' perception of their ability to face job demands in various situations. Organisational-based self-esteem is described as the employees belief that they can fulfil their needs by engaging their work roles within the organisation and optimism is the inclination of the employees to think that they eventually will experience good outcome in life (Xanthopoulou, Bakker, Demerouti, et al., 2007). The items for existing personal resources were taken from Deese (2009) study, consisted of 15 items that described the employees'

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perception on their ability to face future demands and their positive outlook on the future experiences. Personal resources also included two additional constructs, which were the religiosity and spirituality. Religiosity is the organized system of beliefs that is full of practices, rituals and symbols designed to bring one close to God or a higher being. Spirituality is positives values adopted by an individual in search of the meaning and purpose of life and the quest may or may not derive from religion (Osman-gani et al., 2013). The instruments used to test for personal resources constructs were the Spiritual Involvement and Beliefs Scale-Revised (SIBS-R) by Hatch et al. (1998) and Religiosity Personality Scale by Krauss, Hamzah and Idris (2007).

2.5.3 Conceptualisation of Subjective Wellbeing

Subjective wellbeing comprises three components of work: work engagement, organisational commitment and negative personal wellbeing. Schaufeli, Salanova, Gonzalez-Roma and Bakker (2002) defined work engagement as "…a positive, fulfilling, work related state of mind that is characterized by vigour, dedication, and absorption" (p.74). Vigour refers to the high level of energy and mental resilience that an individual has while working, his or her readiness to devote energy and effort to his or her work and the determination that he or she demonstrates while facing difficulties (Bakker et al., 2007). Dedication according to Schaufeli et al., (2002) refers to "a sense of significance,

enthusiasm, inspiration, pride and challenge" (p.74). Absorption is a state of intense focus and when one is delightedly occupied with one's work.

In this study, three types of organisational commitments were studied: affective commitment, continuance commitment and normative commitment. Affective commitment is the emotional attachment and involvement of an individual in the organisation. Continuance commitment is the understanding of an individual of the cost that he or she has to pay for leaving the organisation and normative commitment refers to the individual's feeling of obligation to continue working in the organisation (Chen & Francesco, 2003; Meyer & Allen, 1991).

Negative personal wellbeing in this research examined the presence of negative signs of wellbeing issues in an individual such as boredom, annoyance, fatigue, indecision, insomnia and forgetfulness (Cox et al., 2006). Questions for the SWB were tested using existing questionnaires of Utrecht Work Engagement Scale (UWES), Organisational Commitment Questionnaires (OCQ) and General Wellbeing Questionnaires (GWBQ).

2.5.4 Conceptualisation of Job Performance

Job performance in this study is defined as the ability to perform a task based on self-evaluation. Task performance in this study includes the quantity of work, the quality of work, the job skills and the worker's knowledge (Koopmans et al.,

2013). Contextual performance is any behaviour that supports the organisation as a whole especially on extra activities or extra-role behaviour (Griffin et al., 2000). Adaptive performance is a recent addition to the individual job performance measurement; it relates to the employees' ability to adapt to work roles and environmental change (Koopmans et al., 2013). Job performance was measured using the self-rating Individual Work Performance Questionnaires (IWPQ) (Koopmans et al., 2013).

2.6 Research Questions and Hypotheses

The goal of this research is to study job performance in Malaysia's public service specifically the relationship between job performance and different components of job demands, job resources and personal resources. It also explains the mediating effects of SWB on job performance in Malaysia's public service. The research was conducted in two stages: stage one was an exploratory study based on general questions via interviews (Study 1), while stage two was a descriptive study in which specified survey questionnaires were used (Study 2). There are two research questions for the Study 1 and two research questions and ten hypotheses were developed and investigated for Study 2.

2.6.1 First Research Question (RQ1)

The first objective of this study is to investigate the level of job performance in MPS and what are the main issues that caused the complaints in public service performance from the perspective of the civil servants. Thus, there are two research questions proposed for the first objective.

RQ1: What is the level of job performance in the Malaysian Public Sector and the main issues that cause the complaints in public service performance from the perspective of civil servants?

2.6.2 Second Research Question (RQ2)

The second objective of the study is to investigate further from the civil servant's perspective, the factors affecting public service performance. The second research question is as below:

RQ2: What are the factors affecting public service performance from the civil servant's perspective?

2.6.3 Third Research Question (RQ3)

The third objective of this research is to identify from the findings in Study 1, the new item under the job demands and job resources spectrum that possibly related to job performance in order to develop a tailored measure of JD-R for

Malaysian public service. The questionnaires will then be combined with existing measures of the JD-R and will form part of the first of two quantitative study examining the relationship between JD-R, SWB and job performance. Below is the third research question and the eight hypotheses proposed for the third research question.

RQ3: Are the job demands, job resources and personal resources which included the new items found in study 1 significantly related to subjective wellbeing constructs and job performance?

H1a: Job resources are significantly related to subjective wellbeing constructs; work engagement, organisational commitment and negative personal wellbeing.

H1b: Personal resources are significantly related to subjective wellbeing constructs; work engagement, organisational commitment and negative personal wellbeing.

H1c: Job demands are significantly related to subjective wellbeing constructs; work engagement, organisational commitment and negative personal wellbeing.

H1d: Job demands moderate the relationship of job and personal resources with subjective wellbeing constructs; work engagement, organisational commitment and negative personal wellbeing.

H1e: Job resources and personal resources are positively related to job performance.

H1f: Job demands are negatively related to job performance

H1g: Subjective wellbeing constructs of work engagement and organisational commitment are positively related to job performance, whereas negative personal wellbeing is negatively related to job performance.

H1h: Subjective wellbeing constructs; work engagement, organisational commitment and negative personal wellbeing mediate the relationship between JD-R and Job Performance.

2.6.4 Fourth Research Question (RQ4)

The fourth objective of the study is to examine the role of spirituality and religiosity as the new components of personal resources under JD-R model. For Malaysian civil servants, it is hypothesised that the religiosity and spirituality will affect their job performance, in line with findings on studies utilising personal resources such organisational based self-esteem, self-efficacy and optimism. Thus, the fourth research questions and the three hypotheses proposed are as below:

RQ4: Are religiosity and spirituality as part of personal resources affect job performance?

H2a: Religiosity and spirituality are positively related to existing personal resources constructs.

H2b: Religiosity is positively related to job performance.

H2c: Spirituality is positively related to job performance.

2.7 The Importance and Contribution

The current study contributes to the literature in a number of ways. Firstly, this study provides empirical evidence of MPS job performance especially in Malaysia's public hospitals. The health sector is one of the important sectors of public service, yet, it has been sparsely studied within the context of job demands, job resources and SWB. This research uses both qualitative and quantitative methods to examine the issues surrounding job performance in Malaysian public hospitals by identifying the demands and resources associated with job performance and the impact of these demands and resources on employee wellbeing and their level of commitment and engagement at work. The study relied on mixed methods to provide a holistic understanding and comprehensive finding about the research topic. The qualitative component of the study provided the researcher with a wide range of the respondents' opinions and in-depth understanding of the underlying factors of poor job performance. Whereas, the quantitative data served a complimentary purpose of extending and confirming the findings from the qualitative study (Malina, Nørreklit, & Selto, 2011).

Secondly, this study examines the role of religiosity and spirituality as personal resources in shaping hospital employees' self-belief and how this may affect their work behaviour. The study shows that spirituality and religiosity provide a unique contribution distinct from other personal resources such as self-efficacy, organisational based self-esteem and optimism.

Thirdly, this study examines the effects of SWB as mediating factors between the JD-R and job performance. Subjective wellbeing in this study comprises work engagement, organisational commitment and negative personal wellbeing. Wellbeing in this study looks at ill health that is categorized as worn out and uptight.

The findings of the study will be a new addition to the current JD-R literature within the Asian context and will advance our knowledge of JD-R and its relationship with job performance, organisational commitment, work engagement, wellbeing, spirituality and religiosity.

2.8 Chapter Summary and Conclusion

This chapter has discussed five selected theories to explain job performance which were the Person-Environment Fit Theory, Social Exchange Theory, Conservation of Resources, Job Demand-Control Model and Job Demands-Resources Theory. The relationship between JD-R and job performance was

further explained in subsequent sections as the main theory that the current study would be based on. A detailed explanation on the moderating and mediating variables that could affect job performance was also done in this chapter, followed by the explanation on the theoretical and conceptual framework of the current study. The objectives, research questions and hypotheses were proposed at the end of the discussion. The following chapter will discuss in details the research strategy and methodology.

CHAPTER 3 –RESEARCH METHODOLOGY

3.0 Chapter Overview

This chapter presents the research methodology for study being reported in this thesis. Having situated the study within the context of the Malaysian Public Service in earlier chapters, the focus of this chapter is on the steps taken to plan, design, justify and implement mixed methods approach in the study. The chapter begins with a general overview of qualitative and quantitative research methods, followed by a presentation of the two studies (one for each) that were carried out in the course of this research. The first was a qualitative study which relied on interviews to gain in-depth insight about job performance issues in the MPS. This interview data served a contributory role in the development of additional items for the instruments in the second study which was quantitative. The quantitative study was done to confirm the proposed theoretical model of job performance and the factors affecting job performance in MPS. The ensuing sub-section of this chapter provides a detailed description of the pilot study, results and adjustments that had to be made before commencing the main study. The last section of the chapter is devoted to discussing the ethical considerations that were made, the individual and institutional approvals obtained and the data analysis techniques adopted in the study.

3.1 Research Design

Mixed methods approach was used as the methodological framework for the study. A sequential exploratory design was deemed the most appropriate design for the study. The design enabled the researcher to explore the issue of job performance in the MPS and at the same time to test a new instrument for JD-R. Sequential exploratory approach in this study is a mix between qualitative and quantitative studies in which the first study explored the issues of job performance and factors affecting job performance, while the second study used the data from the first to develop additional items for the study instrument. Interview sessions were carried out with participants at selected hospitals. The data collected from the interviews were used to create additional items for existing instruments in the second study. Figure 4 is a model of the sequential exploratory approach.

MIXED METHOD RESEARCH
EXPLORATORY SEQUENTIAL DESIGN

| QUALITATIVE STUDY | ⟶ | QUANTITATIVE STUDY |

INTERVIEW

SURVEY

THEMATIC ANALYSIS

ANALYSIS USING IBM SPSS, SEM AMOS & PROCESS MACRO
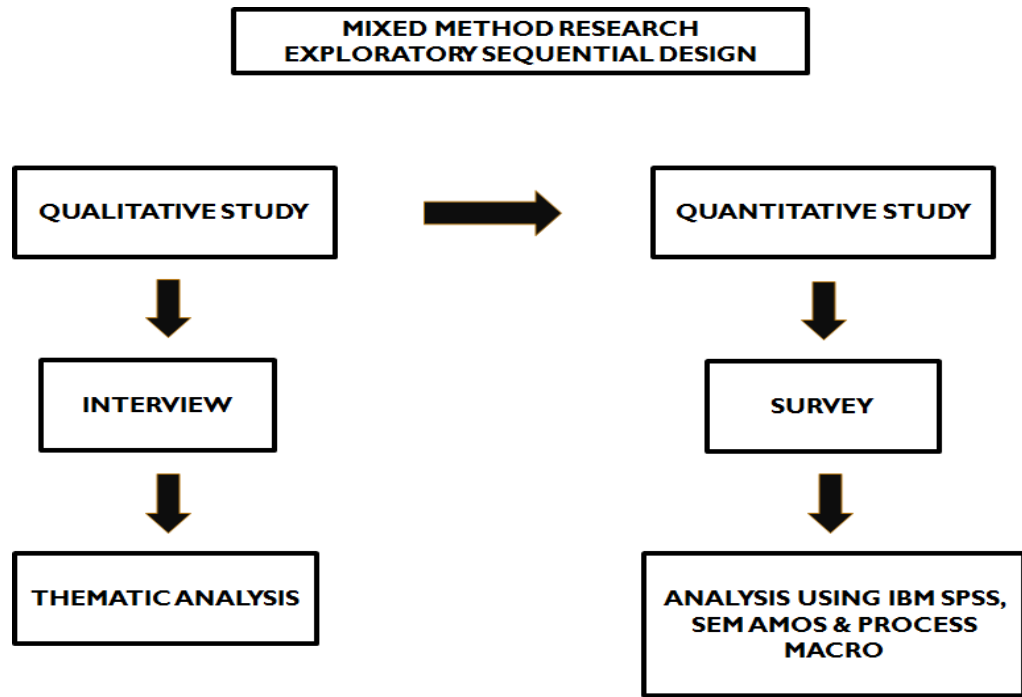
Figure 4: Mixed Method Research-Exploratory Sequential Design

Qualitative and quantitative research methods have similar scientific principles for data collection (Creswell, 2009). However, in terms of ontology and epistemology each method has its unique underlying assumptions. Ontology refers to the interplay between man, society and the world in general and how they react with each other (Gray, 2013). From an ontological perspective, a researcher may be either objectivist or subjectivist. An objectivist researcher is one who is not part of the study and focuses on the objective reality, whereas a subjectivist researcher is one who sees reality from the perspective of the participants in the study. The objectivist views reality as independent of social

actors, thus, the investigation is treated just like the physical or natural sciences, where the subjects are considered as responded mechanism. The subjectivist, views subjects as being able to react and give meaning to the environment and activities around them and not simply an object. Qualitative and quantitative research take the extreme end of both views, however in a mixed method study, the researcher can take the intermediate position by acknowledging both objectivist and subjectivist views (Ansari, Panhwar, & Mahesar, 2016; Bryman & Bell, 2011).

Epistemology is defined as the process by which a researcher determines reality. Both quantitative and qualitative research epistemology are associated with well-known paradigms of positivism and post-positivism. Positivism accepts only one objective reality which is independent of human perception (Ansari et al., 2016). Post-positivism on the other hand, assumes that "social reality is constructed differently by different individuals" (Castellan, 2010, p.4), which means that social reality is created continuously and affected by the surroundings. The researchers in qualitative research are part of the research. Whereas, the quantitative research paradigm is underpinned by the principle that "physical and social reality is independent of those who observe it" (Castellan, 2010, p.4). In the latter, the focus lies in the reality to be discovered in the field and the researchers are independent from the research subjects. Knowing the ontology

and epistemology underpinning the method of qualitative, quantitative and mixed research methods, helped the researcher to understand how to carry out this research properly. The mixed method study included both types of data collection which resulted in a better understanding of the phenomena being investigated.

3.1.1 Qualitative Research Methodology

In qualitative research, interviews, observations and documents are among the data sources used by researchers. Each source has specific processes and procedures to ensure that only relevant data is collected for the study. A good qualitative research can be identified from the quality of the data collected by the researcher. Therefore, it is important for the researcher to fully understand the data collection process and other aspects of the methodology used in the research.

The main objective for collecting data using interviews in a qualitative study is to get in-depth and holistic information on a chosen topic in a study. In depth interview allows a details information to be gathered and an issue to be explored. For example, on a topic about commitment at work, an in-depth interview will allow the participants to explain not only about why they are committed at work but also how, when and what could influence them to be committed at work. The

body language and the voice tone of the interviewees are also information for the interviewer. The power of interview data is in the vividness and the richness of the information gathered from the interviews (Gillham, 2000). Compared to survey questionnaires, an interview allows the interviewees to express and explain their opinion in detail. In most survey questionnaires, participants normally choose from a list of answers and they are not able to explain the reason for some of their choices (Silverman, 2011). However, an interview takes the form of an open dialogue session in which information, ideas and opinions are discussed and clarification using follow up questions can be made instantaneously. During an interview, an attentive researcher can deduce any implicit meaning of an answer given by a respondent and this may go a long way in unravelling the underlying intention of the participants (Gillham, 2005; Kvale, 1996).

In addition to getting direct and detailed answers during the interview, the interviewer can also observe the body language of the interviewees (Arksey & Knight, 1999). Body language can help the interviewer to understand the attitude and perception of the interviewees as well as the extent of the interviewees' personal feelings towards the issues. In some cases, the interviewer can also detect bogus or fake answers, which may indicate that the answers are not necessarily the interviewees' opinions. Interviews are typically conducted on a

one-on-one basis but they can also be done with a group. However, individual interviews are usually preferred when collecting data on sensitive topics (Gillham, 2005b). An interview is a research tool that can add human facets to an impersonal data. The data collected from interviews can be used to explain statistical data and deepen the understanding of the researchers and readers alike.

Although interviews are useful for obtaining valuable and in-depth data, they also have drawbacks which a researcher needs to be aware of before deciding on using interviews in a study. Interviews can only gather data from a limited and specific number of individuals (Gillham, 2000). One individual's view does not necessarily represent that of the whole community, as such, interview data cannot be generalized easily. However, researchers choose certain key data sources for their research for specific reasons. Therefore, the interview is normally chosen for depth, not breadth of information (Gillham, 2000). This aspect of the interview is actually the strength of a research focused on achieving deep understanding of an issue.

For this study, interview was chosen as the first data collection method to gather the information from the civil servants perspective on the level of job performance in the Malaysian Public Sector, the main issues that cause the complaints in public service performance and factors that could affect job performance. Most previous study focused more on customers' perception and

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by using survey, they could only understand the underlying reasons based on a list of answers. Instead in an interview, researcher will be able to gather additional information based on the respondents answer. Thus, in current study, interview was chosen as the most appropriate tool for data gathering in Study 1.

3.1.1.1 Introduction to the First Study

The first study is a qualitative research in which interviews were used to collect data. The participants were asked about their perception of job performance in the MPS and how they perceived the current situation in the public service. They were requested to list all the job demands and resources they were aware of. Subsequently, they were asked to name the factors (demands and resources) they considered important in the public service workplace and why they think the items are important and related to job performance. The data provided useful insights on the types of behaviours and items that are considered as demands and resources based on a Malaysian civil servants' viewpoint.

3.1.1.2 Participants

Participants were selected using purposive sampling technique. Healthcare employees (i.e. doctors, nurses, medical assistants and administrators) were chosen because the nature of their occupation demonstrated the SWB components better. Initially, after taking into consideration the types and nature

of work of the employees in hospitals, I planned to select ten participants from five hospitals: one hospital from Pahang and Selangor, two hospitals from Negeri Sembilan and one hospital from the Federal Territory. However, after interviewing and analysing the interview data in Hospital P in Pahang and Hospital NS1 in Negeri Sembilan, I found that the information gathered was saturated and sufficient for my research. In total, 9 participants from Hospital NS1 and 15 participants from Hospital P were interviewed. However, only interview data from six participants from Hospital NS1 and eight participants from Hospital P were analysed for the research due to saturation and sufficient information gathered. Table 2 and 3 show the demographic features of the participants.

Table 2: Demographic Features of the Participants from Hospital NS1

No.	Gender	Marital Status	Age	Job	Job's Grade	Tenure
1	Female	Married	58	Nurse	36	32
2	Female	Widowed	40	Attendant	11	9
3	Female	Married	31	Attendant	11	7
4	Male	Married	39	Medical Assistant	32	15

No.	Gender	Marital Status	Age	Job	Job's Grade	Tenure
5	Male	Married	37	Doctor	41	10
6	Male	Single	25	Medical Assistant	29	3

Table 3: Demographic Features of the Participants from Hospital P

No.	Gender	Marital Status	Age	Job	Job's Grade	Tenure
1	Female	Married	57	Nurse	36	31
2	Female	Single	45	Doctor	54	19
3	Female	Single	33	Science Officer	44	9
4	Female	Married	31	Nurse	32	5
5	Male	Married	52	Driver	6	24
6	Male	Married	37	Medical Assistant	32	15
7	Male	Married	29	Pharmacist	44	6
8	Male	Single	27	Medical Assistant	29	5

3.1.1.3 Data Collection

Participants were recruited through the hospital's management office. A list of potential participants based on job types and tenure in the public service was prepared by the management office. Each participant was then contacted by the researcher and informed consent was obtained. Participants' tight work schedule made it difficult to arrange for a suitable time to conduct the interview, as such, only half of the potential participants in the list agreed to be interviewed.

Interviews were conducted in the participants' office or at a venue provided by the management such as in the library or an empty room. A few of the interviews were interrupted but the session resumed afterwards. Each participant was given a small token of appreciation (a file for work purposes), but it was not meant to influence their perception of the study because it was given at the end of the interview.

The interviews were done in Bahasa Melayu and English language. However, Bahasa Melayu was used more than English since most of the interviewees were competent in it and showed preference for this choice. The interviews were audiotaped and some were videotaped based on their consent. The interviews lasted between 35 minutes and 80 minutes.

3.1.1.4 Interview Notes

A set of structured notes of ideas or interview protocol was used for the interviews as a guideline for the researcher to standardize the topic. The interview protocol prepared by the researcher is a document of inquiry that helped the researcher fulfil the research objectives and a means to guide the conversation between the participants and the researcher in the study. The prepared interview notes also helped the researcher to stay focused on the topic.

At the start of the interview participants were asked about their demographic details. This was done to make them comfortable with the researcher as well as to obtain peripheral information about them, their jobs and the workplace. The interviewees were then asked to share their work experiences right from their first appointment until their current position. Recounting their previous work experiences was challenging for some interviewees and they were unable to do so seamlessly. They found it easier to answer this question by sharing their experiences like a story and highlighting the ones that mattered to them the most. This approach enabled the researcher to capture meaningful and useful information about the interviewees without having to coerce their views.

The participants were then asked about the motivation for their choice to work as civil servants in the healthcare sector. They were also asked about job

performance at their workplace and the factors that they believe can enhance job performance at the workplace. The researcher then asked the participants about the demands and resources that were not mentioned while discussing the factors. The interview protocol/notes are in Appendix 1.

3.1.1.5 Interview Transcription

The transcription of the interviews was done mainly in Bahasa Melayu. No translation was done at the stage of transcription so as to preserve the authenticity of the information. Only the reported results were translated to English and proofread by a professional proof-reader. The sample full transcript of the interviews in Bahasa Melayu is provided in Appendix 2.

3.1.2 Quantitative Research Methodology

Quantitative research differs from qualitative research due to its numerical emphasis when explaining a phenomenon (Williams, 2007). Surveys using questionnaires and experiments with specific equipment are among the methods in quantitative research (Creswell, 2009). Its replicable nature and reliability, make it a popular methodology among researchers. The concepts and theories in quantitative research was defined before the start of data collection. The process of data gathering in quantitative research is normally done with more structured research tools. The data collection stage has a standardized procedure and the

instruments used need to be verified for reliability and validity. Thus, the collected data is normally stable over the years. Quantitative research requires a larger sample of participants in order to acquire the best results. This makes it possible for the findings to be generalized compared to findings from qualitative research. However, the need to collect a larger sample size may be considered a downside of quantitative research, as it is time consuming and requires a lot of effort. With proper planning and ample time to run the study, any problem in collecting large data could be overcome.

3.1.2.1 Introduction of the Second Study

The second study is a quantitative study to determine the dimensions of the items and compare with existing JD-R items. Data collected from the first interview were used to develop items related to demands and resources in the Malaysian Public Service.

The JDRS was developed by Jackson and Rothmann (2005) for their selected samples. Thus, it was not fully suitable for the MPS environment. From the interview, the researcher expected that new items of job demands and resources would be found. These items would then be selected to be incorporated into the existing questionnaires. The questionnaires then were distributed to the participants in Study 2. Data collected from the Study 2 was used to develop an

adapted instrument with new validated and reliable items of the JD-R
questionnaire for the Malaysian workplace.

3.1.2.2 Existing Measures and Operational Definition of Variables

Ten existing validated instruments were used in this research. The instruments
are 1) Job Demands-Resources Scale (JDRS) (Jackson & Rothmann, 2005), 2)
Physical Work Environment Satisfaction Questionnaires (PWESQ) (Carlopio,
1996), 3) Ratings of Environment Features (REF) (Stokols and Scharf, 1990), 4)
Existing Personal Resources (Deese, 2009), 5) Religiosity Personality Scale
(Krauss et al., 2007), 6) Spiritual Involvement and Beliefs Scale-Revised (SIBS-
R) Hatch et al., (as cited in Ciali 2000), 7) Utrecht Work Engagement Scale
(UWES) (Schaufeli & Bakker, 2003), 8) Organisational Commitment
Questionnaire (OCQ) (Allen & Meyer, 1990), 9) General Wellbeing
Questionnaires (GWBQ) (Cox, Thirlaway, Gotts, & Cox, 1983; Nielsen, 2003)
and 10) Individual Work Performance Questionnaires (IWPQ) (Koopmans et al.,
2013).

i. Job Demands-Resources Scale (JDRS) by Jackson and Rothmann (2005)

The JDRS was developed to measure job demands and job resources. The scale
was developed by Jackson and Rothmann based on the literature review and

interviews done in their study. Items were developed and checked for validity and reliability. The JDRS consists of 48 items related to pace and amount of work, mental load, emotional load, variety in work, opportunities to learn, independence in work, relationships with colleagues, relationship with immediate supervisor, ambiguities about work, information, communications, participation, contact possibilities, uncertainty about the future, remuneration and career possibilities. The final five factors were then introduced and named work overload, job insecurity, growth opportunities, advancement and organisational support. The items are rated on a four-point scale ranging from 1 (Never) to 4 (Always).

Work overload in this instrument refers to the amount of work, mental load and emotional load that an employee faces at work. Job insecurity is a feeling of uncertainty about one's future undertakings in a current job. Growth opportunities represent the prospect for learning on the job, independence at work as well as exposure to various skillsets. Advancement refers to an upgrade in terms of remuneration, training and career opportunities. Organisational support includes the relationship with one's supervisor or manager, the availability of information, communication in the organisation, participation, social support from colleagues, and contact opportunities within the organisation (Jackson & Rothmann, 2005). Based on the factor analysis done on the five

dimensions, they categorised the dimensions into two-factor structures: the job demands and job resources. Work overload represents the job demands under JDRS and the four other factors represent the job resources of JDRS (i.e. growth opportunities, organisational support, advancement and job security). The two factors match with the two factors proposed by Demerouti et al. (2001) and Schaufeli and Bakker (2004).

ii. Physical Work Environment Satisfaction Questionnaires (PWESQ) by Carlopio (1996) and Ratings of Environment Features (REF) by Stokols and Scharf (1990)

Work environment was assessed using questionnaires adapted from Carlopio's Physical Work Environment Satisfaction Questionnaires (PWESQ) (1996), and Rating of Environment Features (REF) by Stokols and Scharf (as cited in Veitch et al., 2002). The PWESQ consists of 42 items that address employees' satisfaction in five general areas namely: the physical environmental design, facilities, work organisation, equipment design, and health and safety. Physical work environment refers to the lighting, air quality and work surface. Facilities refer to amenities provided at the workplace such as toilets, recreation centre, office space and pantry. Work organisation is the work pace and information availability. Equipment design refers to tools, machines and materials provided. Lastly, health and safety refer to training, hazard exposure, and control of the

workspace. The scale reliabilities (Cronbach's alpha) for the PWESQ was .94 and the five sub-scales alpha ranged from .82 for physical environmental design to .92 for health and safety. The REF contains 27 items including privacy, air quality and lighting. Internal consistency of REF was reported based on five pilot administrations with the values of alpha ranging from .84 to .94. The questionnaires were combined to have better work environment (general, control, privacy) items that cover all aspect required by the current research. The items were also taken from established questionnaires to ensure valid and reliable items.

For the purpose of this study, researcher only interested on items about lighting, air quality, atmosphere, facilities provided and cleanliness of the facilities to measure the general work environment. The scale was rated using a 7-point Likert scale from 1 (Extremely Dissatisfied) to 7 (Extremely Satisfied). Whereas, for work privacy and work control, six of the items for work privacy and four items from work control under REF were chosen for this research. Work privacy refers to private activities while working such as wearing headphones, leaving early or taking sudden leave from work because the employee does not want to work that day, keeping personal thought and pretending to be extremely busy. Work control items refer to how employees control work space organisation and personalization as well as the work space comfort.

iii.Existing Personal Resources by Deese (2009)

The items for existing personal resources were taken from Deese (2009) study on personal resources as additional factor for JD-R model. There are 15 items in the questionnaire for all three factors which are the self-efficacy, organisational based self-esteem and optimism. The self-efficacy items were taken from the sub-dimension of the Core Self Evaluations measure by Judge, Erez, Bono, and Thoresen (2003) and a general self-efficacy measure by Chen, Gully, and Eden (2001). Self-efficacy was assessed with five items in which the participants rated their perceived success in life and success in overcoming challenges. The items were rated using a 5-point Likert scale from 1 (Strongly Disagree) to 5 (Strongly Agree). The reliability of this scale was .74. Three items for organisational based self-esteem were also taken from Core Self Evaluations measure by Judge et al., (2003) and two more items from the Rosenberg self-esteem scale by Rosenberg (1965). The items assessed participants' satisfaction of themselves and how they view their attitudes. Participants were asked to respond using a 5-point Likert scale from 1 (Strongly Disagree) to 5 (Strongly Agree). The Cronbach alpha for this scale was sufficient at .76. The optimism items were from the Life Orientation Test by Scheier, Carver, and Bridges (1994) with similar 5-point rating scale. The items are related to the participant's belief and expectation of

themselves in future endeavours. The items were reliable with the Cronbach's alpha at .78.

iv.Religiosity Personality Scale by Krauss, Hamzah and Idris (2007)

The Religiosity Personality Scale was developed by Krauss, Hamzah and Idris (2007) to assess religiosity across four main faiths (Islam, Hinduism, Buddhism and Christianity) in Malaysia based on the Muslim Religiosity-Personality Inventory (MRPI) by Krauss et al. (2006). Contextual editing and removal of Islamic specific terminologies was done to ensure that the scale would be accepted by other faith groups. The scale had high internal consistency with an alpha of .93. To confirm the Content validity of the scale, Kraus, Hamzah and Idris have called on leaders from the faith groups for expert feedback on the items. The final scale consists of 99 items with a five-point Likert scale ranging from 1 (Never) to 5 (Always). The items measure the respondents' frequency of attitudes, behaviours or intention to commit behaviours. Religiosity Personality Scale has three factors which are the pro-social behaviours, ritual behaviours and anti-social behaviours. Pro-social behaviours refer to the positive attitude such as being polite and having good relations with others. Ritual behaviours are the behaviours related to religious activities such as reciting Al-Quran/Holy book/scriptures, performing *solat*/prayers/religious service and obeying rules/advice of the religion. Anti-social behaviours include the negative

behaviours such as being rude to parents, gossiping about other people, ridiculing others and being hostile (anger) towards other people. A pilot test of the current research helped the researcher to choose 22 items out of 99 items to be used in the current study with 8 items for pro-social behaviours and 7 items for each of the ritual behaviours and anti-social behaviours. The items were chosen based on highest factor loadings shown during the EFA for each sub-construct.

v. Spiritual Involvement and Beliefs Scale-Revised (SIBS-R) by Hatch et al. (1998)

The original version of Spiritual Involvement and Beliefs Scale (SIBS) has 39 items to measure spirituality. The revised version of SIBS called Spiritual Involvement and Beliefs Scale-Revised (SIBR-R) has 22 items measuring involvement and beliefs of spiritual orientation. The first 21 items use a seven-point Likert scale ranging from 1 (Strongly Disagree) to 7 (Strongly Agree). Item number 22 asks the respondents to rate their level of spirituality based on a seven-point Likert scale with 7 being the "most spiritual". The SIBS-R contains 4 factors which are core spirituality, spiritual perspective/existential, personal application/humility and acceptance/insight. Ciali (2000) has found that the items in the four factors above have been recategorized. Core spirituality has 14 items and among the items are; belief in something greater than oneself,

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fulfilment, prayer, joy, love, acceptance, spiritual experiences, spiritual growth, spiritual writings, relationship with someone who could provide spiritual guidance, and relationship with spiritual and physical health. Spiritual perspective/existential has 4 items: ability to find meaning, serenity, hope and gratitude. Personal application/humility has 2 items which are application of beliefs and values as well as readiness to serve others. Lastly, the factor acceptance/insight has 2 items that refer to meditation activities and connection to nature. The overall reliability coefficient of the four-factor SIBS-R was .92.

vi. Utrecht Work Engagement Scale (UWES) by Schaufeli and Bakker (2003)

The work engagement questions used in this study were shortened versions from UWES developed by Schaufeli and Bakker (2003). The short version contains three factors which are vigour, dedication and absorption. These factors have three items for each factor and items were rated on a 7-point scale, ranging from 1 (Never) to 7 (Everyday). Vigour refers to feeling energetic at work, vigorous and strong willed to go to work. The reliability of the vigour item was high with the Cronbach's alpha of .75 to 0.91 across 25 studies done by the developer team. Dedication refers to the feeling of enthusiasm and pride in one's job as well as being inspired by the job. Dedication items also had high reliability which ranged from .83 to .93 of Cronbach's alpha values. Lastly, the absorption items relate to

how immersed, how carried away and how happy an individual is when doing their job intensely. The values of Cronbach's alpha vary from .75 to .94 for absorption items showing a good reliability. The short version of UWES had high reliability with Cronbach's alpha and it varies from .89 to .97 for the whole items in the instruments.

vii.Organisational Commitment Questionnaire (OCQ) by Allen and Meyer (1990)

The Organisational Commitment Questionnaire (OCQ) was first introduced by Allen and Meyer (1984) with two factors which are the affective commitment and normative commitment. The revised version of OCQ by Allen and Meyer (1990) was a 24-items questionnaire. There were eight items for each type of commitment, including the new proposed type which is the normative commitment. For the purpose of this research, a short-version of 12 items OCQ was used. The affective commitment emphasizes on the sense of belonging and emotional attachment to the organisation. The continuance commitment refers to perceived cost of leaving the organisation, while normative commitment is the perceived obligation to remain in the organisation. Items for OCQ were rated using 7-point scale, ranging from 1 (Strongly Disagree) to 7 (Strongly Agree). The reliability of OCQ as reported by Allen & Meyer (1990) is .87 for affective

commitment, .75 for continuance commitment, and .79 for normative commitment.

viii.General Wellbeing Questionnaires (GWBQ) by Cox, Thirlaway, Gotts and Cox, (1983)

General Wellbeing Questionnaires (GWBQ) was developed by Cox and Gotts in 1983. The amended version of GWBQ has 24 items with 2 factors; one factor reflecting fatigue, emotional fragility and confusion (worn out) and the other tension, anxiety and agitation (uptight). Each of the factors has 12 items and they were rated using a 5-point Likert scale from 0 (Never) to 4 (All the Time). The 24-item GWBQ showed high internal consistency with Cronbach's alpha of .921, The worn out and uptight scales had a Cronbach's Alpha of .86 and .83 respectively (Cox et al., 2006).

ix. Individual Work Performance Questionnaires (IWPQ) by Koopmans et al., (2011)

Individual Work Performance Questionnaires (IWPQ) was developed by Koopmans et al., (2011). It consists of four dimensions: task performance, contextual performance, adaptive performance and counterproductive work behaviour (CWB). Task performance has indicators related to job completion,

work quality, work quantity, job skills and knowledge, up-to-date knowledge, neatness and accuracy at work, planning and organizing, decision making and problem solving, proficiency in oral and written communication, monitoring and resources control. Contextual performance indicators among others refers to the ability to do extra tasks, the effort and enthusiasm at work, the attention to duty, proactive, creativity and cooperation at work as well as interpersonal relations. Adaptive performance is related to the ability to remain calm and resilient, analyse quickly and act appropriately, generate new and innovative ideas, adjust goals and plan for any situation, learn new tasks and technologies, flexible and open minded, understand other culture, The CWB dimension is the off-task behaviours such as too many or longer breaks, arguing with co-worker, presenteeism and absenteeism. Each dimension has its own 5-points rating scale suitable for the items. Task, contextual and adaptive performance have a scale from 0 (Seldom) to 4 (Always), whereas CWB has a scale of 0 (Never) to 4 (often). The IWPQ has been tested for reliability and it was found to be good to excellent reliability with Cronbach's alpha of .70 to .85 for task performance, contextual performance, adaptive performance and CWB. There are 47 items for overall IWPQ. Task performance has 13 items, contextual performance has 16 items, adaptive performance 8 items and CWB 10 items. In current research, three out of four dimensions of IWPQ were used because current study focused on the task performance and not the off-task behaviour such as CWB. There were

only 11 items for task performance, 7 items for contextual performance and 4 items for adaptive performance that were used in current research.

3.1.2.3 Item Development and Adaptation to JDRS and IWPQ

Job Demands items under this study are adapted from JDRS, PWESQ and REF. One factor is taken from JDRS which is work overload. The overload items were then separated into two factors which are the work overload and emotional demands. The general work environment, work privacy and work control were taken from PWESQ and REF. Several items for policy and leadership were developed using the findings of the qualitative Study 1. The CFA of the newly developed items were done to ensure that they are fitted with the constructs and have factor loadings more than .60 for good AVE and CR. All items for job resources were taken from JDRS. In Table 4 are the sample questions for Job Demands-Resources and other questions for Job Demands and Job Resources are in Appendix 3.

Table 4 : Sample Questions for Job Demands and Job Resources

Job Demands and Job Resource Items	Sample Questions
Job Demands Items	
Work Overload	*Do you have too much work to do?*
Emotional Demands	*Does your work put you in emotionally upsetting situations?*
Work Environment	*How satisfied are you with…?* *The lighting in your area?*
Work Privacy	*How often do you…?* *Wear headphones when you are in the office?*
Work control	*To what extent do you agree with the following statements?* *I determine the organisation/appearance of my work area.*
Policy and Leadership (New)	*The leaders in my organisation have closely monitored the employees' performance.*
Job Resources Items	
Job autonomy	'*Do you have control over how your work is carried out?*
Organisational and Social Support	*If necessary, can you ask your colleagues for help?*

Job Demands and Job Resource Items	Sample Questions
Job security	*Do you need to be more secured that you will keep your current job in the next year?*
Growth and Advancement	*Does your organisation give you opportunities to follow training courses?*

Job performance was measured using the self-rating Individual Work Performance Questionnaire (IWPQ) by Koopmans et al., (2013). The items in the questionnaire measure the task performance, contextual performance and adaptive performance. Four items of overall job performance rating have also been included as additional items in IWPQ. Table 5 contains the sample questions for Job Performance and the full set of questionnaires are in Appendix 3.

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Table 5: Sample Questions for Job Performance

Job Performance Items	Sample Questions
Task Performance	*I managed to plan my work so that it was done on time.*
Contextual Performance	*I took on extra responsibilities.*
Adaptive Performance	*I worked at keeping my job knowledge up-to-date.*
Overall Performance	
Overall Performance	*I have never been issued a letter because of a disciplinary problem.* *On average I see myself as a top performer* *My superior is always satisfied with my job performance.* *My co-workers are always satisfied with my job performance.* *My clients are always satisfied with my job performance.*

3.1.2.4 Sample Questions for Other Variables

i. Personal Resources (Exogenous Variable)

Personal resources contain three sub-constructs which are the existing personal resources, religiosity and spirituality. The existing personal resources questionnaires of self-efficacy, organisational based self-esteem and optimism were taken from Deese (2009). For religiosity and spirituality, questionnaires were taken from Religiosity Personality Scale (Krauss et al., 2007), and Spirituality Involvement and Beliefs Scale (SIBS) by Hatch et al., (1998) as cited in Maltby & Day, (2001). The questions were adapted to suit the MPS context. Table 6 is the sample questions for personal resources items and other items are shown in Appendix 3.

Table 6: Sample Questions for Personal Resources

Personal Resource Items	Sample Questions
Existing Personal Resource **(Self-efficacy, Organisational Based Self-esteem & Optimism)**	
Self-efficacy	*When I try, I generally succeed.*
Organisational Based Self-Esteem	*Overall, I am satisfied with myself.*

Personal Resource Items	Sample Questions
Optimism	*I am always optimistic about my future.*
Religiosity	
Religiosity	*I like to take advantages of opportunities to understand my religion with my family.* *I like to help the needy.*
Spirituality	
Spirituality	*I can find meaning in times of hardship.* *I have a personal relationship with a power greater than myself*

ii. Subjective Wellbeing (Endogenous Variable)

The Utrecht Work Engagement Scale (UWES) was used to measure the participant's level of engagement. The UWES short version is a self-report questionnaire with nine items to measure vigour, dedication and absorption of work engagement. UWES was chosen because it is in line with this study's definition of work engagement and it is the most commonly used scale of engagement (Schaufeli & Bakker, 2003). Organisational commitment was

assessed using Organisational Commitment Questionnaires (OCQ) by Meyer and Allen (1991) with three dimensions of organisational commitment which are affective, continuance and normative. Negative personal wellbeing was measured using an amended version of General Wellbeing Questionnaires (GWBQ) by Cox et al., (1983).The items loaded onto one of two factors: 'uptight' and 'worn out' with uptight measures symptoms related to fear, worry and physical signs of anxiety. Worn out measures symptoms related to tiredness, emotional liability and cognitive confusion. Table 7 presents the sample questions for SWB and the full set of questionnaires is in Appendix 3.

Table 7: Sample Questions for Subjective Wellbeing

Subjective Wellbeing Items	Sample Questions
Work Engagement	
Vigour	*I am bursting with energy at work.*
Dedication	*I find my work full of meaning and purpose.*
Absorption	*I get carried away when I am working.*
Organisational Commitment	
Affective commitment	*I do not feel emotionally 'attached' to this organisation.*

Subjective Wellbeing Items	Sample Questions
Continuance commitment	*One of the few negative consequences of leaving this organisation would be the scarcity of available resources.*
Normative commitment	*I would not leave my organisation right now because I have a sense of obligation to the people in it.*
Negative Personal Wellbeing	
Uptight	*Become easily bored with work schedule.* *Felt burned out or stressed by your work.*
Worn out	*Had difficulty in falling or staying asleep.* *Worn yourself out worrying about your health.*

In addition to the questions for each construct, a set of questions were used to capture the demographic features of the participants. Participants were asked to indicate their job type and other demographic details such as gender, age, sex and tenure. The final questionnaire is in Appendix 3.

3.1.2.5 Pilot Study

A pilot study was conducted to identify the suitability and consistency of the items. The pilot study was also done to test the ability of the participants in

understanding the items and to detect any shortcoming of the questionnaires. A pilot study is a useful medium for researchers to select the right questions and save them from any problematic items that could confuse and offend the participants (Cooper and Schindler (2008) as cited in Saidon (2012)). Sixty (60) questionnaires were distributed to NS1 Hospital's employees out of which 40 questionnaires were returned. Six of the questionnaires had to be excluded due to missing data and only 34 were analysed. Thirty-four (34) participants are considered an ample number for statistical testing procedures Luckas, Hair, and Ortinau (as cited in Saidon 2012).

Based on the pilot, the researcher found that the reliability of the items and the constructs were well beyond an acceptable level as shown in Table 8. According to Hair et al., (1998), .70 and above is sign of good reliability. The Cronbach's alpha for the questionnaires is .83 and each construct has Cronbach's alpha between .73 and .96.

Table 8: Cronbach's Alpha for All Constructs

Construct	Cronbach's Alpha
Job Demands	.87
Job Resources	.85
Personal Resources	.88
Existing Construct	.80
Religiosity	.85
Spirituality	.85
Subjective Wellbeing	
Work Engagement	.82
Work Commitment	.83
Negative Personal Wellbeing	.93
Job Performance	.73

Based on the feedback from the participants, several items had to be taken out to shorten the questionnaires. For existing short questionnaires such as work engagement, the short version was used in the main study. For other questions such as religiosity, exploratory factor analysis was done in order to select the best items. Items with factor loading below .30 and items loaded with more than one factor were deleted. The final version of the selected questionnaires is in Appendix 3.

3.1.2.6 Data Collection and Participants of the Main Study

Data collection process in this study was carried out as a self-administered study. A hospital is a very busy workplace, thus, the participants were allowed to fill the questionnaire at home rather than at work. This afforded the participants the privacy to study and answer the questions without interference from the researcher. They were given between two weeks to one month to answer and return the questionnaire. They were also given an envelope and a pen for convenience purposes. The participants were instructed to seal their filled questionnaire inside the envelope and place it inside the boxes stationed in their offices by the researcher. The researcher collected the questionnaires several times for nearby locations and collected them twice for locations further away. This method ensured that the participants were at ease when answering the questions especially when answering sensitive or confidential questions. Previous researchers have found that participants are more likely to give honest answers in self-administered surveys compared to face-to-face data collection. The perceived reward for answering a questionnaire also has a role in motivating participants to answer questionnaires (Barker et al., 2015; Fan & Yan, 2010; Paulhus, 2005; Shih & Fan, 2009; Razavi, 2010). In this case, the reward in this research was the opportunity to voice out their opinion about their workplace.

In this study, participants were selected using systematic convenience sampling from five hospitals. Participants were selected from one hospital each in Pahang (P), Selangor (S) and Federal Territory (F) and two hospitals from Negeri Sembilan (NS1 & NS2). Systematic convenience sampling here was done by looking at the type of hospital services in Malaysia. There are three types of hospitals under the Malaysian Public Service, the General hospital, the district hospital and the specialized hospital. This study systematically selected the hospitals based one of those types that include in a manner that at least one type of the hospital would be included in the study. At first three of each type of hospital of were proposed, but taking into consideration the time, cost and location only five hospitals were chosen for Study 2 and two hospitals for Study 1. Since researcher has the experiences of working with one of the hospitals and the potential of easy access and communication with the managements, five hospital were chosen that represented the three types of hospitals and have a combination of services. The hospital are Hospital NS1, Hospital NS 2, Hospital P, Hospital S and Hospital FT. Below is the list of the hospitals based on types.

Table 9: List of Hospital Based on Type

Hospital	Type of Hospital	Additional service
Hospital NS 1	General hospital	Specialized hospital and cover the Southern Region of Peninsular Malaysia
Hospital NS2	District hospital	
Hospital P	Specialized hospital	Cover the East Region of Peninsular Malaysia
Hospital S	Specialized hospital	District hospital
Hospital FT	General Hospital	Specialized hospital

One thousand two hundred (1200) questionnaires were distributed to different location and categories of participants. About 250 to 270 questionnaires were distributed to General and Specialized hospital and 160 questionnaires to the District hospital. According to Cochran (1977) as cited in Bartlett, Kotrlik and Higgins (2001) 384 is the minimum number of participants needed in order to obtain 5% margin of error and 95% confidence level from a population of 100,000. The study achieved the minimum number of participants needed as six hundred and eighty-four (684) questionnaires were returned to the researcher.

Out of that number, 55 questionnaires were excluded due to missing data and insufficient demographic information. Six hundred and twenty-nine (629) questionnaires were retained for the analysis purposes. This is about 52.42% response rate. Appendix 4 and 5 are the sample cover letters to the hospital. Table 10 is the summary of data collection and participants' response rate.

Table 10: Response Rate Summary

	Number of Questionnaires	Percentage/Reason	
Total questionnaires distributed	1200	100%	
Questionnaires received	684	57%	
Usable questionnaires	629	52.42%	
Hospital NS 1	133	21.1%	
Hospital NS 2	84	13.4%	
Hospital P	137	21.8%	
Hospital S	158	25.1%	
Hospital FT	117	18.6%	
Unusable questionnaires	55	25%	or more unanswered items or empty demographic features

3.2 Ethical Considerations

Research done for this thesis has been approved by the University of Nottingham Malaysia Campus Ethics Review Board (Reference: FASS Research Ethics Committee Review 29 August 2014) and Ministry of Health Malaysia, Medical Research and Ethics Committee (Reference: (5) KKM/NIHSEC/P-120 11 February 2015). Questionnaires in this research were available in the public domain and several of the items were prepared by the researcher. The questionnaires have been reviewed by both ethic committees.

For the interview, informed consent was obtained when the participants were contacted by the researcher and a consent form was signed at the start of the interview. Each participant was given a research information sheet to read. They were then asked whether they understood the content. For the survey, each questionnaire booklet had a research information sheet and an informed consent form to be filled by the participant. Their willingness to return the questionnaire booklet is considered as informed consent to participate in the research and permission to allow the researcher to use the data for the thesis. To preserve participants' confidentiality, the data were only available to the researcher, supervisor and university reviewer. All returned questionnaire booklets were

kept in a locked storage and data were stored in a password locked personal computer. Based on the University of Nottingham Code of Research Conduct and Research Ethics, the materials will be kept for at least seven years from the date of the thesis publication.

In addition to that, both survey and interview were governed by four basic principles of ethics proposed by Murphy and Dingwall (2007) in (Flick, 2009). The principles were especially important for the face-to-face interview because it involved direct exposure of the participants and the researcher. The four ethical aspects that needed to be considered are non-maleficence, beneficence, autonomy or self-determination and lastly justice.

Firstly, *non-maleficence* means that the participants will not be harmed in any way, physically or emotionally. This is very important during the interview due to the direct contact between the participants and the researcher. Since the participants were required to give their personal opinions face-to-face, it was essential that the researcher paid attention to any emotional or physical change during the interviews. Concerned researchers typically develop a trusting relationship with the participants and motivate them to be as open as possible when giving their opinions. For the survey, the researcher had to make sure that the questions were not sensitive and the participants were assured that they could

withdraw from the study at any time if they were not comfortable answering any of the questions.

Secondly, the researcher must not waste the time and energy of the participants (*beneficence*). An ethical researcher needs to ensure that the research is useful to the individual and benefits the intended community as a whole. The topics and issues discussed in the interview or survey should reflect that the time and energy of the participants is valued and important to the researcher. This research is very important and was not a waste of time and energy. By participating in this study, the respondents were able to reflect on their own performance as well as their workplace environment.

The third ethical aspect is autonomy or self-determination in which the values and decisions of the participants need to be respected. Regardless of the opinions given, the researcher needs to show that the information is valuable to the research and respect the opinions even if they are of different values.

Lastly, all participants should be treated equally (*justice*). For a good research, the participants come from different backgrounds that relate to the same issues, thus it is necessary for the researcher to treat each participant equally throughout the research processes. Different gender, age, race or social economic status should not be an issue when providing valuable information in a research. This

aspect of ethics will be more crucial when the research involves participants that are physically or mentally challenged.

All of these ethical considerations are important during the research, as such, all the necessary documents such as board of ethics form and informed consent forms were completed before the start of the research. As mentioned above, the confidentiality issue was addressed at the start of the research by asking the participants for their consent to tape record the conversation for data analysis purpose only (Creswell, 2009). By complying with all the ethical processes, the research addressed all the ethical considerations properly. In this research, all four ethical aspects were observed accordingly at each phase of the studies.

3.3 Data Analysis Techniques for the Studies

3.3.1 Data Analysis Technique for Qualitative Study

The qualitative study was analysed using thematic analysis, which is one of the most common forms of data analysis in qualitative research. Thematic analysis highlights the process of selecting specific and important patterns or themes in the collected data based on the research questions and objectives. The "themes" will then be examined and recorded accordingly (Braun & Clarke, 2006). Thematic analysis is considered a detailed and rich data analysis tool for qualitative study.

Braun and Clarke (2006) have proposed 6 phases to conduct a thematic analysis. First, the researcher needs to become familiar with the collected data. To achieve a good understanding of the data, it is important that the researcher reads and rereads the data to search for meaning and patterns. For transcribed data from interviews, the process of transcription enables the researcher to familiarize with the data. Thus, it is advantageous if the process is done by the researcher. After doing so, the researcher will be able to proceed to stage two, which involves generating the initial codes for the data. This phase starts with generating ideas and interesting facts from the data. The codes could be very basic terms to describe the raw data. Codes can be set for the whole dataset or a segment of the dataset. Coding process can be done manually by writing or automatically using software such as Nvivo and Atlas.ti. The third stage is the search for themes. The process is done by focussing and analysing the list of codes from the second stage to form a broader theme. The codes can be combined to form primary themes of the data. One way to do it is by using visualization to extract codes and combine them to become a theme. The process can easily be done using the software mentioned above (Braun & Clarke, 2006). The next phase of thematic analysis is the reviewing of themes. At this phase, the researcher needs to look at the data starting from the codes of each participant and review whether the themes are suitable and coherent. If it does not fit, then it means that either the theme is problematic or that the data simply cannot fit with the theme. Thus, the

next step is to create a new theme for the data or maybe the researcher needs to remove the specific data. After the researcher confirms the themes, it transits to the phase of defining and naming the themes. This process involves naming and refining the themes. Each theme should have an analysis or a story to tell the audience. The researcher should also consider whether the themes have sub themes and be able to describe each theme when reporting the process. The last phase of thematic analysis is to produce a report which according to Braun and Clarke (2006, p.23) should be "concise, coherent, logical, non-repetitive, and interesting account of the story the data tell…". The end result should not be only presenting the data, but also be able to analytically present and discuss the data by relating it with the research questions and objectives.

Data analysis for the first study was done using Atlas.ti. The researcher generated the codes for transcription and combined the codes into bigger themes. The process was done by focussing and analysing the list of codes from the second stage to form a broader theme. The themes were then reviewed to look for suitability and coherence. The confirmed themes were refined and named. Each theme should have an analysis or a story to tell the audience.

About 64 initial codes were prepared for the analysis. Most of the codes came from the variables in the JD-R and SWB constructs. Some codes were deleted

and changed in the process due to suitability of the data. Then the codes were grouped into themes. Table 11 is the list of the initial codes:

Table 11 : List of Initial Codes

List of initial codes		
Absorption	Expectation	Pro-social
Acceptance	Experience	Religious
Adaptive	External	Responsibility
Affective	Family	Ritual
Antisocial	Family support	Self-efficacy
Appreciation	Financial	Self esteem
Attitude	Flexibility	Small problem
Autonomy	Generation gap	Social support
Career advancement	Interest	Spirituality
Commitment	Job security	Stress
Communication	Knowledge	Supervision
Complaints	Leader	Task
Conflict	Lenient	Teamwork
Contextual	Miscommunication	Training
Continuance	Monitoring	Understanding
Control	Motivation	Uptight
CWB	Normative	Vigour
Dedication	Optimism	Wasting
Discipline	Organisation program	Work environment
Emotion	Overload	Work system
Enforcement	Perception	Worn out
	problem	

3.3.2 Data Analysis Technique for Quantitative Study

3.3.2.1 Data Analysis Using IBM SPSS and SEM AMOS to test Hypotheses H1 and H2

The second study was analysed using SPSS, SEM AMOS and PROCESS. There were three phases of data analysis in this study. In the first phase, the data were analysed using the IBM SPSS Statistic 22 software to get the preliminary results of the study. The demographic description, frequencies, mean and standard deviation of the data were computed using this software. The normality test and factor analysis were also done using SPSS. The data were first keyed into SPSS and all missing data were excluded before the analysis was done in AMOS. The second phase of the analysis was done using Structural Equation Modeling (SEM) in AMOS version 22. SEM is a statistical modelling technique (multivariate technique), which uses factor analysis, regression or path analysis to analyse complex relationships between multiple variables or constructs. SEM combines the confirmatory factor analysis, multiple linear regression and path analysis to test for the hypotheses of the study. The relationship between the constructs are shown using the regression coefficient of the items and pictured in a graphical path diagram (Hox & Bechger, 1998). SEM is also a technique to confirm a model proposed in a study. The aim of SEM is to understand the patterns of correlation or covariance in the model and explain the relationship of

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the constructs in the specified model. SEM is able to model interdependencies between several dependent variables (endogenous variables) and the independent variables (exogenous variables). It provides concurrent overall tests of model fit and individual parameter estimate tests.

The first step in using AMOS is by looking at the basic steps in model test which are: draw the path diagram, select the data file, display the variables list, drag the variables or assign names, set analysis properties, calculate the estimates and lastly view the text output. There are three levels of SEM analysis, which are the confirmatory factor analysis, measurement model and structural model. The purpose of confirmatory factor analysis is to test for model fit, convergent validity and construct reliability of the individual construct. Measurement model is done by incorporating all latent constructs simultaneously into one path diagram. The purpose of measurement model is to test for model fit, discriminant validity, normality and outliers. Lastly, the purpose of structural model is to test for model fit, the hypotheses on individual path/regression weight and to describe the coefficient of determination.

3.3.2.2 Data Analysis Using PROCESS Macro to Test for Moderation and Mediation

The final step of data analysis in this study is the test for moderation and mediation effect using PROCESS Macro. Andrew Hayes developed PROCESS as a tool in SPSS to test for mediating and moderating effects on the relationship of IV and DV. In order to test for hypothesis H1d and H1h, the researcher used the PROCESS macro provided by Hayes (2013) to run the analysis. PROCESS has procedures to test for indirect effects in samples by using bootstrapping, a nonparametric resample procedure. The output of the analysis yields confidence intervals for the indirect effects. Bootstrapping of 10,000 samples in each analysis was used and to achieve significant moderated mediation effects, the confidence interval (CI) must not be zero. For hypothesis H1d and H1h, model 7 of the PROCESS macro were used (Hayes, 2013). Model 7 enables the moderator and mediator to be run simultaneously. Model 7 also allows up to ten mediators to be tested simultaneously and gives insight on conditional indirect effect when the moderators are introduced.

3.4 Chapter Summary and Conclusion

This chapter has described in detail the rational for using mixed method as the research design used in this study. It provided an in-depth description of

participants, data collection techniques and sampling for both qualitative and quantitative studies; as well as, the instruments used, how ethical issues were addressed and it duly explained the data analysis procedures which were used. A detailed description on the pilot study was also incorporated in this chapter. The next chapter proceeds to provide a detailed description of the procedures and results for the first study in answering the first and second research questions regarding the complaints in job performance of Malaysian public servants.

CHAPTER 4 - PERCEPTION ON JOB PERFORMANCE IN THE MALAYSIAN PUBLIC SERVICE (STUDY 1)

4.0 Chapter Overview

The previous three chapters have discussed the researcher's intention to study job performance in the public service by explaining the importance, previous studies, the questions raised as well as the research strategy and methodology. This chapter continues with an overview of the qualitative study and thorough explanation of the results of the first study (Study 1). The level of job performance in MPS and the complaints issue are discussed in details in this chapter. The chapter then describes thoroughly the factors affecting job performance based on the civil servants' perspective and discusses the theoretical aspects of the factors.

4.1 Introduction

The objectives of Study 1 were to explore the level of job performance in the Malaysian Public Service (MPS), examine the main issues that cause the complaints in public service performance and identify the factors affecting public service performance from the perspective of civil servants. Thus, two research questions were developed; 1) what is the level of job performance in

the Malaysian Public Sector and the main issues that cause the complaints in public service performance from the perspective of civil servants? and 2) what are the factors affecting public service performance from the civil servant's perspective?

Semi-structured narrative interviews with fourteen civil servants from two Malaysia's public hospitals has been carried out to obtain the data. Pre-identification of the participants was done by the hospital management based on researcher given characteristics. Participants were identified based on their job types, tenure and levels that covered the most important categories of job in the hospital. A list of potential participants that have met the researcher criterions was prepared by the management office. Each participant was then contacted by the researcher and informed consent was obtained. Participants' tight work schedule has caused difficulty to conduct the interview at a suitable time and as such, only half of the potential participants in the list agreed to be interviewed. In total, 9 participants from Hospital NS1 and 15 participants from Hospital P were interviewed. However, only interview data from six participants from Hospital NS1 and eight participants from Hospital P were analysed for the research due to saturation and sufficient information gathered. The demographic features of the participants are shown in Table 2 and Table 3 of Chapter 3.

Specifically, two doctors, one science officer, one Pharmacist, four medical assistants, three nurses, two attendants and one driver were interviewed. There are seven males and seven females' participants and their ages range from 25 to 58 years. Nine of them are married, four are single and one is a widowed. They have been working between 3 to 32 years as the healthcare employees. Demographic features of the participants are in Table 2 and Table 3 of Chapter 3.

The narrative interviews lasted from thirty-five to eighty minutes. The conversations started with a general question that led interviewees to talk about their early work experiences which they felt had a connection with the job that they have chosen. In the subsequent exchanges, the interviewees were led to talk about their work experiences, work styles, habits, motivations and challenges faced at work. The conversations were then focus on the research questions of public complaints and current performance status at the MPS. The interview protocol in Appendix 1 was used as a guideline for the researcher during the interview sessions.

4.2 Data Analysis Approach

All interviews were audio-taped, transcribed, and analysed with the aid of a qualitative research software, the Atlas.ti. Extraction of descriptive level

categories and codes was done at the initial phase of the analysis. Themes were not arranged and were not mutually exclusives at this stage. In the next phase, the codes were explored and rearranged to find the connection or relationship between them to form meaningful themes of the integrated codes.

From the initial 64 codes done during the coding phase, the researcher had narrowed down the codes into two big themes; internal factor and external factor. The internal factor refers to factors that are related to the person him/herself, whereas the external factors are factors related to the organisation, superiors, work and colleague. This chapter will first explain the civil servant's views on working in MPS and job performance in MPS, which will then be followed by the factors that have been grouped into themes. The factors are explained according to the most important factors to the least from the interviews' findings. Table 12 is the list of the factors, according to its two bigger themes and will be explained in next section based on most mentioned in the interview sessions.

Table 12: The External and Internal Factors That Affect Job Performance

External Factors	Internal Factors
i. Work Overload	i. Civil Servants' Attitude
ii. Leadership and Monitoring	ii. Religious and Spiritual Belief
iii. Training, Knowledge and Experiences	iii. Personal Issues and Social Support

4.3 Results

4.3.1 Level of Job Performance in Malaysian Public Service and the Main Issues That Causes the Complaints in the Public Service

According to the participants, job performance in MPS according to the participants is at moderate and acceptable level. Most participants rated themselves and their co-workers as very good at work. They believed that the reporting incidents of poor job performance by the Malaysian Public Complaints Bureau and the newspapers were exaggerated based on isolated incidents.

According to matron nurses from Hospital P and Hospital NS1, the public reacted negatively even though on a small miscommunication matter. In reality, long working hours with lots of work to finish during their shift, sometimes have

made them communicate with short and unpleasant ways with the patients. They admitted that mistakes in giving information did occur at times, however, the mistakes were not as serious as reported.

"Hmm, with the public, they only saw the negative side…how do we change their opinion to be positive? After all, we are human, sometimes there are miscommunications, and then comes this complaint. Sometimes even a slight mistake while explaining (things)…" – Participant ID 1:P

"The truth is, there were not many negligence cases occurred, however when an issue happens it is exaggerated. Hmm because most of the problems are related to communication." – Participant ID 1:NS1

The participant admitted that mistakes in giving information did occur at times. Hospital wards are busy workplace and some of the nurses need to do double shifts to replace their colleagues. Thus, when they were tired, mistake might happen. However, it was not and ongoing problems because working in the hospitals required complete focus and negligence avoidance was their main agenda.

"Nevertheless, negligence did happen, but not as serious as reported. However, if it is about the communication problems, indeed it happens especially because, we have busy wards. It is even difficult for us to walk through the ward, thus, when the nurses are tired because sometimes they have to do double duty (double shifts) due to short of staffing. Ha, thus, indeed there is, but not always,

because we need to make sure that we avoid any negligence."- Participant ID 1:NS1

The participants also agreed that the negative perceptions (complaints) occurred because the public did not fully understand the work system and situation in the hospital. For the patients, they would want to be treated as soon as possible when they come to the hospital especially to the trauma and emergency unit, however, the hospital staff need to follow the procedures. . Only an emergency case will be treated immediately. This is also applicable to some procedures at the hospital specialist clinics that will take time to get the result, such as blood test results, but the patients and the family could not wait and did not understand the work system. Participants ID 6:P and ID 8:P, the Medical Assistants from Trauma and Emergency Unit explained that:

> *"A lot (of complaints) here…most of the complaints here, were the delay of treatment, at the green zone [1](the first triage zone). This is because they do not understand that, non-emergency cases should go to the health clinic (not hospital)"* – Participant ID 6:P

> *"Over here, sometimes they do not understand, they want it to be quick, something like that. They want it to be fast. For us, because we have our…for*

[1] Green Zone is one of the three triage zones in the Trauma and Emergency Unit to differentiate the level of sickness and level of treatment needed by the patients. Green Zone is the Non-Critical Zone, Yellow Zone is the Semi Critical Zone and Red Zone is the Critical Zone.

example for fever, there is few days…we need to take the blood first, we need to follow the procedure. If we have a lot of staff, the workload here, the process that we have to go through is a lot. Then, for us, it is not only us that are (involved) with the case. We have two people, we need to draw blood, do the dressing, so, if there is only the two of us that need to do the job, the job will (be delayed), the people are not…it is too much."- Participant ID 8:P

Participant ID 5:NS1 has also pointed out that the perception on negligence cases occurred because the public did not fully understand their work and situation in the hospital. He narrated a case involving a baby who needed to be amputated:

"We have to be very careful. It means that when the public's opinion, when they themselves are involved in the health industry, they themselves go to the ward or work in the ward, perhaps they will understand.

"If you want to know about case (baby with gangrene hands), it is because, the most important things are, people need to understand that human body is not similar to one another. Let say, a mechanic repairing a car, if it is a Proton car, with other Proton cars, the engine might be standardized, however, it is not the same with human body, even, for a man, with the same age, the health condition is not the same. That is why for cases such as gangrene, especially with babies, even we want to look for the vein is very difficult, sometimes when we want to do blood transfusion we cannot be sure, if we want to administer water or drug, because those two need to be transfused through our veins, we can see veins, but if we mistakenly put it through artery, then it will cause gangrene. Especially for kids because of the skin is thin...we cannot differentiate between vein and artery. Thus, to simply say it is the negligence of the doctor, I

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did not agree, because we treat human body and human body is different, just like the baby case, it is not similar with adult body, to draw blood from babies even is more difficult, especially when the babies are crying." – Participant ID 5:NS1

One of the public complaints was that the delay of treatment at the hospital was because of the break taken by hospital staff was not according to the regulations. All of the participants disagreed with the perceptions because working in the hospital required full attention, thus, skipping works were not the problems among the hospitals' employees. The break time for normal office hours is between 1.00 pm to 2.00 pm. However, for those working in wards, emergency unit or operations theatre, the break time is uncertain. When the employees took their break during working hours, it might be because that was the only free time that they have after a long working hour in the wards or a long procedure in the operation theatre. Working in hospitals is not equivalent to working in the office, their rest time is unpredictable and they even alternately going for break for late lunch or dinner and helping colleagues to buy their food. Some of them did not have the time to eat until all the medical procedures were done. Participant ID 8:P explained that staff in the emergency unit took their break only when they were not busy.

"There are ...it is like this...maybe if we look at the job scope, the individual job scope, for example in the emergency department we do not know when he or she will be busy." (*So, they will take the break according to their free time)"* – Participant ID 8:P

Participants ID 4:P agreed that the public did not understand the work of health workers. Most of the health workers such as nurses, medical assistant or doctors will not simply go missing from works or breaking rules.

"People who are in our shoes, the nurses. People will have many complaints, but when they understand, are in our shoes, I think this will not happen (the complaints)..." – Participant ID 4:P

"If we want to mention about going out during work shift, I think the nurses do not have time. Because we work with patients, thus all of our time is with them. Even for food, we will take turn. We have friend to cover for us...we go for our break (for food), when we are done, we go back. Therefore, if we work in the ward...if you want to see us eating outside...(body language that saying it is not possible)." – Participant ID 4:P

Two of them explained how they did their work just for the patients and yet the public did not appreciate their hard works:

"A disaster, like a disaster, sometimes the red zone [2](the third triage) become like that, such as when accidents with lots of cases and we do not have enough staff to help. Furthermore, like when the patient is warded…ah…that is the most stressful for me. For example, if they have locked (full bed), patients cannot go to the ward. All the patients are ready, but they have to wait to go to the ward. We do not have enough bed and wheelchair here. Here, that is one of the problems, we do not have enough wheelchair…lost." - Participant ID 4:NS1.

"Since I have started working in NS1 Hospital, but, yes NS1 is a big hospital with lots of department, so far my experience is in the surgical department. I also have the experience as well working in the emergency unit, attachment, yes. During my master's study, I worked at the anaesthetic department, at the operation theatre, at the pathology department. Our work, our priority is the patient, from all the departments. What I mean is, from the head of the department, the specialists, doctors, nurses, medical assistants, even to the lowest support group, the attendant, who we call PPK, the priority, yes, the public cannot see this, our priority is the patient." - Participant ID 5:NS1

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[2] Red Zone is one of the three triage zones in the Trauma and Emergency Unit to differentiate the level of sickness and level of treatment needed by the patients. Red Zone is the Critical Zone, Green Zone is the Non-Critical Zone and Yellow Zone is the Semi Critical Zone.

The negative perception coupled with their workload and long working hours have taken a toll on the hospital employees. At some points they felt frustrated because they believed that they have worked hard for the patients and tried to help as much as possible and yet they are not being appreciated.

Even though, the participants thought that poor job performance in the hospital is not a big problem, they admitted that there were few attitude problems that need to be tackled. It is undeniable that there is a small group of civil servants who did not take their responsibility seriously and the problems could become worse if is not attended immediately. According to the participants, most staff who have this attitude problems came from the support group such as the attendant and medical assistant. Evidently, the female attendants themselves acknowledged that the problems did occur among the male attendants. They usually break the rules to go for early tea break or lunch.

"Maybe they do not have the sense of urgency, do not think that their job is important. For me, they do not have the sense of responsibility. It is the attitude, more on the attitude." – Participant ID 3:P

"It is the PPK (attendant) those in the support group…PAR (office boy), it is not that we want to point finger, but those with low academic level, low mentality level. …but sometimes… the men, medical assistant or PPK (attendant), they are smart, if we go for thumb print, they went as well, but after

that they will go for drinks then come back to thumb print again because they have to use their own thumb print." – Participant ID 2:NS1

The problems however, rarely occurred among the professional group of civil servants such as the doctors and those nurses working at the wards. This is because they have very tight working schedules and it was quite impossible for them to simply leave the patients.

The negative perception has given a bad reputation to the hospital employees as a whole. According to the participants, the public thought that the delayed in their treatments happened because the hospital employees did not work very hard and always waste their time. However, in reality the hospital employees worked very hard to treat as many patients as possible at one time even with limited number of staff.

4.3.2 Factors Affecting Public Service Job Performance from the Civil Servants Perspective

Initial data analysis has found that work overload, attitude, leadership and monitoring, religious belief and spirituality, knowledge and experience as well as commitment for family are among the main factor that could affect job performance.

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4.3.2.1 Work Overload

Almost all participants in this research agreed that workload is the main factor that can contribute to job performance of civil servants in Malaysian Public Hospital. The work overload issues were mainly raised by the nurses, medical assistants, attendants and doctors in this research. As nurses work in the wards, they have to attend to full patients ward and even in some situations extra beds were added to the wards. The two busiest wards according to the participants are the medical and the orthopaedic wards. The medical ward would have around 50 patients at a time and the orthopaedic ward would have patients who stay in ward for a longer time due to healing process (of fractured bones) that could take a long time. About seven nurses work at the ward at one shift. As a nurse, they have to work around the clock, every four hours they would take all the necessaries readings such as blood pressure readings, administer the drugs and for some serious cases they have to attend to the patients at every 15 minutes.

At the Critical Care Unit (CCU) there would be four nurses to attend to about 30 to 40 patients and each of the patients in CCU needs special attention. Apart from heavy workload due to number of patients, the nurses in CCU also have to entertain the family of the patients that normally came with all sort of questions for the medical staff.

An attendant narrated her experience seeing how doctors prepared the paperwork during discharged time.

"Aha…not only one person to be discharged. At any given time, ten patients are discharged. To do ten discharges report is not in two minutes. No. We have to… like a doctor, they have to write a discharge report properly and in details. If anything happens, there will be no argument, aaa…they need to have a black and white. Any mistake done, when there is an issue, that single mistake will be the main issue" - Participant ID 3:NS1.

For the attendants, their jobs at the ward were different from the nurses. They have to clean the beds, change the urine sacks, prepare the food for all patients, clean all the food trays afterward and in some cases would help the nurses to clean or move the patients around. Previously, they need to attend to about 30 patients at a time, but recent situation at the hospital NS1, they have to attend to about 40 to 50 patients at a time. One attendant commented on her appearance at the start of works as "beautiful" and compared her after work looks as similar to "hard labour worker". With all the sweats and wet attire due to their trays cleaning process. Working as an attendant was also physically drained, which they have to stand for hours to clean the food trays and move from kitchen to wards for several times a day.

For the doctors, in addition to high workload, they also have to work extra time because of shortage of doctors in the hospital. As explained by one participant,

when they did not have enough doctors on duty, a doctor needs to be on standby mode (on call) about three times in a week. In addition to the high workload, they also felt pressured by the superiors. One participant explained his daily duty and how they were expected to do their job.

"Patients, sometimes the number is the same, sometimes more, so when we have shortage of doctors, the workload will increase… Ok, one aspect is that we don't have enough doctors, and the workload is high, one other aspect, maybe it is the pressure from the top. The pressure is when we have a lot of patients but not enough doctors. We finished our job in the ward, we have done with our ward round, went downstairs for the clinic (daily specialist clinic), so the clinic, we need to go down because there are many outpatients coming for treatment, they have been waiting from 8 o'clock (morning). That is a pressure, but we cannot simply leave our task in the ward, that is why it pressured us. The specialists want us to go down to clinic immediately, but at the same time they expect us to finish our job in the ward, because in the evening, the specialists will do the ward round, to oversee whether we have done our job…that is also our responsibility…"- Participant ID 5:NS1.

A medical assistant also experienced pressure with heavy workload and he described how he did his supervision in the clinic. As a supervisor in the clinic, he had to look after the patients, did the job schedule for the staff and replaced the staff be it at the pharmacy, the lab or the clinic itself if the staff could not come to work he needs to. Another medical assistant explained how he works in the Trauma and Emergency unit that has many patients to attend to and he

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explained how his knowledge plays a role in handling the patients during busy hours. He needs to ensure that the patients were sent to the right treatment area which is the triage process. Without proper knowledge, he would not be able to do his job. He has also explained that long working hour for the medical assistants (7 hours per shift and continued with another shift due to shortage of staff), could affect their performance and it was difficult for him as the supervisors to rate the performance in that kind of situation (unfair situation).

Even as the ambulance drivers in the hospital, they have to face tiring and long working hours. Sometimes, the job ended at 5 o'clock in the morning and the drivers had to be on standby for the next day duty at 8 o'clock in the morning. The duty normally ended at 11 pm or mid night, but they had to be on standby for other emergency cases.

Despite all the comments from participants about heavy workload, a doctor thought that, her workload in current situation was manageable compared to her early years of working and she thought that if the staff have a high interest on their works they would not face any problem. She believed that teamwork is very important in helping each other. Problems occurred when the team members were self-centred and not willing to help each other. Everyone was hoping that other people did their job, which in the end the job was done by those who were already busy or was not done at all. Her views were actually parallel with the

research findings on the next factor that could affect job performance, which is the attitude of the civil servants themselves.

4.3.2.2 Civil Servants' Attitude

Attitude is one of the factors that could affect job performance at workplace. This study has found that lack of interest, being too complacent, easily bored, lack of sense of urgency, lack of responsibility and lack of sincerity as well as low in self-discipline are the problems related to attitude that could affect job performance.

According to most participants, civil servants need to have a high interest in the job that they do. As a matron nurse, one of the participants could see that there were young nurses who did not have a high interest in their job. For some, they become a nurse because of their parents or other people in the family. For a senior medical assistant, he had also seen that a high interest plays a role in motivating someone to do his/her job. If the person does not have the interest to work for example as medical assistant, definitely he/she could not do it. There was case of a junior medical assistant who came to work and managed to stay in the job for just a week. For an employee who were sent to Trauma and Emergency Unit, he/she could not immediately ask to be transferred to another department. It would not happen according to the individual's request, but,

according to the hospital needs. Thus, the person needs to have an interest to work at the hospital. Hospital is the main medical facility in a state that gives all sort of treatment, thus, all categories of cases would be sent to the hospital. Every day they would see new patients, different kind of people, so the hospital employees need to know how to handle and tolerate those patients' antics.

"Young…there is some of them who is definitely not interested…do not have the interest to be a nurse. Ha…she becomes a nurse because the parents ask to or the sister asks to." - Participant ID 1:NS1

"Interest. Interest is one of them...if a person is not interested, it cannot be. If you do not have the interest, definitely you cannot do it, because there is some who came here and managed to stay in the job for just a week. Staff such as medical assistant, if he is sent here (Trauma and Emergency Unit), he cannot immediately ask to be transferred to another department. It cannot be. They need to have an interest to work here. Because, here is the main hospital centre, all sort of cases will come here. We need to identify and do the triage before going to the ward. Thus, every day we will see new people here, every category, we also have VIP, so we need to know how to tackle (handle) it. So, if you do not have the interest, definitely you cannot work here." – Participant ID 4:NS1

To boost their interest to work, they need to choose their job wisely. As one pharmacist explained, he decided on which area of work he wanted to do. He focused on the job that he loved. Some civil servants were bored and fed-up with

their job and the routine that they have to follow. In Malay it is called "jemu" or "cemuih" of doing the same things over and over again. Being too complacent at one's job or place is also a reason that could affect the job performance. Some do not have the sense of urgency and responsibility.

"It happens here as well, such as, among our staff, sometimes we are also facing difficulties in handling this problem. Even though we have told them for so many times, it is still happening, it is the habit of the civil servants, sometimes they feel too complacent, at this stage, at what they have now, like...so, they are a bit indifference (lackadaisical attitude)."- Participant ID 7:P

"Maybe they do not have a sense of urgency, do not think that the job is important. For me, they do not have a sense of responsibility; it is attitude, more on attitude. They gave their reason for coming late to work because they are unable to wake up, and they have given the same reasons over and over." - Participant ID 7:P

One way to overcome negative attitude among civil servants is by instilling the sincerity to do the job diligently. They have to be very responsible and have high discipline.

"Job performance, for me who work in the hospital, working with the public, like us in the hospital, we need to be really sincere, to treat other people, I need to have a sincere heart to treat other people. Maybe it is because I love this work, even though, you are only an attendant, but I love my work. For me, I

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can help the patients, of course, it is not big deed, but maybe small good deeds, we can do it, if we are sincere, emm...for me, it is like that. I was asked to quit my job, but I said I do not care how much is the salary, the most important thing I want my job, I love this job. Aaa...like us, for a bedridden patient, we want to see the patients to recover until they can walk...aa...it is just that. Everybody wants to feel that, the feeling when one of your patients is healed, what we feel, thanked God, relieved. One problem is settled. The family go home happy. That is what we always want. Just what I have said before, we are the PPK (attendant), U11, low level, but we have our own task, so do not..., people said do not look down on us, if everybody wants to be the boss, who is the supporting staff? So, it means, we need to collaborate with each other." – Participant ID. 2:NS1

One of the participants also suggested that the civil servants must plan their day ahead because working in the hospital is unpredictable and they do not know when it is going to be very busy (emergency situation).

"If we discipline ourselves, for example, for me, when I already have responsibilities, why not we settle our personal problems (before going to work). We take our breakfast early (at home), send our children to school, or have breakfast at that time or bring our own breakfast box (so that you are not going outside the hospital for breakfast and wasting more time). It is like this, maybe, it depends on the job scope, for example if in the emergency unit, we do not know when it is the busy time. Haa, yes, so, meaning that, during that time he/she is

busy and need to attend to the public, when he/she is free he/she can go for a break."-Participant ID 6:P

Being responsible for a medical assistant is different from being responsible for a driver, but, each individual who works at the hospital needs to fulfil their responsibilities accordingly. A participant who is a driver observed that being responsible is doing the job as the best as he can while driving to transport the medical staff or taking and sending the specimens to the lab. He described his work during the H1N1 outbreak in 2009 as very nerve racking (transporting dangerous specimens to lab), but he did it diligently and felt very proud that he could contribute to the nation. For these participants, with positives attitude, hospital employees would be able to do their job excellently.

"When you want to send something, you need to send it to the exact location and according to the time given. The thing was sealed, sometimes when we arrive they open it, they do it while wearing mask, if we have case like H1N1 last time, I have the experience sending the clinical specimens, I wore the protective cloth. We need to wear it. I had the experience in Mentakab (one location near to Temerloh), I needed to wear the protective cloth and the mask, took the clinical specimens in Bera and sent them to Kuantan (about 2 ½ hours from Temerloh). When I was driving with the protective cloth and when I was breathing with the mask, it was stuck at my nose (difficult), I don't know about other people who didn't have the opportunity, but I did experience it, I did that kind of job during that time (proudly explained the situation)"- Participant ID 5:P

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4.3.2.3 Leadership and Monitoring

A leader is an important figure at work. The leader can bring the organisation forward or backward if he wants to. From the interview, researcher has found that, another factor that could affect job performance is the leadership or supervision and how he/she handle the monitoring of the work.

A participant opined that the supervisor of her workplace as the person who can ensure the works are done according to the rules. The supervisor could monitor the whereabouts of each member of staff.

"We can see, when we did not do it, it can be seen, Ok, let us say for porter [3] job to the X-ray department, the supervisor will use the walkie-talkie and call for those who are free at that time. All five group members will have to answer, if we do not answer, the supervisor will call our names one by one. Actually, it is the role of the top management, their monitoring of the lower support staff (that could increase job performance)."- Participant ID 2:NS1

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[3] *One Unit that Seremban Hospital create for attendants who become transporter for patients from wards to other hospital facilities such as Specialist Clinic, X-Ray room and Dialysis room*

The participants also suggested that the leader should be fair, trusting and always give opportunities to the staff to improve their works. Several participants wanted an understanding leader that does not simply judge them and their colleagues. In addition to understand and trusting, a leader should also be friendly, committed to the works and caring.

"Ha, one more, a good boss, the boss that is fair...not the type that look at the first impression when the first time he/she came and see our mistake... and think that our works are not good, be an understanding boss, who motivates, encourages. Just like the time before this, before I went for my Master's I thought of myself as not suitable, maybe not up to the level. I thought that I did not deserve it. However, when the latest specialist came in to the hospital, he gave me many opportunities to do many procedures. He gave me the trust, during his free time he gave us classes, if we want to go for our Master's what do we need to know, what kind of books to read, so, all that also helps a lot." - Participant ID 5:NS1

"An understanding supervisor (laughing), meaning, he understands our work. Why is it the medic two (medical assistant) is not at the red zone? Means that he understands that we are out, we have many cases outside, that is, aaa, he will not keep asking, "Eh where is that medic, medic two?" right. Haa, so that he will not think that we are absent from work, when the truth is we are working outside (the hospital)." – Participant ID 6:NS1

"One of the main factors is the head of department must be good. Must be friendly. Then he or she has to be committed and care for the staff. The head of department or the supervisor, we need to know if our staffs are having

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problems. We need to ask them. If we manage to settle, we should settle it. Even if we could not settle it, we should try. About job performance, we need to tell the staff, if he or she says that he or she did not receive the excellent award, we have to ask what the problem is. You need to think first, why you did not receive it. Therefore, we have to tell them how to acquire it. If he or she wants to further their study, we need to support and approve their wishes. Cannot just tell them that the department do not have enough staff (to let you go for further study)." – Participant ID 1:NS1.

A matron nurse described her experiences as a leader for the nurses in Hospital NS1 as positive experiences that she could calmly handle any problems that came to her.

"With our leader we do not have any problem. Only few have problem with the staff. So far, we do not have...people said...(with) experiences, we can still handle. Because, we do not have cases that the staff gets angry towards us, so far, I did not encounter such experience. Ha...so, normally if we give advice, they can accept it. Nevertheless, we do have (cases), sometimes people from other unit that come here crying, want to transfer out from the their unit, not satisfied with Sister Nurse. Normally, we will calm them down, ask them what are the issues, and we will try to settle them. So far we do not have case that we cannot handle."- Participant ID 1:NS1.

While her counterpart in Hospital P related her experience as a matron nurse in monitoring the nurses as stressful, yet, she diligently did her duty and helped the nurses who were having problems by giving advices.

"If we are not careful enough, it will happen too. We have to monitor them, to see if they are following our nursing national audit where there are five elements in it. If they said they have followed all the procedures, we need to check if they are following all five elements. One of the elements is the dressing. Do they follow the dressing according to the dressing we learned from the nursing audit? Next would be the way they gave the medicines. Do they give the right medicine, is it administered correctly? How should they inject the medicine? There are five elements but I forgot the other elements.

"So that is where we monitor them. Sometimes, we would send them for auditing. They would have a practical session there to observe their performance. Problems do exist, depending on the reason. Sometimes their performance would decrease because they are sick, so they cannot focus. If that is the reason, we would understand their situation. The only thing we could do is advise them. If they still repeat the same mistake, even worse skipping work or causing disciplinary problems, only then we would write a report on them.

"Stress, yes, we do. Some people who are hot-headed or like to make weird decision, we would think maybe they have a problem. We would call them out and ask if they are having any problem. Some would share with us, some do not."- Participant ID 1:P.

The matrons have to monitor the nurses to see if they are following the nursing national audit because their jobs are very important at the hospital. If the staff said that they have followed all the procedures, the matrons need to check if they were following all the required elements. For example, one of the elements is the dressing. Thus, the matron needs to know whether, they follow the dressing according to the procedure they learned from the nursing audit. What would be the way they could give the medicines? Do they give the right medicine, is it administered correctly? How should they inject the medicine? These are the questions that the matrons asked when monitoring the nurses' job.

One participant suggested that, whichever treatments that the civil servants received from the superiors were the reflections of their own behaviours. For those who work diligently and responsibly, they will not have problem with their superiors. However, there was participant who believed that, sometimes, the way a leader treats the staff has also led to negative behaviours on the staff side. One of the participants saw embarrassed moments of his colleagues in which the superiors have the habit to humiliate them in front of other people. Often, he saw the specialists would scold the housemen and nurses in front of patients in the ward. Sometimes the subordinates would feel embarrassed. When they were embarrassed, they were reluctant to come to the ward or come to work. Thus, in some cases they would come and punched their card, and disappeared during

working hours. When it was time to go home, they would come and punched their card again. Thus, the leaders play important roles in encouraging the employees negative or positives attitudes at work.

"I want to say that we should do our work properly, only then people or our own boss would appreciate us. We have to think why our bosses treat us like that. Maybe it is because of our work" – Participant ID 7:P

"I said maybe, maybe there are other factors. We cannot say that is their boss, character of the boss, I am not sure. Maybe, the boss likes to scold, we do not know, sometimes maybe the boss has the habit to humiliate them in front of other people. Oftentimes I see the specialists would scold the housemen, nurse, in front of patients in my ward, maybe. Sometimes the subordinate will feel embarrassed, maybe when they are embarrassed, they are reluctant to come to the ward, come to work, they go out. They would come and punch their card, no…, yes, not present at work (disappear during work time). When it is time to go home, we would see them punch their card." Participant ID 7:P

There were leaders who use their departmental meetings as monitoring session to advise the staff on the discipline matters. The participant viewed the effort by the superior as outstanding. Every three months, his superior would ask in the meeting if the staff were having any problem, would tell the staff any

wrongdoing that he had found and gave advices as well as warnings that similar cases would not happen again.

"But, our, our, head of unit, our boss, he did tell us, because in this pharmacy unit we were told, our head of unit told us, if we are going out for lunch, he let us go and remind us to not come back late. Every three months we would have a meeting. Our boss would tell us if there is any issue, who have problems going out (breaking rules). He did monitor, we do monitor, as a boss we need to monitor. Nevertheless, it depends on their attitude, whether to accept or not. We told them, we did, but, if they would not accept it, what can we do?- Participant ID 7:P.

Most participants commended the effort done by leaders/superiors who closely monitored their employees at work, because they believed with good leaders and persistent efforts in monitoring the work system or the employees, the problems at work could be reduced and there would only be very few problematic employees in the hospital.

4.3.2.4 Religious and Spiritual Belief

In this study, researcher also investigated the relationship between religiosity and spirituality with job performance. During the interview, the researcher found that religiosity and spirituality play the role as personal enhancer of job

performance. Most participants highlighted that with the belief in religion and strong spirituality they were able to face challenges while working and did their job well.

In one case, the participant had a problem in fulfilling the ritual of "solat" (praying). She was having a difficulty in doing her prayer because she was not sure about her cleanliness. However, she acknowledged the importance of observing the prayer and tried to be better in the future by preparing the necessary attire during rest time. Another participant said that her religious belief and rituals have helped her in doing her job. Her perspective that her job is her responsibility has built her characters, attitude and made her did her job diligently. She believed that any bad or good things that she did would be reflected in her life. Did her job well, then God would provide enough good things in her life; good family, comfortable house and enough basic needs. She revealed how her colleagues who had problems at work and did not work as they should be, would also have miserable life. They accumulated debts, had problems at home and at work.

"Istighfar…istighfar[4]… Said a lot of it. My mom always said that, for me to say it a lot. Because people react differently. How…it is number one, we need to believe in God and number two we need to be diligent. In my experience, it is not that I said they are not good, but few of them do their job perfunctorily. We can see the difference between those who are working with… it is not that I want to be proud of myself, not that I said I am good…but I have seen the situation when I have to work, other people just relaxed, and I told myself, "No wonder you have a hard life, this is the way you work." Haa, something like that, there is a few, two or three people who are working for years but do not have anything (wealth: money, house) but have much debts. Attitude. Yes, it is the attitude, yes God, God always give us sustenance, the blessing that we need to search, if our works are not blessed, we will always do not have enough salary. During solat hour (prayer time), before going to work we pray, lunchtime, as today it is easy for me to pray, because it is office hour (working as a porter). (Last time in the ward) in the afternoon, then zohor prayer at home if I work morning shift. But, when I need to work in the evening, then it is a bit of a problem, my late evening solat is in rushing, at 6 pm, after I have done all my tasks."- Participant ID 3:NS1.

Another participant supported her view that by fulfilling his responsibility at work, he had also followed the teaching of his religion in giving "halal" sustenance for the family. Not doing their job well meant that the salary that they

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[4] Istighfar is an Arabic word meaning to seek forgiveness and repent to Allah

received was not a "halal" salary. The salary would be used to feed the family and they would feel very uncomfortable and guilty.

"We feel as if it is not halal[5]...for us...right? Therefore, it can help (spirituality and religion). If people have problem, and he or she has a belief, he or she will come back (to his or her religion/belief). The external problem is not actually a problem, but it is our internal self." - Participant ID 3:NS1.

In addition to the family support, another participant also saw spiritual belief as part of the support that makes him strong at work. His perspective is also supported by a Hindu participant who is following his belief rituals and another Muslim participant who think that his belief has helped him to keep doing his job attentively. One participant also thought that the understanding of his spiritual and religious belief made him a better person. According to him, a person always has to hold on to something to guide his/her life.

"Yes, spiritual is important, with the support of my family, my wife and everybody." –Participant ID 6:P

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[5] Halal means "permissible". In this case permissible by God and not only related to food. It could also relate to salary.

"I will also pray (Hindu). I pray before I come to work, I pray that today I will be okay at work. I was also being sent to motivation course before this. Therefore, it is necessary. Thus, we will feel calmer…calm." – Participant ID 4:NS1

"Yes, just like me, for me it is like, uh, you have this amount of salary, you do your job accordingly (to your salary amount), if we have good understanding of our religion, we will feel, we know how to do our work, if we have lots of works, uh, if we have works to be done, we settle them, we know it, our belief. (That is true) for me." –Participant ID 7:P

For one of the participants, it did not matter what other people said. The most important thing to him is the person values in front of the God. The participants also believed that if a person has good relationship with his or her God, then his or her relationship with another human would also be good.

"Our works as a nurse, we work with people…we must first take care of our relationship with Allah. If we ourselves do not have good relationship (with Allah), maybe we will be faltering in life, everything we do will be affected and not harmonised. There will be problems. If we have strong belief, wherever we go, we will be okay. God willing. Yes, the job is sort of responsibility that is trusted on us."- Participant ID 1:P

According to the participants, the religious belief could help them in becoming a good "whole" person in life, reduce stress at work or after work and prevent

them from negative activities such as substances abuse. They knew that some people would choose alcohol or drugs to reduce stress in which would affect their bodies negatively. However, individual who has high spiritual and religious beliefs would be able to calm themselves by resting and praying. The "stress free" attitudes would be able to help them to perform their duties at the hospital regardless of how busy or havoc their workplace is.

"I think I agree, because if we feel like, we want to ask anybody when we are in stressful condition, sometimes what do we have, we have Allah that will help us. One thing for those who do not have (God or spiritual belief), there is people like that. I do not know how big is their problem, maybe they will find other ways to relieve it, like taking substance (drugs) or alcohol to relieve stress which is in a way is not good because it is a temporary reliever and will affect their body negatively. In addition to that, just I said before, it is the religion, in term of the whole, the whole person not only the knowledge, we also need to have our foods for spirit and physical, all of that need to be strong, we learnt that in school." – Participant ID 2:P

"For me, if I feel stress, I will go to my prayer room (Hindu prayer room), I will stay and relax there, I will close my eyes, say about 10 minutes, 15 minutes, to calm myself." – Participant ID 5:P

4.3.2.5 Training, Knowledge and Experience

Participants in this research have agreed that training, knowledge and experience have helped them in increasing their job performance. The hospital has provided mentoring and Continuous Leaning Education (CME) programs for the hospital's employees. The CME sessions were valuable sharing sessions by their own experience colleagues to increase the skills and knowledge in treating the patients. For some of the participants, their experiences of doing clinical procedures in another district hospital has helped them to do more complicated tasks in Hospital NS1.

"Last time (in previous Hospital), there were specialists who trust us, there were lots (chances to do clinical procedures), since there are not many of us. Therefore, there are many procedures that we can do, but to think in term of the variety of cases, there are lots more here (NS1). Because from previous hospital, cases that they cannot solve there, such as CT scan, they will send it here. The experiences, I am not saying there are less experience in smaller hospital, it is not exactly." - Participant ID 5:NS1

These trainings, knowledge and experience have long assisted the health workers at work, as explained by a medical assistant who works at the Trauma and Emergency Unit in Hospital NS1 and a doctor who was once worked at the Psychiatric Department in the Hospital P. The medical assistant has been using

his knowledge and experience to understand his patients and did the right triage at the emergency unit and the doctor was able to understand her mental illness patients better than her young and less experience colleagues.

"If patients come at 2 or 3 in the morning, if they come and said that they have chest pain, it should be yellow zone. It, yellow zone. It is not logic if they come at three or four in the morning with chest pain, it is not logic (that they were pretending). There must be something serious, if not gastric it must be the heart."

"But, it is necessary… knowledge is very important, always there…Sometimes, even if we are inside (station in the emergency ward, not at the triage centre), we need to be updated. If a patient is classified into red zone, why is it in the red zone? We have to read again because of the triage."- Participant ID 6:NS1

"I do not know, so far in psychiatric, the patients are like… they are really good at reading body language, because not everyone can be a psychiatrist as we need to be patient while listening to the patients. We also have to become a good listener where we cannot make any bad reaction haa… because the patients are very sensitive in terms of body language. I do not know but God has created them like that… Therefore, I think that means… I am not bragging but the patients really like me… because I was the only one for a long time then others came. The old patients come for follow up, they will, even if they are not treated by me, they would visit my room and …, they will appreciate us like that…"- Participant ID 2:P

"We have credentialing and privileging. Therefore, when we are already six months in the department, we have to fill out the form at our department, that is the credentialing and privileging. Meaning that is the type of procedure that we can do, the HOD (head of the department) will verify, then we are qualified to do those procedures because we are given the privileges to do so. Like psychiatry, before we erm … aa… when we are qualified to discipline the patient…ha all that is credentialing to do the things (procedures). It depends on the procedures. Therefore, by six month we have to fill out the form for credentialing. So, other than that, we have to see other performance, meaning such as our SKT (annual targeted tasks) that have good quality… it is our work, right? The effectiveness, the communication …" – Participant ID 2:P

The importance of skills and knowledge at the hospital could be seen by their accredited program in the hospitals. The medical personnel at the hospital need to undergo certain accredited programs to be able to administer certain procedures to the patients.

On top of that, there was one participant who has seen the cases that he attended to as the training ground of his work. He would want to attend to more cases so that he would have more experiences and knowledge to treat his patients. For him more works meant more experiences and more knowledge for him, thus, high chances to perform well at work.

"Learning... accident cases... where bus flipped over or five cars collided, they were interesting for me, but, for some people it was not" - Participant ID 6:NS1.

Indeed, the passion to seek more knowledge is presence among the health workers as explained by one of the participants. They are willing to do it as a part timer or from a long-distance location as long as they could expand their knowledge to perform better a work.

4.3.2.6 Personal Issues and Social Support

Another factor that could affect job performance found in the interviews with the participants was the personal issues and how social support has helped them. The participants agreed that problems at home can affect job performance. Nevertheless, they are able to detach themselves from thinking about the problem at work with the help from their family members or their superiors at work. However, they have seen other people who were affected by their personal problem at home. In some cases, the personal issues have stressed and demotivated the staff, but the superior or colleague could not give any help because the staff themselves were not willing to share their problems.

"The first factor would be family, sometimes it the husband, for married (nurses) the husband. There are also conflicts at the workplace, between friends, between friends maybe there are misunderstandings… ha…there are. Jealousy

or envy... this is normal... what else...hmm...sometimes their backgrounds is the reason. Most of them. Individuals ... it is just their behaviour... themselves, right? Occasionally, if their children are sick it would also affect (their work) ... they want to focus on their child, and their work at the same time... sometimes, but, it is not that serious because most of the time they can handle it. We can motivate them... any problems, we need to overcome it... oversee their performance... then, we have to advice, any mistakes we need to advise...that is how we work ... monitor them." – Participant ID 1:P

One participant shared his experience in handling his staff as disturbing experiences. He thought that everybody has problems at home, but some did not know how to handle their problems and were reluctant to share them with people at work or at home. In the end, they would feel demotivated and worried because they were still thinking about the unsolved problems when they were at work. They would stress themselves out and at the end could affect their work and the people around them.

"Disturbing actually. Normally it is the attitude. Their own behaviour. If he has problems, like some staff, they have their own problems outside (work). When he cannot solve it, do not know with whom to share it thus that will make them demotivated because he has to think about those things (problems). Then bring all that to work, so, they will stress themselves out."- Participant ID 6.:P

Two participants disclosed their experiences when they had problems at home, but they managed to overcome them and able to perform well at work.

"So, at that time… I was thinking about my commitment towards my family and during that time, I still live in other district, so I need to commute between home and work. Family commitment, my children was still small, the oldest is still in school, being in the surgical department requires a lot of commitment and our working time is not fixed. It was how I feel about myself, but it is subjective. We think that we have done the best, but, we are human, we make mistakes. Then when we were on call duty, so tiring, sometimes when we start our on-call, before that maybe we have problems at home, maybe with our children, the night before on call duty maybe we do not have enough sleep. That is subjective, but if we want to say with all that we have given, all out."- Participant ID 5:NS1

"Sometimes when I want to go to work, my child would cry. The babysitter... sometimes she has problem, she does not have time or she was sick. So, err, there are many challenges as a nurse for me. We...err... we need to separate, our work with personal matter, because if we do not know how to separate it, it would be very hard for us as a nurse."- Participant ID 4:P

For these participants, they knew that they need to handle their personal problems themselves before coming to work to be able to focus on their duties at the hospital.

4.4 Discussion

The first objective of this study is to investigate the level of job performance in MPS and what are the main issues that caused the complaints in public service performance from the perspective of the civil servants.

Based on the findings, job Performance in MPS according to the participants is at the moderate and acceptable level. Most participants believe that they were doing well at their job and rated their co-workers as also very good at work. They have seen some problematic co-workers or employees, but for them it was small problem that is normal at every workplace. They believed that the reported incidents of poor job performance by the Malaysian Public Complaints Bureau and the newspapers were exaggerated based on isolated incidents.

These findings might be due to the nature of the works at hospital settings. Employees who are working in the hospital need to focus on their works, be fully alert and responsible employees because they are dealing with the human life. A small mistake might cause a loss of life. Thus, they do not see themselves or their colleagues wasting any time or playing around during the working hours.

The words used such as "not always", "slight mistakes", "exaggerated" and "miscommunication" could be interpreted as a perception of something that is not serious, thus, the researcher concluded that the job performance among the

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healthcare employeess in MPS is at moderate and acceptable level. The participants believe that they and their colleagues have work hard, even under a stressful work condition. The hospitals working environments are also controlled and monitored for any wrongdoing, mistake or negligence. The health workers are normally focus and alert on the tasks given. Staff who were having problems at work would be advised and appropriate action would be taken.

However, they did acknowledge that, few of the colleagues did have attitude problems, but, the management has taken care of the problem by changing work systems or monitoring methods. They also admitted that the overload given to them at work, might cause them to be very tired and might cause miscommunication with the patients. The miscommunication and unfriendly attitudes were among the reported cases of complaints in MPS job performance (Malaysian Public Complaints Bureau, 2013).

The second objective of the study is to investigate further from the civil servant's perspective, the factors affecting public service performance. From the findings, there are six factors that could affect job performance at MPS hospitals; 1) work overload, 2) civil servants' attitude, 3) leadership and monitoring, 4) religious and spiritual belief, 5) training, knowledge and experience and 6) personal issues. These factors were analysed by the researcher based on the participants'

views and then supported by previous research. Critical and contextual analysis of the findings were also discussed simultaneously.

i. Work Overload

The finding that work overload could affect performance supported the reports by Jensen, Patel, and Messersmith, (2013), Abd. Razak, Yeop Yunus, and Mohd Nasurdin, (2011) and Gilboa et al. (2008). The employees who are given tasks that exceed their ability might have problem in giving excellent performance. In these cases of nurses, medical assistants and doctors in the Hospital NS1 and Hospital P, the participants believed that the number of patients that they have attended to was too many and thus, they have to work within their limit to avoid any mistake or wrongdoings. The findings from the interview also supported finding by Gilboa et al., (2008) that work overload is not always a hindrance to job performance. This is because for staff with strong sense of responsibility and belief that their work is part of their religious and spiritual purpose will be able to cope with the workload and did their works according to their job specifications. According to Bakker and Demerouti, (2007) and Bakker et al., (2010) job resources and job demands will interact to achieve work goals or basic needs. From the interview, researcher has gathered that the religious and spiritual beliefs have instilled the sense of responsibility of the participants. Thus, when they are facing with work overload, they will overcome the challenge because

their main reason to work (as a Muslim) is to give "rezeki yang berkat" (blessed sustenance) to their family which are the basic needs for life such as foods and shelter.

ii. Civil Servants' Attitude

The findings from the interview on civil servants attitude that could affect job performance such as lack of interest, being too complacent, lack of sense of urgency and low in self-discipline are related to the reported public complaints and news in the mass media (Corporate Communication Unit, Ministry of Health Malaysia, 2014). The civil servants who are being too complacent at work might be due to the nature of the MPS itself that the civil servants (especially the support group) think that working in a public service is a secured and a lifelong employment and not easily be punished when they are behind their job targets (Johari & Yahya, 2016; Chen, 2007). Even though Lucky, Minai, & Abdul Rahman (2013) have reported that the secured feeling could increase motivation, work engagement and the retention rate, this current study found that feeling secured with one's job might result in the person to be complacent, thus doing their job perfunctorily or lackadaisically (Johari & Yahya, 2016). Participants in this interview have agreed that these attitude problems if not controlled, could become a big issue for the hospitals specifically and the MPS overall in the

future. However, currently, only a few of their colleagues are having these kinds of negative attitude.

The sense of responsibility and sincerity according to the participants in this study are the keys to job performance. They believed that the civil servants with positive attitude in the hospitals would normally have these work ethics. "Amanah" (responsible) and "ikhlas" (sincere) are also the two values that were promoted in the Malaysian government Initiatives and Campaign of good governance such as The Clean, Efficient and Trustworthy Campaign (*Kempen Bersih, Cekap dan Amanah*), Leadership Through Example Campaign (*Kempen Kepimpinan Melalui Teladan*), Implementation of Pure Values (*Penerapan Nilai-Nilai Murni*), Excellent Work Culture (*Budaya Kerja Cemerlang*) and National Integrity Plan (*Pelan Integriti Nasional).* The understanding of the participants about the importance of the two values in a way shows that the initiatives did have an impact on the civil servants' thinking. However, on other note, it might also show that there is still a lot to be done to ensure that all the civil servants are holding these positive values and, in the end, would be able to show only positive attitude at work.

iii. Leadership and Monitoring

The success of the organisations depends on the leadership of the organisations' heads. To achieve the organisations goals and objectives, the leaders need to

possess a strong will, persuasive power and influencing behaviours. Appropriate leadership styles will increase the employees' job satisfaction, motivation, commitment, engagement and performance (Mihalcea, 2014; Voon, Lo, Ngui, & Ayob, 2011). Apart from planning, coaching and managing, one other important skill of leadership is the monitoring. One participant from Hospital NS1 has seen the monitoring effort of her supervisor as one of the biggest aspects in smooth running of the porter station in Hospital NS1. This view is consistent with the findings of Taiwo (2010) that strict supervision will help in improving employees' productivity. Participants in the interview are also hoping for friendly, caring, fair and trusting leaders. They are hoping the leaders to understand their job, wellbeing and always ask their condition at the workplace. This aspect is actually laying on the communication skills and behaviour of the leaders. The leaders' persuasive communication, supportive and considerate attitude would be cherished by the employees especially for those who work in busy and hectic environment like the hospitals (Cullen & Gordon, 2014; Germain & Cummings, 2010). These employees are willing to work the extra mile if the leaders know how to appreciate them.

iv. Religious and Spiritual Belief

Religiosity in this interview is explained by the participants as observing the ritual of solat (praying) in Islam. They believed that their relationship with God

reflects their ability to focus on their works and help them becoming closer to the work and patients. In other words, the closer you are to your God, the better is your ability to cope with challenges at work. They also believed that anything that happened around them was the consequence of their relationship with God. Holding onto one's belief in God has helped them during challenges and if they could not overcome some problems exactly as they wished for, they still feel calm and understand that anything that happened around them have meaning and purpose. Some of the participants were very concern of wanting the blessing of their life from God by doing positives things at work, being responsible and doing their job diligently. One participant called it a "whole" person when you have the three important things in your life, the mental ability (knowledge), physical health (healthy body) and spiritual belief (believing in divinity).

The researcher in this current study has found that with religious and spiritual belief, the civil servants become more motivated at work and feel that they have the obligation to do their job properly and diligently. The findings in this research are similar with the spirituality studies reviewed by Karakas (2009). Spirituality according to the review benefits the employees by improving their lives and wellbeing and by instilling a sense of purpose and meaning at work.

v. Training, Knowledge and Experience

According to Zumrah (2012), appropriate training given to employees will help them update the job-related knowledge and skills to perform better at work. In this current study, the participants also acknowledged that their training and experience at work have helped them in increasing their knowledge and abilities to perform their duties. For the doctors, nurses or medical assistants who have work-related experiences in previous department or hospital, they have found that their experiences have assisted them in their current tasks.

Training given at their early stage of work, the mentoring programme and Continuous Medical Education (CME) that are provided for the health workers by the hospitals and have also increased their abilities and reduced mistakes at work. Having the knowledge and experiences have also increased the confident level for the participants in this study. According to the participants with the knowledge and experiences, they felt more capable and have higher understanding for patients' needs. Bakker and Demerouti (2012) and Markos and Sridevi (2010) also have reported similar findings that employees with knowledge and skills required, feel more confident in performing their work and able to work with minimal supervision. The increased knowledge and skills also contribute to personal resources such as self-efficacy, resilience, and optimism.

vi. Personal Issues and Social Support

Personal issues that were discussed during the interviews are related to the participants' children and family members as well as their ability to handle personal problems outside their work. For some of them, they have the experiences of having problems when the children were sick or the babysitter was not able to take care of their children during their working shifts. They need to handle the problem properly before going to work, to ensure that their work would not be affected. Often, they would share their problems with the superiors, thus, they would be advised accordingly and in most cases the superiors would find the replacement for their shift. These participants have learned how to separate personal matters and work responsibilities. While few others were not willing to share their problems and not sought for help, they would feel stressful and demotivate, thus in the end affected their job performance. These few people would normally made mistakes at work, would be less engaged at work and in some cases would be absent from work. With social support at work, these problems could be reduced as found in Othman and Nasurdin's (2013) study on Malaysian nurses that supervisor's support is positively related to work engagement. In addition to that, AbuAlRub (2004) study on nurses' job stress and job performance, also has found that perceived social support from co-workers could decrease the level of job stress and enhance the level of job performance of the nurses.

The factors that could affect job performance found in the first study would be incorporated and adapted in the questionnaires for the second study (Study 2) related to the roles of job demands-resources and subjective wellbeing on job performance in Malaysian Public Sector. Many of the factors were already existed in the questionnaires from previous researchers, thus the factors were only adapted to be JD-R questionnaires for present research. Questionnaires for sub-construct policy and leadership were created based on participants' views. They found that policy that does not support good working environment and leaders that do not monitor their workers are the hindrance for better job performance of the workers. They saw them as demands or something that hampered them from doing their job properly. Therefore, participants believe that a good monitoring by the leader will ensure better performance by the workers. Thus, item "The leaders in my organisation have closely monitored the employees' performance" was proposed to be under job demands item under the sub-construct "policy and leadership". Even though, policy and leadership items have not considered by the previous researchers as demands, present researcher agreed with the participants that bad policy and poor leader are part of job demands. This understanding is supported by the definition of job demands proposed by Bakker and Demerouti, (2012) and Bakker and Demerouti, (2007); job demands refer to any physical, psychological, social and continuous organisational aspects of a job that requires emotional and cognitive strength.

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When they felt bad that their leaders did not monitor their colleague for wrongdoing and nothing would be done to those who did not perform well, they themselves were then would be demotivated at work. Their energy would be pulled down by the negative feelings and affect their performance at work. Thus, it is important that current study investigate this proposition based on the results found in Study 1.

4.5 Chapter Summary and Conclusion

This section has discussed in details the findings from Study 1 on the perception of MPS job performance and public complaints on the civil servants' performance. The factors that could affect job performance were explained in details and related to the theoretical implication. The next chapter will discuss in details the findings of Study 2.

CHAPTER 5 - CONFIRMATORY FACTOR ANALYSIS (CFA) FOR STUDY 2 - JOB PERFORMANCE IN THE MALAYSIAN PUBLIC SERVICE: THE ROLES OF JOB DEMANDS-RESOURCES AND SUBJECTIVE WELLBEING

5.0 Chapter Overview

This chapter explains in detail the description of the quantitative study (Study 2) that was carried out after the qualitative study. The details explanation on the statistical techniques used and the analyses of data collected are presented in this chapter and also in chapter 6. In this chapter the results on each variables CFA analysis are presented and followed by a detailed step by step SEM AMOS analysis to test for model fit on the proposed theoretical model until a fit measurement model is found.

5.1 Introduction

This thesis contains two main studies on job performance in the Malaysian Public Service. Study 1 is the qualitative study that entailed the use of the interviews. The findings of Study 1 were discussed in Chapter 4. For Study 2, the researcher intends to study the roles of job demands-resources and subjective wellbeing on job performance of the MPS. The definition, foundation and

predictors of job performance in the MPS have been examined by various researchers in the field of management and organisational psychology. These previous studies have assisted many scholars in the field to enhance their knowledge of job performance.

In the present study, the researcher answers the third and fourth research questions with eleven hypotheses. Nine of the hypotheses were tested and analysed using the SEM AMOS and the other two were analysed using PROCESS Macro. Below are the research questions and hypotheses reported in this chapter:

i.   Third Research Question (RQ3)

Are the job demands, job resources and personal resources which included the new items found in study 1 significantly related to subjective wellbeing constructs and job performance?

Hypotheses proposed for RQ3.

H1a: Job resources are significantly related to subjective wellbeing constructs; work engagement, organisational commitment and negative personal wellbeing.

H1b: Personal resources are significantly related to subjective wellbeing constructs; work engagement, organisational commitment and negative personal wellbeing.

H1c: Job demands are significantly related to subjective wellbeing constructs; work engagement, organisational commitment and negative personal wellbeing.

H1d: Job demands moderate the relationship of job and personal resources with subjective wellbeing constructs; work engagement, organisational commitment and negative personal wellbeing.

H1e: Job resources and personal resources are positively related to job performance.

H1f: Job demands are negatively related to job performance

H1g: Subjective wellbeing constructs of work engagement and organisational commitment are positively related to job performance, whereas negative personal wellbeing is negatively related to job performance.

H1h: Subjective wellbeing constructs; work engagement, organisational commitment and negative personal wellbeing mediate the relationship between JD-R and Job Performance.

ii.   Fourth Research Question (RQ4)

Are religiosity and spirituality part of personal resources and do they affect job performance?

Hypotheses proposed for RQ4.

H2a: Religiosity and spirituality are positively related to existing personal resources constructs.

H2b: Religiosity is positively related to job performance.

H2c: Spirituality is positively related to job performance.

The ensuing six sub-sections present an overview of analysis, preliminary data analysis, demography of the participants and the analysis processes. Results and hypotheses testing of the study will be discussed in chapter 6.

5.2 Data Analysis

5.2.1 Analysis Overview

5.2.1.1 SEM Assumption

In using SEM as a tool, there are three assumptions that need to be monitored by the researcher. They are the sample size, number of indicators and item parcelling (Ho, 2006). Generally, SEM requires a large sample size which according to Kline as cited in Saidon (2012) and Hoe (2008), 200 is the minimum of sample size. It is important to have an adequate sample size because a small sample size is rather unstable to estimate covariance and correlations. It will be difficult to detect the significant path coefficients and will show sample error in covariance matrix. In some cases, irrelevant results and unsatisfactory goodness-of-fit indices will be shown in small sample sizes.

The second requirement for SEM is to have an adequate number of indicators/items. The preferred least number of items to represent a construct is three and the most number of items is between five and seven (Hair et al., 1998). Using a small number of good items is recommended rather than using a large number of poor items because sometimes, too many items for a construct is difficult to fit a model (Bentler, 1980; Pedhazur, 1997).

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Item parcelling is the third requirement for SEM and it is only to be used to improve the overall fit of the model. Item parcelling is done by combining several items to be used as observed variables in a study and recommended when doing exploratory factor analysis of items or estimating reliability.

5.2.1.2 Maximum Likelihood Estimation (ML)

Maximum likelihood is one of the methods for estimation of the parameters in a statistical model. ML is used to examine model fit for the reported values of the fit indices and estimates for the paths of all models tested. ML is widely used for estimation procedures due to its ability to handle more complicated models and its robustness to non-normality (Bollen, 1989; Brown, 2006). Other estimation methods such as weighted least square (WLS) are less accurate in estimates and require a larger sample size of 1000 or more (Olsson et al., 2000). Hence, ML was chosen as a method of estimation for the present research.

5.2.1.3 Goodness-of-Fit Indices

Goodness-of-fit indices are used to test for model fit. For an adequate evidence of model fit, Hair, Black, Babin, and Anderson (2010) recommend the use of 3 to 4 fit indices. There are three types of Goodness-of-fit indices namely; Absolute fit measures, Incremental fit measures and Parsimony fit measures. Absolute fit measure is the direct measure of how well the indicated model

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reproduces the observed data. Examples of Absolute fit measures are χ^2 statistic, Goodness-of-Fit Indices (GFI), Adjusted Goodness-of-Fit Indices (AGFI) and Root Mean Square Error of Approximation (RAMSEA). The Incremental fit measures how well a model fit to some alternative baseline model or the null model. Examples are the Normed Fit Index (NFI), Comparative Fit Index (CFI) and Tucker Lewis Index (TLI). The parsimony fit measures are uses to decide which model is the best among the competing models. Samples of parsimonious fit measures are Normed Chi-Square(χ2/df) (Awang, 2015; Saidon, 2012). Level of Acceptance for Fitness Indexes are shown in Table 13 below.

Table 13: Level of Acceptance of Fitness Indexes

Types of Goodness-of-Fit Indices	Name of Index	Level of Acceptance
Absolute Fit	Discrepancy Chi-Square(χ2)	P value > 0.05 (Not applicable for large sample size: n > 200)
	GFI	GFI > 0.90
	RAMSEA	RAMSEA < 0.08
Incremental Fit	AGFI	AGFI > 0.90
	NFI	NFI > 0.90
	CFI	CFI > 0.90
	TLI	CFI > 0.90
	IFI	NFI > 0.90
Parsimonious Fit Normed Chi-Square(χ2/df)	Chsq/df	Chi-Square/df < 5.0 (Reported if n > 200)

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5.2.1.4 Validity

The ability of an instrument to measure what it is supposed to measure for a latent construct is called validity. A measurement model needs to have three types of validity which are; Convergent validity, Construct validity and Discriminant Validity. Convergent validity is achieved when all items are statistically significant and can also be confirmed by looking at the Average Variance Extracted (AVE) loadings. All items need to have AVE loadings of 0.50 and above, those with loadings below 0.50 should not be used to measure a construct to ensure the convergent validity. Construct validity is related to the Goodness-of-Fit Indices. When certain level of fitness indexes is achieved the items are considered valid for measuring the intended latent construct. Discriminant validity is used to check for redundancy of items, meaning that a variable designed to measure one construct does not measure another separate construct. One way to detect the redundancy of items is by looking at the value of Modification Indices (MI). High MI values indicate redundancy of items. Researchers could delete items until the desired value is achieved. The correlation between exogenous construct should not exceed .85 in order to achieve the discriminant validity (Awang, 2015; Mior Ahamad Ariffin, 2010).

5.2.1.5 Reliability

Reliability is the extent to which a measurement model measures the intended latent construct. To assess whether a construct is internally reliable, the Cronbach's Alpha has to exceed .70 (using SPSS) for the construct to be considered reliable and internally consistent when the Composite Reliability value exceeds .60. The reliability could also be assessed using Average Variance Extracted (AVE). The AVE is the average percentage of variation explained by the measuring items for the latent construct. For the measurement model to be considered reliable, the AVE needs to exceed .50 (Awang, 2015).

5.2.2 Preliminary Data Analysis

Data editing and coding were done after the completion of data collection. The surveys were checked thoroughly to ensure an acceptable answer rate and no missing data, specifically for the participants' demographic features. Questionnaires that were not fully answered or with missing demographic profiles were omitted. The raw data were then pre-coded to numerical values and manually entered in IBM SPSS.

Data screening is the process of checking for any missing or out of range values. Through frequencies test, the researcher would be able to detect any missing values and revisit the survey questionnaire. In most cases, missing values were

either corrected or the researcher would use the item mean response for each. For this study, the missing values were due to mistakes in manually entering the data, thus, they were corrected by entering the data collected.

For tests of normality, skewness and kurtosis were used to check for data distribution. The data is considered normally distributed with skewness between -2 to +2 and kurtosis between -7 to 7. According to Tabachnik and Fidell (2001), for multivariate analysis, a large sample size will reduce the difficulties in assumption of normal distribution.

5.2.2.1 Univariate and Multivariate Outliers

Outliers in statistical analyses are extreme values that do not seem to fit with the majority of a data set. These extreme values can have a large effect on any conclusions that might be drawn from the data in question since they can skew correlation coefficients and lines of best fit in the wrong direction.

A univariate outlier is a data point that consists of an extreme value on one variable. Univariate outliers for the dependent variable will be take into consideration in this analysis by converting all of the scores for a variable to standard scores. If the sample size is small (80 or fewer cases), a case is an outlier if its standard score is ±2.5 or beyond. Since the sample size in this study is larger than 80 cases, a case is an outlier if its standard score is ±3.0 or beyond. Based

on Table 14, there are some raw data scores in Task and Adaptive constructs that made these cases outliers.

Table 14: Standard Score Variable

	N	Minimum	Maximum
Zscore: Task	**629**	**-4.10383**	**1.62859**
Zscore: Contextual	629	-2.70394	1.69704
Zscore: Adaptive	629	-3.53081	1.44595

Multivariate outliers are typically examined when running statistical analyses with two or more independent or dependent variables, and Mahalanobis distance test (D^2) test is an approach to detect multivariate outliers. Mahalanobis D^2 is a multidimensional version of a z-score. It measures the distance of a case from the centroid (multidimensional mean) of a distribution, given the covariance (multidimensional variance) of the distribution. A case is a multivariate outlier if the probability associated with its D^2 is or less. D^2 follows a chi-square distribution with degrees of freedom equal to the number of variables included

in the calculation. D^2 values that are significant at 5% indicate outliers while those significant at a 1% level indicate extreme outliers. By using a Mahalanobis distance with probability value < 0.001, 37 were identified as multivariate outliers.

5.2.2.2 Normality Analysis

The Kolmogorov-Smirnov test and the Shapiro-Wilk's W test determine whether the underlying distribution is normal. Both tests are sensitive to outliers and are influenced by sample size. Shapiro-Wilk test should be preferred as it is generally more sensitive towards smaller sample size while for larger samples (i.e. more than one hundred), the normality tests are overly conservative and the assumption of normality might be rejected too easily.

The normality assessment of the data can also made by assessing the measure of skewness and kurtosis of every item. An absolute value of skewness equal to 1.0 or lower indicates that the data is normally distributed. However, data analysis using Maximum Likelihood Estimator (ML) in SEM AMOS is robust to skewness greater than 1.0 in absolute value, particularly with a large sample size. When the assumption of normality is not achieved, the researcher could choose to delete the items with absolute value of skewness more than 1.0, remove the

outlier or continue the analysis (if using ML) and confirm the result using bootstrapping.

Based on the result of normality test in Table 15, it was found that several items in this data, had skewness more than 1.5 and Critical Region (CR) of more than 8.0. However, since the sample size for this study exceeds minimum sample size of 200, the researcher proceeded with the analysis and re-confirmed the results using bootstrapping.

5.2.2.3 Descriptive analysis of the variables

A descriptive statistics analysis was conducted in order to summarize the data in terms of the frequency distribution and measures of central tendency of the scale responses of the observed indicators, as shown in Table 15. If the distribution is nearly normal, then both skewness and kurtosis values should be close to zero.

Table 15: Descriptive Statistics and Normality test

Items Code	Maximum	Minimum	Mean	Standard deviation	Skewness	Kurtosis
A1	1	4	2.81	.70	.17	-.74
A2	1	4	2.53	.80	.40	-.51
A3	1	4	2.61	.78	.31	-.60
A4	1	4	3.21	.76	-.55	-.50
A5	1	4	3.06	.77	-.36	-.53
A6	1	4	2.25	.76	.66	.34
A7	1	4	2.07	.78	.73	.56
A8	1	4	1.95	.72	.83	1.23

Items Code	Maximum	Minimum	Mean	Standard deviation	Skewness	Kurtosis
A9	1	4	1.89	.75	.76	.72
A10	1	7	2.33	1.06	1.39	2.89
A11	1	7	2.73	1.33	1.20	1.18
A12	1	7	2.84	1.27	1.02	.94
A13	1	7	2.89	1.29	.91	.59
A14	1	7	2.82	1.25	1.04	.95
A15	1	5	1.29	.76	3.01	9.10
A16	1	4	1.24	.53	2.27	4.88
A17	1	5	1.40	.71	1.99	4.49
A18	1	4	1.35	.61	1.59	1.55
A19	1	5	1.54	.67	1.08	1.03
A20	1	5	2.18	1.03	.64	-.00[6]
A21	1	7	3.66	1.69	.43	-.86
A22	1	7	4.04	1.74	.11	-1.14
A23	1	7	3.79	1.64	.35	-.86
A24	1	5	2.79	1.19	.34	-.97
A25	1	7	3.17	1.38	.63	.02
A26	1	7	3.10	1.20	.70	.17
A27	1	7	2.90	1.30	.77	.51
A28	1	7	3.01	1.28	.69	.26
A29	1	7	3.27	1.41	.55	-.07
B1	1	4	2.73	.85	-.10	-.68
B2	1	4	2.82	.82	-.13	-.66
B3	1	4	2.43	.81	.16	-.46
B4	1	4	2.65	.77	-.04	-.42
B5	1	4	2.31	.81	.11	-.53
B6	1	4	2.62	.76	.05	-.43
B7	1	4	2.05	.80	.44	-.23
B8	1	4	2.65	.78	.14	-.57
B9	1	4	3.41	.63	-.71	.07
B10	1	4	2.81	.84	-.06	-.82
B11	1	4	3.14	.73	-.45	-.32
B12	1	4	2.78	.81	-.05	-.67
B13	1	4	1.99	.68	.63	1.06
B14	1	4	3.39	.63	-.55	-.42
B15	1	4	2.31	.88	.12	-.72

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[6] Actual figure is .003

Items Code	Maximum	Minimum	Mean	Standard deviation	Skewness	Kurtosis
B16	1	4	2.95	.71	-.17	-.38
B17	1	4	2.78	.75	-.07	-.45
B18	1	4	2.99	.77	-.17	-.83
B19	1	4	2.77	.76	-.08	-.47
B20	1	4	3.20	.73	-.45	-.61
B21	1	4	3.11	.80	-.39	-.81
B22	1	4	2.64	.94	-.19	-.85
B23	1	4	2.72	.95	-.29	-.83
B24	1	4	2.72	.93	-.21	-.84
B25	1	4	2.53	.90	-.05	-.76
B26	1	4	2.29	.83	.16	-.53
B27	1	4	2.29	.87	.26	-.59
B28	1	4	2.26	.88	.18	-.73
B29	1	4	3.02	.79	-.26	-.78
B30	1	4	2.76	.84	-.14	-.67
C1	1	7	5.18	1.16	-.73	.60
C2	1	7	4.12	1.63	.09	-1.02
C3	1	7	5.44	1.14	-1.14	1.77
C4	2	7	5.78	.89	-.97	1.73
C5	1	7	5.59	1.09	-1.26	2.36
C6	1	7	5.18	1.03	-.61	.43
C7	1	7	5.52	.89	-1.05	3.20
C8	1	7	4.71	1.48	-.35	-.63
C9	2	7	5.50	.94	-.61	.24
C10	1	7	5.46	.91	-.71	1.19
C11	1	7	4.30	1.30	-.22	-.24
C12	1	7	5.22	1.12	-.84	.84
C13	1	7	3.66	1.29	.30	-.04
C14	1	7	5.96	.95	-1.02	1.50
C15	1	7	5.90	1.07	-1.08	1.21
C16	1	5	3.81	1.05	-.88	.52
C17	1	5	3.55	.93	-.21	-.30
C18	1	5	4.38	.83	-1.51	2.50
C19	1	5	3.27	.98	-.15	-.19
C20	1	5	3.90	.86	-.42	-.35
C21	1	5	4.32	.87	-1.16	.78
C22	1	5	4.42	.76	-1.53	3.06
C23	1	5	3.53	.88	-.076	-.26
C24	1	5	3.91	.85	-.418	-.14
C25	1	5	3.19	1.18	-.26	-.79

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Items Code	Maximum	Minimum	Mean	Standard deviation	Skewness	Kurtosis
C26	1	5	3.53	.90	-.24	-.16
C27	1	5	4.22	1.15	-1.42	1.04
C28	1	5	3.91	.96	-.79	.43
C29	1	5	4.06	.81	-.45	-.41
C30	1	5	3.58	.98	-.45	-.05
C31	1	5	4.31	.95	-1.58	2.39
C32	1	5	3.61	.949	-.24	-.42
C33	1	5	3.66	.861	-.29	-.03
C34	1	5	3.59	.932	-.20	-.42
C35	1	5	4.48	.819	-1.75	3.08
C36	1	5	4.25	.822	-.94	.47
C37	1	5	4.14	.876	-1.08	1.38
C38	1	7	5.00	1.34	-.99	.91
C39	1	7	4.98	1.10	-.50	.54
C40	1	7	4.41	1.62	-.06	-.91
C41	1	7	5.33	1.05	-.86	1.19
C42	1	7	5.26	1.23	-1.08	1.41
C43	1	7	5.98	1.54	-1.61	1.72
C44	1	7	3.08	1.38	.86	.50
C45	1	7	4.18	1.78	-.21	-.84
C46	1	7	4.72	1.51	-.58	.08
C47	1	7	5.84	1.13	-1.55	3.19
C48	1	7	4.50	1.80	-.23	-1.10
C49	1	7	5.49	1.13	-.91	1.43
C50	1	7	5.07	1.47	-.72	.09
C51	1	7	5.06	1.25	-.54	.37
C52	1	7	5.54	1.22	-1.27	2.24
C53	1	7	5.50	1.08	-.98	1.75
C54	1	7	5.18	1.40	-.93	.79
C55	1	7	4.97	1.58	-.53	-.53
D1	1	7	6.02	1.09	-1.75	3.94
D2	1	7	6.00	1.08	-1.80	4.30
D3	1	7	5.78	1.34	-1.60	2.44
D4	1	7	6.03	1.15	-1.77	3.64
D5	1	7	5.93	1.26	-1.68	3.09
D6	1	7	6.20	1.15	-2.09	5.17
D7	1	7	5.83	1.33	-1.63	2.79
D8	1	7	3.70	2.07	.02	-1.46
D9	1	7	3.65	2.06	.07	-1.43
D10	1	7	5.13	1.36	-.92	.65

Items Code	Maximum	Minimum	Mean	Standard deviation	Skewness	Kurtosis
D11	1	7	4.30	1.55	-.05	-.74
D12	1	7	4.70	1.46	-.49	-.27
D13	1	7	4.07	1.54	-.41	-.52
D14	1	7	4.51	1.40	-.35	-.32
D15	1	7	4.60	1.57	-.39	-.51
D16	1	7	4.34	1.56	-.23	-.69
D17	1	7	5.17	1.48	-.74	-.18
D18	1	7	4.41	1.60	-.43	-.57
D19	1	7	4.89	1.42	-.60	-.20
D20	1	7	4.87	1.39	-.72	.13
D21	1	7	4.26	1.43	-.32	-.29
D22	0	4	1.69	.84	.20	-.06
D23	0	4	2.31	.92	-.07	-.16
D24	0	4	2.34	.93	-.11	-.33
D25	0	4	2.38	.93	-.21	-.23
D26	0	4	2.26	1.06	-.04	-.57
D27	0	4	2.24	1.01	-.07	-.53
D28	0	4	2.15	.90	-.01	-.23
D29	0	4	3.53	.83	-1.75	2.37
D30	0	4	2.43	.97	-.15	-.50
D31	0	4	2.84	.85	-.39	-.13
D32	0	4	2.67	.86	-.30	-.15
D33	0	4	2.22	1.08	-.03	-.69
D34	0	4	2.46	.92	-.26	-.14
D35	0	4	2.81	.95	-.50	-.07
D36	0	4	2.22	.98	-.06	-.49
D37	0	4	2.42	.92	-.29	-.01
D38	0	4	2.67	.99	-.29	-.67
D39	0	4	2.6	1.02	-.37	-.45
D40	0	4	2.63	.94	-.32	-.26
D41	0	4	2.67	.85	-.36	.48
D42	1	4	3.17	.89	-.69	-.61
D43	0	4	3.54	.76	-1.76	2.95
D44	0	4	2.64	.82	-.06	-.28
D45	0	4	2.36	1.12	-.20	-.68
E1	0	4	3.01	.87	-.61	-.20
E2	0	4	2.78	.90	-.50	-.19
E3	0	4	2.97	.82	-.67	.46
E4	0	4	2.84	.86	-.75	.53
E5	0	4	2.72	.89	-.48	-.17

Items Code	Maximum	Minimum	Mean	Standard deviation	Skewness	Kurtosis
E6	0	4	0.94	1.12	1.08	.22
E7	0	4	0.91	1.05	1.07	.38
E8	0	4	2.89	.61	-.76	2.37
E9	0	4	2.94	.59	-.72	2.65
E10	0	4	2.98	.65	-.58	1.40
E11	0	4	2.96	.66	-.61	1.36
E12	0	4	2.62	.99	-.40	-.59
E13	0	4	2.74	.91	-.64	.13
E14	0	4	2.39	1.04	-.22	-.83
E15	0	4	2.33	1.10	-.23	-.83
E16	0	4	3.31	.76	-.93	.54
E17	0	4	3.14	.79	-.79	.74
E18	0	4	3.14	.83	-.84	.43
E19	0	4	2.96	.90	-.68	.04
E20	0	4	3.04	.86	-.69	.03
E21	0	4	2.51	1.00	-.34	-.56
E22	0	4	2.39	1.09	-.33	-.65
E23	0	4	3.31	.76	-.93	.54
E24	1	7	5.70	2.05	-1.51	.76
E25	1	7	5.29	1.19	-.86	1.18
E26	1	7	5.13	1.12	-.43	.25
E27	1	7	5.14	1.10	-.45	.29
E28	1	7	5.30	1.03	-.39	-.07

5.2.3 Analysis and Results of Confirmatory Factor Analysis (CFA)

The data analysis process commenced with the creation of a model for each construct. The model measures the dependency of the observed variables on unobserved or latent variables. The first step in the analysis was Confirmatory Factor Analysis (CFA), a technique in statistical test to measure the factor loadings of each item and ascertain if it confirmed the expectation (Kline, as

cited in Saidon, 2012). In CFA, each of the constructs was analysed in the individual measurement model. The measurement models were reassigned and reanalysed until model fit was established. The constructs with fit model were then analysed for uni-dimensionality, reliability and validity. For each construct, several items or indicators were used, thus, it is important to test each item's suitability to be included in the same construct. For this purpose, each item or indicator should have a factor loading of 0.5 or greater, in order to achieve acceptable reliability and validity (Hair et al., 2006). In the case of a model with poor fit, items with low factor loadings were deleted or reassigned to other sub-constructs. The modification indexes and standardized residual covariances were also observed to find the best fit model for the construct. AMOS 22 was used to test the data.

The multidimension of the variables job demands, job resources, personal resources and job performance were collapsed into global constructs due to the theoretical and empirical findings from previous researchers. The global constructs were used to have a better model fit for the measurement and structural model and it can also simplify the interpretation of complex measurement structures.

As for the second order, according to Chen et al., (2005), second order model is applicable when there is a higher order factor that is hypothesized to account for

the relations compared to lower order factors, thus, second order CFA was used in this study. Second order CFA have several advantages compared to first order CFA. First, the second-order model can explain the covariance in a more parsimonious way with fewer parameters. Second, variance due to specific factors from measurement error was separated, thus leading to a theoretically error-free estimates of specific factor. Third, second-order model also can provide a simplified interpretation of complex measurement structures.

5.2.3.1 Job Demands

Job demands in this research consists of six sub-constructs which are: work overload, emotional load, general work environment, work privacy, work control and lastly work policy and leadership. Work overload was measured using five items, emotional load was measured using four items, general work environment was measured using five items, work privacy was measured using six items, work control was measured using four items and sub-construct policy and leadership was measured using five items. Since initial CFA was conducted for each sub-construct to select the best items, the measurement model for the final items yielded a good fit model. However, the AVE was below .50, thus, items with low factor loadings were deleted one by one until AVE and a good model fit were found. The chi-square was significant ($\chi2 = 623.51$ df =147, p=.00) and the relative chi-square was 4.24. Further, the GFI was .90, CFI=.91, IFI=.91 and

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RMSEA =.07. According to Hair et al., (2010), 3 to 4 fit indices are enough to conclude that a model fits and this model yields more than enough fit indices to conclude a model fit. Figure 5 is the measurement model for job demands.
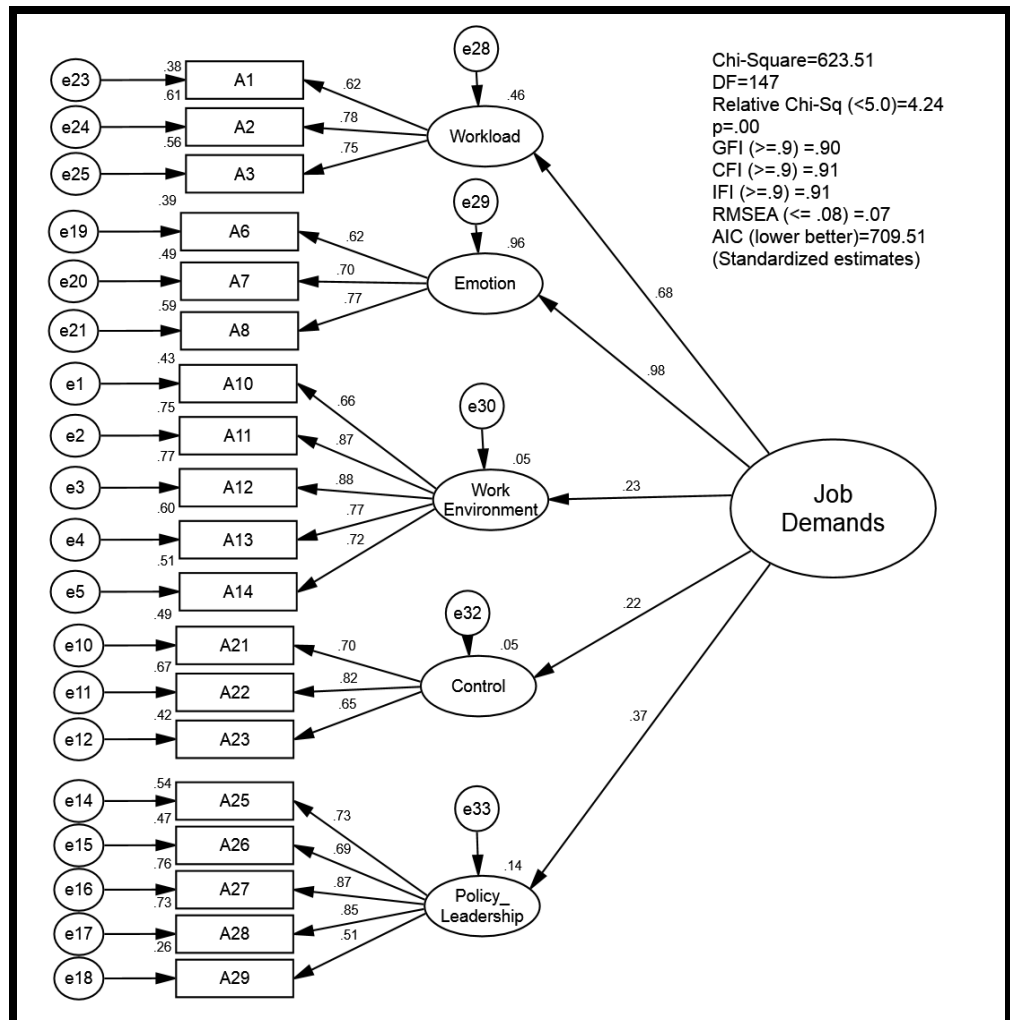
Figure 5: Measurement Model for Job Demand

However, the sub-construct privacy was deleted because of low factor loadings, and AVE for the items was less than .50. Table 16 shows the AVE, construct reliability (CR) and convergent validity (CV) of each sub-construct of job demand and Table 17 shows the items in each sub-construct.

Table 16: AVE and CR of Job Demand Sub-constructs

Sub-Constructs	AVE	CR	CV
Work overload	.52	.76	Valid
Emotional Demand	.50	.74	Valid
Work Environment	.62	.89	Valid
Work Control	.53	.77	Valid
Policy and Leadership	.55	.86	Valid

Table 17: Job Demands Items

Original Items	Item Label	Standardized Factor Loadings	Item Deleted
Work overload:			
Do you have too much work to do?	A1	.61	✓
Do you work under time pressure?	A2	.73	✓
Do you have to be attentive to too many things at the same time?	A3	.77	✓

Original Items	Item Label	Standardized Factor Loadings	Item Deleted
Do you have to give continuous attention to your work?	A4	.45	Deleted
Do you have to remember many things in your work?	A5	.57	Deleted
Emotional load:			
Are you confronted with things in your work that affect you personally?	A6	.63	✓
Do you have contact with difficult people in your work?	A7	.68	✓
Does your work put you in emotionally upsetting situations?	A8	.76	✓
Do you feel that other people do not work as hard as you do?	A9	.51	Deleted
General Work Environment:			
The lighting in your work area?	A10	.66	✓
The air quality in your work area?	A11	.87	✓
The general atmosphere of your work area?	A12	.88	✓
In general, the type of facilities provided in your work area?	A13	.77	✓
The cleanliness of the facilities in your work area?	A14	.72	✓
Work Privacy:			
Wear headphones when you are in the office?	A15	.28	Deleted

Original Items	Item Label	Standardized Factor Loadings	Item Deleted
Take a sudden leave from work just because you do not want to work that day?	A16	.49	Deleted
Position yourself with your back to your colleagues?	A17	.42	Deleted
Pretend to be extremely busy? (i.e. act as if you are being more active than you actually are)	A18	.42	Deleted
Leave the office earlier than you intend to?	A19	.41	Deleted
Keep personal thoughts to yourself and do not share them with colleagues or other people in the office?	A20	.33	Deleted
Work Control:			
I determine the organisation/appearance of my work area.	A21	.71	✓
I can personalize my workspace.	A22	.81	✓
I feel my work life is under my personal control.	A23	.64	✓
I have my own comfortable work space.	A24	.52	Deleted
Policy and Leadership:			
My organisation has a very established and good program for job performance improvement.	A25	.74	✓

Original Items	Item Label	Standardized Factor Loadings	Item Deleted
I found that the majority of employees in my organisation have a good job performance.	A26	.69	✓
My organisation has good leaders to ensure high job performance.	A27	.87	✓
The leaders in my organisation have closely monitored the employees' performance.	A28	.85	✓
Strict action will be taken against non-performing individuals.	A29	.71	✓

5.2.3.2 Job Resources

Job Resources in this research consists of four sub-constructs. The four sub-constructs are job autonomy, organisational support, job security as well as job growth and advancement. Job autonomy was measured using seven items, organisational support using fourteen items, job security using three items, and job growth and advancement was measured using six items. Since initial CFA was done for each sub-construct to select the best items, the measurement model for the final items yielded a good model fit for job resources. However, since the AVE for the constructs was below .50, items with low factor loadings were

deleted until model fit and AVE of .50 or more were achieved. The chi-square

was significant ($\chi 2$ = 149.57 df = 61, p= .00) and the relative chi-square was

2.45. Further, the GFI was .96, CFI=.97, IFI=.97 and RMSEA =.05. All fit

indices were met, according to Hair et al., (2010), 3 to 4 fit indices are enough

to conclude good model fit. Figure 6 is the final measurement model for job
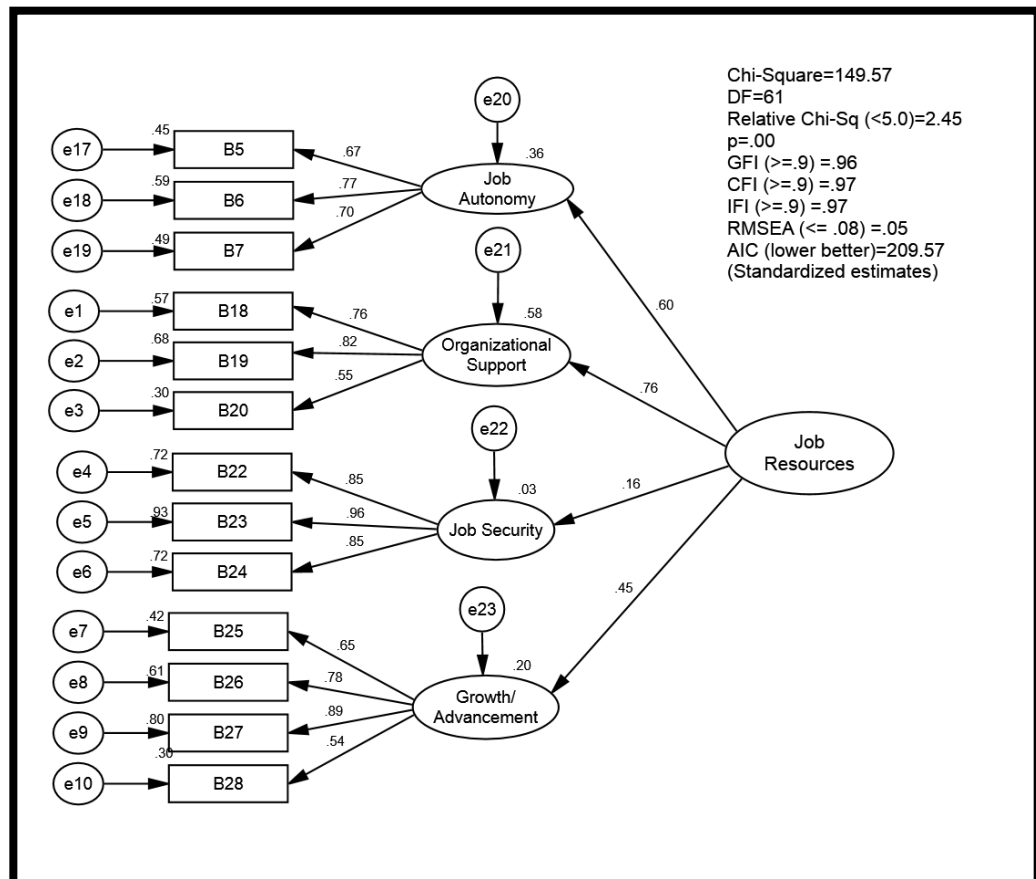
resources.

Figure 6: Measurement Model for Job Resources

Table 18 below shows that all AVE are more than .50 and the CR more than .70. Table 19 lists all the items under each sub-construct of job resources that were used in the analysis as well those which were deleted.

Table 18: AVE and CR for Job Resources Sub-Constructs

Sub-Constructs	AVE	CR	CV
Job Autonomy	.51	.76	Valid
Organisational Support	.52	.76	Valid
Job Security	.79	.92	Valid
Job Growth and Advancement	.53	.81	Valid

Table 19: Job Resources Items

Original Items	Item Label	Standardized Factor Loadings	Item Deleted
Autonomy:			
Does your job offer you opportunities for personal growth and development?	B1	.56	Deleted
Does your work give you the feeling that you can achieve something?	B2	.50	Deleted

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Original Items	Item Label	Standardized Factor Loadings	Item Deleted
Does your job offer you the possibility of independent thought and action?	B3	.50	Deleted
Do you have freedom in carrying out your work activities?	B4	.43	Deleted
Do you have influence in the planning of your work activities?	B5	.70	✓
Can you participate in decisions about the nature of your work?	B6	.61	✓
Do you have a direct influence on your organisation decisions?	B7	'61	✓
Organisational Support:			
Can you count on your colleagues when you come across difficulties in your work?	B8	.58	Deleted
Do you get on well with your colleagues?	B9	.56	Deleted
Can you count on your supervisor when you come across difficulties in your work?	B10	.59	Deleted
Do you get on well with your supervisor?	B11	.44	Deleted
In your work, do you feel appreciated by your supervisor?	B12	.18	Deleted
Do you feel that the supervisors/leaders in your organisation are too lenient?	B13	.50	Deleted
Do you know exactly for what you are responsible?	B14	.43	Deleted
Do you know exactly what your direct supervisor thinks of your performance?	B15	.40	Deleted

Original Items	Item Label	Standardized Factor Loadings	Item Deleted
Do you receive sufficient information on the purpose of your work?	B16	.51	Deleted
Do you receive sufficient information of the results of your work?	B17	.61	Deleted
Are you kept adequately up-to-date about important issues within your organisation?	B18	.78	✓
Is the decision-making process in your organisation clear to you?	B19	.66	✓
Is it clear to you whom you should address within the organisation for specific problems?	B20	.70	✓
Can you discuss work problems with your direct supervisor?	B21	.54	Deleted
Job Security:			
Do you need to be more secure that you will still be working in one year's time?	B22	.85	✓
Do you need to be more secure that you will keep your current job in the next year?	B23	.96	✓
Do you need to be more secure that next year you will keep the same function level as currently?	B24	.85	✓
Growth and Advancement:			
Do you think that your organisation pays good salaries?	B25	.66	✓
Can you live comfortably on your pay?	B26	.75	✓

Original Items	Item Label	Standardized Factor Loadings	Item Deleted
Do you think you are paid enough for the work you do?	B27	.81	✓
Does your job offer you the possibility to progress financially?	B28	.60	✓
Does your organisation give you opportunities to attend training courses?	B29	.41	Deleted
Does your job give you the opportunity to be promoted?	B30	.51	Deleted

5.2.3.3 Personal Resources

Personal Resources consists of three sub-constructs: existing personal resources (Self-Efficacy, Organisational Based Self-Esteem and Optimism), religiosity and spirituality. Existing personal resources were measured using fifteen items, both religiosity and spirituality were measured using twenty-two items each. Initial CFA was done for each sub-construct to select the best items. However, the measurement model of personal resources items returned poor fit indices results. Examination of the standardized residual covariances indicate that many items under the sub-constructs have unacceptable values. Thus, the decision was made to delete the items individually until model fit was achieved. The final measurement model for personal resources consisted of five items for existing

personal resources, four items for religiosity and eleven items for spirituality. The chi-square was significant ($\chi^2 = 427.99$ df $= 87$ p=.00) and the relative chi-square was 4.92. The GFI was .92, CFI=.92, IFI=.92 and RMSEA =.08. Figure 7 represents the measurement model for personal resources.
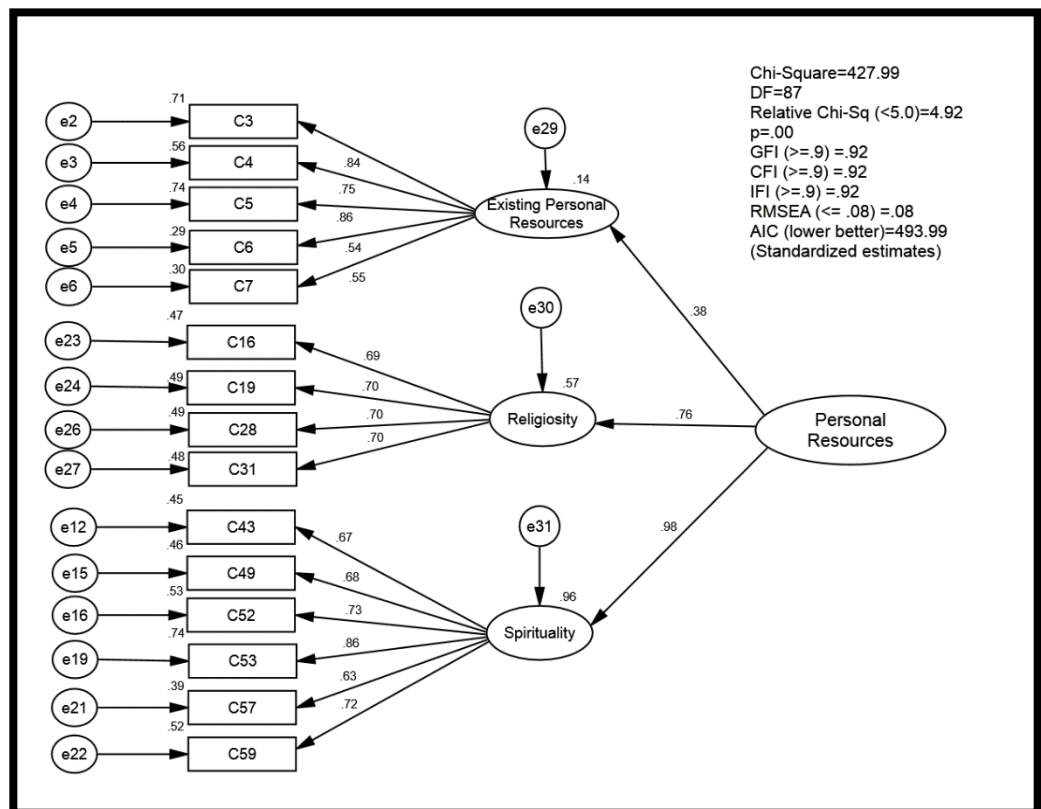
Figure 7: Measurement Model for Personal Resources

The AVE and CR for personal resources sub-constructs are shown in Table 20. Table 21 is all items under personal resources construct.

Table 20: AVE and CR for Personal Resources Sub-Constructs

Sub-Constructs	AVE	CR	CV
Existing Personal Resources	.52	.84	Valid
Religiosity	.50	.79	Valid
Spirituality	.52	.86	Valid

Table 21 : Personal Resources Items

Original Items	Item Label	Standardized Factor Loadings	Item Deleted
Existing Personal Resources:			
I am confident I get the success I deserve in life.	C1	.52	Deleted
Sometimes when I fail I feel worthless	C2	.18	Deleted
Overall, I am satisfied with myself.	C3	.69	✓
I take a positive attitude toward myself.	C4	.78	✓
On the whole I am satisfied with myself.	C5	.71	✓
When I try, I generally succeed.	C6	.69	✓
I complete tasks successfully.	C7	.73	✓
I am filled with doubts about my competence.	C8	.31	Deleted
I believe I can succeed at most any endeavour to which I set my mind.	C9	.56	Deleted
I will be able to successfully overcome many challenges.	C10	.59	Deleted
I don't expect things to go wrong for me.	C11	.25	Deleted
I am always optimistic about my future.	C12	.47	Deleted

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Original Items	Item Label	Standardized Factor Loadings	Item Deleted
I hardly ever expect things to go my way	C13	.08	Deleted
I count on good things happening to me.	C14	.47	Deleted
I expect more good things to happen to me than bad.	C15	.49	Deleted

Religiosity:

I try to understand the teachings of my religion in the Holy book/Qur'an.	C16	.66	✓
I find ways to recycle anything that can still be of use.	C17	.49	Deleted
I try to avoid myself from giving donations.	C18	.35	Deleted
I frequently share my religious values with my friends.	C19	.68	✓
I immediately apologize if I have done wrong to someone.	C20	.37	Deleted
I will ridicule someone in return when they ridicule me.	C21	.24	Deleted
I make effort to obey rules/advice of my religion (God) in my daily life.	C22	.33	Deleted
I am the first to greet when meeting another person.	C23	.44	Deleted
I criticize my friends when they do wrong.	C24	.14	Deleted
I participate in recreational activities without neglecting religious norms.	C25	.33	Deleted

Original Items	Item Label	Standardized Factor Loadings	Item Deleted
I always obtain the facts before passing judgment.	C26	.38	Deleted
I do not feel worried when I send negative e-mails/SMS messages/information to people.	C27	.05	Deleted
I like to take advantages of opportunities to understand my religion with my family.	C28	.89	✓
I like to help the needy.	C29	.47	Deleted
I openly display my anger if somebody meddles with my belongings.	C30	.52	Deleted
I practice solat/religious prayers as taught in my religion.	C31	.83	✓
I forgive others who wrong me before they ask for my forgiveness.	C32	.52	Deleted
I gossip about others.	C33	.56	Deleted
I like to help the poor without anyone knowing.	C34	.82	✓
I speak rudely to my parents when I am angry at them.	C35	.32	Deleted
I enjoy working in a team.	C36	.43	Deleted
Based on the scale provided, please rate your level of religious practice. (with "5" being High and "1" as Not practicing).	C37	.56	Deleted
Spirituality:			
I set aside time for meditation and/or self-reflection.	C38	.58	Deleted

Original Items	Item Label	Standardized Factor Loadings	Item Deleted
I don't take time to appreciate nature.	C39	.02	Deleted
I can find meaning in times of hardship.	C40	.55	Deleted
I find serenity by accepting things as they are.	C41	.54	Deleted
In times of despair, I can find little reason to hope.	C42	.33	Deleted
In difficult times, I am still grateful.	C43	.66	✓
A person can be fulfilled without pursuing an active spiritual life.	C44	.10	Deleted
I have a relationship with someone I can turn to for spiritual guidance.	C45	.57	Deleted
Prayers do not really change what happens.	C46	.34	Deleted
I have a personal relationship with a power greater than myself.	C47	.27	Deleted
I have had a spiritual experience that greatly changed my life.	C48	.53	Deleted
I have joy in my life because of my spirituality.	C49	.71	✓
My relationship with a higher power helps me love others more completely.	C50	.53	Deleted
Spiritual writings enrich my life.	C51	.50	Deleted
I have experienced healing after prayer.	C52	.72	✓
My spiritual understanding continues to grow.	C53	.83	✓
I have been through a time of suffering that led to spiritual growth.	C54	.52	Deleted

Original Items	Item Label	Standardized Factor Loadings	Item Deleted
I solve my problems without using spiritual resources.	C55	.32	Deleted
I examine my actions to see if they reflect my values.	C56	.43	Deleted
How spiritual a person does you consider yourself? (with "7" being the most spiritual).	C57	.42	✓
When I help other I expect nothing in return.	C58	.47	Deleted
I focus on what needs to be changed in me, not on what needs to be changed in others.	C59	.32	✓

5.2.3.4 Subjective Wellbeing

Subjective Wellbeing in this research consists of three sub-constructs: work engagement, organisational commitment and negative personal wellbeing. Work engagement was measured using nine items, whereas organisational commitment and negative personal wellbeing were measured using twelve and twenty-four items respectively. Initial CFA was done for each sub-construct to select the best items.

Work Engagement

CFA on work engagement yielded an unfit model with a significant chi-square ($\chi2 = 895.56$ df $=27$, p=.000) and a relative chi-square of 33.17. The GFI was .79, CFI=.78, IFI=.78 and RMSEA =.23. Examination of the standardized residual covariances indicated that two items under the construct had unacceptable values. Thus, the items were deleted individually and the two error terms were covaried until model fit was achieved. The final model of work engagement consists of seven items. The chi-square was significant ($\chi2 = 53.82$ df $=13$, p=.00) and the relative chi-square was 4.14 with a GFI of .97, CFI=.99, IFI=.99 and RMSEA =.07. Figure 8 depicts the measurement model for work engagement.
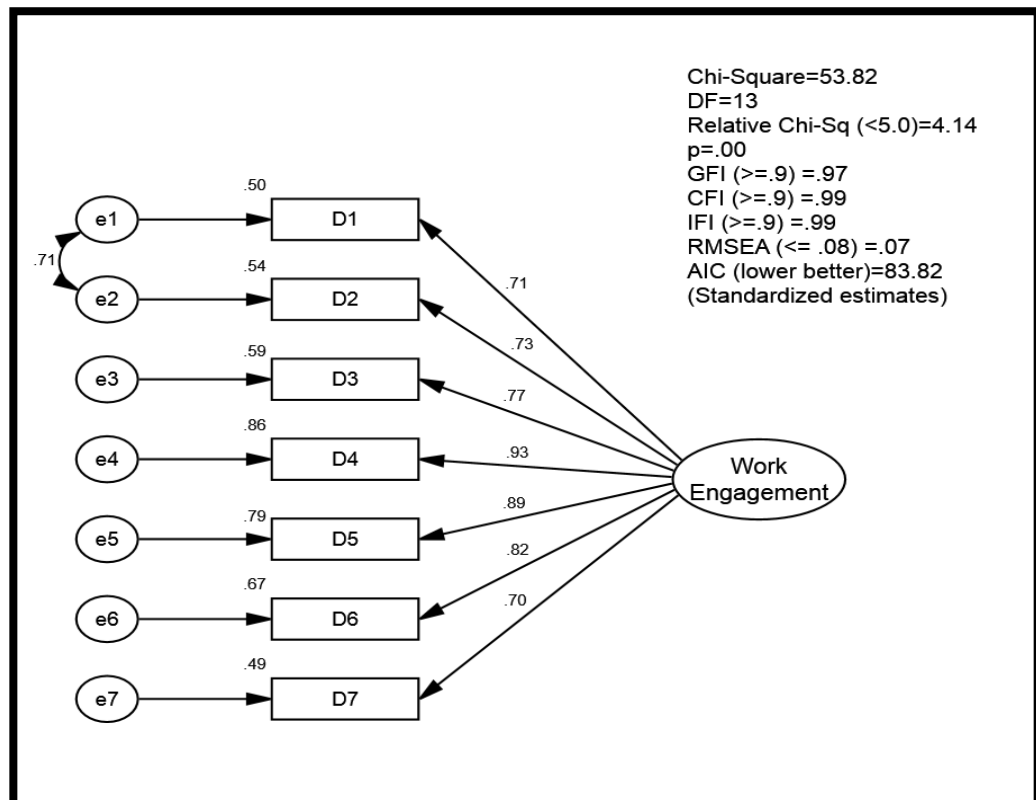
Figure 8: Measurement Model for Work Engagement

Organisational Commitment

CFA on organisational commitment yielded an unfit model with the chi-square significant at ($\chi 2 = 392.95$ df $=54$, p=.000) and the relative chi-square was 7.28. The GFI was .90, CFI=.78, IFI=.78 and RMSEA =.10. Examination of the standardized residual covariances indicated that five items under the construct had unacceptable values. Thus, the items were deleted individually until a model fit was achieved. The final model of organisational commitment consisted of

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four items. The chi-square was significant at (χ2 = 5.27, df =1, p=.00) and the

relative chi-square was 2.63 with the GFI of 1.00, CFI=.99, IFI=.99 and RMSEA

= .05. Figure 9 is the measurement model for organisational commitment.
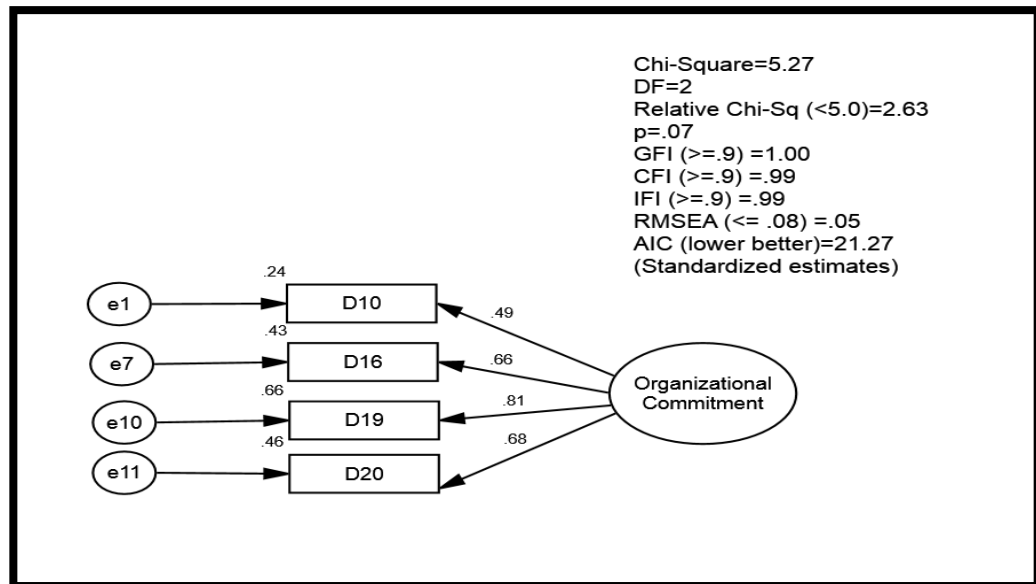
Figure 9: Measurement Model for Organisational Commitment

Negative Personal Wellbeing

CFA on negative personal wellbeing yielded an unfit model with a significant

chi-square of (χ2 = 1819.28 df =252, p=.000) and a relative chi-square of 7.22.

The GFI was .74, CFI=.77, IFI=.77 and RMSEA =.10. Examination of the

standardized residual covariances indicated that twelve items under the construct

had unacceptable values. Thus, the decision was made to delete the items

individually until a model fit was achieved. The final model of personal

wellbeing consists of ten items as shown in Figure 10. The chi-square was significant at ($\chi2$ = 169.80, df = 35, p=.00) and the relative chi-square was 4.85 with the GFI of .95, CFI=.95, IFI=.95 and RMSEA =.08.
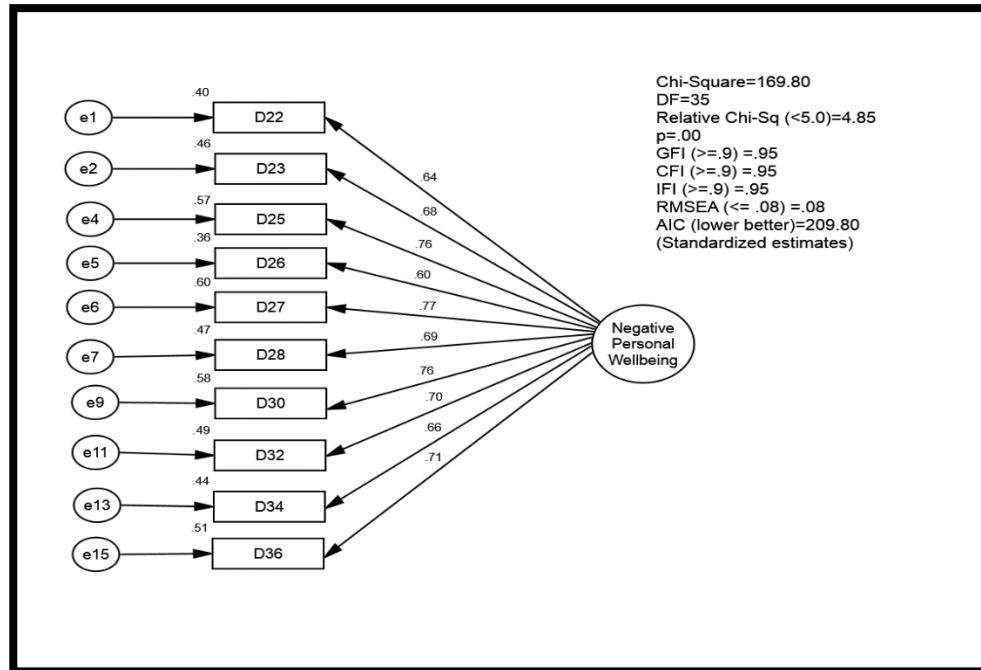
Figure 10: Measurement Model for Negative Personal Wellbeing

Table 22 shows all AVE and CR for work subjective wellbeing sub-constructs. All constructs have AVE of .50 and above. While CR for the constructs were all more than .70. Table 23 are all the items of subjective wellbeing sub-constructs.

Table 22: AVE and CR for Subjective Wellbeing Sub-Constructs

Sub-Constructs	AVE	CR	CV
Work Engagement	.64	.92	Valid
Organisational Commitment	.50	.77	Valid
Negative Personal Wellbeing	.50	.91	Valid

Table 23: Subjective Wellbeing Sub-Constructs Items

Original Items	Item Label	Standardized Factor Loadings	Item Deleted
Work Engagement:			
I am bursting with energy in my work.	D1	.61	✓
I feel strong and vigorous in my job.	D2	.64	✓
When I get up in the morning, I feel like going to work.	D3	.77	✓
I am enthusiastic about my job.	D4	.81	✓
My job inspires me.	D5	.70	✓
I am proud of the work that I do.	D6	.80	✓
I feel happy when I am engrossed in my work.	D7	.84	✓
I am immersed in my work.	D8	.14	Deleted
I get carried away by my work.	D9	.17	Deleted
Organisational Commitment:			
I would be very happy to spend the rest of my career in this organisation.	D10	.78	✓

Original Items	Item Label	Standardized Factor Loadings	Item Deleted
I do not feel any obligation to remain with my current employer.	D11	.30	Deleted
It would be very hard for me to leave the organisation right now, even if I wanted to.	D12	.06	Deleted
I really feel as if this organisation's problems are my own.	D13	.04	Deleted
Even if it were to my advantage, I do not feel it would be right to leave my organisation right now.	D14	.19	Deleted
Too much of my life would be disrupted if I decided I wanted to leave my organisation right now.	D15	.09	Deleted
I would feel guilty if I leave my organisation right now.	D16	.84	✓
I do not feel like "part of the family" at my organisation.	D17	.21	Deleted
One of the few negative consequences of leaving this organisation would be scarcity of available resources.	D18	.01	Deleted
I would not leave my organisation right now because I have a sense of obligation to the people in it.	D19	.82	✓
This organisation has a great deal of personal meaning for me.	D20	.76	✓
I feel that I have too few options to consider leaving this organisation.	D21	.16	Deleted

Original Items	Item Label	Standardized Factor Loadings	Item Deleted
Negative Personal Wellbeing:			
Been bothered by fatigue?	D22	.78	✓
Become easily bored with work schedule?	D23	.70	✓
Felt emotionally drained from your work?	D24	.23	Deleted
Become easily annoyed or irritated as a result of pressure at work?	D25	.83	✓
Felt used up at the end of the workday?	D26	.74	✓
Felt tired when you got up in the morning and had to face another day on the job?	D27	.64	✓
Got mixed up in your thinking when you have had to do things quickly?	D28	.66	✓
Broken out in a rash when you have been upset or excited?	D29	.49	Deleted
Felt burned out or stressed by your work?	D30	.89	✓
Done things in a rush or on impulse?	D31	.46	Deleted
Felt nervous and stressed?	D32	.71	✓
Felt drained from undertaking household activities like cooking and childcare?	D33	.43	Deleted
Found things getting on your nerves and wearing you out?	D34	.74	✓
Become afraid of unfamiliar places or people?	D35	.38	Deleted
Become easily tired?	D36	.65	✓
Been bothered by minor health problems such as headaches or stomach upset?	D37	.43	Deleted
Experienced numbness or tingling in your arms or legs?	D38	.50	Deleted
Had difficulty in falling or staying asleep?	D39	.32	Deleted

Original Items	Item Label	Standardized Factor Loadings	Item Deleted
Been tense or jittery?	D40	.46	Deleted
Found that you could not cope with all the things you had to do?	D41	.32	Deleted
Had any pains in the heart or chest?	D42	.26	Deleted
Been troubled by stammering?	D43	.16	Deleted
Found it hard to make up your mind?	D44	.17	Deleted
Worn yourself out worrying about your health?	D45	.44	Deleted

5.2.3.5 Job Performance

Job performance in this research consists of four sub-constructs. The four sub-constructs are task performance, contextual performance, adaptive performance and overall performance. Task performance and contextual performance were measured using eleven items and seven items respectively. Adaptive performance and overall performance were measured using five items each. Initial CFA was done for each sub-construct to select the best items. The measurement model yielded a good model fit result. However, the AVE were below .50. Thus, the items were deleted one after another until the AVE and CR achieved the desired more than .50 and .70 respectively. The chi-square was significant ($\chi2 = 325.18$, df =86, p=.00) and the relative chi-square was 3.78.

Further, the GFI was .93, CFI=.96, IFI=.96 and RMSEA =.07 as shown in Figure

11.
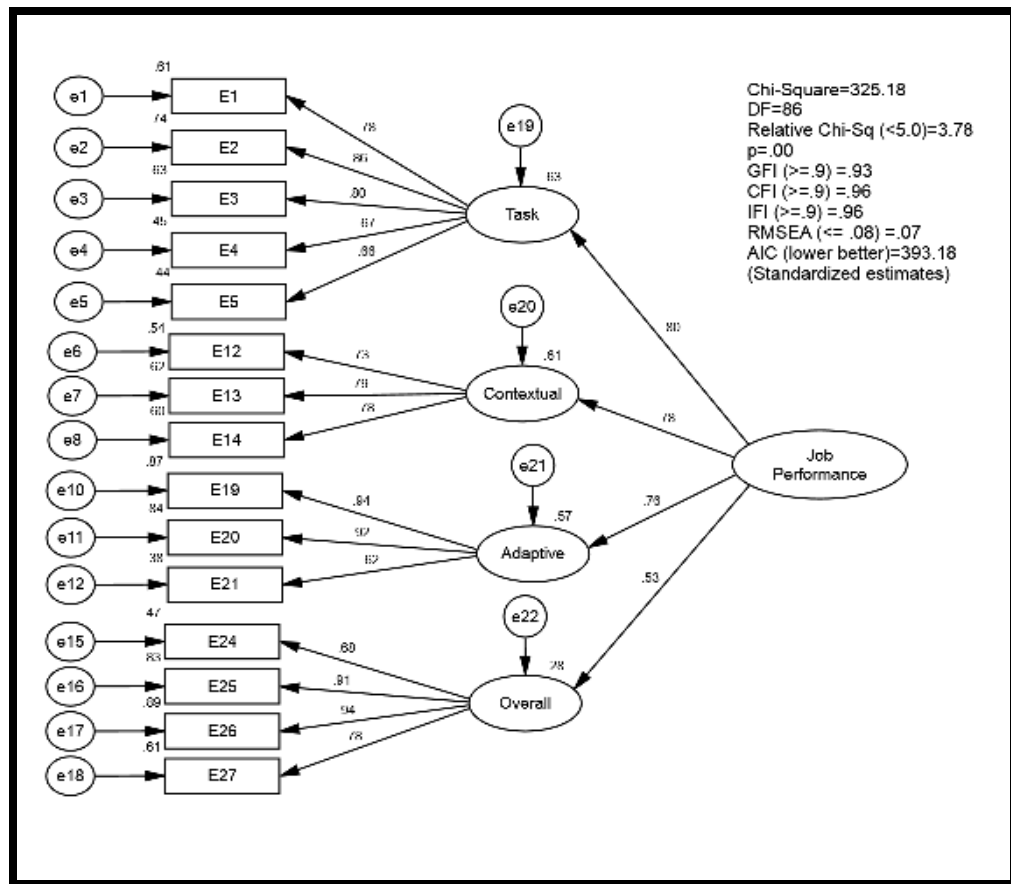
Figure 11: Measurement Model for Job Performance

The AVE and CR for job performance sub-constructs are shown in Table 24. All

AVE were more than .50 and CR were more than .70. Table 25 shows all the

items under Job Performance. Table 26 is the summary of goodness-of-fit

indices of all the measurement models in this study.

Table 24: AVE and CR for Job Performance Sub-Constructs

Sub-Constructs	AVE	CR	CV
Task Performance	.58	.87	Valid
Contextual Performance	.59	.81	Valid
Adaptive Performance	.70	.87	Valid
Overall Performance	.70	.90	Valid

Table 25: Job Performance Items

Original Items	Item Label	Standardized Factor Loadings	Item Deleted
Task Performance:			
I managed to plan my work so that it was done on time.	E1	.75	✓
My planning was optimal.	E2	.82	✓
I kept in mind the results that I had to achieve in my work.	E3	.77	✓
I was able to separate main issues from side issues at work.	E4	.69	✓
I was able to perform my work well with minimal time and effort.	E5	.67	✓

Original Items	Item Label	Standardized Factor Loadings	Item Deleted
How often was the quality of your work below it should have been for the past 3 months?	E6	.11	Deleted
How often was the quantity of your work less than it should have been for the past 3 months?	E7	.18	Deleted
How do you rate the quality of your own work in the past 3 months?	E8	.46	Deleted
How do you rate the quantity of your own work in the past 3 months?	E9	.45	Deleted
Compared to last year, I judge the quality of my work in the past 3 months to be…	E10	.44	Deleted
Compared to last year, I judge the quantity of my work in the past 3 months to be…	E11	.37	Deleted
Contextual Performance:			
I took on extra responsibilities.	E12	.71	✓
I started new tasks myself, when my old ones were finished.	E13	.73	✓
I took on challenging work tasks, when available.	E14	.44	Deleted
I actively participated in work meetings.	E15	.37	Deleted
I am willing to work harmoniously with others.	E16	.17	Deleted
I meet the norms of my workplace.	E17	.49	Deleted
I am always ready to offer help to my co-worker.	E18	.41	Deleted

Original Items	Item Label	Standardized Factor Loadings	Item Deleted
Adaptive Performance:			
I worked at keeping my job knowledge up-to-date.	E19	.91	✓
I worked at keeping my job skills up-to-date.	E20	.91	✓
I came up with creative solutions to new problems.	E21	.66	✓
I keep looking for new challenges in my job.	E22	.47	Deleted
I am willing to work harmoniously with others.	E23	.32	Deleted
Overall Performance:			
I have never been issued a letter because of disciplinary problem.	E24	.29	Deleted
On average I see myself as a top performer	E25	.91	✓
My superior is always satisfied with my job performance.	E26	.94	✓
My co-workers are always satisfied with my job performance.	E27	.78	✓
My clients are always satisfied with my job performance.	E28	.80	✓

Table 26: Summary of Goodness-of-Fit Indices of Measurement Models (CFA)

Measurement Model (CFA)	χ^2	df	p	GFI	CFI	IFI	RMSEA
Job Demand	4.24	147	.00	.90	.91	.91	.07
Job Resources	2.45	61	.00	.96	.97	.97	.05
Personal Resources	4.92	87	.00	.92	.92	.92	.08
Work Engagement	4.14	13	.00	.97	.99	.99	.07
Organisational Commitment	2.63	1	.00	1.00	.99	.99	.05
Negative Personal Wellbeing	4.85	35	.00	.95	.95	.95	.08
Job Performance	3.78	86	.00	.93	.96	.96	.07

5.2.4 Participants Demographic Data

Table 27 summarizes the participants' demographic data. Both actual figures and percentages are presented in the table to enable better understanding of the data. Majority of the participants are from the age group of 30 to 39 years (53.7%) followed by the age group of 40 to 49 years (19.4%) and the age group of 20 to 29 years (18.0&). The rest of the participants came from the age group of above 50 years. More than half of the participants are female (75.2%) and the remainder are male (24.8%). Majority of the participants (66.3%) have a diploma qualification or below while the rest are degree holders or above.

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A large number of the participants are nurses (29.6%), followed by doctors (13.5%), lab technologists (8.6%), pharmacists (7.2%), medical assistants (7.0%), clerks (6.5%) and attendants (6.4%). The rest of the participants are from various professions in the hospital such as radiographers, occupational therapists, dieticians and science officers. Majority of them have been working in the public service for 6 to 15 years (57.2%). About 25.7% of the participants have been working for 16 years or above and 17% of the participants are those who have been working in public service for 5 years and below.

Since this research is also related to religious and spiritual beliefs, the religion and the race of the participants were also recorded. Majority of the participants are Malay (81.2%), followed by Indian (9.2%) and Chinese (7.2%). The remaining are from the Sabah/Sarawak ethnic groups and others reported unknown race (2.6%). A total of 82.8% are Muslim, 8.6% are Hindu, 5.6% are Buddhist, 2.1% are Christian and 1.0% did not specify any religion.

Table 27: Participants Demographic Data

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Characteristic	N	%

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<u>Age</u>

20-29	113	18.0
30-39	337	53.7
40-49	122	19.4
50-59	55	8.8
60 and above	1	0.2

<u>Gender</u>

Male	156	24.8
Female	473	75.2

<u>Marital Status</u>

Single	118	18.8
Married	493	78.4
Widowed/Divorced	18	2.9

<u>Highest Attained Qualification</u>

PhD/Specialist	6	1.0
Masters	44	7.0
Degree	162	25.8
Diploma	286	45.5
SPM	111	17.6
Other	20	3.2

_____

Characteristic	N	%
Job		
Doctor	85	13.5
Pharmacist	45	7.2
Science Officer	16	2.5
Administrator	4	0.6
Nurses	186	29.6
Medical Assistant	44	7.0
Attendants	40	6.4
Radiographer	23	3.7
Social Worker	3	0.5
Lab Technologist	54	8.6
Information Technologist	4	0.6
Assistant Pharmacist	3	0.5
Clerk	41	6.5
Research Officer	3	0.5
Occupational Therapist	16	2.5
Physiotherapist	9	1.4
Rehabilitation Officer	2	0.3
Dietician	18	2.9
Health Educator	1	0.2
Health Inspector	3	0.5
Dentist	1	0.2
Dental Technologist	9	1.4
Audiologist	5	0.8
Optometrist	4	0.6
Other	10	1.6
Hospital		
Hospital NS 1	133	21.1
Hospital NS 2	84	13.4
Hospital P	137	21.8
Hospital S	158	25.1
Hospital FT	117	18.6

Characteristic	N	%

Years Working in the Hospital

Below 5	262	41.7
6-10	245	39.0
11-15	65	10.3
16-20	23	3.7
21-25	13	2.1
26-30	12	1.9
31-35	5	1.0
36 and Above	3	0.5

Years Working in Public Service

Below 5	107	17.0
6-10	231	36.7
11-15	129	20.5
16-20	65	10.3
21-25	45	7.2
26-30	29	4.6
31-35	16	2.5
36 and Above	7	1.1

Race

Malay	511	81.2
Indian	58	9.2
Chinese	45	7.2
Sabah Bumi	5	0.8
Sarawak Bumi	4	0.8
Other	6	1.0

Religion

Islam	521	82.8
Hindu	54	8.6
Buddha	35	5.6
Christian	13	2.1
Other	6	1.0

The profile of participants in the current research is similar to the profile of participants in other MPS studies. This is due to the fact that most of the employees in the MPS are Malays, followed by Indians and then Chinese. Given this kind of demographic profile, it is believed that this research could represent the wider population of Malaysian Public Hospital employees.

5.2.5 Measurement Model Analysis

After individual constructs were run for model fit and the desired AVE and CR were achieved, the researcher ran a measurement model for all constructs to test for inter-correlations among the constructs. The measurement model for all constructs yielded poor fit indices and only the chi-square was significant ($\chi2 = 1888.98$, df =607, p=.00) with the relative chi-square at 3.11 and RMSEA =.06. Thus, the tests were run until a model with fit indices was found with all AVE and CR of the variables are more than .50.

Finally, fit indices for the measurement model indicated good model fit for all constructs with good AVE and CR (Hair et al., 2010). The chi-square was significant ($\chi2 = 997.81$ df =383, p=.00) and the relative chi-square was 2.61. The GFI was .90, CFI=.93, IFI=.93, NFI=.90, TLI=.93 and RMSEA =.050. Figure 12 is the fit model of measurement model for all constructs with good validity and reliability. To achieve good validity and reliability, a number of sub-

constructs for Job Demands, Job Resources, Job Performance and one item from

Organisational Commitment had to be deleted.
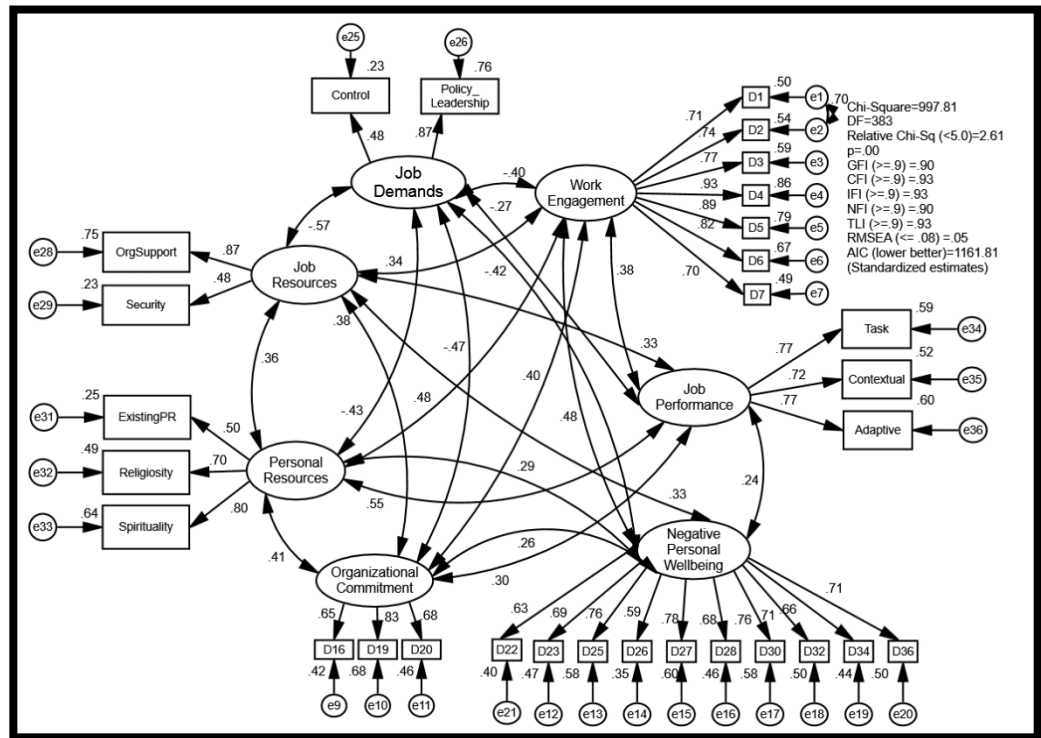
Figure 12: Measurement Model for All Construct

5.2.5.1 Multicollinearity analysis

The variance inflation factor (VIF) is the quotient of the variance in a model with

multiple terms by the variance of a model with one term alone and it quantifies the

severity of multicollinearity in an ordinary least squares regression analysis.

Meanwhile, tolerance is the reciprocal of VIF. Both VIF and tolerance are based on the

R-squared value obtained by regressing a predictor on all of the other predictors in the

analysis. Based on Table 28, all VIF shows a value less than 5 and tolerance more than .20. These indicates that the model are in good shape, and can proceed to the next stage.

Table 28: Tolerance and variance inflation factor (VIF) of the predictors

Variables	Collinearity Statistics	
	Tolerance	VIF
Organisational Support	.63	1.60
Job Security	.76	1.31
Existing Personal Resources	.63	1.58
Religiosity	.58	1.73
Spirituality	.52	1.92
Job Control	.76	1.32
Policy and Leadership	.59	1.71
Task Performance	.51	1.94
Contextual Performance	.53	.88
Adaptive Performance	.52	1.93
D1	.24	4.26
D2	.22	4.61
D3	.40	2.48
D4	.21	4.73
D5	.24	4.11
D6	.33	3.06
D7	.45	2.21

Variables	Collinearity Statistics	
	Tolerance	VIF
D16	.64	1.56
D19	.52	1.94
D20	.62	1.62
D22	.56	1.77
D23	.50	2.04
D25	.43	2.31
D26	.61	1.63
D27	.39	2.56
D28	.53	1.90
D30	.45	2.22
D32	.47	2.12
D34	.52	1.94
D36	.47	2.14

5.2.5.2 Assessing the Validity and Reliability of the Measurement Model for all Constructs

The convergent validity for the measurement model is achieved for all constructs with AVE of .50 or more. The construct validity for each construct is achieved when at least 3 or 4 indices are fit as shown in Figure 5 to Figure 11. The discriminant validity for the measurement model for all constructs is also achieved when the correlations between factors in the measurement model do

not exceed 0.85 as recommended by Kline (as cited in Saidon, 2012). Besides that, the square root of AVE (values in bold, off diagonal) are greater than the correlations in the respective columns and rows. Overall, the measurement model demonstrated adequate discriminant validity as shown in Table 29.

Table 29: Summary of the discriminant validity of the Measurement Model for all Constructs

Constructs	JD	JR	PR	WE	OC	NPW	JP
Job Demand (JD)	**.70**						
Job Resources (JR)	-.57	**.70**					
Personal Resources (PR)	-.43	.36	**.68**				
Work Engagement (WE)	-.40	.34	.48	**.80**			
Organisational Commitment (OC)	-.47	.38	.41	.40	**.72**		
Negative Personal Wellbeing (NPW)	-.42	.33	.29	.48	.26	**.70**	
Job Performance (JP)	-.27	.33	.55	.38	.30	.24	**.75**

The convergent validity for the measurement model is achieved for all constructs with AVE of .50 or more, as shown in Table **30**. Meanwhile for standardized loadings, loadings close to 0 indicate that the factor has a weak influence on the variable.

Table 30: Summary of the standardized loading, reliability and validity of the Measurement Model all Constructs

Items	Standardized Loading	CR	AVE
Job Demand (JD)		.64	.50
Work Control	.50		
Policy & leadership	.82		
Job Resources (JR)		.64	.50
Organisational Support	.81		
Job Security	.49		
Personal Resources (PR)		.71	.50
Existing Personal Resources	.53		
Religiosity	.68		
Spirituality	.76		
Work Engagement (WE)		.92	.64
D1	.71		
D2	.74		
D3	.77		
D4	.92		
D5	.89		
D6	.82		
D7	.70		
Organisational Commitment (OC)		.77	.53
D16	.64		
D19	.83		
D20	.67		

Items	Standardized Loading	CR	AVE
Negative Personal Wellbeing (NPW)		.91	.50
D22	.62		
D23	.68		
D25	.76		
D26	.59		
D27	.77		
D28	.68		
D30	.76		
D32	.71		
D34	.66		
D36	.71		
Job Performance (JP)		.80	.57
Task	.78		
Contextual	.72		
Adaptive	.77		

5.2.5.3 Assessment of Normality Distribution of the Data

The normality assessment of the data was made by assessing the measure of skewness of every item as shown under section 5.2.2.2. Based on the result of normality test, it was found that several items in this data, had skewness more than 1.5 and Critical Region (CR) of more than 8.0. However, since the sample

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size for this study exceeds minimum sample size of 200, the researcher proceeded with the analysis and re-confirmed the results using bootstrapping.

5.3 Chapter Summary and Conclusion

This chapter has discussed the findings from Study 2 on the relationship between job resources, personal resources, subjective wellbeing and job performance. The details explanation on the statistical techniques used and the analyses of data collected were also presented in this chapter. The results on each variables CFA analysis were presented, followed by a detailed step by step SEM AMOS analysis to test for model fit on the proposed theoretical model. The subsequent chapter 6 explain in details the hypotheses testing based on the structural model and concluded with an evaluation of the findings in relation to the hypotheses of the study.

.All nine hypotheses under phase 1 of Study 2 were evaluated according to the results found in the study. The next chapter will discuss in detail the moderating effects of job demands on subjective wellbeing and the mediating effects of subjective wellbeing on job demands-resources and job performance.

CHAPTER 6 – STRUCTURAL MODEL ANALYSIS AND HYPOTHESES TESTING FOR STUDY 2 - JOB PERFORMANCE IN THE MALAYSIAN PUBLIC SERVICE: THE ROLES OF JOB DEMANDS-RESOURCES AND SUBJECTIVE WELLBEING

6.0 Chapter Overview

This chapter starts with the results of the structural model for all constructs and followed by details explanation on the hypotheses testing based on the structural model. This chapter is concluded with an evaluation of the findings in relation to the hypotheses of the study.

6.1 Introduction

Based on the final measurement model for all constructs in Figure 12, the structural model for all constructs was run and hypotheses of current study will be evaluated based on the results of the fit model.

6.2 Structural Model Analysis

The structural model for all constructs was run and the result was a model with good fit, where the chi-square was significant ($\chi2 = 1092.85$, df =389, p=.00) and the relative chi-square was 2.81. The GFI was .90, CFI = .92, IFI = .93, NFI = .89, TLI=.92 and RMSEA =.05. More than three fit indices indicated good

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model fit for the structural model and for all constructs (Hair et al., 2010). Figure

13 is the structural model for the all constructs.
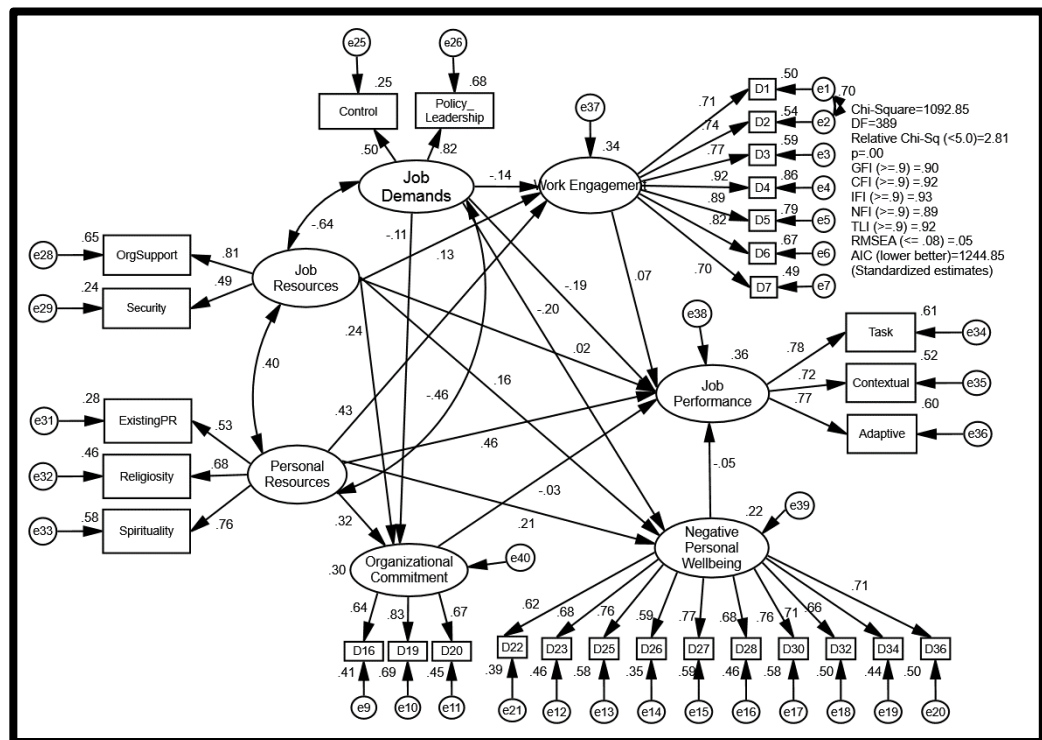
Figure 13: Structural Model for All Constructs

6.2.1 Hypothesis Testing – Hypothesis 1

For this research, eleven hypotheses were developed to answer the questions in

Study 2. These hypotheses were grouped into two phases with four main

categories of hypotheses as listed in Table 31 to test: 1) the relationship between

job resources, personal resources and job demands with subjective wellbeing; 2)

to test the relationship between job resources, personal resources, job demands and subjective wellbeing with job performance; 3) the relationship of the religiosity and spirituality with personal resources; and 4) the moderating and mediating effects. The first phase tested the relationship of the demands/resources with subjective wellbeing and job performance. The second phase studied the moderating and mediating effects. The first phase is reported in this chapter and the moderating and mediating analysis is reported in the next chapter (chapter 7).

In the first phase, the researcher ran a structural model for all constructs in order to test for the relationship of the constructs with subjective wellbeing and job performance. Whereas, to test for the relationship between religiosity and spirituality with personal resources, a structural model for personal resources and job performance was used.

Table 31: List of Hypotheses for Study 2

Hypotheses

First Phase: Relationship of the Constructs

Hypotheses 1

H1a: Job resources are significantly related to subjective wellbeing constructs; work engagement, organisational commitment and negative personal wellbeing.

H1b: Personal resources are significantly related to subjective wellbeing constructs; work engagement, organisational commitment and negative personal wellbeing.

H1c: Job demands are significantly related to subjective wellbeing constructs; work engagement, organisational commitment and negative personal wellbeing.

H1e: Job resources and personal resources are positively related to job performance.

H1f: Job demands are negatively related to job performance

H1g: Subjective wellbeing constructs of work engagement and organisational commitment are positively related to job performance, whereas negative personal wellbeing is negatively related to job performance.

Hypotheses 2

H2a: Religiosity and spirituality are positively related to existing personal resources constructs.

H2b: Religiosity is positively related to job performance.

H2c: Spirituality is positively related to job performance.

Second Phase: Moderating and Mediating Effects of the Constructs

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H1d: Job demands moderate the relationship of job and personal resources with subjective wellbeing constructs; work engagement, organisational commitment and negative personal wellbeing.

H1h: Subjective wellbeing constructs; work engagement, organisational commitment and negative personal wellbeing mediate the relationship between JD-R and Job Performance.

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The fit indices for structural model for all constructs are reported in para 6.2.

This section reports the results of hypotheses testing. There are six hypotheses 1

and three hypotheses 2 as shown in Table 31. For the first hypotheses, there are

six hypothesized paths of the relationship between the constructs. Hypotheses 1

was tested using Structural Model for All Constructs in Figure 13, whereas,

hypotheses 2 was tested using the Structural Model for Personal Resources and

Job Performance in Figure 14.

Table 32: Hypotheses – Structural Model for all Constructs

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Hypotheses Paths	Hypotheses
H1a: Job Resources → Subjective wellbeing	Job resources are significantly related to subjective wellbeing constructs.
H1b: Personal resources → Subjective wellbeing	Personal resources are significantly related to subjective wellbeing constructs.
H1c: Job Demands → Subjective wellbeing	Job Demands are significantly related to subjective wellbeing constructs.
H1e: Job Resources → Job Performance Personal Resources → Job Performance	Job resources and personal resources are positively related to job performance
H1f: Job Demands → Job Performance	Job demands are negatively related to job performance
H1g: Work Engagement → Job Performance Organisational → Job Performance Commitment Negative Personal → Job Performance Wellbeing	Work engagement and organisational commitment are positively related job performance. Negative personal wellbeing is negatively related to job performance
H2a: Religiosity → personal resources Spirituality → personal resources	Religiosity and spirituality are positively related to existing personal resources
H2b: Religiosity → Job performance	Religiosity is positively related to job performance

| H2c: Spirituality ➡️Job performance | Spirituality is positively related to job performance |

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i. Job Resources and Personal Resources Relationship with Subjective Wellbeing

The analysis from Figure 13 found that job resources were significantly related to subjective wellbeing constructs of work engagement, organisational commitment and negative personal wellbeing at β = .13 and p value of .03 for work engagement, β = .24 and p value of .00 for organisational commitment and β = .16 and p value of .02 for negative personal wellbeing. Thus, hypothesis H1a is fully supported.

Personal resources were significantly related to work engagement with β =.43 and p value of .00, organisational commitment with β =.32 and p value of .00 and negative personal with β =.22 and p value of .00 as the results shown in Table 33. Thus, hypothesis H1b is fully supported.

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Table 33: Hypothesis Statement of the Analysis for Job Resources, Personal Resources
and Subjective Wellbeing

Hypothesized Path	Beta	P	Results of Hypothesis
H1a: Job resources are significantly related to Subjective Wellbeing constructs.			
Job Resources → Work Engagement	.13	.03	**Supported**
Job Resources → Organisational Commitment	.24	.00	**Supported**
Job Resources → Negative Personal Wellbeing	.16	.02	**Supported**
H1b: Personal resources are significantly related to Subjective Wellbeing constructs.			
Personal Resources → Work Engagement	.43	.00	**Supported**
Personal Resources → Organisational Commitment	.32	.00	**Supported**
Personal Resources → Negative Personal Wellbeing	.22	.00	**Supported**

ii. Job Demands and Subjective Wellbeing

It was found that job demands were significantly related to all subjective wellbeing constructs which are the work engagement, organisational commitment and negative personal wellbeing with β = -.14 for work engagement, β = -.11 for organisational commitment and β = -.20 for negative personal wellbeing at p value of .00 for all sub-constructs. Thus, hypothesis H1c is fully supported as shown in Table 34.

Table 34: Hypothesis Statement of the Analysis for Job Demands and Subjective Wellbeing

Hypothesized Path	Beta	P	Results of Hypothesis
H1c: Job Demands are significantly related to Subjective Wellbeing			
Job Demands → Work Engagement	-.14	.00	**Supported**
Job Demands → Organisational Commitment	-.11	.00	**Supported**
Job Demands → Negative Personal Wellbeing	-.20	.00	**Supported**

iii. Job and Personal Resources with Job Performance

The analysis found that only personal resources that are significantly related to job performance with $\beta = .46$ and p value of .00. However, job resources are not significantly related to performance constructs with $\beta = .02$ at the p value of .82. Hypothesis H1e is partially supported as shown in Table 35.

Table 35: Hypothesis Statement of the Analysis for Job Resources, Personal Resources and Job Performance

Hypothesized Path	Beta	P	Results of Hypothesis
H1e: Job Resources and Personal Resources are positively related to Job Performance			
Job Resources → Job Performance	.02	.82	**Not Supported**
Personal Resources → Job Performance	.46	.00	**Supported**

iv. Job Demands and Job Performance

The analysis on the relationship of job demands and job performance found that job demands are negatively related to job performance with β = -.19 and p value of .00. Thus, as shown in Table 36 hypothesis H1f is supported.

Table 36: Hypothesis Statement of the Analysis for Job Demands and Job Performance

Hypothesized Path	Beta	P	Results of Hypothesis
H1f: Job Demands are negatively related to Job Performance			
Job Demands → Job Performance	-.19	.00	**Supported**

v. Subjective Wellbeing and Job Performance

The analysis on the relationship of subjective wellbeing and job performance found that, all constructs are not significantly related to job performance as shown in Table 37. Thus, hypothesis H1g is not supported.

Table 37: Hypothesis Statement of the Analysis for Subjective Wellbeing and Job Performance

Hypothesized Path	Beta	P	Results of Hypothesis
H1g: Subjective Wellbeing constructs of Work Engagement and Organisational Commitment are Job Performance and Negative Personal Wellbeing is negatively related to Job Performance			
Work Engagement → Job Performance	.07	.19	**Not Supported**
Organisational Commitment → Job Performance	-.05	.27	**Not Supported**
Negative Personal Wellbeing → Job Performance	-.03	.65	**Not Supported**

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6.2.2 Hypothesis Testing – Hypothesis 2

The Structural Model for Personal Resources and Job Performance was used to test the hypotheses H2a, H2b and H2c. The result was run until model fit was found with the chi-square significant at ($\chi2$ = 781.96 df =162, p=.00) and the relative chi-square was 4.83. The GFI was .89, CFI=.92, IFI=.92, and RMSEA =.84. More than three fit indices indicates good model fit (Hair et al., 2010). Figure 14 is the structural model of personal resources and job performance.
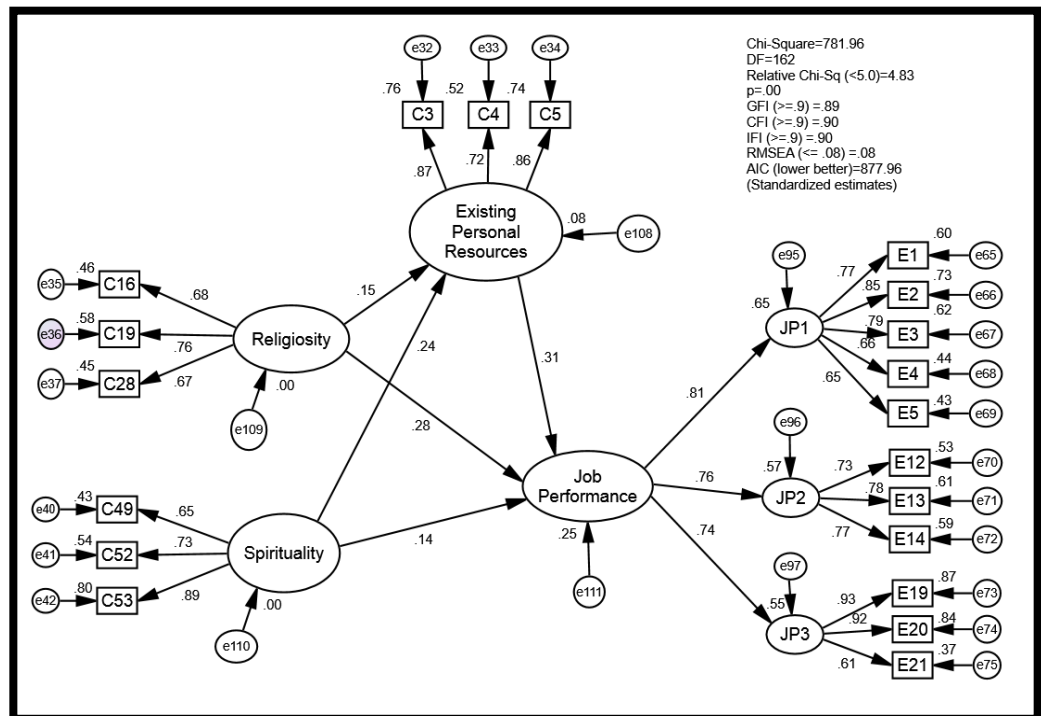
Figure 14: Structural Model for Personal Resources and Job Performance

i. Relationship of Religiosity and Spirituality with Existing Personal Resources Constructs

For hypothesis H2a, the path analysis found that religiosity and spirituality are positively related to the existing personal resources with β =.15 and p value is significant at .00 for religiosity and β = .24 at significant p value lesser than .001 for spirituality. Hypothesis H2a is supported as shown in Table 38.

Table 38: Hypothesis Statement of the Analysis for Religiosity and Spirituality with Existing Personal Resources

Hypothesized Path	Beta	P	Results of Hypothesis
H2a: Religiosity and spirituality are positively related to existing personal resources constructs			
Religiosity → Existing Personal Resources	.15	.00	**Supported**
Spirituality → Existing Personal Resources	.24	***	**Supported**

ii.Religiosity and Spirituality with Job Performance

It was found that religiosity and spirituality are positively related to job performance with β = .28 and significant p value lesser than .001 for religiosity and β = .14 with p value of .00 for spirituality. Thus, hypotheses H2b and H2c are supported as shown in Table 39.

Table 39: Hypothesis Statement of the Analysis Religiosity and Spirituality with Job Performance

Hypothesized Path	Beta	P	Results of Hypothesis
H2b: Religiosity is positively related to job performance			
Religiosity → Job Performance	.28	***	**Supported**
H2c: Spirituality is positively related to job performance			
Spirituality → Job Performance	.14	.00	**Supported**

6.3 Discussion

For hypothesis testing-hypothesis 1, out of six hypotheses tested, four hypotheses were fully supported, one was partially supported and one was not supported. Hypothesis H1a, H1b, H1c and H1f were fully supported with the job

resources, personal resources and job demands are found to be significantly related to all SWB constructs of which are work engagement, organisational commitment and negative personal wellbeing. Job demands are also found negatively related to job performance.

However, for hypothesis H1e, only personal resources that are found positively related to job performance. Job resources are not positively related to job performance. For hypothesis H1g, no significant results was found on the relationship between job demands and SWB constructs.

> H1a: Job resources are significantly related to subjective wellbeing constructs – Fully Supported
>
> H1b: Personal resources are significantly related to Subjective wellbeing constructs – Fully Supported
>
> H1c: Job demands are significantly related to subjective wellbeing constructs – Fully Supported
>
> H1e: Job resources and personal resources are positively related to job performance – Partially Supported
>
> H1f: Job demands are negatively related to job performance – Supported
>
> H1g: Subjective wellbeing constructs of work engagement and organisational commitment are positively related to job performance, whereas negative personal wellbeing is negatively related to job performance – Not Supported

For hypothesis testing-hypothesis 2, all three hypotheses H2a, H2b and H2c were supported. Religiosity and spirituality are found positively related to the existing personal resources and job performance.

H2a: Religiosity and spirituality are positively related to existing personal resources constructs – Fully Supported

H2b: Religiosity is positively related to job performance – Supported

H2c: Spirituality is positively related to job performance – Supported

6.3.1 Discussion on Hypotheses 1 – Direct Effect of Job Demands, Job Resources and Personal Resources to Subjective Wellbeing Constructs and Job Performance

i. Job Resources and Personal Resources Relationship with Subjective Wellbeing Constructs

The finding that job resources are significantly related to all subjective wellbeing constructs was expected. The significant and positive results on the relationship of job resources and work engagement also support previous findings of Bakker (2011) and Bakker and Demerouti, (2007b) on job resources and engagement. Bon and Shire (2017) study on job resources and organisational commitment also found that job resources were related to affective commitment. The significant and positive beta finding in present research shows that when the job

resources are high, work engagement and organisation commitment are also high. However, the positive beta of the construct negative personal wellbeing is quite intriguing. A positive beta suggests that negative personal wellbeing moves in the same direction with the job resources. When the job resources are high, negative personal wellbeing is high. This finding is contradicted with the findings from previous research, the availability of job resources reduces one's feeling of being worn out and uptight at work. Studies from previous scholars have also found that job resources have direct negative relationship with burn out (related items in negative personal wellbeing) (Crawford, LePine, & Rich, 2010; Bakker, Demerouti, & Euwema, 2005; Schaufeli & Bakker, 2004; Bakker, Demerouti, Schaufeli, 2003). Employees with an abundance of resources would be able to protect themselves from strains that cause stress and motivate others to perform at work. Whereas, in situations of resources depletion, employees will have problems protecting themselves from the strains of work which could cause fatigue, boredom, burnout and stress (Crawford et al., 2010). Current research finding shows that the employees are more likely to feel burn out and up tight even though there are ample resources around. Schaufeli (2017) in his paper on work engagement and burnout has provided some insights on how the current findings work. He explained the stress process of work engagement and burnout, in which excessive job demands and low job resources might cause poor performance and low commitment when employees' energy levels were depleted

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and they felt burnt-out. In some cases, giving ample resources without concerning oneself with the demands, will not help in reducing the negative effects on employees' wellbeing. For example, having a high salary might not guarantee a healthy and performed employee at work if the employee feels burdened with an excessive workload and high emotional demands. In the case of healthcare employees in MPS hospitals, job resources such as organisational support and job security were not enough for them and still cause them to feel worn out and uptight. This might also due to the presence of job demands such as lack of work control, poor monitoring policy and poor action to curb low job performance by the leaders in the MPS. In certain MPS hospitals, the employees need to share work space, thus, after their busy shift they have to take their rest in sharing space and in some cases there is no space for resting at all. This could explain the current findings that even with good job resources, employees still could facing the negative personal wellbeing due to high demands at work. Thus, a further analysis of job demands as moderator of job resources and negative personal wellbeing in the next section, might be able to explain the current findings on negative personal wellbeing.

The finding on the relationship between personal resources and work engagement in present study is supported by previous scholars' findings such as Karatepe and Olugbade (2009), Myhre (2014), Sloetjes (2014) and

Xanthopoulou et al. (2009). Xanthopoulou et al. (2009) study on employees in one of the electrical engineering and electronic companies in Netherland found that personal resources such as self-efficacy, self-esteem and optimism are positively related to work engagement. A study on oil and gas employees by Myhre (2004) also found similar result between personal resources of self-efficacy and work engagement.

As for the significant findings on the relationship between personal resources and organisational commitment, Myhre (2014) and Zeb and Nawaz (2016) studies on the relationship of self-efficacy and organisational commitment have also found similar results. Self-efficacy significantly contributed in explaining the variance of employees' level of organisational commitment. Wainaina et al. (2014) found a strong relationship between workplace spirituality and organisational commitment. Religiosity in this study comprises ritualistic behaviour of doing good deeds, referring to religious texts for tranquillity and remembering death and the afterlife. For a Muslim, these ritualistic behaviours would help one maintain a positive outlook in life. For spirituality, the final items are related to the spiritual effects in the lives of employees which gives them happiness, healing experiences and strong will to face difficulties and challenges. The findings suggest that when employees have high religiosity and spirituality, they would have positive attitudes and positive feelings towards

themselves, people around them, and their workplace. Thus, a sense of obligation or loyalty to the organisation might also increase.

However, the finding that personal resources are positively and significantly related to negative personal wellbeing was differed from previous studies and quite unexpected. From the previous findings, we found that employees with high personal resources, view themselves positively and have healthy lifestyles, which in turn reduces the negative effects on wellbeing. Similar to the explanation on the relationship between job resources and SWB constructs above, the presence of ample personal resources will not be able to reduce the negative personal wellbeing and help the employees to feel healthy if the job demands are not taken care of. In current study, even with high belief and spirit that they could perform well, over time the employee might felt worn out and uptight over high demands at work.

There are other two plausible explanations for current research finding on the relationship between personal resources and negative personal wellbeing. The first is that the samples used in previous studies i.e. engineering, hotel and ICT background employees, were rather different from the present sample, with the exception of Sloetjes' (2014) study which utilised employees from a health care background. Hence, a sample-specific effect in the present research may have been at play since all participants were healthcare workers from an Asian, and

strongly religious background that might have affected the results differently. Another explanation is that incorporating religiosity and spirituality into the personal resources construct might affect the results. A similar trend may also explain the positive significant relationship between personal resources and negative personal wellbeing.

ii. Job Demands and Subjective Wellbeing

Job demands in this study were found to be significantly related to all sub-constructs of subjective wellbeing. Job demands are negatively related to work engagement and organisational commitment meaning that the higher the demands, the lower the sense of work engagement and organisational commitment. A study by Field (2011) found that job demands such as work overload was significantly related to work engagement. Montgomery, Spanu, Baban, and Panagopoulou (2015) also had similar findings in which the workload and emotional demands were found to be negatively related to work engagement dimensions such as vigour and dedication. In the current study, organisational commitment which comprises affective and normative commitment was negatively related to job demands which consisted of elements of control, policy and leadership. The higher the demands, the lower the organisational commitment. Limited information is available regarding the relationship between the job demands and organisational commitment. The few

studies done by Jyoti and Rajib (2016) and Todd and Mari-Amanda (2016) found a negative relationship between job demands and affective commitment. However, Bon and Shire's (2017) study on job demands, job resources and affective commitment did not find any significant role of job demands on affective commitment. The findings of the current research could be explained in line with Jyoti and Rajib (2016) in which they explained that job demands could drain an individual's energy and affect the mental state of employees. The withdrawal could decrease affective commitment. In most studies on the relationship between job demands and organisational commitment, job demands are normally involved as a third variable in the job resources and commitment relationship. As discussed above, the lack or work control, poor monitoring policy and poor supervision might affect the MPS hospitals employees' commitment. The healthcare workers have long hours of working and not being able to control their work and work space might decrease their commitment. Previous studies on work space and physical environment on nurses have also supported this finding. In order to increase satisfaction and commitment of the nurses, workspace and safety are among the concerns of the nurses. This is also applicable in MPS hospitals, in which, the healthcare employees are normally shared their rest area and lack of personal space. Furthermore, their work are often following strict procedures and could not be control individually. Thus, it is important that the demands are reduced to increase their commitment at work.

In the present research, job demands were also found to be negatively related with negative personal wellbeing, which indicated that the higher demands do not necessarily affect the wellbeing of employees. As explained previously, stress or burnout could develop if the employees experience a loss of resources, while an abundance of job resources could prevent employees from getting stressed and burnt out (Crawford et al., 2010). The findings that job demands did have significant negative relationship on negative personal wellbeing could be explained by the same process. For employees with higher job demands and abundant job resources, the negative effects of demands might be buffered by these resources and the employees would not have any problem in facing the demands. Further analysis on the relationship between job demands, job resources and negative personal wellbeing could explain the findings.

iii. Job and Personal Resources with Job Performance

The findings that job resources were not significantly related to job performance and only personal resources were significantly related to job performance differed from previous research findings (Bakker et al., 2004; Rabiul Islam & Al-Homayan, 2013). For the current study, the job resources sub-constructs were organisational support and job security. The findings showed that the sub-constructs were not the predictors of job performance in this study.

Personal resources with the sub-constructs of existing personal resources, religiosity and spirituality were found to be positively related to job performance and aligned with the previous studies reported by Affeldt and MacDonald (2010), Elçi et al., (2011), Karakas (2009), Osman-gani et al., (2013) and Zahrah et al., (2016). By having high personal resources such as high self-esteem, self-efficacy, religiosity and spirituality would help employees to perform better. Employees with personal resources have a sense of responsibility and self-will in doing their job, and are thus more confident that they are capable and will always strive to do their job well. The findings are also consistent with the findings of Study 1 in present research. Participants in Study 1 believe that religiosity and spirituality play an important roles in MPS healthcare workers performance.

iv. Job Demands and Job Performance

Job demands in this research were found negatively related to job performance. The finding is supported by previous research by Gilboa et al. (2008) that found job demands such as role overload and situational constraints have negative correlation with performance. Based on the constructs of job demands in this research, the finding means that lack of work control, poor monitoring policy and poor action to curb low job performance by the leaders in the MPS will negatively affect job performance. Lack of control at work, poor policy in

monitoring the employees and lack of good leader to monitor the employees are considered demands for performing employees. Work control in current study refer to employees perceive control of their work and work space. Whereas for policy and leadership, it is their perception on the policy and leaders in MPS. It is a known fact among civil servants that the monitoring (supervision) and action were not taken unto the nonperforming individuals due to constraints of the rules and regulations. In the long run, performed employees would also be affected by the situation, they would become demotivated and eventually affect their performance at work. This finding is in line with finding of Study 1 in which the participants believe that lack of work control, poor monitoring policy and no action taken by the leaders to curb poor performance will affect the job performance in MPS hospitals.

v. Subjective Wellbeing and Job Performance

Hypothesis H1g was not supported with all SWB sub-constructs are not significantly related to job performance. The findings on the relationship between work engagement and job performance are differed from Chung and Angeline's (2010) study on working adults in the Klang Valley, Malaysia. They found that work engagement was significantly related to in-role and extra-role performances. Similar findings on the relationship between work engagement and job performance were also reported by Alessandri, Borgogni, Schaufeli,

Caprara, and Consiglio (2015), Halbesleben and Wheeler (2008), Reijseger, Schaufeli, Peeters, and Taris (2010), Salanova, Agut, and Peiró (2005) and Zahrah et al., (2017). Engaged employees are normally positive and healthy employees (Bakker & Demerouti, 2008b). An enthusiastic character, couple with an abundance of job and personal resources, these engaged employees would behave positively at work which then would be portrayed as high job performance. Present research also found that negative personal wellbeing construct in this research did not related directly to job performance which is differed from previous research that found negative relationship between poor wellbeing and job performance; and employees with poor wellbeing are unlikely to give satisfactory performance (Alvi, 2017; Baptiste, 2008; Bryson, Forth, & Stokes, 2015).

Current research in which SWB constructs, work engagement, organisational commitment and negative personal wellbeing are not directly related to job performance and not directly predict work performance might be due to sample-specific effect in MPS hospitals and the differences between the constructs used in previous and current studies. Thus, the next analysis on the moderated mediation relationship between the constructs might give a clear explanation on the relationship between SWB and job performance.

6.3.2 Discussion on Hypotheses 2 – The Relationship of Religiosity and Spirituality to Personal Resources and Job Performance

For the next part of hypotheses testing, a structural model for personal resources and job performance was used. It was found that all three hypotheses were supported. The religiosity and spirituality are positively related to job performance and existing personal resources constructs.

The existing personal resources construct in the present study comprises of four sub-constructs: self-efficacy, organisational based self-esteem, religiosity and spirituality. Self-efficacy, organisational based self-esteem, religiosity and spirituality are connected based on individuals' positive belief that they are capable of facing challenges in life. Challenges and demands help in increasing self-efficacy and an individual becomes positive when he or she believes that his or her life has purpose and meaning, be it as a good devotee to God or a good worker in the organisation. Individuals with high efficacy are the masters of their life, they know that they can control and overcome any circumstance in life (Syeda & Ali, 2015). These attributes are also shown in highly religious and spiritual persons. In the organisational setting, individuals with high religious and spiritual beliefs will try their best to uphold their work responsibilities and perform well. This is in line with hypothesis H2a and H2b as well as the researcher's findings in Study 1 that the participants are able to do their job well

because they believe that one needs to fulfil their responsibility in accordance with their religious and spiritual beliefs.

Both findings that religiosity and spirituality are related to job performance, are also similar to other studies reported by Adams (2008), Karakas (2009), Neyrinck et al. (2006), Osman-gani et al. (2013), as well as Biberman and Tischler (2008) and McGee and Delbecq's (2003) as cited in Osman-gani et al. (2010) Zahrah et al. (2016) The findings are also consistent with Study 1 in this current research. The participants in Study 1 agreed that religiosity and spirituality does affect job performance of civil servants in Malaysian Hospitals.

The findings of Study 2 which are; a significant relationship between job resources with work engagement and (negative) personal wellbeing, a significant relationship between personal resources with organisational commitment and job performance; a significant relationship between job demands and all sub-constructs of subjective wellbeing, and a significant relationship between work engagement, religiosity and spirituality with job performance could give a better understanding of the relationship of JD-R with job performance in the MPS, particularly in the hospital setting.

6.4 Chapter Summary and Conclusion

This chapter is a continuation of chapter 5 that explained step by step SEM AMOS analysis to test for model fit on the proposed theoretical model. All nine hypotheses under phase 1 of Study 2 were evaluated according to the results found in the study. The next chapter will discuss in detail the moderating effects of job demands on subjective wellbeing and the mediating effects of subjective wellbeing on job demands-resources and job performance.

CHAPTER 7 - MODERATED MEDIATION ANALYSIS OF JOB DEMANDS-RESOURCES, SUBJECTIVE WELLBEING AND JOB PERFORMANCE

7.0 Chapter Overview

This chapter discusses the findings on moderation and mediation analysis of the empirical data of the study. It is the extension of the findings from the qualitative findings in Study 1 and quantitative findings in the first phase of Study 2 reported in chapters four, five and six. The chapter begins by acknowledging the complex nature of the relationship of the variables that predict job performance in the Malaysian Public Sector. Then it proceeds with a presentation of the rationale behind the choices of variables and an introduction of the Moderated Mediation Model being adopted for analysis. Further, the results of each of the Moderated Mediation Analysis carried out are extensively discussed in relation to the hypothesis of the study. The chapter concludes with an evaluation of the findings based on the literature and its relationship to the findings of Study 1 and findings of the first phase of Study 2.

7.1 Introduction

Job performance is one of the vital aspects in employees' management in the MPS. Thus, the MPS has put extra focus on this aspect for years. A lot has been done to enhance job performance in the MPS (Jabatan Penerangan Malaysia, 2016; Malaysia Administrative Modernisation Planning Unit, 2015; Rafikul Islam, 2011). In order to plan for the best programs to enhance job performance in the MPS, the predictors of job performance in the MPS need to be known. Previous research has concentrated more on a simple relationship between two variables such as between motivation and job performance, stress and job performance or organisational support and job performance. However, over the years, researchers have found that the relationship is not a direct relation between two variables and is actually more complex in nature. Researchers have started to question the processes surrounding these relationships, how the processes happen, in what way or circumstances they occur and what are the variables involved.

Based on the model adapted from Bakker and Demerouti (2008b), this research investigates the impact of job demands as moderators of the relationship between job and personal resources with subjective wellbeing constructs, and further investigates these subjective wellbeing constructs as the mediators of the relationship between job demands-resources and job performance.

Bakker and Demerouti (2008b) found that job resources and personal resources independently or jointly predict work engagement. The impact of job and personal resources on work engagement were particularly seen when the job demands were high, and that work engagement, in turn, would have a positive impact on job performance. The investigation was tested in this study using a model proposed by the researcher at paragraph 2.4 (Figure 2, pg 143) in which two additional subjective wellbeing variables were added as the mediators: organisational commitment and negative personal wellbeing. The researcher proposed that job demands would moderate the relationship between job and personal resources and subjective wellbeing constructs; work engagement, organisational commitment and negative personal wellbeing, which in turn would mediate the relationship between job and personal resources with job performance.

7.2 Job Demands and Subjective Wellbeing as the Moderated Mediation Variables

This current study tested the moderating and mediating effects in one model which is called the Moderated Mediation Model. Moderated mediation is a process that links the independent variables (IV) and the dependent variables (DV) through mediators (M) depending on the value of a moderator (W). The first phase tested the moderating effect of job demands on job and personal

resources with work engagement, organisational commitment and negative personal wellbeing which are grouped under the subjective wellbeing (SWB) variables. The second phase of testing was on the mediation effects of the SWB variables on the relationship of job and personal resources with job performance.

Subjective wellbeing was introduced by Diener, Sandvik and Pavot (1991) to explain how people evaluate their life cognitively and affectively (Diener et al., 2003). Cognitive evaluation is how people experience or view their life as a whole, such as in terms of their relationship as a family or friends, at work or in a community, whereas, the affective evaluation is how they experience the pleasantness or the unpleasantness of their life by looking at their emotion, moods and feelings (Diener et al., 2003).

There are two kinds of SWB, positive SWB and negative SWB. Examples of positive SWB are work engagement, job happiness and job satisfaction. While negative SWB includes workaholism and burnout. In this study, the researcher chose two mediator variables; work engagement and organisational commitment to explain positive SWB and negative personal wellbeing which includes elements of feeling worn out and uptight. It is hypothesized that job demands moderate the relationship of job and personal resources with subjective wellbeing and that SWB mediates the relationship between JD-R and job performance.

H1d: Job demands moderate the relationship of job and personal resources with subjective wellbeing

H1h: Subjective wellbeing mediates the relationship between job demands-resources, personal resources and job performance

Job Demands as moderator variable were reported by Bakker and Demerouti (2008b) in their study which found that job resources would have better effects on work engagement when the demands were at a medium and high level. According to JD-R model, every job has its' own risk factors that are associated with job-related stress. The two factors involved in JD-R are the demands and the resources which contribute to the underlying processes of health impairment and motivation (Demerouti & Bakker, 2011b). As for health impairment, job demands are assumed to exhaust the employees' physical and mental resources, which would in turn reduce their energy and cause health problems to employees. As for the motivational processes, the assumption is that job resources have the motivational potential to lead to work engagement, increased optimism and performance (Demerouti & Bakker, 2011b). The JD-R also suggested that job resources could buffer the effects of job demands on job strain, thus, reducing any negative effects on the organisational behaviours. Xanthopoulou et al. (2007) and Xanthopoulou, Bakker, Demerouti, and Schaufeli (2009b) have expanded the JD-R model by including personal

resources and found that job and personal resources are mutually related and can buffer the effects of job demands. Personal resources can include constructs such as self-efficacy, self-esteem and optimism could be the predictors of work engagement.

Studies using the JD-R model also support the hypothesis that the motivational effects of job and personal resources are more salient when job demands are high. Bakker et al, (2007) and Bakker et al. (2010) studies have supported the hypotheses that work engagement was maintained under high job demands and work attitude were more positive when both job resources and job demands were high. These studies supported the moderating effects of job demands on job resources relationship with organisational behaviours.

Work engagement was also found to be a mediator in the relationship between job resources and organisational behaviours. For example, Salanova and Schaufeli's (2008) study with samples from Spain and Netherlands found that work engagement constructs such as vigour and dedication mediated the relationship of job resources such as job control and feedback with proactive behaviour at work. Chung and Angeline (2010) also found a significant effect for work engagement as the mediator between job resources and in-role and extra-role performance behaviours.

Thus, this research studied not only the work engagement aspect of SWB but also two other variables which are the organisational commitment and negative personal wellbeing. As explained by the JD-R through basic assumption of motivational processes, job and personal resources can lead to work engagement which would subsequently affect organisational outcomes such as job performance (Airila et al., 2014). Similar effects are assumed between the organisational commitment and negative personal wellbeing.

7.3 Constructs used in the Hypotheses test of Moderation and Mediation.

For this study, the variables considered after achieving model fit are shown in Table 40. Several of the sub-constructs and items had to be deleted to achieve the model fit. For job demands, there were only two sub-constructs that were used in the moderated mediation analysis which were the job control and policy and leadership. For job resources, only organisational support and job security remained in this phase of testing. For personal resources and subjective wellbeing, the sub-constructs remained, but the items for some of the sub-constructs under personal resources and subjective wellbeing were reduced as explained in paragraph 5.2.6.

Table 40: Sub-Constructs for Moderated Mediation Analysis

Constructs	Sub-Constructs
Job Resources (IV)	Organisational Support
	Job Security
Personal Resources (IV)	Existing Personal Resources
	Religiosity
	Spirituality
Job Demands (Moderator)	Job Control
	Policy and Leadership
Subjective Wellbeing (Mediator)	Work Engagement
	Organisational Commitment
	Negative Personal Wellbeing

7.4 Data Analysis using PROCESS Macro for SPSS

From the structural model of all constructs in Figure 13, further analysis was done using PROCESS macro for SPSS (Hayes, 2013) to test for the moderated mediation effects. PROCESS utilizes bootstrapping analysis to generate 10,000 samples. In order to achieve the significant moderated mediation effects, the confidence interval (CI) must not be zero.

Bootstrapping analysis was chosen by the researcher because of its "superiority". (Hayes, 2013; Hayes, 2009; Preacher & Hayes, 2008) compared bootstrapping to other analysis proposed by Baron and Kenny (1986) and the Sobel test by Sobel (1982). One of the advantages of bootstrapping is that it does not require a normal distribution assumption and can be used for small and large samples (Hayes, 2013), as it is unrealistic for studies in psychology and social science fields to have fully met the assumption of normal distribution (Micerri, 1989).

The proposed procedure by Baron and Kenny (1986) to test for moderation and mediation using SEM is a popular approach. However, recent literature has identified several disadvantages with the procedure, such as lack of power in testing mediation and the need to test the hypotheses separately (Hayes, 2013; Hayes & Scharkow, 2013; Rucker, Preacher, Tomala & Petty, 2011). Baron and Kenny (1986) also advocate the use of the term "partial mediation" and "full

mediation" to describe the findings, which is philosophically and statistically problematic according to some scholars (Fugueredo, Garcia, de Beca & Gable, 2013; Hayes, 2013; Rucker, et al., 2011). In some cases, there were tendencies to get a "full mediation" for studies with small sample sizes compared to studies with larger samples. This is contradicted by literature which suggests that larger samples are better (Hayes, 2013). The terms "full mediation" and "partial mediation" have also been somewhat misleading because "full mediation" connotes that no other variables can mediate the relationship, whereas, "partial mediation" connotes that the researchers were not able to find other sound variables for the mediators (Rucker et al., 2011). Baron and Kenny (1986) have also suggested that "full mediation" occurs when there is no effect of X on Y, which is a rare occurrence in social science research (Hayes, 2009). Thus, taking into consideration the disadvantages highlighted by Baron and Kenny, the researcher used PROCESS to test for the moderated mediation in this study.

The moderated mediation Model 7 in PROCESS Macro as shown in Figure 15 enables testing of simple moderation and moderated mediation simultaneously. Model 7 enables moderator and multiple mediators to be run simultaneously, instead of running the moderators and mediators separately (Hayes, 2013). By using model 7, the researcher was able to control for variables that might affect the dependent variables through other mechanisms and not the intended

variables (Hayes, 2013; Preacher & Hayes, 2008). Model 7 also enabled the researcher to test for both the moderator and mediators as proposed in the theoretical model in Figure 2.

Statistical Diagram

Conditional indirect effect of X on Y through $M_i = (a_{1i} + a_{3i}W)b_i$

Direct effect of X on $Y = c'$

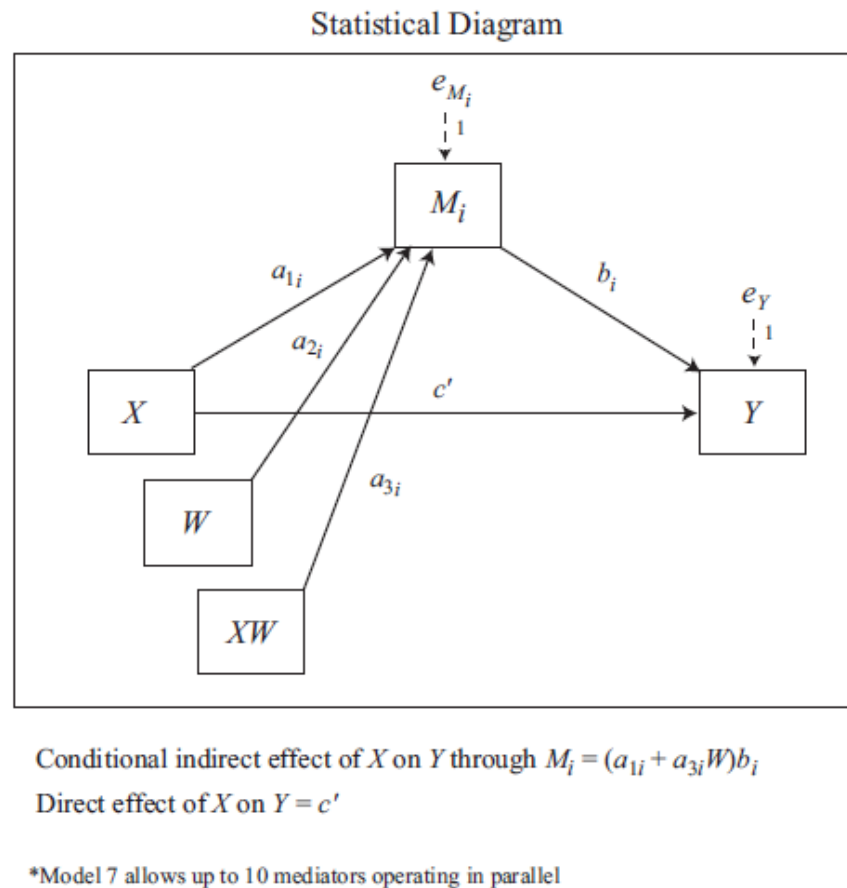*Model 7 allows up to 10 mediators operating in parallel

Figure 15: Statistical Diagram Moderated Mediation Model 7 by Hayes (2013)

7.5 Results of Simple Moderation and Moderated Mediation Analysis

7.5.1 Results of Simple Moderation Analysis

For the moderation analysis, the role of job demands as the moderators in the job and personal resources relationship with subjective wellbeing variables was tested. Moderation was analysed simultaneously with mediation using Model 7 in PROCESS Macro (Hayes, 2013). Firstly, job demands were examined as simple moderators of the relation between job resources and work engagement. Job performance was entered as the dependent variable, work engagement was entered as the mediator, job demands were entered as the moderators and job resources were entered as independent variables. 10,000 bias corrected bootstrap samples were requested. The overall model was significant (F=29.371[7], p=.000), accounting for 12.4% of the overall variance in work engagement (*R2*=.124). The interaction between job resources and job demands was also significant. It was concluded that job demands moderated the relationship of job resources and work engagement.

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[7] Three decimal points were used in this section to avoid misunderstanding between zero and 0.00 due to changes to two decimal points

For the next test of moderation, job performance was entered as the dependent variable, organisational commitment was entered as the mediator, job demands were entered as the moderators and the job resources were entered as independent variables. 10,000 bias corrected bootstrap samples were requested. The overall model was significant (F=37.588, p=.000), accounting for 15.3% of the overall variance in organisational commitment ($R2$=.153). However, the interaction between job resources and job demands was not significant. That is, job demands did not moderate the relationship of job resources and Organisational commitment as shown in Table 41.

To then test the relationship between job resources and negative personal wellbeing, job performance was entered as the dependent variable, negative personal wellbeing was entered as the mediator variable, job demands were entered as the moderators and the job resources were entered as independent variables. 10,000 bias corrected bootstrap samples were requested. The overall model was significant (F=26.248, p=.000), accounting for 11.2% of the overall variance in negative personal wellbeing ($R2$=.112). However, the interaction between job resources and job demands was not significant. That is, job demands were not the moderators between the relationship of job resources and negative personal wellbeing as shown in Table 41.

Table 41: Moderation Analysis Results for the Relationship between Job Resources and

Subjective Wellbeing Constructs

	b	SE	t	p	CI(lower)	CI(Upper)
Work Engagement						
X1-->Y1	-.912	.753	-1.212	.226	-2.390	.567
W --> Y1	-2.493	.613	-4.070	.000	-3.697	-1.290
X1*W-->Y1	.278	.102	2.730	.007	0.078	.478
Organisational Commitment						
X1-->Y2	1.053	.379	2.778	.006	.309	1.798
W --> Y2	-.159	.309	-.513	.608	-.765	.448
X1*W-->Y2	-.056	.051	-1.082	.280	-.156	.045
Negative Personal Wellbeing						
X1-->Y3	.553	.746	.742	.459	-.911	2.018
W --> Y3	-1.124	.607	-1.851	.065	-2.316	.069
X1*W-->Y3	.034	.101	.336	.737	-.164	.232

X1=Job Resources, W=Job Demands, Y1=Work engagement. Y2=Organisational
commitment, Y3=Negative personal wellbeing,

The next step for moderation analysis was done to examine the role of job demands as the moderator for the relationship between personal resources and subjective wellbeing variables. Firstly, job performance was entered as the dependent variable, work engagement was entered as the mediator, job demands were entered as the moderators and the personal resources were entered as independent variables. 10,000 bias corrected bootstrap samples were requested. The overall model was significant (F=65.676, p=.000), accounting for 24% of the overall variance in work engagement (R_2=.240). However, the interaction between personal resources and job demands was not significant. Thus, job demands were not the moderators between the relationship of personal resources and work engagement as shown in Table 42.

For the next test of moderation, job performance was entered as the dependent variable, organisational commitment was entered as the mediator, job demands were entered as the moderators and the personal resources were entered as independent variables. 10,000 bias corrected bootstrap samples were requested. The overall model was significant (F=42.993 p=.000), accounting for 17.1% of the overall variance in Organisational commitment ($R2$=.171). The interaction between personal resources and job demands was also significant which concluded that job demands were the moderators between the relationship

between personal resources and organisational commitment as shown in Table 42.

To test the relationship between personal resources and negative personal wellbeing, job performance was entered as the dependent variable, negative personal wellbeing was entered as the mediator, job demands were entered as the moderators and the personal resources were entered as independent variables. 10,000 bias corrected bootstrap samples were requested. The overall model was significant (F=30.221, p=.000), accounting for 12.7% of the overall variance in negative personal wellbeing (R^2=.127). However, the interaction between personal resources and job demands was not significant. That is, job demands were not the moderators in the relationship between personal resources and negative personal wellbeing as shown in Table 42.

Table 42: Moderation Analysis Results for the Relationship between Personal Resources and Subjective Wellbeing Constructs

	b	SE	t	p	CI(lower)	CI(Upper)
Work Engagement						
X2-->Y1	.767	.455	1.687	.092	-.126	1.660
W --> Y1	-2.089	.895	-2.333	.020	-3.847	-.330
X2*W-->Y1	.100	.058	1.729	.084	-.013	.215

	b	SE	t	p	CI(lower)	CI(Upper)
Organisational Commitment						
X2-->Y2	.940	.243	3.862	.000**	.461	1.417
W --> Y2	.530	.479	1.107	.268	-.410	1.471
X2*W-->Y2	-.064	.031	-2.065	.039**	-.125	-.003
Negative Personal Wellbeing						
X2-->Y3	.815	.480	1.700	.090	-.128	1.757
W --> Y3	-.539	.945	-.570	.569	-2.394	1.316
X2*W-->Y3	-.020	.061	-.329	.743	-.141	.100

X2=Personal Resources, W=Job Demands, Y1=Work engagement. Y2=Organisational commitment, Y3=Negative personal wellbeing

The results for the moderation analysis for this study found that the H1d was partially supported, wherein only the relationship between job resources and work engagement and personal resources with organisational commitment were supported.

Moderation implied an interaction effect, where introducing a moderating variable changes the direction or magnitude of the relationship between two variables (Zainudin, 2015). The moderation effect of job demands on the relationship between job resources and work engagement occurred under the condition when the coefficient from job resources to work engagement is not significant. According to Zainudin (2015) the moderation for current research is

a full moderation in which the introduction of job demands in the interaction between job resources and work engagement has generated a significant result. For the interaction between personal resources, job demands and Organisational commitment, the direct interaction produced a significant result between personal resources and organizational commitment. Thus, only partial moderation was found when job demands is introduced in the interaction and significant results is found.

7.5.2 Moderated Mediation Analysis

The bootstrapping analysis was conducted by generating 10,000 samples using the PROCESS macro for SPSS software. The effects of the moderated mediation were confirmed based on the 95% bias corrected bootstrap confidence interval (CI). The indirect effects are deemed to be significant when the upper and lower CI intervals do not cross zero (Hayes, 2013; Preacher & Hayes, 2008).

Job and personal resources were entered as the independent variables (IV), job demands as the moderator (W), subjective wellbeing as the mediator (M) and job performance as the dependent variable (DV). The tests were done separately for each IV and M.

From the analysis, it was found that the relationship between job resources and job performance via work engagement was significant only for individuals with

moderate to high job demands. Confidence intervals for bootstrapping analysis for job demands did not cross zero, at the moderate level of job demands (β = .079, 95% Conf. Interval: .037 to .127) and at the high level of job demands (β = .129, 95% Conf. Interval: .064 to .199) as shown in Table 43.

Table 43: Conditional Indirect Effects of Job Resources Through Work Engagement at the Values of Job Demands (N=629)

	Job Performance	
Job Demands	β	Confidence level of 95% for confidence intervals
Low JD (4.867)	.036	-.013 to .087
Moderate JD (6.800)	.079	.037 to .127
High JD (.9.000)	.129	.064 to .199

Zero was found in the confidence intervals for the test on organisational commitment and negative personal wellbeing. The indexes for moderated mediation of organisational commitment had 95% confidence intervals between -.016 to .004 and the negative personal wellbeing had 95% confidence intervals between -.010 to .010. The results show no evidence of a conditional indirect effect between the

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variables. Therefore, the association between job resources and job performance through organisational commitment and negative personal wellbeing was not significantly affected when there was an increase or decrease in job demands.

The next analysis of the relationship between personal resources and job performance via job demands and subjective wellbeing constructs, only revealed significant results for the relationship between personal resources and job performance via organisational commitment. Confidence intervals for bootstrapping analysis for job demands did not cross zero at all levels of job demands as shown in Table 44.

Table 44: Conditional Indirect Effects of Personal Resources Through Organisational Commitment at the Values of Job Demands (N=629)

Job Performance		
Job Demands	β	Confidence level of 95% for confidence intervals
Low JD (4.867)	.028	.003 to .058
Moderate JD (6.800)	.023	.002 to .046
High JD (.9.000)	.162	.001 to .035

Zero was found in the confidence intervals for the test on work engagement and negative personal wellbeing. The indexes for moderated mediation for work engagement had 95% confidence intervals between -.001 to .011 whilst those for negative personal wellbeing had 95% confidence intervals between -.003 to .002. The results show no evidence of a conditional indirect effect between the variables. Therefore, the association between job resources and job performance through organisational commitment and negative personal wellbeing was not significantly affected when there was an increase or decrease in job demands.

7.6 Discussion

Hypothesis H1d was partially supported. It was found that the job demands only moderated the relationship between job resources and work engagement. Job demands were not the moderators of the interaction between job resources and organisational commitment; and between job resources and negative personal wellbeing. As for personal resources, job demands were only found to significantly moderate the relationship between personal resources and organisational commitment. However, the interaction between the personal resources and work engagement and negative personal wellbeing were not moderated by job demands.

H1d: Job demands moderate the relationship of job and personal resources with subjective wellbeing – partially supported

Previous studies have shown support for the current findings in which job resources such as social support, job autonomy and job learning are positively associated with work engagement (Bakker, 2011). The interaction model between job resources, job demands and work engagement was found to be significant in the current research. Job resources which consisted of organisational support and job security significantly interacted with job demands to affect work engagement.

The above findings are consistent with studies by Bakker et al., (2007) as well as Bakker and Demerouti (2008b). Further analysis revealed that this was especially the case when the job demands were at moderate and high levels. This is explained by the motivational process of the JD-R which suggests that an engaged worker will mobilize resources to stay engaged over time. When demands are increased they will continue to use such resources in order to remain engaged. A bulk of the research on work stress tends to rely on a one-sided approach of job stress and job motivational process. We often think that stressed employees will become exhausted, demotivated and eventually psychologically withdrawn from their work, thus, affecting their performance. Whereas, satisfied and happy employees will be motivated to keep working and stay engaged at work (Bakker & Demerouti, 2012). Nevertheless, this one-sided approach is no

longer the assumption of the current JD-R theory and its findings. Both job stress and job motivation work together to explain the employees' wellbeing and performance. The findings of the current research demonstrate how the interaction between job resources and work engagement become more salient when job demands are at a moderate and high level, which supports the dual approach of stress and motivational processes. The presence of organisational support and job security that employees have while working in the MPS has helped them cope with the imposed demands of job control, policy and leadership, and has helped them to remain engaged at work. Looking back at the sub-constructs in job demands of this study, it can also be concluded that the support and security of working in the MPS are important to the employees, and thus, enable them to cope with the demands of the job in MPS such as lack of control, poor monitoring policy and poor action to curb low job performance by the leaders in the MPS.

The overall model of job resources, job demands and organisational commitment was significant with 15.3 % of job resources explaining the overall variance in organisational commitment. However, there was no significant moderation for job demands on the interaction between job resources and organisational commitment. This finding is consistent with a study by Bon and Shire (2017),

which found that job demands did not play a significant role in the affective commitment of employees.

Albeit 11.2 % of job resources explained the overall variance in negative personal wellbeing, there was no significant moderating effect of job demands on the relationship between job resources and negative personal wellbeing. This result was not supported by previous research which found that job demands did buffer the effects of job resources on burn out and exhaustion (Bakker et al., 2004). This could be explained by of the fact that health workers in the MPS might differ in terms of their mental preparation for work. The employees in hospital settings are known to be mentally prepared to work in very stressful and exhausting situations, and are thus able to cope with whatever resources and demands that arise. The hypothesis that job resources would have a negative relationship with negative personal wellbeing especially when the demands were high was not found. Further investigation of work context of MPS employees need to be done to explain the findings.

The finding that job demands only moderated the relationship between personal resources and organisational commitment has also supported the previous studies done by Zeb and Nawaz (2016), Myhre (2014) and Wainaina, Iravo and Waititu (2014). Personal resources in this study consisted of self-efficacy, organisational based self-esteem and optimism, religiosity and spirituality. The

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findings suggest that when employees have high self-esteem, self-efficacy, religiosity and spirituality, they are more likely have positive attitudes and positive feelings towards themselves, the people around them, and their workplace. This, in turn, could lead to an increase in their sense of obligation or loyalty to the organisation. In short, increasing job demands do not diminish job resources, but instead serve to bolster employees' inner strength to do their best, thus increasing their commitment at work.

The overall model of interaction between personal resources, job demands and work engagement was significant with 24% of the variance in work engagement explained. Previous studies have shown similar findings in which only the self-efficacy aspect of personal resources significantly explained the variance in the interaction between job demands and work engagement, whereas, other constructs such as optimism and resilience did not (Myhre, 2014). Current findings might also be due to the additional constructs included in personal resources, such spirituality and religiosity which might have diluted the effects of the interaction. As the interaction between personal resources and job demands in predicting work engagement was not significant, this study suggests that job demands do not contribute to the relationship between personal resources and work engagement.

The overall model of interaction between personal resources, job demands and negative personal wellbeing was also significant, with 12.7% in negative personal wellbeing explained. The assumption that personal resources will reduce the effects of negative personal wellbeing is supported, but the interaction between personal resources and job demands in predicting negative personal wellbeing was not significant. Thus, no moderating effect was found. This finding shows that job demands does not contribute to the relationship between personal resources and negative personal wellbeing.

For the moderated mediation analysis, the hypothesis H1h was only partially supported. Only the relationship between job resources and job performance via job demands and work engagement; and the relationship between personal resources and job performance via job demands and organisational commitment were found to be significant.

H1h: Subjective wellbeing mediates the relationship between job demands-resources, personal resources and job performance – partially supported

The significant finding of the relationship between job resources and job performance via job demands and work engagement supports the theoretical model in Figure 2. Job resources predict work engagement and have a particularly positive impact when job demands are at moderate and high levels.

Work engagement in turn, positively impacts upon job performance. According to Demerouti and Bakker (2011b) job resources could buffer the effects of job demands on job strain, thus, reducing any negative effects on the work engagement. This positive relationship will affect how the employees behave at work. As explained by many previous scholars, work engagement is positively related to job performance (Bakker, Albrecht, & Leiter, 2011; Bakker & Xanthopoulou, 2009; Chung & Angeline, 2010; Demorouti & Bakker, 2011; Salanova et al., 2005). Work engagement creates positive employees who are happy, enthusiastic and full of joy and gratitude. Their thoughts and actions will be affected by these positive emotions, which in return will influence their job performance (Bakker, 2011). Positive emotions seem to come with positive attitudes, which could in turn affect their wellbeing. Without having to worry about their health, these engaged employees in MPS could devote their attention to their jobs. Being able to focus on their job helps them to perform better at work. Positive attitudes also go a long way to influence the people around them, thus creating a better and more positive work environment.

As why work engagement did not mediate the relationship when job demands is low could be explained using the challenging view proposed by Schaufeli (2017). Low job demands mean less challenging job, thus decrease effect of the

work engagement and at the same time increase the salient effect of job resources.

The moderated mediation between personal resources and job performance via job demands and organisational commitment is a new finding. Previous researchers only linked separate constructs under personal resources to organisational commitment or to job performance. For example, self-efficacy, self-esteem, religiosity and spirituality were known to be related to organisational commitment, but limited research links personal resources with organisational commitment to predict job performance. The addition of job demands to the link was also a test based on the work engagement model proposed by Bakker (2011).

The significant findings for the moderated mediation between personal resources, organisational commitment and job performance via job demands could help explain organisational behaviours better, especially in hospital settings. Existing personal resources as explained in the previous chapter are the building blocks of one's beliefs in one's ability to act, react and control their surroundings which include self-esteem, self-efficacy and optimism (Xanthopoulou et al., 2007; Tremblay & Messervey, 2011). In this study, personal resources have also included the religiosity and spirituality constructs. Religiosity and spirituality constructs are similar to existing personal resources

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constructs in which they also have the components of beliefs, values and inner strength with the purpose of achieving betterment in life (Valasek (2009) and Koenig, McCullough, & Larson (2000) as cited in Osman-gani, Hashim, and Ismail, 2013). Thus, it is believed that religiosity and spirituality could be combined with existing personal resources to form one unitary construct of personal resources. The current findings show that, indeed this unitary construct of personal resources interacts with job demands and organisational commitment to predict job performance. The results also show that the moderated mediation can be seen at all level of job demands. Thus, it can be concluded that with ample personal resources, job demands in a hospital setting is not a hindrance to job performance, but, could help employees increase their organisational commitment and perform better at work. It might be assumed that their personal resources have helped them to overcome job strain produced by job demands and continue to increase their commitment to the organisation. These findings were consistent with the findings in Study 1 in which participants echoed the belief that people with high religiosity and spirituality are more committed to their work and will strive to perform well at work.

7.7 Chapter Summary and Conclusion

This section has discussed the moderated mediation findings from Study 2 on the relationship between job resources, personal resources, job demands,

subjective wellbeing and job performance. The next section will summarize the findings of all three empirical testings and further explain the theoretical implication, practical implication and the limitation of the research. Subsequently, the conclusion for the current research and recommendations for future research will be presented.

CHAPTER 8 - DISCUSSION, IMPLICATION AND FUTURE RESEARCH

8.0 Chapter Overview

This last chapter begins by summarising the research findings and discussion based on the research objectives, questions and hypotheses outlined in Chapter 1 and Chapter 2. It proceeds to discuss the theoretical and practical implications of the findings, as well as the limitations of the study and recommendations for future research. The chapter then concludes with a summary of the overall contributions of the research.

8.1 Summary of Research Findings

This research comprised two main studies on job performance in the MPS. The studies employed different methods with specific objectives and research questions. The first study (Study 1) used a qualitative approach whilst the second study (Study 2) a quantitative research design. There were two objectives for each study and eleven hypotheses for Study 2.

The first objective of the studies was to investigate the level of job performance in MPS and to explore the source and nature of complaints in relation to job performance from the perspective of the civil servants. The second objective of

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the study was to further investigate the factors affecting public servants' job performance from the civil servant's perspective. The third objective of the studies was to test for the relationship between new JD-R, SWB and job performance using the proposed questionnaires. The fourth objective of the studies was to examine whether spirituality and religiosity are part of personal resources sub-constructs and to test whether spirituality and religiosity directly affect job performance. Previously, issues of poor job performance in the MPS were reported in newspapers and in the yearly reports of Malaysia's Public Complaints Bureau. There have been few studies and limited empirical data which discuss this subject matter, those that do exist were conducted based on customers' views. Therefore, this research attempted to explore these issues from a different perspective which is from the civil servants' viewpoint.

8.1.1 First Objective – Level of Job Performance and the Main Cause of the Complaints in MPS

Study 1 found that job performance in the MPS was at a moderate and acceptable level according to the participants in the study. Most participants were very enthusiastic about their work and workplace. They were satisfied with their job performance and their colleagues' job performance. However, they did acknowledge that, some employees did not perform well due to several problems such as attitudes and work overload. According to these participants, these

problematic employees could still be given support to overcome the problems that affect their performance. They also believed that the complaints on poor job performance by the Malaysian Public Complaints Bureau and the newspapers were exaggerated based on isolated incidents.

8.1.2 Second Objective – Factors That Affecting Public Service Performance in MPS

Study 1 has also found six factors that could affect public service performance in MPS which were the 1) work overload, 2) civil servants' attitude, 3) leadership and monitoring, 4) religious and spiritual belief, 5) training, knowledge and experiences and 6) personal issues.

Almost all participants in this research agreed that workload is the main factor that can contribute to poor performance in MPS hospitals. The work overload issues were mainly raised by the nurses, medical assistants, attendants and doctors in this research. However, according to the participants work overload is not always a hindrance to job performance. This is because with strong sense of responsibility and belief that their work is part of their religious and spiritual purpose the participants believe that they will be able to cope with the workload and did their works according to their job specifications. The key to high job performance according to the participants is the positive attitude by having the

sense of responsibility and sincerity. Apart from spiritual and religious beliefs as well as the positive attitudes, the presence of good monitoring policy and concerned leaders could also be the factors that could enhance job performance in MPS. The participants expect the leaders to monitor their work and behaviour, because for them, close supervision means the leaders care and want them to perform. The leaders' persuasive communication, supportive and considerate attitude will encourage positive attitude of the employees.

The leadership and monitoring factors found in Study 1 were then incorporated as items for the Policy and Leadership sub-construct in the JDRS questionnaires. The religiosity and spirituality factors were also added to the personal resources constructs to explore the connection between religiosity and spirituality with the existing personal resources of self-efficacy, organisational based self-esteem and optimism as well as to test for their relationship with job performance.

8.1.3 Third and Fourth Objectives – Relationship Between Items and Constructs Under the Proposed Theoretical Model of JD-R in MPS Setting and the Role of Spirituality and Religiosity as the New Components of Personal Resources Under JD-R Model

Study 2 was then run using the new items and constructs together with other existing instruments to test the theoretical model in Figure 2. The theoretical

model for the study was adapted from Bakker and Demerouti, (2008b). Bakker and Demerouti's (2008b) model focuses on the relationship between JD-R and job performance with work engagement as the mediator. However, the current study focused on the relationship between JD-R and job performance with work engagement, organisational commitment and negative personal wellbeing (SWB) as the mediators. The model also included job demands as the moderator of the relationship between job resources and personal resources with SWB. SEM AMOS was used to test the model. After several analyses were done on the measurement model using SEM AMOS, it was found that the model had good fit indices, good AVE and CR. Thus, it was concluded that the theoretical model in Figure 2 with the exception of few of the constructs, was fit, valid and reliable to test for the hypotheses in Study 2. The items and constructs that were included in the fit model are in table 45.

Table 45: Final Constructs Included in Study 2

Constructs	Sub-Constructs	Number of Items
Job Resources	Organisational Support	3
	Job Security	3
Personal Resources	Existing Personal Resources	5
	Religiosity	4
	Spirituality	6

Constructs	Sub-Constructs	Number of Items
Job Demands	Work Control	3
	Policy and Leadership	5
Subjective Wellbeing	Work Engagement	7
	Organisational Commitment	3
	Negative Personal Wellbeing	10
Job Performance	Task Performance	5
	Contextual Performance	3
	Adaptive Performance	3

There were eleven hypotheses proposed for Study 2. These hypotheses were proposed to test for; 1) the relationship between job resources, personal resources and job demands with subjective wellbeing; 2) the relationship between job resources, personal resources, job demands and subjective wellbeing with job performance; 3) the relationship between religiosity and spirituality with personal resources; and 4) the moderating and mediating effects. These tests were carried out in two phases. The first phase tested the direct relationship of the demands/resources with subjective wellbeing and job performance. The second phase studied the moderating and mediating effects.

In the first phase, the researcher ran a structural model for all constructs in order to test for the relationship of the constructs with subjective wellbeing and job performance. Whereas, to test for the relationship between religiosity and spirituality with personal resources, another structural model for personal resources and job performance was used. Nine hypotheses were tested in the first phase of Study 2 and they revealed several significant findings. H1a hypothesized that job resources are significantly related to subjective wellbeing and found that the job resources were significantly related to all SWB constructs; work engagement, organisational commitment and negative personal wellbeing. This finding was supported by previous studies done by Bakker (2011); Bakker and Demerouti, (2007b), Bakker, Demerouti, and Euwema, (2005), Bakker, Demerouti and Schaufeli, 2003; Crawford, LePine, and Rich, (2010), Schaufeli and Bakker, (2004) and Schaufeli (2017).

For hypothesis H1b, that proposed personal resources are significantly related to SWB, it was also found that personal resources were significantly related to all SWB constructs; work engagement, organisational commitment and negative personal wellbeing. The findings are similar to Myhre (2014), Wainaina et al. (2014) and Zeb and Nawaz (2016) studies on the personal resources constructs such as self-efficacy and spirituality. However, the findings were differed from Karatepe and Olugbade (2009), Slöetjes (2014) and Xanthopoulou et al. (2009)

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studies that found the relationship between personal resources with work engagement and negative personal wellbeing. The inclusion of spirituality and religiosity as new sub-constructs for personal resources might have weakened the effects on work engagement and negative personal wellbeing.

The analysis also supported the third hypothesis H1c that job demands were significantly related to all constructs of subjective wellbeing. Studies done by Field (2011) and Montgomery, Spanu, Baban, and Panagopoulou (2015) supported the current study that job demands such as workload and emotional demands were found related to work engagement and organisational commitment. In the present research, job demands were also found to be negatively related to negative personal wellbeing, which indicated that higher demands do not necessarily affect the wellbeing of employees. For employees with higher job demands and abundant job resources, the negative effects of demands might be buffered by these resources and the employees would not have any problem facing the demands (Crawford et al., 2010).

For hypotheses H1e, it was proposed that job and personal resources are significantly related to job performance, however, it was only personal resources that were found to be positively related to job performance and not job resources. The finding that there is a significant relationship between personal resources and job performance aligned with the previous studies reported by Affeldt and

MacDonald (2010), Elci et al., (2011), Karakas (2009), Osman-gani et al., (2013) and Zahrah et al., (2016). By having high personal resources, the employees would have a sense of responsibility and self-will to do their jobs, thus, would give their best performance at work.

Hypothesis H1f was supported in which job demands are negatively related to job performance. The finding is aligned with few studies that found negative relationship between job demands or work stressors with job performance as reported by Lu et al., (2017), LePine et al., (2005) and Beehr et al., (2000). This is also consistent with Study 1 findings that job demands may lead poor performance. Demands such as lack of control on work and workspace, poor monitoring policy and poor action to curb low job performer by the leaders in the MPS will negatively affect job performance. Good performers would feel demotivated and their performance would also be affected in the long run. This is due to the perception that they have to work hard, and yet their co-workers who are not performing, continue to be in the office and not working as expected.

Hypothesis H1g was rejected in which all three SWB constructs were found not related to job performance. The findings on the relationship between work engagement and job performance are differed from several studies done by Chung and Angeline's (2010), Reijseger, Schaufeli, Peeters, and Taris (2010), Alessandri, Borgogni, Schaufeli, Caprara, and Consiglio (2015), Halbesleben

and Wheeler (2008), Salanova, Agut, and Peiró (2005) and Zahrah et al., (2017). Present research also found that negative personal wellbeing construct in this research did not related directly to job performance which is differed from previous research that found negative relationship between poor wellbeing and job performance; and employees with poor wellbeing are unlikely to give satisfactory performance (Alvi, 2017; Baptiste, 2008; Bryson, Forth, & Stokes, 2015).

Hypotheses 2a, 2b and 2c were all supported in which religiosity and spirituality were found to be positively related to existing personal resources constructs; and religiosity and spirituality are positively related to job performance. The attributes found in persons with high personal resources could also be found in those who have high spiritual and religious beliefs. Personal resources sub-constructs, self-efficacy, organisational based self-esteem, religiosity and spirituality are connected based on individuals' positive belief that they are capable of facing challenges in life. Thus, it is justifiable that spirituality and religiosity are found to be related to existing personal resources construct.

Both findings that religiosity and spirituality are related to job performance, are also consistent with other studies reported by Adams (2008), Karakas (2009), Neyrinck et al. (2006), Osman-gani et al. (2013), as well as Biberman and Tischler (2008) and McGee and Delbecq's (2003) as cited in Osman-gani et al.

(2010) Zahrah et al. (2016). These findings are also similar to findings in Study 1 of the current research. The participants in Study 1 agreed that religiosity and spirituality do affect job performance of civil servants in MPS hospitals.

For the second phase of Study 2, there were two hypotheses proposed, H1d: Job demands moderate the relationship of job and personal resources with subjective wellbeing and H1h: Subjective wellbeing mediates the relationship between job demands-resources, personal resources and job performance. The second phase test was done using PROCESS Macro and not SEM AMOS. The proposed procedure by Baron and Kenny (1986) to test for moderation and mediation using SEM is a popular approach. However, recent literature has identified several disadvantages with the procedures, such as lack of power in testing mediation and the need to test the hypotheses separately (Hayes, 2013; Hayes & Scharkow, 2013; Rucker, Preacher, Tomala & Petty, 2011).

For the second phase of Study 2, the hypothesis that job demands moderate the relationship of job and personal resources with subjective wellbeing was partially supported. The simple moderation analysis only found that job demands moderate the relationship between job resources and work engagement; and job demands moderate the relationship between personal resources and organisational commitment.

These findings were supported by Bakker, (2011) that found job resources such as social support, job autonomy and job learning were positively associated with work engagement. Job resources which consisted of organisational support and job security in the current study significantly interacted with job demands to affect work engagement.

As for the moderation effect of job demands on the relationship between personal resources and organisational commitment, it was consistent with Myhre (2014) finding that only the self-efficacy aspect of personal resources significantly explained the variance in the interaction between job demands and work engagement; whereas, other constructs such as optimism and resilience did not. Current findings might also be due to the additional constructs included in personal resources, such as spirituality and religiosity which might have diluted the effects of the interaction.

For the moderated mediation analysis, the proposed hypothesis that subjective wellbeing mediates the relationship between job demands-resources, personal resources and job performance was also partially supported in which the results were only significant for the relationship between job resources and job performance via job demands and work engagement and also between personal resources and job performance via job demands and organisational commitment. The findings seem consistent throughout the study in which job resources always

related to work engagement and personal resources with organisational commitment.

As explained by many previous scholars, work engagement is positively related to job performance (Bakker, Albrecht, & Leiter, 2011; Bakker & Xanthopoulou, 2009; Chung & Angeline, 2010; Demorouti & Bakker, 2011; Salanova et al., 2005). The current research also supported previous scholars and found that job resources predict work engagement and have a particularly positive impact when job demands are at the moderate and high levels, and in turn, work engagement positively impacts upon job performance. Job resources could buffer the effects of job demands on job strain, thus, reducing any negative effects on the work engagement.

Self-esteem, self-efficacy, religiosity and spirituality were known to be related to organisational commitment, but very few studies link personal resources with organisational commitment to predict job performance. The addition of job demands to the link was also a test based on the work engagement model proposed by Bakker (2011). The significant findings of the moderated mediation relationship between personal resources and job performance via job demands and organisational commitment is a new finding that could help in explaining the organisational behaviours especially in hospital settings. Existing personal resources are the building blocks of one's beliefs in one's ability to act, react and

control their surroundings which include self-esteem, self-efficacy and optimism (Xanthopoulou et al., 2007; Tremblay & Messervey, 2011). Religiosity and spirituality constructs are similar to existing personal resources constructs in which, they also have the components of beliefs, values and inner strength with the purpose of achieving betterment in life (Valasek (2009) and Koenig, McCullough, & Larson (2000) as cited in Osman-gani, Hashim, and Ismail, 2013). Thus, the inclusion of spirituality and religiosity to the existing personal resources of self-efficacy and organisational based self-esteem has formed a unitary construct of personal resources that interacted well with job demands and organisational commitment to predict job performance. These findings were consistent with the findings in Study 1 in which participants echoed the belief that people with high religiosity and spirituality are more committed to their work and will strive to perform well at work.

8.2 Theoretical and Practical Implication

This research provided several important implications for theory. First, the job demands-resources and subjective wellbeing literature was expanded through this research, which investigated the job demands-resources, subjective wellbeing and job performance within the organisational context in a non-western country, namely Malaysia. Although studies regarding the roles of job demands-resources and subjective wellbeing are emerging in the literature, it

should not be assumed that findings derived using the western data could be generalised to another region of the world such as Asian countries, particularly Malaysia.

Secondly, these findings could contribute to public knowledge and understanding of job performance in the MPS from a different perspective. Previously, public complaints about job performance in the MPS were publicised through newspaper and reports from Malaysian Public Complaints Bureau and the complaints were solely based on the perception of the customers that felt they were mistreated and did not get the services that they sought. Study 1 of the research was able to break this trend by exploring a hitherto unexamined perspective which is that of civil servants in the MPS. Their perceptions could assist the management of MPS to work on the factors that have been found and propose job performance enhancement programs that are tailored to the MPS especially to the hospital employees.

Thirdly, current study has expanded the methodology of JD-R study in Malaysia setting by using a mixed method approach. The data collected in Study 1 of present research is a new information gather through interview session. Study 1 has also able to find factors that affect job performance in MPS. Items were developed from the factor and incorporated in JDRS as policy and leadership

constructs. The model run using SEM AMOS showed that the factor policy and leadership indeed one of the demands in MPS workplace.

The following sub-section will discuss the overall theoretical and practical findings of this research and the areas that can be expanded for future research.

8.2.1 Instruments of Study – JDRS and Personal Resources

This research relied on existing instruments and adapted some instruments during the testing phase of Study 2. The JDRS by Jackson and Rothmann (2005), originally has five dimensions with two factors: job demands and job resources. Job demands were represented by the work overload items. However, for this research, the sub-constructs of work environment were added to the JDRS in which three sub-constructs were proposed; the general work environment, work control and work privacy. The job demands constructs were also separated into two which were called work overload and emotional demands. Policy and Leadership sub-construct was added from the findings in the first study to suit the MPS. These sub-constructs were all known to be related to subjective wellbeing and job performance (Abou-Moghli, 2015; Beh, 2014; Bakker, 2011; Bakker & Demerouti, 2007; Bakker & Demerouti, 2012; Chen, 2007; Chung & Angeline, 2010; Folkman et al., 1986; Gilboa et al., 2008; Hamzah, Othman, Hashim, & Abd, 2013; Vischer, 2007).

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As for personal resources, the constructs were also expanded by adding religiosity and spirituality to existing sub-constructs of self-efficacy, organisational based self-esteem and optimism to test for religiosity and spirituality as personal resources. The sub-constructs of religiosity and spirituality were also added based on the findings of previous scholars that had shown religiosity and spirituality to be predictors of subjective wellbeing and job performance (Campbell & Hwa, 2014; Karakas, 2009; Oler's, 2004; Osman-gani, Hashim, & Ismail, 2013; Rahim & Omar, 2017; Rani, Abidin, & Ab Hamid, 2013; Zahrah, Abdul Hamid, Abdul Rani, & Mustafa Kamil, 2016; Zahrah, Abdul Hamid, Abdul Rani, & Mustafa Kamil, 2017)

8.2.2 Adaptation Model of Relationship between JD-R, Subjective Wellbeing and Job Performance

Most existing studies have examined the motivational process of JD-R within job resources, work engagement and organisational commitment contexts and they have neglected the role of negative personal wellbeing. Previous works have also focused on the inner self of personal resources, which are self-efficacy, organisational based self-esteem and optimism. Very limited studies were done on the role of spirituality and religiosity as personal resources. Thus, there is a gap in the literature in the international and Malaysian workplace context. Based on a model proposed by Bakker and Demerouti (2008b) that tests the roles of

work engagement in the relationship between JDR and job performance, the current research has expanded the model by adding more constructs as the mediators and sub-constructs for personal resources. The organisational commitment and negative personal wellbeing were grouped together with work engagement as the mediators called subjective wellbeing (SWB). The JD-R construct was also added with new items found in Study 1 and an additional sub-construct of work environment. These were done by taking into account the literature reviews that proposed all the sub-constructs relationship with job performance. The constructs of personal resources were expanded by adding religiosity and spirituality to existing sub-constructs of self-efficacy, organisational based self-esteem and optimism. Spirituality and religiosity were added to existing personal resources after taking into consideration the landscape of MPS that have been using religious values and spiritual belief in performance enhancement program in MPS (Jabatan Penerangan Malaysia, 2016)

All these constructs were tested together in one model and it was found that the model was fit, valid and able to test the hypotheses. The initial measurement model which was fit consisted of all the proposed constructs. However, few constructs need to be deleted to get the fit, valid and reliable measurement and structural model to test for the hypotheses as shown in Figure 12 and 13. Job demands have two sub-constructs which are the work control sub-construct and

policy and leadership sub-construct. Job resources have two sub-constructs of organisational support and job security. Personal resources have three sub-constructs: the existing personal resources (with only organisational based self-esteem and self-efficacy items), religiosity and spirituality. Job performance has three sub-constructs of task performance, contextual performance and adaptive performance. These findings show that even though some constructs in the instruments used were theoretically established, validated and widely used in other studies, they did not correspond well with a Malaysian sample. One plausible explanation might be because the participants in this research consisted of healthcare employees, whereas in other studies the participants consisted of various types of employees drawn from engineering, hotel and ICT establishments. Hence, a sample-specific effect in the present research may have been at play. Furthermore, with different cultural and religious backgrounds of the participants in the current research might have affected the results differently.

On the other hand, the adapted sub-constructs were found to have corresponded well in the study. For example, the items for policy and leadership were created based on Study 1 and they worked well with work control to form the construct for job demands. Job security was also added as job resources in the study, whereas prior studies used job insecurity as job demands. The results show that these two sub-constructs: the policy and leadership, and the job security are

suitable to be used in a similar study of JD-R in Malaysia. The religiosity and spirituality items have also corresponded well with organisational based self-esteem and self-efficacy items to form a solid personal resources construct. The personal resources construct was tailored to the Malaysian sample to test for JD-R, subjective wellbeing and job performance relationship. Figure 16 is the final model with validated constructs of the relationship between JD-R, SWB and job performance in Malaysian Public Service.
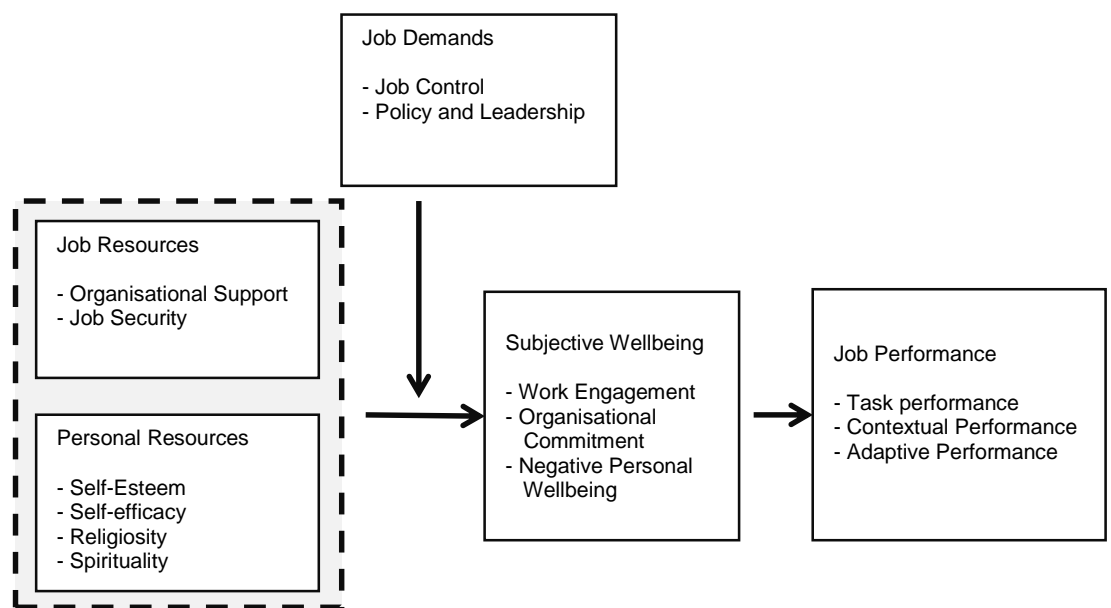

Figure 16: Model of the Relationship between JD-R, Subjective Wellbeing and Job Performance in Malaysian Public Service

8.2.3 Relationship among Constructs

The present research revealed that in terms of direct relationships, only personal resources and job demands were found to be significantly related to job performance, whereas, job resources and all SWB constructs were not significantly related to job performance. In addition to the direct relationships, the moderated mediation analyses have found supportive results for the relationship of job resources with work engagement and personal resources with organisational commitment. Job demands moderated the relationship between job resources and work engagement when job demands were at moderate and high levels. The findings suggest that, the relationship between job resources and work engagement were more salient with increased job demands. There was no relationship between job resources and work engagement when the job demands were low. This is explained by the motivational process of the JD-R which suggests that an engaged worker will mobilize resources to stay engaged over time. When demands are increased they will continue to use such resources in order to remain engaged (Bakker & Demerouti (2008b);Bakker et al., (2007)) and when demands are decreased the engagement is also not salient.

Job demands were found to moderate the relationship between personal resources and organisational commitment. Because significant moderating effects were shown at all levels of the job demands, it was concluded that the

presence of the demands themselves, has helped to increase the relationship between personal resources and organisational commitment regardless of whether the demands were low, moderate or high. Personal resources have helped them to overcome job strain produced by job demands and continue to increase their commitment to the organisation. The finding could be explained by the underlying process of health impairment and motivation, in which similar to studies done on job resources, the personal resources were also found to be able to buffer the effects of job demands on job strain, thus reducing any negative effects on the organisational behaviour (Demerouti & Bakker, 2011b; Xanthopoulou et al. (2007); Xanthopoulou, Bakker, Demerouti, & Schaufeli, 2009b).

For the moderated mediation relationship as proposed in Figure 2, it was found that the relationship between job resources and job performance via work engagement is significant only for individuals with moderate and high job demands. The findings explained that, job resources could predict work engagement which in turn affects the job performance of the employees. The mediating effects of work engagement were more salient when job demands were at moderate and high levels. This is explained by the motivational process of the JD-R which suggests that an engaged worker will use all the resources to stay engaged over time. When demands are increased they will continue to use

such resources in order to remain engaged. These engaged employees subsequently performed better at work.

The next analysis of moderated mediation was conducted on the relationship between personal resources and job performance via job demands and subjective wellbeing. The significant result was found only for the relationship between personal resources and job performance via organisational commitment at all levels of demand. These findings revealed that demands were no longer the hindrance of the relationship if the employees have ample and suitable resources. With high organisational commitment, the employees would increase their job performance.

Throughout the findings, it was consistent that job resources were related to work engagement and personal resources were related to organisational commitment. This might be due to the fact that the constructs used as job resources and personal resources in the research were well known to be related to work engagement and organisational commitment respectively. For example, personal resources of self-efficacy and spirituality were known to be related to organisational commitment to predict job performance as studied by Garg (2017), Zeb and Nawaz (2016) and Wainaina et al., (2014) and job resource of organisational support was related to work engagement as found by Field (2011).

Thus, it was understandable that these findings were consistent throughout all tests in Study 2.

8.2.4 Roles of JD-R and Subjective Wellbeing in MPS Job Performance

It was found in this research that job demands, resources and subjective wellbeing played a role in MPS job performance. Although similar JD-R constructs from previous studies were used in the present research, it was found that only parts of the constructs were found to be significantly related to subjective wellbeing and job performance. It was also found that, for subjective wellbeing constructs, only work engagement and organisational commitment worked well with job resources and personal resources to predict job performance. Job demands had also played their roles in the proposed theoretical model in Figure 2, in which, job demands moderated the relationship between job and personal resources with job performance via work engagement and organisational commitment respectively. Religiosity and spirituality have also worked well as personal resources constructs to predict job performance. The Malaysian sample has contributed to these differences of findings from previous JD-R studies and expanded the theoretical model to test for JD-R and job performance. Taking the differences into consideration, it is reasonable to claim that this research provided a new avenue of research surrounding JD-R,

subjective wellbeing and job performance, which extends beyond the reported scope of previous studies.

Current research findings could assist the management of the MPS to propose tailored job performance enhancement programs for healthcare employees. For instance, job resources of organisational support and job security in this study were found positively related to work engagement, thus, the management could provide more supportive environment at the hospitals and strengthen the benefits of working in MPS. For the healthcare employees, demands at work would not be a hindrance so long as they have a supportive environment.

To enhance commitment at work, it would be worthwhile for the hospital administrations in the MPS to encourage and enhance the level of self-esteem and self-efficacy of their employees. It is important that they develop skills that boost their self-esteem and self-efficacy (personal resources) to become more positive, resilient and capable to handle and protect themselves from negative effects of job demands at the workplace. To enhance the employees' belief and inner strength, MPS management could also instil the positive values through encouraging the employees to adhere to their spiritual and religious beliefs. By doing so, the employees might not only have positive attitude at work, but also would become a good person outside from their workplace. This is because people will normally follow the spiritual and religious beliefs as a way of life.

One of the job demands found in the current research is job control, thus, it would be best for the policy makers in the MPS to look in depth at the different aspects of control at work. From the current research, it seems that the participants felt they had little control over their work and workspace. This might be due to the shift-rotation system in the hospitals does not give employees ample opportunities for control. The elements of control itself could be explored further by the hospital management. As mentioned by participants in Study 1, they believed that leadership plays important roles in ensuring good performance, thus, the policy makers in MPS could revisit their leadership policy and development program, to develop a suitable leadership development program and enhance the monitoring aspect at work.

8.3 Limitation of the Research

This research is not without its limitations. First, this research is subject to socially desirable responses, or the desire to respond in a more acceptable or favourably way in accordance with the social norms and standards (Kim & Kim, 2016; Zerbe & Paulhus, 1987). Investigating one's job performance and wellbeing could be considered as a sensitive issue and thus could raise the issue of such bias. For instance, employees might be reporting the positive factors more than negative factors. Employees may view their performance better than other people view theirs. The biasness in reporting may somehow affected the

findings of a research. However, for the current research, preventive measures were taken to minimize the social desirability bias such as ensuring confidentiality and anonymity of the participants' responses, using reversed scored items in the questionnaires and employing indirect questioning method (Fisher, 1993; Podsakoff, MacKenzie, Lee, & Podsakoff, 2003)

Secondly, most of the instruments used were previously designed and validated in Western and African countries (Jackson & Rothmann, 2005). Therefore, it is possible that there would have been some potential setbacks when applying this measure to the Asian sample drawn from Malaysia. However, both languages, English and Bahasa Melayu were used to carefully adapt and tailor the sample from this study to accommodate this concern. Furthermore, employees in the selected hospitals are mostly well versed in English and they use English in their daily work communication.

Thirdly, this research is the first attempt to include new variables in personal resources constructs and new questionnaires to the JD-R instruments. Thus, the possibility that the new items could weaken the interaction effects existed. However, attempts were made to use existing and validated items in the personal resources constructs and to create the formatting of the new questions similar to those in the JDRS instrument provided by Jackson and Rothmann (2005).

Finally, the sample was chosen based on the convenience of the researcher and participant's locations, thereby increasing the possibilities of unbalance samples' categories. However, attempts were made to choose the most unbiased and balanced samples possible from each hospital. This research is best generalized to Malaysian hospitals or similar hospital settings only.

8.4 Suggestions for Future Research

Realizing that this may be the first empirical research to use the proposed model in Malaysia, it is suggested that future research replicates similar methods used in this research to other sample from other sectors or cultures to confirm a robust conclusion of the findings. It is also suggested that the mixed method approach to be expanded to include an additional qualitative study to collect the participants' post-perception about the findings.

This research did not focus on gender, race and the types of jobs of the participants, thus, it is suggested that future research could focus on these demographic features of the participants to expand the study of JD-R, subjective wellbeing and job performance in hospital settings. Since more than 70% of the participants in this research were females, it is suggested that the effect of gender differences on resources and demands could be explored in the future. It is also understandable that different job types might have different resources and

demands that could affect job performance, thus, future research could explore and focus on specific job types in the hospitals such as the nurses and medical assistants that are known to be the backbone of hospital employees.

As the current research also found additional sub-constructs for job demands and personal resources, it would be best that future research explores these sub-constructs. Among the findings in this research was that spirituality and religiosity are significantly related to personal resources. Therefore, future research could steer towards investigating the strength of spiritual beliefs and religiosity as resources that interact with subjective wellbeing to affect job performance. Policy and leadership were also identified as job demands in MPS, thus, future research could focus of the criterions of the leaders that could act as the demands in healthcare settings. The weakness in the monitoring policies was also reported by participants in Study 1. Thus, it is suggested that future research could look in-depth on work monitoring aspects in the MPS by using qualitative approach study.

8.5 Conclusions

This research successfully gathered the empirical data to fully investigate and further understand the issue of job performance in the MPS. The data found in Study 1 was classified as factors to predict job performance in MPS and has also

helped the researcher to add items to existing JD-R instrument (JDRS). From there, Study 2 was done and the proposed theoretical model of this research was supported and the model was found fit, valid and reliable to test for the relationship between, JD-R, subjective wellbeing and job performance in the MPS.

SEM AMOS was used to test for the best fit model and it produced suitable constructs under the JD-R which can be used in similar research. By knowing the constructs for the JD-R, subjective wellbeing and job performance, one will be able to extract them to find the most suitable job performance enhancement programs in the MPS. For example, the job demands sub-construct of policy and leadership was related to how the organisation prepares job performance programmes and how the leaders in the organisation managed the employees' job performance. It seems that the participants in Study 2 wanted the leaders to be firm and closely monitor the employees' performance. Similar to Study 1, there were few participants who opined that the leaders in the MPS did not monitor and did not properly take action against problematic employees. Thus, the weakness of the policy and the leaders in the MPS inadvertently became demands for civil servants. They believe that they have to work in an environment that does not punish the wrongdoings of some workers and they have to work harder because of the few co-workers that have performed poorly.

However, these job demands, will only became a hindrance if there is no job resource provided at work. The study has shown that, job resources relationship with work engagement and job performance will be more salient when the demands are moderate or high. The employees will use up their resources to face all the demands. With organisational support such as up-to-date information and clear decision-making processes as well as security of the job, the employees were able to reduce the effect of job demands and keep increasing the work engagement. Thus, the MPS should ensure that employees are given good information on important issues in the organisation and made aware of the decisions making processes. With this policy in place, the civil servants might be able to maintain their engagement and increase their performance even with high demands at work.

The incorporation of the religiosity and spirituality in the personal resources construct has also gained positive results with the findings on the relationship between personal resources, subjective wellbeing and job performance. The MPS can now proposed to include more religiosity and spirituality aspects at work to enhance the commitment at work which in turn could increase job performance. The employees could also be enlightened about the benefits of possessing high self-esteem, high self-efficacy, high religiosity and high spiritual beliefs towards enhancing one's performance at work.

It is also hoped that the current research findings could help the management in the MPS hospitals to better understand the roles of those job resources, personal resources, job demands and subjective wellbeing in enhancing job performance of hospital employees. In addition to that, it is also anticipated that the findings would help the policy makers in MPS to propose better and tailored job performance enhancement programs in the MPS, specifically in hospital settings.

Overall, the current study has met all the research objectives and answered all the questions set out in Chapter 2. The main contributions to the research literature of JD-R, subjective wellbeing and job performance have been clearly presented. The theoretical model for JD-R, subjective wellbeing and job performance has also been propounded with specific sub-constructs that were tailored to the MPS setting. It is hoped that this thesis would provide valuable information about the roles of JD-R and subjective wellbeing in predicting job performance and the suggestions would encourage future research.

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APPENDICES

Appendix 1- Interview Protocol Form (English)

Interview Protocol Form

Hospital: _____

Department/Unit: _____

Interviewee (Title and Name): _____

Interview Section Used:

_____ A: Interviewee Background

_____ B: Job Performance in Public Service

_____ C: Job Demands and Resources at work

_____ D: Subjective Wellbeing

_____ E: Demographics (no specific questions)

Other Topics Discussed:
_____
_____

Documents Obtained:
_____
_____
_____

Post Interview Comments or Leads:

_____

Job Demands-Resources and Performance Interview

Introductory Protocol

To facilitate my note-taking, I would like to audio tape our conversations today. Please sign the release form. For your information, only researcher on the project will be privy to the tapes and will be used only for my PhD study purposes. Essentially, this document states that: (1) all information will be held confidential, (2) your participation is voluntary and you may stop at any time if you feel uncomfortable, and (3) I do not intend to inflict any harm. Thank you for your agreeing to participate.

I have planned this interview to last no longer than two hours. During this time, there are several questions that I would like to cover. If time begins to run short, it may be necessary to interrupt you in order to push ahead and complete this line of questioning.

Introduction

You have been selected to speak with me today because you have been identified as someone who has a great deal to share about working as public servant in hospital setting. My research project as a whole, focuses on the job performance in public service, with particular interest in understanding how job performance can be enhance or hindrance by factors we will discuss later.

A. Interviewee Background

How long have you been:

_____ in your present position?

_____ at this hospital?

What is your highest education?

_____

What is your field of study?

1. Briefly describe your role in your unit/department.

2. What motivates you to work in public service and to be specific in hospital?

B. Job Performance in Public Service

1. How do you describe job performance in public service?

Probe: Do you agree with current view of job performance in public service?

2. What are the things that you think can enhance job performance of public servants in Hospital setting?

Next questions will depend on the answer for question 2.

C. Job Demands and Job Resources

Note: probe participants to get the idea of components of resources and demands.

1. What are the things that you think act as job resource and demands?

2. What resources are available for you to improve your performance at work?

3. What are the demands that you have to face at work?

4. How the demands affect your performance at work?

5. Is there other aspects or factors that you can consider as resources aside from job? (probe to get opinion on personal resources)

6. In a situation with high demands (specified by the participants) that you mention just now, what are the things that help you to cope with the demands? (probe to get information on subjective wellbeing roles).

D. <u>Subjective Wellbeing</u>

7. How do you see yourself as a worker in this hospital?

 (probe to get opinion on work engagement and organisational commitment)

8. What are the things that make you strive for excellent despite all the demands at your workplace?

9. How do you see your wellness? Are there times when you think you lost hope or do not feel very well physically, emotionally or mentally?

(probe to get information on participants' level of personal wellbeing)

E. <u>Demographics</u>

Name:

Age:

Gender:

Tenure:

Post Interview Comments and/or Observations:

_____

_____

_____

Appendix 2 - Sample of Interview Transcript in Native Language (Malay)

Interview Transcript Hospital P

Interviewer: Student

Interviewee: Respondent 2

Interview Setting: Interview conducted in office of Matron Z

Name: Matron Z-Nurse

Date: 3 March 2015   Duration:

Subject	Conversation
Interviewer (I)	Terlebih dahulu, terima kasihlah sebab sudi untuk diinterview. Saya punya kajian ni ada 3 peringkat.
Interviewee (W)	Hmmm…
I	Saya interview ni dia membantu saya senaraikan maklumat yang saya nak tu, next time dari maklumat yang matron bagi tu saya buat soal selidik. Soal selidik tu saya bagilah kat semua orang kan…yang ketiga tu datang balik, interview jugak…mungkin orang yang sama, mungkin orang lain kan.
W	Hmmm
I	Dia berkaitan dengan job performancelah, prestasi kerja dalam perkhidmatan awam, sebab saya buat ni sebab saya pun. Kita perkhidmatan awam kan, so jadi biar dia berguna sikitlah…thesis tu kan…
W	Hmmm…
I	So, matron berapa lama dah bertugas?
W	Emmm…31…

I	31 tahun?
W	Haah
I	Tahun bila tu
W	Tahun 83 baru dapat…83, 2003, err 30 nak masuk 31…
I	83, 2003, ha yelah dekat 31 tahun dah…
W	Hmmm
I	Sekarang ni gred matron berapa?
W	Gred U 36.
I	Bil Dilantik tu U berapa?
W	Hmmm? U29
I	Ok, So…kalau sebagai permulaan, untuk kita nak…. matron boleh cerita permulaan kerja tu ke mana matron diletakkan, sikit sikitlah setiap tempat tu dan bidang tugas wad…sebab saya nak fahamkan bidang tugas jururawat.
W	Ok. Mula mula masa qualified tu, saya ditempatkan di hospital mentakab la…
I	Mentakab?
W	Ha…ini hosp barulah, itu hospital lama. Lepas tu saya bertugas, mula mula bertugas masa tu di wad err masa tu wad kenanga 7, wad 7 iaitu wad lelaki oto, otopedik.
I	Hmm
W	Pastu selama 3 tahun kerja kat situ, pastu transfer ke dipindahkan ke wad err…wad… kenanga 3, wad kanak kanak. Wad Ped dan kanak kanak la.
I	Ingatkan nama apa tadi…

W	Puas nak ingatkan apa. Pastu pergi ke wad medical, wad medical perempuan dan laki laki lah. Dekat wad 4 panggil masa tu kan…situ pun ada CCU, ICU Tapi tak bukak lagilah, ada dua katillah, lepas tu saya pindah ke wad bersalain dan saya ambik kursus pos basic kebidanan…tahun 1990.
I	Selepas 7 tahun
W	Ha ye…
I	Lebih kurang kan…berapa lama kat mentakab dulu
W	Hmm
I	Berapa lama kat mentakab dulu?
W	Saya err…Kat mentakab sampai 2004, pindah sini. 2005, sorry 2005.
I	Dia macam kawasan Pahang je lah? Tak pernah ni…
W	Haah dekat mentakab je, haah…
I	Hmm
W	Sebab Hospital tu dah ni dia dah tak wujud lagilah sekarang.
I	Jadi apa dah kat situ?
W	Ha?
I	Bangunan tu jadi apa?
W	Sekarang ni dia buat jadi PKD, macam KKDM apa KKDM.
I	KKDM tu?
W	Macam Klinik kesihatan mentakab.
I	Oo masih lagi…

W	Ha dia ubahsuailah…ada lagi hemodialisis masih lagi kat sana, dan hemodialisis department dia masih bukak lagi…
I	Masih bukak lagi jadi klinik kesihatan lah…
W	Hmmm…
I	Mak saya bersalin kat situ…
W	Ahem…
I	Sebab kitaorang Jengka…Ok so err…naik pangkat bila?
W	Saya naik pangkat err saya naik pangkat U32, pada tahun 2004 saya rasa…
I	Yang nak pindah dekat nak pindah tu?
W	Eh 2003 sorry…lepas tu masa tu saya dah, lepas tahun 90 saya ambik mid tu, lepas tu saya ambik err apa pos basic ICUlah eh CCU, CCU tu maksudnya penjagaan rawatan apa… jantung.
I	Fokus untuk jantung tu…selepas yang naik pangkat ni?
W	Hmmm haah…eh belum belum, sebelum tu lagi…
I	Yang pos basic selepas 7 tahun tu?
W	Satu … lepas tu saya buat lagi untuk apa critical care…
I	Ooo dia banyak kali…pos basic ni…
W	Bolehlah…kalau masa tu…
I	Kita mohon je lah… apa kita nak lah…
W	Kita mohon lah, kalau ada kekosongan dia bagilah…
I	Pos basic kali pertama tu bidang apa?

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W	Bidang kebidanan…tentang sambut kelahiran, bidan, itu lah…
I	Haa…
W	Yang itu setahun, pastu saya buat dia kira 6 bulan.
I	Kelebihannya dengan pelbagai pelbagai tu
W	Uhuh…
I	Dapat kiranya knowledge banyak lah…
W	Ye…
I	Hantar ke manapun…
W	Lagipun kita more skill la…more skilling daripada…banyak…multiskillinglah…kita pergi sana pun boleh lah…
I	So 2 lah pos basic…
W	Last sekali saya ada pos basic, saya buat pos basic …apa ni…err pengurusan personal…
I	Ha… (laughing) dekat dekat nak jadi matron kut….dia masa tu
W	Err…
I	Matron ni U36, er yang U32 tu dia panggil apa…
W	Dia panggil … apa ni…ketua jururawat…
I	Yang sister biasa gred berapa?
W	Yang ni lah…
I	U 32 lah… U36 yang matron?
W	U 36 bulan… saya dapat naik pangkat bulan Mac 2010…
I	Yang membezakan matron matron lain ni senioritylah?

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W	Tak…kita…kebanyakan, semuanya sama pangkat U36, tapi kita masing masing punya… panggil apa…
I	Bidang?
W	Bidang, pos basic masing masinglah…ada yang….kalau ada pos basic jantung jaga jantung….kalau pos basic critical care, jaga critical care…icu…ada penyakit…ada mid…kita boleh jaga labor room camtulah…
I	Ooo…yang sekarang ni?
W	Kita bagi pecahan pecahan….
I	Ketua tetap soranglah? Bukan giliran…
W	Hmmm…
I	Ketua…
W	Tetap Sorang…
I	Tadi macam cakap pos basic yang akhir tadi?
W	CCU…rawatan…yang akhir sekali …last sekali…personal…
I	Ha personal tadi…
W	Pengurusan personal…
I	Personal maknanya dia …dia more on pengurusan ke?
W	Ha ye…lebih pada pengurusan…tapi masa saya pergi tu kita buat macam pjj, tapi sekarang bukan…saya pergi 2 minggu… balik….pastu
I	Yang dulu…3, 3 tu…
W	Satu tu je yang last tu…yang lain tu semua full time…yang last tu…

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I	Better full time ke better pjj?
W	Full time la lebih concentrate…
I	Yelah focus…ni balik, kerja pun berlambakkan….
W	Betul…Tapi bagus jugak, kita tengok suasana luar… masa tu saya buat kat ulu kinta, dekat apa tu…hospital…err…hospital ulu kinta lah, dulu kita panggil tanjung rambutan kan…sekarang tak panggil tanjung rambutan dah…dia dah ubah suai dah…
I	Dia yang sebiji sebiji…tu kan…
W	Haah dekat ulu kinta…
I	Pernah melawat tu sekali…aa…so, Ok …err kalau macam seorang nurse ni…bila kita sebut pasal job performance…
W	Ye
I	Ataupun prestasi …apa sebenarnya kita tengok…
W	Prestasi kerja…
I	Ha…
W	Kita tengok …pertama sekali kita nilai daripada dia punya apa, kemahiran dari segi kerja dia…ha kan…skill dia, knowledge dia…ada ke dia kerja tu … kerja je tanpa knowledge kan…lepas tu tengoklah tumpuan dia, komitmen dia, disiplin dia…
I	Komitmen ye,
W	Haah…
I	Disiplin kerja

W	Disiplin kerja…kerja kerja keluar sumbangan dia pada masyarakat…ha…
I	So, Kalau kita nak menilai laporan prestasi dia akhir tahun tu…ada peribadi dia kut…dia ada amalan…semua ada…Skt dia macamana…skt seorang nurse lah…
W	SKT dia sama je…Cuma kita…masa jururawat 29, sasaran kerja dia lain, kita ada sasaran kerja kita kan…32 lain, 36 lain…tapi yang tu berdasar kan SKT dia sama je…dengan yang lain lain sama je…
I	Makna kalau…kerja bawah jantung pun…Dia kira apa sebenarnya, apa yang dikira?
W	Sama juga, semua bidang apa pun, sasaran kerja tetap sama. Cuma dia punya…dari segi apa…dia punya kemahiran dalam tugas.
I	Macam kalau contoh orang pentadbiran, SKT dia contoh la…kalau kerani tu menyediakan kew 8, 100 bilangan, kalau nurse camana?
W	Kalau nurse kita tak nilai macam tu, macam tulah… macam dia datang kerja tu…pagi, pukul 2 balik petang kerja dia…ada ke Kerja dia tinggal tinggal ke, tangguh tangguh ke…ha kita tengok daripada situ. Dia boler err…
I	Dia tak ada on bilangan lah?
W	Tak ada…
I	Nilai dia err…
W	Cuma ada la nilai dia…kita buat sasaran kerja macam, diorang nilailah berapa ambik observation untuk patient ni…
I	Bagi… bagi gitu gitulah…
W	Ha…gitu gitu lah…kita bagi bagikan…
I	Maknanya nilai tu tetap ada…

W	Ada…
I	Yang kpi pulak apa dia?
W	KPI kita yang untuk jururawat ni berbeza beza ikut jabatan… tapi kpi yang untuk yang macam untuk nurses je… kita panggil macam backsore dengan thrombophlebitis lah…kalau nak bagusnya nursing care kita, maknanya patients kita tak ada backsore lah… tak ada beri tekanan kan…
I	Haah…
W	Kuranglah maknanya. Kalau lebih tu ada SAQ lah…
I	Backsore dengan apa tadi?
W	Thrombophlebitis…. Thrombophlebitis tu maksud dia, dia punya apa kita masuk darah, masuk ni …apa ni, air ke, maknanya benda tu tak bengkak la, tak nampak bengkak, tak demam la…takde jangkitan la masa tu…tak nak la…
I	Dia panggil apa…susah nak eja tu…backsore tau la nak eja, macamana eja dia? (Laughing).
W	Thrombo…Thrombophlebitis…
I	Ha lajunya…tak apa lah itulah… (laughing). So, maknanya setiap kali dia buat benda tu, dia kena lebih hati hati sebab nak kira tu kan.
W	Hmmm
I	Siapa yang check kpi tu?
W	Hmm…kita…sister sister kena buat laporan la…hantar.
I	Laporan kat katil tu…

W	Ya hantar…Kalau ada kejadian kita hantar …ada satu ajk dia sapa yang dia punya yang collect data, dia akan hantar ke JKN laporan tu lah…Yang satu lagi KPI nurses, dia… hand hygene tu lah… Hand hygene ni kita kena pantau, dia mesti kena buat hand washing tu… proper … pastu dia amalkan sentiasa tak adalah kata… ada kita nampak dia tak buat ke…kita kena pantau lah…mesti buat hand washing sebelum apa…ada 5 la…sebelum dia buat prosedur, lepas buat prosedur…macam macam lah…(not clear)…
I	Ada dia punya tu la…
W	Haah…
I	Itu bawah kpi, sekarang fokusnya more on kpi ke more on skt yang kita lebih fokus?
W	Hmm…KPI tu lebih kepada pesakit …Tapi SKT lebih pada performance diri kitalah…
I	Nilaian akhir tahun yang tiap tiap tahun dapat tu more on?
W	More on diri sendiri. Untuk maju ke depan. Dalam kemajuan kerjaya. Kalau bagus result SKT dia…makna dia… dia punya peluang nak dapat kenaikan pangkat tu lebih tinggi. Ataupun dia nak pergi pos basic pun tengok SKT juga. Nak pergi apply kata nak masuk U pun nak kena tengok.
I	Kalau prestasi tadi…benda benda ni prestasi la kan… Sekarang ni kita selalu dengar dekat paper la…
W	Hmmm…hmmm…
I	Kecuaian la…
W	Hmmm…
I	Pastu…kalau yang kerja pejabat ni keluar minum tak tentu masa la ni semua tu. So menyebabkan saya jadi tertanya tanyalah, sejauh mana, sebesar mana, benda ni berlaku dalam kita punya perkhidmatan awam? Macam dalam kes ni, di hospital tu sendiri.

W	Hmmm….
I	Kalau pada pandangan matron macamana sebenarnya?
W	Macam kecuaian tu memang kita tak dapat elaklah. Memang ada berlakukan. Tapi kalau boleh kita dah train diorang, masuk masuk je kita dah buat orientasi. Untuk budak budak kita, apa patut buat apa tak patut buat. Aaa…jangan berlaku gini, apa kesannya kalau berlaku. Kecuaian, apa maksudnya kat kita. Berapa banyak saman dah dikenakan atas kecuaian kita…semua kan…. Jadi tak nak lah kita punya imej hospital, imej jabatan, KKM semua, kita dah…Semua dah tekan kan kepada budak budak ni, tapi manusia kan.
I	Hmmm…
W	Kesilapan tetap berlaku. Jadi, err…kita cuba nak menghalanglah…tentang yang makan makan kat luar tu, kita orang kebanyakannya nurses, memang tak dapat buat camtu. Sebab kita memang tertumpu pada kerja kita.
I	Dia ada kerja dia tu…
W	Jarang dapat keluar. Kecuali klinik ke, mungkin diorang dapat keluar. Itupun tengahari la, ataupun…mungkin waktu weekend ke diorang kerja shift. Yang bukan, bukan nurseslah, setahu saya…memang, jaranglah nurses yang terlibat tu.
I	Sebab dia ada kerja dia sendiri kan.
W	Ya…betul.
I	Kalau tak orang carikan… (laughing).
W	Ya betul. Lagipun patient macamana dia nak tinggal, kalau jadi apa-apa siapa nak jawap? Dia kena jawap.
I	Ha…So, so isunya sebenarnya kalau di hospital, mungkin kalau di di luar…isu minum, kalau di hospital tu, apa isu prestasi yang pernah matron dengarlah.

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W	Berkenaan dengan isu…
I	Selain daripada kecuaian yang tadi tu.
W	Ooo…tentang prestasi diorang ni? Yang lain-lain tu…kadang kadang macam kalau kita katakanlah, macam katakan dia bagi ubatkan…katakan dia bagi ubat ke, mungkin miss ke ha kan…
I	Hmmm….
W	Maksudnya belum bagi lagi… akan berlaku benda tu kalau tak berhati hati akan berlaku jugak…kita kena pantau dia…dia ikut tak kita punya apa…kita ada bagi apa nursing national audit, ha ada lima elemen kat situ, ha dia follow tak benda tu. Kalau kata dia buat prosedur, dia ikut tak 5 tu…5 elemen tu, ha dressing dia ikut tak…dressing tu macamana kita belajar dalam nursing audit tu…err lepas tu apalagi ye…cara dia bagi ubat. Cara dia bagi ubat tu betul ke tak, bagi injection. Kan. Dia bagi ubat oral, bagi injection macamana cara dia, lepas tu hmmm… apa lagi 2 ye? Ha…ha…haa…dia ada 5 kat situ. Terlupa pulak…
I	Hmmm
W	Jadi kat situ kita pantau la diorang, kadang kadang kita hantar diorang pergi audit, lepas tu dia mengikuti… dia ada bagi praktikal session kat situ, tengok pencapaian dia macamana…
I	Ha….
W	Dari situ pun boleh measure jugak dia macamana…
I	Jadikan kata…maknanya ada la, permasalahan yang disebut sebut diorang ni…sebenarnya ada…
W	Itu kita tak boleh pertikaikan…memang ada…
I	Memang ada…Tapi dan dia kata kata level service prestasi perkhidmatan awam ni teruklah diorang kata…
W	Itu la dia kata, kadang kadang dia kita kita punya fasiliti ni…apa…

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I	Canggih, first class.
W	Canggih, first class, tapi mentality third class.
I	Third class. Dia katakan…
W	Biasalah.
I	Pastu dia kata lembab buat keputusan, ni kalau yang pejabat la.
W	Ahem. Ya…hmmm…
I	Itu dari segi diorang kata…tapi kalau saya nak bagi, matron bagi scale pada kita punya ni. 1 sampai 10. 10 is cemerlang…
W	Ya…hmmm…
I	1 is bermasalah ni. Berapa kita boleh anggaplah di di hospital sendiri. Sinilah senangkan.
W	Hmmm…hmmm…Sini err…dalam hati saya kata 80 ke atas lah…
I	8 lah…8 kan…
W	Tak ada lah teruk sangat kan…
I	Perkhidmatan awam di sini 8 lah, 1 hingga 10 tu bagi 8 lah…
W	Haah….
I	Kalau matron bagi diri matron sendiri, apa yang matron dah buat selama ini, matron rasa dah bagi tahap berapa?
W	Untuk diri saya?
I	Ha
W	Saya rasa 9.

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I	Setakat yang kita dah buat kan…
W	Sebab sepanjang saya bertugas, saya tak pernah melakukan apa apa kecuaian, lepas tu performance saya pun agak baguslahkan, sampai ke tahap ni lah…
I	Boleh rasalah kita ni bagi berapa…
W	Dan kita dapat kepuasan apa yang kita buat kan…
I	Ok …k …k… k …

I	So tadi kata, mereka mereka yang bermasalah ni kan…mesti ada something yang menyebabkan berlakunya di hospital ni…
W	Banyak…banyak factor
I	Apakah antara factor factor tu?
W	Pertama faktor keluarga, kadang kadang factor suami…kalau isteri dah kahwin…suami…
I	Faktor keluargalah ni?
W	Yes…Faktor suami, kadang kadang mungkin juga factor konflik di tempat kerja pun ada…antara kawan dengan kawan …kawan dengan kawan mungkin tak ada persefahaman…ha…ada. Irihati ke jelousy ke…biasalah kan…err apa lagi, err…hmmmm…kadang background tu la puncanya. Kalau kebanyakan.
I	Background tu camana?
W	Tu la daripada family, kadang kadang kalau dah kahwin tu suami la…kalau daripada keluarga, kita tak tau apa punca rumahtangga dia…rumah daripada rumah dia la yang belum kahwin tu…
I	Mesti ada something di luar yang menyebabkan dia trigger…
W	Kadang masalah boyfriend pun ada…
I	(Laughing)

W	Perempuan kan…
I	Masalah cintalah jatuh cinta.
W	Ha …ye…
I	Kalau yang diri sendiri tu ada?
W	Diri sendiri pun ada …macam dia punya own behaviour…diri sendiri kan…
I	Sikap dia…
W	Sikap dia haah…
I	Itu luaran, dan jugak diri dialah… konflik rakan sekerja, persekitaran kerja di hospital sendiri camana?
W	Persekitaran kerja setakat ni…apa…macam mungkin diorang stress, tu jela…
I	Stress disebabkan?
W	Stress…mungkin suasana kerja tu…itu yang dia…stress lah kadang kadang tak tau…kadang kadnag mungkin dia rasa…kadang kadang dia nak kerja shift, mungkin dia nak cuti ke, kadang kita tak dapat nak bagi kan…
I	Cuti tak dapat. Banyaknya sebab dia tak dapat cuti la.
W	Yelah…kadang kadang dia request nak cuti masa tu…kita tak boleh nak bagi…
I	Setakat daripada pengalaman…
W	Kita nak olah dia punya roaster tu…nak bagi samarata…kan … ha camtu lah…
I	Dari segi bebanan lain?

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W	Beban tugas pun ada, kadang kadang beban tugas sebab kita kan…masih kurang manpower lagi… tak cukup sepenuhnya…itu pun berlaku jugak…
I	Dia kalau ikut yang sebenar benarnya berapa ke berapa…
W	Itu nak ikutkan…memang…
I	Berapa patients ke berapa…ada tak?
W	Ratio dia…kita ada buat dulu, dia ikut acute, tak acute…itu yang…dia bagi ikut norms, 1 dalam 7 lah…1 nurse 7 orang
I	1 orang, 7
W	Hmmm…lepas tu dengan beban tugas lah, kalau kita nurses kat ICU, satu nurses 1 patient. 1 in 1, kalau ICUlah…kalau dekat CCU 1 nurses 2 patients….
I	Ooo…
W	Dia tak sama sebab ICU dia jaga ventilatorkan….
I	Yang ni memenuhi ke tak…
W	Hah?
I	Memenuhi tak yang …
W	Yang setakat ni…err…yang…ada yang memenuhi ada yang tidak la…ada masa boleh capai 1:1 ada masa 1:2, tengoklah…
I	Sebab pada orang…
W	Kadang kadang kita punya nurses banyak cuti bersalin…dia dah longgar kat situ, dah berapa banyak…
I	Sebenarnya, beza kerja nurses dengan MA tu kat mana?

W	MA dia kebanyakannya di kecemasan. MA beza dia, tak buat nursing care…
I	Nursing care tu is?
W	Macam kita …bagi perawatan pada pesakit…mandikan pesakit, rawat pesakit…
I	Ini di wad
W	Ha diorang tak ada, kita buat yang camtu. Bagi makan patients, dia tak ada. Dia lebih kepada…macam diorang dekat casualty dia tengok triage, tapi apa nak buat prosedur masa tu dia buat…
I	Dia maknanya menilai sakit apa nak ubat apa…
W	Ya…pastu dia triage patient ni dekat zon merah masuk ke zon kuning ke zon hijau…dia tiga zon, stage. Dia kat situ… triage kat situ…dia mungkin merah tu memang very bad conditionlah…diorang sah kat bawah, pastu dia hantar ke ICU ke mana mana…
I	Then nurse sambutlah
W	Kita terima
I	Jaga
W	Jaga…diorang tak jaga…PPP jugak banyak ditempatkan di health side…kan diorang…
I	PPP apa ye…
W	Itulah…MA …
I	Penolong Pegawai…
W	Haah penolong pegawai perubatan…dia pun banyak ditempatkan di health sebab dia ni macam dia boleh tengok patient…dia boleh screening patient dia boleh prescribe ubat…

I	Dia dia dia bagi macamana, kategori health tu di mana…
W	Health tu macam klinik kesihatan…
I	Aaa…itu maksud health…Kalau kat sini dipanggil?
W	Di sini dipanggil hospital lah…
I	Ooo kita panggil di klinik tu di health…hmm…nak tau term term …(laughing)
W	Ha betul betul…medical ye…
I	Ok aa…So ini tadi orang kata antara …demands…benda benda ni lah, ada masalah keluarga, background dia, sikap macam ni…ada lagi tak?
W	Dia rela eh macam apa…leka kan…
I	Itu sikap dia lah kan…ada lagi tak yang…demands yang boleh mengganggu prestasi kerja dia?
W	Hmm mungkin hutang yang banyak…kadang kadang dengan along ke …tak tau kan…
I	Hmmmm…Ada ke dengan along? Ke hutang biasa je?
W	Tak tau (laughing)…Hutang biasa je saya rasa…sebab kita had kan dia punya apa dia punya gaji tu 60% kan…jangan kurang.
I	Setakat di sini pengalaman matron sendiri ada yang teruk sangat dia sebab berhutang tu la….
W	Ada jugak, saya rasalah dulu dulu ada…sekarang tak ada dah…macam…dia suka pinjam duit orang… tak bayar…pastu banyak menipu lah…
I	Hubungan dnegan rakan rakan ni dah…tak baik

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W	Ha betul…dia macam tulah bila dah menekan…jadi stress lah …bila tak ada duit dia mencuri, tipu sana tipu sini…ada berlaku dulu…sekali….
I	Kerja luar tu…tambah…
W	Kerja luar macamana? Ada kadang kadang dulu memang kita galakkan tapi sekarang ni saya rasa dengan gaji kita sekarang ni ramai dah tak berapa….
I	Dah ok…
W	Macam boleh lah…
I	Hmmm…
W	Kadang kadang Kat sini kita pun ada masa kita perlukan diorang kitapun bagi overtime jugak…staff nurse, kalau tak cukup manpower terpaksa panggil diorang datang…
I	Boleh claim
W	Ha boleh claim
I	Datangkan boleh claim… (talking with other people)
I	Ok so tadi demands lah, tapi macam walaupun dalam keadaan macam ni ada konflik keluarga…ada sikap…sikap mungkin susah sikitlah…tapi ada masalah tak cukup staff semua ni… still kita tengok ada orang yang boleh cope…pada pandangan matron orang orang yang macam ni apa yang dia gunakan, resources dia, sumber dia, yang boleh menyebabkan dia boleh cope?
W	Maksudnya maksud tu…
I	Maksudnya…ada…kita tengok orang ni berbeza kan…tadi dia ada masalah keluarga…masalah dengan suami semua semua…ada 2 orang, 1 dengan 2. Yang 1 ni memang meng effect dia punya

	prestasi…tapi orang kedua ni…walaupun dia ada masalah dengan suami…dia ok… so agaknya apakah…?
W	Itu saya rasa dia mungkin dia punya cara dia menangani masalah dia…mungkin dia…apa orang kata tu…dia ada kawalan diri dia yang tersendiri …
I	Kawalan diri…
W	Atau dia mungkin suka cerita masalah dia kat orang lain…seorang lagi suka menyimpan…
I	Hmmm
W	Kan…Bila dia dah bercerita dia dapat mengurangkan beban apa yang dia tanggung tu kan…
I	Hmmm…Kurang nak fikir fikir sangatlah…
W	Ye betul…ada seorang tu dia ikutkan sangat emosi kan…tu yang tak boleh kerja tak boleh fokus.
I	Selain daripada tu…
W	Selain daripada tu kita hantar kaunseling kalau kita tau…kita hantar kaunseling untuk dia la…
I	Untuk dia la…
W	Untuk menangani masalah dia…
I	Tadi guna…dia sendiri boleh cope la…maksudnya dia pandai balance…dia walaupun dia ada masalah dia tinggal kat rumah…
W	Ya betul…
I	Ada lagi tak? Apa yang boleh…macam matron sendiri…Pengalaman…pengalaman matron sendiri…dulu dulu kerja dulu….

W	Haah…
I	Bila ada masalah…tak kisahlah masalah apa …matron datang kerja …still cemerlang…
W	Kita kan kalau nak diikutkan by right kita ni diajar…kita keluar…kita sangkut masalah kita kat pintu rumah…kan… itu yang diorang kata, jangan bawak masalah rumah datang kerja…kalau boleh…macam tu lah
I	Hmmm…
W	Jadi kita cubalah… orang kata tu focus… datang sini buat kerja…kita ingatkan …kita nak bagi perkhidmatan pada patients…tu je lah…rumah tu kita kena tinggalkan…buang…
I	Hmmm…hmmm….
W	Tapi bukan semua orang boleh ikut…ada orang tak boleh…
I	Hmmm…
W	Terpulang pada individu…
I	Macam…apa yang motivate matron…nak bagi perkhidmatan and then…apa yang sebenarnya motivasi masa tu…
W	Mungkin keseronokan bekerja….
I	Seronoknye bekerja tu…
W	Ha mungkin ha mungkin…kita focus …kita tak ingat apa apa lah…kerja tu kan…kita penuh dengan minat…tak fokuslah tak ingat dah apa yang berlaku…
I	Minat pada kerja tu la…Sayangnya pada kerja tu…kan…
W	Ha…(Laughing)
I	Ok err…Satu lagi…kalau…kalau macam matron dah berapa tahun kerja…dah 31 tahun kan…sukanya kerja ni kan…

W	Suka…
I	Kalau …yalah masa kalau diberi peluang nak offer kerja lain nak ke?
W	Bagi saya…tak …tak nak…
I	Tak nak…
W	Sebab kita dah serasikan…apa orang kata tu memang hidupan kita hari hari dengan pesakitkan…kita rasa macam tak…luar dari kita punya ni lah…
I	Hmmm…macamana pulak kalau bagi peluang tukar…hospital.
W	Tukar hospital…ikutlah… untuk …tukar untuk apa…
I	Kalau naik pangkat?
W	Terpaksa…kena ikutlah…arahan kan…kena ikut arahan…
I	Kalau macam kata diberi…peluang macam boleh pilih, bukan naik pangkat lah…you boleh pilih nak pergi…kuantan ke…ni ke…nak ke tak nak?
W	Hmmm…kalau saja saja tu memang tak nak lah… tapi kalau arahan pergi lah….kalau mohon tak…
I	Kalau diri sendiri tu…tak rasa nak pindah lah…maksudnya…memang sini jugalah…
W	Haah…
I	Sebab ni nak tengok…komitmen pada kerja…
W	Ya betul …hmmmm
I	Komitmen pada … rasa pernah tak ada buat kerja tak ingat nak makan tak ingat nak minum…

W	Masa dulu dulu ye…masa kita dulu dulu …masa saya staff nurse ye…sebab kita memang betul betul apa orang kata memang sibuk…masa tu manpower memang tak cukup…prosedur banyak memang tak sempat…berlaku…ada masa pun kadang kadang sister pun ada berlaku gitu juga…tengoklah keadaan situasi, ada masa ok…boleh makan…bukan selalu tak boleh makan…
I	Tapi tak pernah bawak balik kerja ke rumah lah…
W	Tak…
I	balik ok je…
W	Haah… memang tak ada kerja…
I	Hmmm…ok…Pernah rasa sakit ke terganggu emosi ke disebabkan kerja…
W	Setakat ni tak ada…alhamdulillah lagi…
I	Fizikal pun tak adalah rasa…tetiba kaki sakit sangat…
W	Tak ada…
I	Oklah …mental pun ok…
W	Ya …insyaallah…
I	Ya maknanya…tapilah pernah tak pengalaman matron kerja ni…melihat kurangnya benda benda ni menyebabkan prestasi turun…
W	Maksudnya…
I	Berlaku tak di kalangan nurses…masalah emosi…masalah fizikal…
W	Betul…

I	Yang menyebabkan emosi dia turun…macamana…sejauh, sebesar mana sebenarnya masalah tu…
W	Masalah tu err… tengok dari segi macamana…kadang kadang tu sakit tu prestasi memang turun…kan dia tak dapat fokuskan…kita pun faham…tapi apa yang boleh kita bagitau dia, kita kaunseling dialah…kita kaunseling dia, kita nasihat kan dia…kalau dia tak boleh sangat sangat barulah kita…kalau dia tak datang kerja…masalah disiplin baru kita buat laporan…
I	Biasa ni yang ni sakit apa…sakit…
W	Ada staff yang buat cuci, buat hymodaelisis pun ada…
I	Itu sakit yang besar la…Yang kata sakit emosi tak tahan kerja…
W	Ada…stress…ada jugak…err dia nanti kalau kita tengok dia macam suka marah marah…suka macam, dia buat keputusan tu kita tengok lain macam tu…ha mungkin dia ada masalah…ha kena panggil lah…sister akan panggil dia, tanya dia…awak ada masalah ke apa ke? Setengah tu ceritalah…setengah tak juga…ada memang berlaku.
I	Kalau kerja diorang ni…dia tak boleh sebenarnya dia tu sakitkan sebab dia nak attend orang…
W	Tapi kadang kadang dia…kalau anak sakit pun effect juga…dia nak tumpu anak lagi, mana nak kerja lagi kan…ada masa jugak, tapi tak la serius sangat memang dia…macam dia akhirnya dia tangani gitu jelah…ha…
I	So ada tak faktor faktor lain yang matron nampak, sebagai membantu kita sebenarnya nak kerja. Jadi macam tadi kan sikap minat, apa lagi yang boleh bantu kita…sebagai seorang pekerja yang cemerlanglah, menjadikan kita cemerlang. Sebab saya sebenarnya nak senaraikan tu lah… nak senaraikan…
W	Hmmm…
I	Masalah masa matron kerja dulu…err… ketua, penyelia ataupun pengurusan main peranan tak?

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W	Ya…main peranan diorang akan turun, lepas tu diorang buat laporan pada kita, lepas tu diorang cadangkan…kalau nampak dia bagi la peluang untuk aaa kemukakan nak naik pangkat ke kan…ha…pastu nak hantar kursus ke…ha camtulah…
I	Maknanya, sumber salah satu yang boleh bantulah, walaupun kita kerja susah semua, tapi ketua ketua ni banyak bantu tak? Maksudnyanya…
W	Memang bantu…memang bantu…
I	Memang antara salah satu factor ni diorang lah…
W	Macam kita pun kalau ni…kita turun ke bawah, kita memang bantu staff kita…
I	Maksudnya bagi motivate…
W	Motivate lah…. apa apa masalah dia… kita kena atasi…tengok performance dia…lepas tu apa ni…macam kata…bagi teguran, mana yang tak betul tu kena tegur…macam tulah kerja kita daripada … pantau diorang ni kan…
I	Satu lagi…yang saya nak tengok sumber yang bantu ni…err…religious…
W	Keugamaan
I	Keugamaan dengan spiritual…

W	Spiritual macam kita jabatan, sesetengah jabatan memang ada buat…macam kita org kadang kadang buat qiyamulail…sini pun hospital ada buat ceramah agama, setiap hari jumaat petang pukul 3, dia bagi…ceramah agama sekurang kurangnya sebulan 2 kali.
I	Hmmm…
W	Dia bagi…kita pergilah …siapa yang lapang pukul 3, pergi lah kat auditorium…memang ada lah dia…terapkan kerohanian tu, pastu

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	kita buat macam aktiviti…macam kata nasyidlah…buat peraduan nasyidkan…peraduan apa ni macam macam sambut kemerdekaan…lah…macam macamlah hospital anjurkan untuk diorang ni…
I	Matron rasa, benda ni…bila pegangan ni…effect tak dia punya kerja….
W	Hmmm…
I	Sebab kadang kadang bila dia ada satu pegangan agama, tak kisahlah islam ke apa ke…dia …
W	Hmmm
I	Berbeza orang ada pegangan agama dengan tak ada ni kan…
W	Betul betul…hmmm…
I	Kalau pengalaman kerja sini ada tak nampak orang bezanya orang…
W	Tak berugama
I	Bukan tak berugama…maksudnya tak ada…
W	Kurang, tak ada pegangan…
I	Ha…
W	Dia kuranglah iman dia…
I	Ha…
W	Ye memang betul…
I	Apa dia punya effect prestasi…setakat yang tau la… pengalaman dulu…kan…

W	Hmm…macam pengalaman saya dulu, tak tau la…dulu kurang sekarang lagi banyak…
I	Sejak akhir akhir ni…lagi kita terapkan …
W	Aha…makin lama makin ni, kita semua staff pun dah bertudung kan…baju pun semua dah menutup aurat…dulu…pakai skirtkan…banyaklah kita tak bertudung masa masa muda muda dulu…
I	Ada beza orang yang…ada pegangan tu dengan yang tak ada untuk melaksanakan kerja kerja dia…
W	Memang ada…kadang kadang kan kita ni kita lebih apa orang kata ikhlas…buat kerja kan…lebih amanah…dari segi pegangan kita lah kan…
I	Bila kita sedar pegangan kita tu…
W	Buat kerja pun orang kata, tak nak la belakang orang kita tak buat kerja, depan orang kita buat…kita ingat kerana Allah kan…
I	Itu je …ada 2 jugak tu…maksudnya satu keagamaan tadi rituallah, yang rajin solatnya apa semua ni…satu lagi spiritual ni, kefahaman dia, dia buat baik akan ada yang membalasnya…
W	Betul…
I	Tapi…ada jugak berlaku yang dikomplen komplen orang ni lah…secara luarannya dia ni memang nampak seorang yang religious, tapi ada jugak kerja dia…tak…
W	Betul memang ada… kadang kadang diorang ni macam…contohnya…dia tak ikut betul betul proper prosedur kan nak cepat…
I	Tapi dari segi orang nya kita tengok…
W	Ada …
I	Amalannya ok kan…

W	Memang…ada jugak memang …sebab itu tak tau nak cakap macamana…
I	Kat mana ye, sebab saya pun nak tau punca dia kat mana…
W	Betul …dia macam sikap lah …sikap macam tu…
I	Sikap dia sendiri…
W	Sikap…
I	Mungkin jugak dia buat agama tu sebagai rutin…dia dia…rasa…
W	Ha itu tak tau…mungkin kurang…orang kata ke arah tu dia nampak macam dia buat apa tu basic je kan… dalaman…mungkin dalaman dia kita tak tau kan…ha…
I	Macam orang kata dia sembahyang tapi sembahyang tu…
W	Hmmm
I	Tak betul…
W	Ikhlas ke haah… Tapi setakat kita kat sini alhamdulillahlah semua ada surau…siapa nak sembahyang memang boleh…senang…
I	Nampak banyak kan…kat situ ada…
W	Mudah…mudah…dalam bilik kitaorang icu pun ada surau… OT pun ada…
I	Pembinaan…fasiliti kira baguslah dia dah fikir kedudukan tu kan…saya tengok ni…saya masuk dalam pentadbiran ada lagi satu…kat luar laluan tu satu lagi…
W	Dia cadang nak buat masjid kat depan …bukan masjid… surau kat depan tu dalam tengah…
I	Ada kawasannya lah…
W	

I	Ha depan tu je…dekat…err sebelah haemodialis tu, jalan dia sebelah… (interrupted)
I	Ok kalau hmmm…matron sendiri, nilaian prestasilah…kalau boleh share dengan saya, 3 tahun kebelakang ni, on average berapa matron dapat?
W	Saya punya average dulu dalam 90 lebih lah…
I	90 lebih…kat sini biasanya 90 lebih tu…
W	Aa…dia kalau A tu memang nak ikutkan…85 ke atas dah cemerlang dah…
I	Hmmm…hmmm…Average, tiap tiap tahun dapat 90 ke atas ye…sebabnya setengah kementerian tu dia bagi rendah…macam setengah tempat tu 80 dah rasa dia…
W	Ha betul 85 dah kira cemerlang dah…
I	Ha…
W	Sebab A dah kan…85 tu…
I	Ok matron tengok, nurses di bawah selian matron sendiri apa semua tu, kalau nak bagi skala prestasi diorang ni berapa?
W	Tapi dia …skala…dia tak boleh majority dia kena individu punya skala…Sebab yang junior dia lain sikit sebab dia masih perlukan tunjuk ajar, yang macam middle…antara pandai dengan tak pandai lagi…yang senior tu baru pandai…
I	Tapi on average?
W	Kalau average samarata kepuasan pelanggan saya…saya jaga unit rawatan rapi kan…saya rasa dalam hmmm…dalam 90 kut sebab saya rasa…
I	Oklah…bawah bawah ni…

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W	Sebab saya rasakan…saya tak ada aduan, belum lagi, tak ada aduan, belum ada near missed ke, belum berlaku lagi…apa err…kelalaian ke, setakat ni tak ada lagilah…
I	Matron bagi dekat majority staff…di bawah pun 90 an?
W	Tak jugak, kalau yg junior tu mungkin 80 lebih ke bawah sikit yang middle tu tengok daripada segi banyak benda yang kita kena fikirkan…
I	Majoriti…yang berapa ramai bawah?
W	Bawah saya semua 70 lebih…mula 100 lebih…
I	Kira di bawah pejabat matron ke di bawah wad ni…
W	Di bawah unit saya…
I	Unit…
W	Kita aa…saya unit rawatan rapi critical care kan…
I	Ha critical care ye…hmmm…90 berapa?
W	Saya punya staff?
I	Ha…
W	7 campur 4 campur 3, 70 lebih lah…
I	76 orang staff ye…
W	Hmmm
I	So, boleh dikatakan service yang dibagi 90 plus ye …
W	Ha ye lah…Hmm saya sebab pencapaian kat wad pun macam dari sekarang ada audit farmasi ke…mungkin dapat A jarang la yang dapat B atau C, macam setengah wad dapat B, C semua tu…maknakan diorang bagus lah, jadi kita kena regardlah diorang, apa orang kata tu…macam, motivate diorang suruh buat lagi…the

	diorang buat lagi baguslah…then dapat anugerah jugalah…H control…ha macam tu lah…
I	Kadang hospital ni memang banyakkan yang audit auditnya…kalau ikut tu kira boleh kawallah kan…
W	Macam macam…Tapi masih ada kelemahan memanglah kita kena ni lah jugak
I	Umur matron sekarang berapa?
W	Umur saya sekarang 57
I	Matron ambik 60lah?
W	Saya ambik 60, tapi tengok keadaan lah, kalau…
I	Boleh kontrak lagi ke?
W	Sampai 60 tak boleh kontrak dah…
I	Hmm…
W	Dulu ye…kalau 60 tak boleh dah…dia dah…itu hari ada cadangan kan nak 70…kan…
I	Ha…Tak tau lah kita camana… (laughing)… Sebab kehidupan sekarang makin ok lagi…60 pun kita tengok ok lagi, jadi orang akan meningkat…kerja swasta kan 60 lebih kan…
W	Saya satu jelah saya nak, pengalaman saya tak buat degree masa saya…sebab kitakan kerja kat hospital mentakab ni kan kita kurang exposed tu orang kata…apa challenges antara satu sama lain tu kurang…tapi kalau KL dah ramai dah buat degree…
I	Sampai level berapa boleh pergi…
W	45 boleh lagi…
I	45…tu lantikan maknanya…

W	Bukan tu nak buat degree…
I	Umur umur…itu umur…ke apa 45 tu…bukan maksud saya…Gred …gred dia berapa…
W	41 lah…Sekarang kitaorang sampai jusa ke atas…sekarang kita ada atas jusa…
I	Yang pejabat matron…Di KL tu dia jusa? Untuk nurses?
W	Sini ke KKM?
I	Di sini camana?
W	Di sini sampai kitaorang sampai 42…by right…44…tapi 42 pun tak ada degree…sekarang ni…kalau 44 baru ada degree…
I	Dia siapa, dia duduk kat mana?
W	Sekarang dia duduk kat pejabat, bilik tu ada pejabat, pejabat matron ada kat situ…
I	Ooo…
W	Dia ketua penyelia jururawat hospital…U42
I	Ketua penyelia jururawat hospital…ooo U42
W	Negeri patut U44.
I	Hmmm
W	Patutnya U48…post ada dah U44 tapi belum isi lagi…
I	Pejabat kat KL tu dia gred apa? Jusa?
W	Mana? Pejabat KKM? Putrajaya?
I	Yang ketua kepada Matron ada kan?

W	Diorang kata jusa. Matron Selvine…masa…Matron Selvine…
I	Zaman saya tu tak ada lagi la…
W	48…ada saya rasa…tapi tak tau le dia jusa ke belum…saya tak tau le …tapi dulu…
I	Kena ada degree ke?
W	Dr fathilah tu ye…besar…siapa ada degree?
I	Yang 40 lebih ni kena ada degree?
W	41 semua ada degree…tapi macam kita ni nak habis…kan yang lama lama tak ada degree ni 42 je…
I	Still boleh naiklah…
W	Sampai 42 je lah…
I	Tapi boleh naiklah…peluang…38 tak ada ye…38 untuk siapa sebenarnya?
W	38 tak ada…
I	Gred mana mana pun tak ada…jadi melompat 36 - 42 kan…
W	Tak ada…
I	Sebab kalau yang ganjil tu lantikan kan…41, 45 tu…ok ok k k…
W	Tapi kita lantikan ada yang jururawat yang berijazah ada…dia keluar terus U41…
I	Ooo sekarang dah ada dah ye?
W	Kita 5 orang kat sini…
I	Jadi diorang buat apa?

W	Diorang patutnya diorang pantau clinicallah…sebab diorang belajar lebih ha kadang diorang suruh buat research kan…sebab diorang kan lagi banyak belajar tentang, ada buat research…dia suruh buat research.
I	Dia duduk kat mana kalau dia datang…
W	Dia bagi penempatan, satu jabatan satu…macam saya kat atas tu ada sorang…Dekat…wad apa ni O & G ada sorang, medical ada sorang….
I	Pakaian nya tetap sama lah?
W	Err…sama…baju putih…
I	Baju putih…nurse macam JM tu?
W	Ha…sebab dia ada 2, satu yang post register, satu yang baru keluar…dia orang kerja pun masih belum ni lagilah…
I	Knowledge je baru dapat…praktikalnya belum lagi…
W	Tapi gaji dia lebih la…
I	Ya la gaji 41, at least berapa tu kan…
W	Tapi sekarang pun budak budak…ni ramai ramai berlumba lumba nak buat degree…
I	Sampai satu masa nanti…
W	Diorang pergi buat PJJ …sendiri, pergi OUM, Massa, UITM…ramai lah…
I	Ye lah macam zaman kita dulu SPM masuk kan…pastu dia jadi Diploma, dah SPM dah tak macam….
W	Ye…
I	Sekarang dah diploma dah, akan datang dah jadi degree dah…

W	Betul…
I	Akan datang master dah tak nampak apa dah…dah macam biasa dah…ha kan (laughing) Macam kerja ni kan…ha ok ok…so setakat ni saya rasa saya dah tanya semualah cuma kalau saya lupa…nanti saya call, lah, saya ambik no dah semalam kan…
W	Haah…
I	Sebab saya nak tanya yang prestasi tu lah…yang prestasi perkhidmatan awam tu macamana pada pandangan kita …so tadi matron dah jawab, rasanya tak lah seteruk manakan…8 sebenarnya kan…tak ada lah kata dengar kat suratkhabar tu macam teruk sangat…
W	Tapi macam kata…diorang teruk sangat masalah disiplin…diorang kata selalu tak datang kerja, selalu MC, err apa orang kata pencapaian tak bagus, itu pun ada 75 ke bawah…tapi setakat ni setahu sayalah, nurses tak ada, belum lagi sampai 70 lebih …jaranglah yang buat perangai sangat sangat…
I	Macam tengok pun kita perkhidmatan awam ni tak la teruk…ke teruk…ke perkhidmatan awam orang kerja kerajaan nak banding dengan swasta…kan selama ni…kita dok baca…
W	Haah…macam diorang datang kat kita sendiri yang cakap macam tu…
I	Kenapa dia cakap macam tu?
W	Kalau hospital pun eh…baik pergi hospital swasta…sama je…
I	Hmmm(laughing)
W	Lama lama tak larat bayar datang juga sini…kan…
I	Betul betul…Pandangan la…pandangan…mungkin kalau agak matronlah pandangan…ni asal usulnya daripada mana dia boleh jadi negatif tu?

W	Masyarakat kita sendiri…
I	Ya lah…macamana boleh jadi gitu? Mungkin pengalaman satulah…tapi…
W	Mungkin kita ni kurang…bagi …
I	Communicate kan…
W	Hmmm dengan masyarakat ni kurang…asyik nampak negative je kan…kita nak positifkan dia tu macamana ye? Lagipun…kita manusiakan, kadang kadang ada miscommunication pun berlaku aduan…kadang cakap tak betul sikit pun…
I	Salah faham.
W	Masa dulu kalau menteri kesihatan ada dekat bentong lagilah…
I	Menteri kesihatan kat bentong
W	Dulu liow tong lai…hahah
I	Ha…dia dia…
W	Lagi banyak aduan
I	Ooo…diorang…apa apa orang…
W	Dia refer sini, jengka refer sini, bentong lipis raub… jerantut semua hantar sini…
I	Saya rasa hospital temerloh ok lagi kut sebab dia baru lagikan…fasiliti baru…
W	8 tahun dah ni.
I	Dia punya peralatan dia semua ok kat sini?

W	Peralatan dia…err ok…cuma ada apa tu…tapi umur dia tua la, 8 tahun…umur aset aset tu…
I	Tapi sebuah hospital yang barulah kan…dia setanding putrajaya setanding serdangkan…sebab dia…group yang baru baru ni kan…
W	Hmmm
I	Kalau compare dengan hospital lama tu
W	Yelah…
I	Itulah kan…ruangan pun saya tengok…
W	Luaslah…ini semua bilik pakar ni.
I	Pakar pun tak duduk dah.
W	Pakar dia pergi turun padang petang kang dia balik lah.
I	Petang lah
W	Baliklah tengok patients dia…waktu pagi dia keluar…
I	Kiranya…level 3 ni memang untuk…wad wad level berapa sebenonya…
W	Wad aras 2 ada, aras 2 sorry tak de, aras 3, 4, 5, 6, 7, 8, 9
I	Besorlah banyak…atas ada ofis lagi? Tak ada dah?
W	Atas ada…tak ada tak ada level 3 je…tak ada ofis dah…
I	Hmmm
W	Lain semua wad wad…3, klinik, 2 dengan 3 klinik, sini depan ni…
I	Klinik pakar tu ke…
W	Ha semua kat depan…sebelah ni wad bersalin, dengan apa ni unit rawatan…apa, baby nicu…

I	Ya lah, tengok kuarters pun tak ada orang duduk.
W	Kita punya anggota penuh…
I	Penuh?
W	Anggota kita penuh…kita 2000 lebih…
I	Hmm…patients …berapa setahun…
W	Setahun…kita punya katil 550…kalilah kadang kadang BOR kita sampai 90 lebih…80 lebih ha…
I	Dia kira mengisi katil lah kiraan 550 tu, tapi kalau ikut kiraan bilangan pesakit setahun…tu berapa agak agaknya…
W	Ooo setahun tu saya tak ambik figure daripada… rekod…tapi BOR tu ada la…
I	550 dalam 90 % ye…
W	Hmmm kalau nak ikut jumlah pesakit kadang dia ada klinik pakar, ada klinik luar, jabatan luar kan…dalaman ha…
I	Lain pulak kiranya kan…
W	Dia ada dua…kelahiran pulak ada lagi…
I	Dia luas sebenarnya hospital ni…tu la masa nak interview pun saya dok fikir siapa saya nak diinterview ni…jawatan dia terlalu banyakkan…
W	Hmmm
I	Tapi main bodynya adalah Doktor, nurses, MA…
W	Tapi yang paling ramai nurseslah, nurses 800 lebih…ramai.
I	Ok…terima kasih matron…kalau ada apa apa karang saya hubungi…

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Appendix 3 - Full Questionnaires (Both in English and Malay)

The University of
Nottingham
UNITED KINGDOM · CHINA · MALAYSIA

JUN 2015

**JOB PERFORMANCE IN THE MALAYSIAN PUBLIC SERVICE:
THE ROLES OF JOB DEMANDS-RESOURCES AND SUBJECTIVE WELLBEING**

*(PRESTASI KERJA DALAM PERKHIDMATAN AWAM MALAYSIA:
PERANAN TUNTUTAN-SUMBER KERJA DAN KESEJAHTERAAN SUBJEKTIF)*

1

Informed Consent Letter and Form

Dear Participant,

I am a PhD student at the University of Nottingham Malaysia Campus and I am conducting a research study for my PhD thesis. The purpose of the research is to study the relationship between Job Performance and job demands, job resources, work engagement, organisational commitment and wellbeing of Hospital staff in Malaysia Public Hospital. Therefore, my research sample consists of Hospital staff from various departments of Hospitals in the Klang Valley, Negeri Sembilan and Pahang. Insights gained from this study could lead to further understandings the Job Performance of Malaysian Public Servant, especially in the hospital.

This study will require you to answer several questionnaires; the Utrecht Work Engagement Scale, the Organisational Commitment Questionnaire, the Job Performance Questionnaires, the Religiosity and Spirituality Questionnaires as well as the Job Demands-Resources Scale. It also entails the completion of a demographic questionnaire for statistical purposes. All information is confidential and will not be revealed to your superior or colleagues. Complete anonymity of all participants will be ensured. The questionnaires will all be kept in accordance with University regulations. Participation is voluntary and you are completely free to withdraw from this study at any stage and for any reason. Please fill in the informed consent form if you agree to participate in this study.

Your participation will be greatly appreciated and will not take longer than 1 hour to complete. Please feel free to contact either myself, or my supervisor for any further clarification regarding this study.

Surat dan Borang Persetujuan Termaklum

Tuan/puan,

Saya adalah pelajar PhD di University of Nottingham Malaysia Campus dan saya sedang menjalankan kajian untuk tesis PhD saya. Tujuan kajian ini dijalankan adalah untuk melihat perhubungan antara prestasi kerja dan tuntutan-sumber kerja, penglibatan kerja, komitment organisasi dan kesejahteraan kakitangan hospital di dalam perkhidmatan awam. Sehubungan dengan itu, responden kajian saya terdiri dari kakitangan beberapa jabatan di hospital di Lembah Klang, Negeri Sembilan dan Pahang. Dapatan kajian akan membolehkan kita lebih memahami prestasi kerja dalam perkhidmatan awam Malaysia, terutamanya di hospital.

Kajian ini akan memerlukan tuan/puan untuk menjawab beberapa soalan berkaitan penglibatan kerja dari Utrecht, Komitment organisasi, Prestasi Kerja, Keagamaan dan Spiritual serta soalan berkaitan tuntutan-sumber kerja. Adalah penting untuk tuan/puan melengkapkan soal selidik demografi bagi tujuan pengumpulan statistik. Maklumat yang diberikan oleh tuan/puan adalah sulit dan tidak akan diketahui oleh ketua atau rakan sekerja tuan/puan. Semua soal selidik akan disimpan mengikut peraturan-peraturan Universiti. Penyertaan adalah secara sukarela dan tuan/puan bebas untuk menarik diri dari kajian ini di mana-mana peringkat dan untuk apa-apa sebab sekalipun. Kerjasama tuan/puan diperlukan untuk mengisi borang persetujuan di lampiran sebelum mengisi borang soal selidik ini.

Penyertaan tuan/puan sangat dihargai dan tidak akan mengambil masa lebih daripada 1 jam. Sila hubungi sama ada saya atau penyelia saya untuk sebarang penjelasan lanjut mengenai kajian ini.

Yours sincerely/Yang benar,

Fatimah Hanum Mohamad Hajari

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Email: 1) fhmh_2012@yahoo.com

     2) kscx2fha@nottingham.edu.my

Supervisor:
Dr. Marshall Valencia
E-mail: Marshall.Valencia@nottingham.edu.my

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Informed Consent Form

I, _____ (full name) hereby confirm that I understand the contents of this document and the nature of this research and I consent to participating in the research project.

I understand that I am at liberty to withdraw from the project at any time, should I so desire.

Signed on this _____ day of _____ 2015.

Signature

_____

ID/IC _____

Mobile Number _____ (for researcher identification only)

Borang Persetujuan Termaklum

Saya, _____ (Nama Penuh) dengan ini mengesahkan bahawa saya memahami kandungan dokumen ini, jenis kajian ini dan saya bersetuju untuk mengambil bahagian dalam kajian ini.

Saya faham bahawa saya bebas untuk menarik diri daripada kajian ini pada bila-bila masa saya kehendaki.

Ditandatangani pada _____ 2015.

Tandatangan

_____

No Kad Pengenalan _____
No Telefon _____ (Untuk kegunaan penyelidik sahaja)

IMPORTANT NOTE: PLEASE PUT THE QUESTIONNAIRE IN THE PROVIDED BOXES AFTER YOU HAVE COMPLETED THE SURVEY. THANK YOU.

NOTA PENTING: SILA MASUKAN KERTAS SOAL SELIDIK INI KE DALAM KOTAK YANG DISEDIAKAN APABILA ANDA SELESAI MENGISINYA. TERIMA KASIH.

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- **SECTION A (*BAHAGIAN A*)**

1. Gender (*Jantina*)

   Male (*Lelaki*) ☐

   Female (*Perempuan*) ☐

2. Age (*Umur*)

   ☐ Years (*Tahun*)

3. Religion (*Agama*)

   Islam ☐

   Budha ☐

   Hindu ☐

   Christian ☐

   Others ☐
   (*Lain-Lain-Nyatakan*)

   _____

4. Race (*Bangsa*)

   Malay (*Melayu*) ☐

   Chinese (*Cina*) ☐

   Indian (*India*) ☐

   Bumiputra Sabah ☐
   (*Nyatakan*)

   _____

   Bumiputera Sarawak ☐
   (*Nyatakan*)

   _____

   Others (*Lain-Lain*) ☐

   _____

5. Marital Status
   (*Taraf perkahwinan*)

   Single (*Bujang*) ☐

   Maried (*Berkahwin*) ☐

   Divorced/Widowed ☐
   (*Bercerai/Balu*)

4

6. Department/Unit (*Jabatan/Unit*)

_____

7. Years Working Within The Hospital
(*Tempoh Berkhidmat di Hospital ini*)

[ ] Years (*Tahun*)

8. Years in Public Service
(*Tempoh Berkhidmat Dalam Perkhidmatan Awam*)

[ ] Years (*Tahun*)

9. Highest Attained Qualification
(*Pendidikan Tertinggi*)

SPM [ ]

Diploma [ ]

First Degree (*Ijazah Sarjana Muda*) [ ]

Master Degree (*Ijazah Sarjana*) [ ]

PhD [ ]

Others (*Lain-Lain*) [ ]

_____

10. Position/Job (*Pekerjaan*)

Doctor
(*Pegawai Perubatan*) [ ]

Pharmacist
(*Pegawai Farmasi*) [ ]

Science Officer
(*Pegawai Sains*) [ ]

Administrator
(*Pentadbir*) [ ]

Nurse (*Jururawat*) [ ]

Medical Assistant
(*Pembantu Perubatan*) [ ]

Attendant
(*Pembantu Perawatan Kesihatan*) [ ]

Clerk (*Kerani*) [ ]

Others (*Lain-lain*) [ ]

_____

11. Level [ ]

(Example/*Contoh*: U52, U32, M41, C44, JC (Jusa C))

In order to get an accurate picture of your conduct at work, it is important that you complete the questionnaire as carefully and honestly as possible. If you are uncertain about how to answer a particular question, please give the best possible answer. Thank you.
(*Untuk mendapatkan gambaran yang tepat mengenai tingkah laku anda di tempat kerja, adalah penting untuk anda melengkapkan soal selidik dengan berhati-hati dan sejujur yang mungkin. Jika anda tidak pasti tentang bagaimana untuk menjawab sesuatu soalan, sila berikan jawapan yang terbaik. Terima kasih*)

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IMPORTANT NOTES:
PLEASE CHOOSE AND CIRCLE YOUR ANSWER.
(*SILA PILIH DAN BULATKAN JAWAPAN ANDA SEPERTI CONTOH DI BAWAH*)

1	(2)	3	4

- **SECTION B (BAHAGIAN B)**

Never	Sometimes	Mostly	Always
Tidak Pernah	Kadang-Kadang	Pada Kebanyakan Masa	Selalu
1	2	3	4

Please choose your answer based on your current job. Sila pilih jawapan berdasar kerja anda sekarang.				
1. Do you have too much work to do? Adakah anda mempunyai terlalu banyak kerja yang perlu dilakukan?	1	2	3	4
2. Do you work under time pressure? Adakah anda bekerja di bawah tekanan masa?	1	2	3	4
3. Do you have to be attentive to too many things at the same time? Adakah anda perlu memberikan perhatian kepada terlalu banyak perkara pada satu masa?	1	2	3	4
4. Do you have to give continuous attention to your work? Adakah anda perlu memberikan perhatian berterusan kepada kerja anda?	1	2	3	4
5. Do you have to remember many things in your work? Adakah anda perlu mengingati banyak perkara dalam pekerjaan?	1	2	3	4
6. Are you confronted with things in your work that affect you personally? Adakah anda berhadapan dengan perkara-perkara dalam kerja anda yang memberi kesan kepada anda secara peribadi?	1	2	3	4

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Never *Tidak Pernah* 1	Sometimes *Kadang-Kadang* 2	Mostly *Pada Kebanyakan Masa* 3	Always *Selalu* 4

Please choose your answer based on your current job.
Sila pilih jawapan berdasar kerja anda sekarang.

7. Do you have contact with difficult people in your work?
   Adakah anda mempunyai hubungan dengan orang yang menyukarkan dalam kerja anda?

   1 2 3 4

8. Does your work put you in emotionally upsetting situations?
   Adakah kerja anda meletakkan anda dalam situasi yang menggugat emosi?

   1 2 3 4

9. Do you feel that other people do not work as hard as you do?
   Adakah anda merasakan bahawa orang lain tidak bekerja keras seperti yang anda lakukan?

   1 2 3 4

10. Does your job offer you opportunities for personal growth and development?
    Adakah kerja anda menawarkan anda peluang untuk pertumbuhan dan perkembangan peribadi?

    1 2 3 4

11. Does your work give you the feeling that you can achieve something?
    Adakah pekerjaan anda memberikan anda perasaan bahawa anda boleh mencapai sesuatu?

    1 2 3 4

12. Does your job offer you the possibility of independent thought and action?
    Adakah pekerjaan anda menawarkan anda kemungkinan untuk pemikiran dan tindakan yang bebas?

    1 2 3 4

13. Do you have freedom in carrying out your work activities?
    Adakah anda mempunyai kebebasan untuk menjalankan aktiviti kerja anda?

    1 2 3 4

7

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	Never *Tidak Pernah* 1	Sometimes *Kadang-Kadang* 2	Mostly *Pada Kebanyakan Masa* 3	Always *Selalu* 4

Please choose your answer based on your current job.
Sila pilih jawapan berdasar kerja anda sekarang.

14. Do you have influence in the planning of your work activities?
Adakah anda mempunyai pengaruh dalam merancang aktiviti kerja anda? — 1 2 3 4

15. Can you participate in decisions about the nature of your work?
Bolehkan anda turut serta dalam membuat keputusan tentang jenis kerja anda? — 1 2 3 4

16. Do you have a direct influence on your organisations decisions?
Adakah anda mempunyai pengaruh langsung tentang keputusan organisasi anda? — 1 2 3 4

17. Can you count on your colleagues when you come across difficulties in your work?
Bolehkah anda bergantung kepada rakan sekerja anda apabila anda menghadapi kesukaran dalam kerja anda? — 1 2 3 4

18. Do you get on well with your colleagues?
Adakah anda dapat menyesuaikan diri dengan rakan sekerja anda? — 1 2 3 4

19. Can you count on your supervisor when you come across difficulties in your work?
Bolehkah anda bergantung kepada penyelia anda apabila anda menghadapi kesukaran dalam kerja anda? — 1 2 3 4

20. Do you get on well with your supervisor?
Adakah anda dapat menyesuaikan diri dengan penyelia anda? — 1 2 3 4

21. In your work, do you feel appreciated by your supervisor?
Dalam kerja anda, adakah anda rasa dihargai oleh penyelia anda? — 1 2 3 4

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Never	Sometimes	Mostly	Always
Tidak Pernah	*Kadang-Kadang*	*Pada Kebanyakan Masa*	*Selalu*
1	2	3	4

Please choose your answer based on your current job.
Sila pilih jawapan berdasar kerja anda sekarang.

22. Do you feel that the supervisors/leaders in your organisation are too lenient?
    Adakah ada merasakan penyelia-penyelia/pemimpin-pemimpin dalam organisasi anda terlalu berlembut?   1   2   3   4

23. Do you know exactly for what you are responsible?
    Adakah anda tahu sebenarnya apa yang anda dipertanggungjawabkan?   1   2   3   4

24. Do you know exactly what your direct supervisor thinks of your performance?
    Adakah anda tahu sebenarnya apa yang penyelia anda fikir tentang prestasi anda?   1   2   3   4

25. Do you receive sufficient information on the purpose of your work?
    Adakah anda menerima maklumat yang mencukupi untuk tujuan kerja anda?   1   2   3   4

26. Do you receive sufficient information of the results of your work?
    Adakah anda menerima maklumat yang mencukupi tentang hasil kerja anda?   1   2   3   4

27. Are you kept adequately up-to-date about important issues within your organisation?
    Adakah anda dimaklumkan tentang isu-isu penting dalam jabatan/organisasi anda?   1   2   3   4

28. Is the decision-making process in your organisation clear to you?
    Adakah proses membuat keputusan dalam organisasi anda jelas pada anda?   1   2   3   4

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	Never	Sometimes	Mostly	Always
	Tidak Pernah	Kadang-Kadang	Pada Kebanyakan Masa	Selalu
	1	2	3	4

Please choose your answer based on your current job.
Sila pilih jawapan berdasar kerja anda sekarang.

29. Is it clear to you whom you should address within the organisation for specific problems?
   Adakah anda jelas kepada siapakah anda perlu rujuk mengenai masalah tertentu?   1   2   3   4

30. Can you discuss work problems with your direct supervisor?
   Bolehkah anda berbincang tentang masalah kerja dengan penyelia anda?   1   2   3   4

31. Do you need to be more secure that you will still be working in one year's time?
   Adakah anda memerlukan lebih rasa selamat/keselesaan yang menyebabkan anda perlu terus bekerja dalam tempoh setahun ini?   1   2   3   4

32. Do you need to be more secure that you will keep your current job in the next year?
   Adakah anda memerlukan lebih rasa selamat/keselesaan yang menyebabkan anda perlu berada dalam pekerjaan anda sekarang untuk tahun seterusnya?   1   2   3   4

33. Do you need to be more secure that next year you will keep the same function level as currently?
   Adakah anda memerlukan lebih rasa selamat/keselesaan yang menyebabkan anda perlu terus mengekalkan level fungsi sekarang?   1   2   3   4

34. Do you think that your organisation pays good salaries?
   Adakah anda menganggap organisasi anda membayar gaji yang bagus?   1   2   3   4

10

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Never	Sometimes	Mostly	Always
Tidak Pernah	*Kadang-Kadang*	*Pada Kebanyakan Masa*	*Selalu*
1	2	3	4

Please choose your answer based on your current job. *Sila pilih jawapan berdasar kerja anda sekarang.*				
35. Can you live comfortably on your pay? *Bolehkah anda hidup selesa dengan gaji anda?*	1	2	3	4
36. Do you think you are paid enough for the work you do? *Adakah anda rasa anda dibayar secukupnya untuk kerja anda?*	1	2	3	4
37. Does your job offer you the possibility to progress financially? *Adakah pekerjaan anda menawarkan anda kemungkinan untuk peningkatan kewangan?*	1	2	3	4
38. Does your organisation give you opportunities to follow training courses? *Adakah organisasi anda memberi peluang untuk anda mengikuti kursus/latihan?*	1	2	3	4
39. Does your job give you the opportunity to be promoted? *Adakah kerja anda memberi peluang untuk anda dinaikkan pangkat?*	1	2	3	4

11

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Extremely Dissatisfied	Dissatisfied	Slightly Dissatisfied	Neither Satisfied nor Dissatisfied	Slightly Satisfied	Satisfied	Extremely Satisfied
Sangat Tidak berpuas Hati	*Tidak berpuas Hati*	*Agak Tidak Berpuas Hati*	*Tidak Pasti*	*Agak Berpuas Hati*	*Berpuas Hati*	*Sangat Berpuas Hati*
1	2	3	4	5	6	7

How satisfied are you with…
Sejauh mana anda berpuas hati dengan …

1. The lighting in your work area? *Pencahayaan di tempat kerja anda?*	1	2	3	4	5	6	7
2. The air quality in your work area? *Kualiti udara di tempat kerja anda?*	1	2	3	4	5	6	7
3. The general atmosphere of your work area? *Atmosfera umum di tempat anda bekerja?*	1	2	3	4	5	6	7
4. In general, the type of facilities provided in your work area? *Secara umumnya, jenis fasiliti yang disediakan di tempat kerja anda?*	1	2	3	4	5	6	7
5. The cleanliness of the facilities in your work area? *Kebersihan fasiliti di tempat kerja anda?*	1	2	3	4	5	6	7

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Never Tidak Pernah 1	Rarely Jarang-jarang 2	Sometimes Kadang-kadang 3	Often Agak kerap 4	Always Selalu 5

How often do you…
Berapa kerap anda…

1. Wear headphones when you are in the office?
   Memakai fon kepala semasa berada dalam pejabat?   1   2   3   4   5

2. Take a sudden leave from work just because you do not want to work that day?
   Mengambil cuti secara tiba tiba dari kerja hanya kerana anda tidak mahu bekerja pada hari berkenaan?   1   2   3   4   5

3. Position yourself with your back to your colleagues?
   Membelakangi/berpaling dari rakan sekerja and?   1   2   3   4   5

4. Pretend to be extremely busy?
   (i.e. Act as if you am being more active than you actually are)
   Berpura-pura sangat sibuk?
   (seperti berlagak seolah olah anda terlebih aktif dari biasa)   1   2   3   4   5

5. Leave the office earlier than you intend to?
   Meninggalkan pejabat cepat daripada yang anda hajati?   1   2   3   4   5

6. Keep personal thoughts to yourself and do not share them with colleagues or other people in the office?
   Menyimpan padangan peribadi dan tidak berkongsi dengan rakan sekerja atau orang lain di pejabat?   1   2   3   4   5

13

Strongly Disagree Sangat Tidak Bersetuju 1	Disagree Tidak Bersetuju 2	Slightly Disagree Agak Tidak Bersetuju 3	Uncertain Tidak Pasti 4	Slightly Agree Agak Setuju 5	Agree Setuju 6	Strongly Agree Sangat Bersetuju 7

To what extent do you agree with the following statements?
Sejauhmana anda bersetuju dengan kenyataan berikut?

1. I determine the organization/appearance of my work area.
Saya membuat keputusan atas susunatur/rupabentuk ruangan kerja saya.
1 2 3 4 5 6 7

2. I can personalize my workspace.
Saya boleh memperibadikan ruangan kerja saya.
1 2 3 4 5 6 7

3. I feel my work life is under my personal control.
Saya berasa kehidupan bekerja saya berada di dalam kawalan saya.
1 2 3 4 5 6 7

4. I have my own comfortable workspace.
Saya mempunyai ruang kerja sendiri yang selesa
1 2 3 4 5 6 7

5. My organisation has a very established and good program for job performance improvement.
Organisasi saya mempunyai program yang mantap dan baik untuk penambaikan prestasi kerja.
1 2 3 4 5 6 7

6. I found that the majority of employees in my organisation have a good job performance.
Saya mendapati majoriti pekerja di organisasi saya menunjukkan prestasi kerja yang baik.
1 2 3 4 5 6 7

7. My organisation has good leaders to ensure high job performance.
Organisasi saya mempunyai pemimpin yang baik untuk memastikan prestasi kerja yang tinggi.
1 2 3 4 5 6 7

8. The leaders in my organisation have closely monitored the employees' performance.
Pemimpin di organisasi saya memantau secara dekat prestasi pekerja-pekerja.
1 2 3 4 5 6 7

9. Strict action will be taken for non-performing individuals.
Tindakan tegas akan diambil kepada individu-individu yang tidak berprestasi.
1 2 3 4 5 6 7

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- **SECTION C (BAHAGIAN C)**

Strongly Disagree *Sangat Tidak Bersetuju* 1	Disagree *Tidak Bersetuju* 2	Slightly Disagree *Agak Tidak Bersetuju* 3	Uncertain *Tidak Pasti* 4	Slightly Agree *Agak Setuju* 5	Agree *Setuju* 6	Strongly Agree *Sangat Bersetuju* 7

To what extent do you agree with the following statements?
Sejauhmana anda bersetuju dengan kenyataan berikut?

1. I am confident I get the success I deserve in life.
   Saya yakin saya mendapat kejayaan yang saya impikan dalam hidup.

   1 2 3 4 5 6 7

2. Sometimes when I fail I feel worthless
   Kadang-kadang apabila saya gagal saya rasa tidak bernilai.

   1 2 3 4 5 6 7

3. Overall, I am satisfied with myself.
   Secara keseluruhan, saya berpuas hati dengan diri saya sendiri.

   1 2 3 4 5 6 7

4. I take a positive attitude toward myself.
   Saya mengambil sikap yang positif terhadap diri saya.

   1 2 3 4 5 6 7

5. On the whole I am satisfied with myself.
   Pada keseluruhannya saya berpuas hati dengan diri saya sendiri.

   1 2 3 4 5 6 7

6. When I try, I generally succeed.
   Apabila saya mencuba, saya biasanya berjaya.

   1 2 3 4 5 6 7

7. I complete tasks successfully.
   Saya menyelesaikan tugasan dengan jayanya

   1 2 3 4 5 6 7

8. I am filled with doubts about my competence.
   Saya penuh keraguan tentang kecekapan saya.

   1 2 3 4 5 6 7

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Strongly Disagree *Sangat Tidak Bersetuju* 1	Disagree *Tidak Bersetuju* 2	Slightly Disagree *Agak Tidak Bersetuju* 3	Uncertain *Tidak Pasti* 4	Slightly Agree *Agak Setuju* 5	Agree *Setuju* 6	Strongly Agree *Sangat Bersetuju* 7

To what extent do you agree with the following statements?
Sejauhmana anda bersetuju dengan kenyataan berikut?

9. I believe I can succeed at most any endeavor to which I set my mind.
Saya percaya saya boleh berjaya pada mana-mana usaha yang saya tetapkan dalam minda saya.

    1   2   3   4   5   6   7

10. I will be able to successfully overcome many challenges.
Saya akan mampu berjaya menangani pelbagai cabaran.

    1   2   3   4   5   6   7

11. I don't expect things to go wrong for me.
Saya tidak menjangkakan apa-apa menjadi tidak kena untuk saya.

    1   2   3   4   5   6   7

12. I am always optimistic about my future.
Saya selalu optimis tentang masa depan saya.

    1   2   3   4   5   6   7

13. I hardly ever expect things to go my way
Saya tidak pernah menjangkakan sesuatu perkara memihak kepada saya.

    1   2   3   4   5   6   7

14. I count on good things happening to me.
Saya mengharapkan perkara yang baik berlaku kepada saya.

    1   2   3   4   5   6   7

15. I expect more good things to happen to me than bad.
Saya menjangkakan sesuatu yang lebih baik akan berlaku kepada saya berbanding yang buruk.

    1   2   3   4   5   6   7

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- **SECTION D (BAHAGIAN D)**

Never Tidak Pernah 1	A few times a year or less Beberapa Kali Setahun atau Kurang 2	Once a month Sekali Sebulan 3	A few times a month Beberapa Kali Sebulan 4	Once a week Sekali Seminggu 5	A few times a week Beberapa Kali Seminggu 6	Everyday Setiap Hari 7

How many times you feel...
Berapa kali anda berasa...

1. I am bursting with energy in my work.
   Saya amat bertenaga dalam kerja saya.   1   2   3   4   5   6   7

2. I feel strong and vigorous in my job.
   Saya berasa kuat dan bertenaga dalam pekerjaan saya.   1   2   3   4   5   6   7

3. When I get up in the morning, I feel like going to work.
   Bila saya bangun di waktu pagi, saya rasa ingin pergi bekerja.   1   2   3   4   5   6   7

4. I am enthusiastic about my job.
   Saya bersemangat tentang kerja saya.   1   2   3   4   5   6   7

5. My job inspires me.
   Kerja saya memberi inspirasi kepada saya.   1   2   3   4   5   6   7

6. I am proud of the work that I do.
   Saya berbangga dengan kerja yang saya lakukan   1   2   3   4   5   6   7

7. I feel happy when I am engrossed in my work.
   Saya berasa gembira apabila saya asyik dengan tugasan.   1   2   3   4   5   6   7

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Never Tidak Pernah 1	A few times a year or less Beberapa Kali Setahun atau Kurang 2	Once a month Sekali Sebulan 3	A few times a month Beberapa Kali Sebulan 4	Once a week Sekali Seminggu 5	A few times a week Beberapa Kali Seminggu 6	Everyday Setiap Hari 7

How many times you feel…
Berapa kali anda berasa…

8. I am immersed in my work.
    Saya tenggelam dalam kerja saya.

    1   2   3   4   5   6   7

9. I get carried away by my work.
    Saya terbawa bawa dengan kerja saya.

    1   2   3   4   5   6   7

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- **SECTION E (BAHAGIAN E)**

Strongly Disagree *Sangat Tidak Bersetuju* 1	Disagree *Tidak Bersetuju* 2	Slightly Disagree *Agak Tidak Bersetuju* 3	Uncertain *Tidak Pasti* 4	Slightly Agree *Agak Setuju* 5	Agree *Setuju* 6	Strongly Agree *Sangat Bersetuju* 7

To what extent do you agree with the following statements?
Sejauhmana anda bersetuju dengan kenyataan berikut?

1. I would be very happy to spend the rest of my career in this organisation. *Saya sangat gembira untuk menghabiskan kerjaya saya di organisasi ini.*	1	2	3	4	5	6	7
2. I do not feel any obligation to remain with my current employer. *Saya tidak berasa apa apa kewajipan untuk kekal dengan majikan saya.*	1	2	3	4	5	6	7
3. It would be very hard for me to leave the organisation right now, even if I wanted to. *Sangat sukar untuk saya meninggalkan organisasi ketika ini, walaupun jika saya mahu.*	1	2	3	4	5	6	7
4. I really feel as if this organisation's problems are my own. *Saya amat berasa seolah olah masalah organisasi ini adalah masalah saya.*	1	2	3	4	5	6	7
5. Even if it were to my advantage, I do not feel it would be right to leave my organisation right now. *Walaupun, ia memberi kelebihan kepada saya, saya tidak rasa ianya baik untuk saya meninggalkan organisasi ketika ini.*	1	2	3	4	5	6	7
6. Too much of my life would be disrupted if I decided I wanted to leave my organisation right now. *Terlalu banyak perkara yang akan terganggu dalam hidup saya jika saya membuat keputusan meninggalkan organisasi saya ketika ini.*	1	2	3	4	5	6	7

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Strongly Disagree *Sangat Tidak Bersetuju* 1	Disagree *Tidak Bersetuju* 2	Slightly Disagree *Agak Tidak Bersetuju* 3	Uncertain *Tidak Pasti* 4	Slightly Agree *Agak Setuju* 5	Agree *Setuju* 6	Strongly Agree *Sangat Bersetuju* 7

To what extent do you agree with the following statements?
Sejauhmana anda bersetuju dengan kenyataan berikut?

7. I would feel guilty if I leave my organisation right now.
    Saya akan rasa bersalah jika meninggalkan organisasi ketika ini.
    1 2 3 4 5 6 7

8. I do not feel like "part of the family" at my organisation.
    Saya tidak rasa seperti "sebuah keluarga" ketika di organisasi saya.
    1 2 3 4 5 6 7

9. One of the few negative consequences of leaving this organisation would be scarcity of available resources.
    Salah satu daripada beberapa kesan negatif jika meninggalkan organisasi ini adalah akan kekurangan sumber yang ada.
    1 2 3 4 5 6 7

10. I would not leave my organisation right now because I have a sense of obligation to the people in it.
    Saya tidak akan meninggalkan organisasi saya sekarang kerana saya mempunyai rasa tanggungjawab kepada orang orang di dalamnya.
    1 2 3 4 5 6 7

11. This organisation has a great deal of personal meaning for me.
    Organisasi ini mempunyai banyak makna peribadi bagi saya.
    1 2 3 4 5 6 7

12. I feel that I have too few options to consider leaving this organisation
    Saya rasa saya ada sedikit pilihan untuk mempertimbangkan meninggalkan organisasi ini.
    1 2 3 4 5 6 7

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- **SECTION F (BAHAGIAN F)**

Never *Tidak Pernah* 0	Rarely *Jarang-jarang* 1	Sometimes *Kadang-kadang* 2	Often *Kerap* 3	All the time *Sepanjang Masa* 4

How often do you…
Berapa kerap anda…

1. Been bothered by fatigue? *Diganggu oleh keletihan?*	0	1	2	3	4
2. Become easily bored with work schedule? *Mudah berasa bosan dengan jadual kerja?*	0	1	2	3	4
3. Felt emotionally drained from your work? *Rasa terganggu emosi disebabkan kerja?*	0	1	2	3	4
4. Become easily annoyed or irritated as a result of pressure at work? *Menjadi mudah marah atau jengkel akibat tekanan di tempat kerja?*	0	1	2	3	4
5. Felt used up at the end of the workday? *Rasa digunakan sepenuhnya pada akhir waktu kerja?*	0	1	2	3	4
6. Felt tired when you got up in the morning and had to face another day on the job? *Rasa letih apabila bangun di waktu pagi dan perlu berhadapan dengan satu lagi hari bekerja?*	0	1	2	3	4
7. Got mixed up in your thinking when you have had to do things quickly? *Pemikiran bercampur aduk apabila anda perlu melakukan kerja dengan cepat?*	0	1	2	3	4
8. Broken out in a rash when you have been upset or excited? *Mendapat ruam apabila anda rasa kecewa atau teruja?*	0	1	2	3	4

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Never Tidak Pernah 0	Rarely Jarang-jarang 1	Sometimes Kadang-kadang 2	Often Kerap 3	All the time Sepanjang Masa 4

How often do you...
Berapa kerap anda...

	0	1	2	3	4
9. Felt burned out or stressed by your work? *Rasa "burn out" (kehabisan tenaga) atau stress dengan kerja?*	0	1	2	3	4
10. Done things rushly or on impulse? *Melakukan sesuatu dengan terburu-buru atau mengikut perasaan?*	0	1	2	3	4
11. Felt nervous and stressed? *Rasa gementar dan tertekan*	0	1	2	3	4
12. Felt drained from undertaking household activities like cooking and childcare? *Rasa terlalu penat selepas melakukan kerja-kerja rumah seperti memasak dan menjaga anak?*	0	1	2	3	4
13. Found things getting on your nerves and wearing you out? *Dapati ada yang menyebabkan anda rasa diganggu dan tidak sabar?*	0	1	2	3	4
14. Become afraid of unfamiliar places or people? *Menjadi takut kepada sesuatu tempat atau orang yang tidak dikenali?*	0	1	2	3	4
15. Become easily tired? *Menjadi mudah penat?*	0	1	2	3	4
16. Been bothered by minor health problems such as headaches or stomach upset? *Rasa terganggu dengan masalah kesihatan kecil seperti pening kepala atau sakit perut?*	0	1	2	3	4

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Never Tidak Pernah 0	Rarely Jarang-jarang 1	Sometimes Kadang-kadang 2	Often Kerap 3	All the time Sepanjang Masa 4

How often do you...
Berapa kerap anda...

17. Experienced numbness or tingling in your arms or legs?
    Mengalami kekebasan atau kesemutan di lengan atau kaki? 0 1 2 3 4

18. Had difficulty in falling or staying asleep?
    Menghadapi kesukaran untuk mula tidur atau tidur lena? 0 1 2 3 4

19. Been tense or jittery?
    Pernah rasa tegang atau gelisah? 0 1 2 3 4

20. Found that you could not cope with all the things you had to do?
    Dapati anda tidak boleh menangani semua perkara yang anda perlu lakukan? 0 1 2 3 4

21. Had any pains in the heart or chest?
    Pernah ada kesakitan di hati atau dada? 0 1 2 3 4

22. Been troubled by stammering?
    Pernah menghadapi masalah gagap? 0 1 2 3 4

23. Found it hard to make up your mind?
    Dapati sukar untuk membuat keputusan? 0 1 2 3 4

24. Worn yourself out worrying about your health?
    Dapati diri anda bimbangkan tentang kesihatan anda? 0 1 2 3 4

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- **SECTION G (BAHAGIAN G)**

Never *Tidak Pernah* 1	Rarely *Jarang-Jarang* 2	Sometimes *Kadang-Kadang* 3	Often *Kerap* 4	Always *Selalu* 5

How often do you…
Berapa kerap anda…

1. I try to understand the teachings of my religion in the Holy book/Qur'an.
   Saya cuba untuk memahami ajaran agama saya di dalam Kitab Suci/Al Quran. 1 2 3 4 5

2. I find ways to recycle anything that can still be of use.
   Saya mencari jalan untuk menggunakan semula barang yang masih boleh digunakan. 1 2 3 4 5

3. I try to avoid myself from giving donations.
   Saya cuba mengelakkan diri dari memberi derma/sumbangan. 1 2 3 4 5

4. I frequently share my religious values with my friends.
   Saya sering berkongsi nilai-nilai agama saya dengan rakan-rakan saya. 1 2 3 4 5

5. I immediately apologize if I have done wrong to someone.
   Saya terus memohon maaf jika saya bersalah terhadap seseorang. 1 2 3 4 5

6. I will ridicule someone in return when they ridicule me.
   Saya akan mengejek seseorang sebagai balasan apabila mereka mengejek saya. 1 2 3 4 5

7. I make effort to obey rules/advice of my religion (God) in my daily life.
   Saya berusaha untuk mematuhi peraturan/nasihat agama saya (Tuhan) dalam kehidupan seharian saya. 1 2 3 4 5

8. I am the first to greet when meeting another person.
   Saya orang yang pertama menyapa apabila bertemu orang lain. 1 2 3 4 5

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Never *Tidak Pernah* 1	Rarely *Jarang-Jarang* 2	Sometimes *Kadang-Kadang* 3	Often *Kerap* 4	Always *Selalu* 5

How often do you...
Berapa kerap anda...

	1	2	3	4	5
9. I criticize my friends when they do wrong. *Saya mengkritik rakan-rakan saya apabila mereka berbuat salah.*	1	2	3	4	5
10. I participate in recreational activities without neglecting religious norms. *Saya mengambil bahagian dalam aktiviti-aktiviti rekreasi tanpa mengabaikan norma-norma agama.*	1	2	3	4	5
11. I always obtain the facts before passing judgment. *Saya selalu mendapatkan fakta-fakta sebelum mengeluarkan pandangan.*	1	2	3	4	5
12. I do not feel worried when I send negative e-mails/SMS messages/information to people. *Saya tidak berasa bimbang apabila saya menghantar e-mel/ SMS/maklumat negatif kepada orang lain.*	1	2	3	4	5
13. I like to take advantages of opportunities to understand my religion with my family. *Saya suka mengambil peluang untuk memahami agama saya bersama-sama keluarga saya.*	1	2	3	4	5
14. I like to help the needy. *Saya suka membantu mereka yang memerlukan.*	1	2	3	4	5
15. I openly display my anger if somebody meddles with my belongings. *Saya secara terbuka menunjukkan kemarahan saya jika seseorang mengganggu barang kepunyaan saya.*	1	2	3	4	5
16. I practice solat/religious prayers as taught in my religion. *Saya mengamalkan solat solat/doa keagamaan seperti yang diajar dalam agama saya.*	1	2	3	4	5

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Never	Rarely	Sometimes	Often	Always
Tidak Pernah	*Jarang-Jarang*	*Kadang-Kadang*	*Kerap*	*Selalu*
1	2	3	4	5

How often do you…
Berapa kerap anda…

17. I forgive others who wrong me before they ask for my forgiveness.
Saya memaafkan orang lain yang bersalah terhadap saya, sebelum mereka meminta maaf daripada saya.   1   2   3   4   5

18. I gossip about others.
Saya mengumpat tentang orang lain.   1   2   3   4   5

19. I like to help the poor without anyone knowing.
Saya suka membantu golongan miskin tanpa sesiapa mengetahui.   1   2   3   4   5

20. I speak rudely to my parents when I am angry at them.
Saya bercakap kasar dengan ibu bapa saya apabila saya marahkan mereka.   1   2   3   4   5

21. I enjoy working in a team.
Saya seronok bekerja dalam satu pasukan.   1   2   3   4   5

22. Based on the scale provided, please rate your level of religious practice. (with "5" being High and "1" as Not practicing).
Berdasarkan skala yang diberi, mohon nyatakan tahap anda mempraktikan ajaran agama anda. (dengan "5" sangat tinggi dan "1" sebagai tidak mengamalkan)   1   2   3   4   5

- **SECTION H (BAHAGIAN H)**

Strongly Disagree *Sangat Tidak Bersetuju* 1	Disagree *Tidak Bersetuju* 2	Slightly Disagree *Agak Tidak Bersetuju* 3	Uncertain *Tidak Pasti* 4	Slightly Agree *Agak Setuju* 5	Agree *Setuju* 6	Strongly Agree *Sangat Bersetuju* 7

To what extent do you agree with the following statements?
Sejauhmana anda bersetuju dengan kenyataan berikut?

1. I set aside time for meditation and/or self-reflection. *Saya meluangkan masa untuk meditasi dan/atau bermuhasabah.*	1	2	3	4	5	6	7
2. I can find meaning in times of hardship. *Saya boleh mencari makna tersirat pada masa kesusahan.*	1	2	3	4	5	6	7
3. A person can be fulfilled without pursuing an active spiritual life. *Hidup seseorang boleh dipenuhi tanpa mengejar kehidupan rohani yang aktif.*	1	2	3	4	5	6	7
4. I find serenity by accepting things as they are. *Saya mencari ketenangan dengan menerima apa yang ada yang*	1	2	3	4	5	6	7
5. I have a relationship with someone I can turn to for spiritual guidance. *Saya mempunyai hubungan dengan seseorang yang saya boleh rujuk untuk bimbingan kerohanian.*	1	2	3	4	5	6	7
6. Prayers do not really change what happens. *Solat/sembahyang/doa tidak benar-benar mengubah apa yang berlaku.*	1	2	3	4	5	6	7

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Strongly Disagree	Disagree	Slightly Disagree	Uncertain	Slightly Agree	Agree	Strongly Agree
Sangat Tidak Bersetuju	*Tidak Bersetuju*	*Agak Tidak Bersetuju*	*Tidak Pasti*	*Agak Setuju*	*Setuju*	*Sangat Bersetuju*
1	2	3	4	5	6	7

To what extent do you agree with the following statements?
Sejauhmana anda bersetuju dengan kenyataan berikut?

7. In times of despair, I can find little reason to hope. *Pada ketika berputus asa, saya boleh mencari sedikit sebab untuk berharap.*	1	2	3	4	5	6	7
8. I have a personal relationship with a power greater than myself. *Saya mempunyai hubungan peribadi dengan kuasa yang lebih besar daripada diri saya sendiri.*	1	2	3	4	5	6	7
9. I have had a spiritual experience that greatly changed my life. *Saya mempunyai pengalaman rohani yang telah begitu mengubah hidup saya.*	1	2	3	4	5	6	7
10. When I help others I expect nothing in return. *Apabila saya membantu orang lain saya tidak mengharapkan apa-apa sebagai balasan.*	1	2	3	4	5	6	7
11. I don't take time to appreciate nature. *Saya tidak mengambil masa untuk menghargai alam semula jadi.*	1	2	3	4	5	6	7
12. I have joy in my life because of my spirituality. *Saya mempunyai kegembiraan dalam hidup kerana kerohanian saya.*	1	2	3	4	5	6	7

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Strongly Disagree *Sangat Tidak Bersetuju* 1	Disagree *Tidak Bersetuju* 2	Slightly Disagree *Agak Tidak Bersetuju* 3	Uncertain *Tidak Pasti* 4	Slightly Agree *Agak Setuju* 5	Agree *Setuju* 6	Strongly Agree *Sangat Bersetuju* 7

To what extent do you agree with the following statements?
Sejauhmana anda bersetuju dengan kenyataan berikut?

13. My relationship with a higher power helps me love others more completely.
Hubungan saya dengan kuasa yang lebih tinggi membantu saya menyayangi orang lain sepenuhnya.

   1   2   3   4   5   6   7

14. Spiritual writings enrich my life.
Penulisan kerohanian memperkayakan hidup saya.

   1   2   3   4   5   6   7

15. I have experienced healing after prayer.
Saya telah mengalami penyembuhan selepas solat/berdoa.

   1   2   3   4   5   6   7

16. My spiritual understanding continues to grow.
Kefahaman rohani saya terus berkembang.

   1   2   3   4   5   6   7

17. I focus on what needs to be changed in me, not on what needs to be changed in others.
Saya memberi tumpuan kepada apa yang perlu diubah di dalam diri saya, bukan pada apa yang perlu diubah pada orang lain.

   1   2   3   4   5   6   7

18. In difficult times, I am still grateful.
Dalam masa yang sukar, saya masih bersyukur.

   1   2   3   4   5   6   7

19. I have been through a time of suffering that led to spiritual growth.
Saya telah melalui masa penderitaan yang membawa kepada pertumbuhan rohani.

   1   2   3   4   5   6   7

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Strongly Disagree *Sangat Tidak Bersetuju* 1	Disagree *Tidak Bersetuju* 2	Slightly Disagree *Agak Tidak Bersetuju* 3	Uncertain *Tidak Pasti* 4	Slightly Agree *Agak Setuju* 5	Agree *Setuju* 6	Strongly Agree *Sangat Bersetuju* 7

To what extent do you agree with the following statements?
Sejauhmana anda bersetuju dengan kenyataan berikut?

20. I solve my problems without using spiritual resources.
    Saya menyelesaikan masalah saya tanpa menggunakan sumber kerohanian.

    1   2   3   4   5   6   7

21. I examine my actions to see if they reflect my values.
    Saya menilai tindakan saya untuk melihat jika ianya mencerminkan nilai-nilai saya.

    1   2   3   4   5   6   7

22. How spiritual a person do you consider yourself? (with "7" being the most spiritual).
    Sejauhmana tahap kerohanian anda pada pandangan anda? (dengan "7" sebagai sangat tinggi kerohanian)

    1   2   3   4   5   6   7

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- **SECTION I (BAHAGIAN I)**

Seldom	Sometimes	Frequently	Often	Always
Jarang-Jarang	*Kadang-Kadang*	*Agak Kerap*	*Kerap*	*Selalu*
0	1	2	3	4

Please rate how often have you engaged in each behaviour for the **past 3 months**.
*Sila nilaikan berapa kerap anda terlibat dengan setiap tingkah laku yang dinyatakan **dalam 3 bulan ke belakang**.*

1. I managed to plan my work so that it was done on time. *Saya boleh merancang kerja saya supaya ianya dapat disiapkan pada masanya.*	0	1	2	3	4
2. My planning was optimal. *Perancangan saya adalah optimum.*	0	1	2	3	4
3. I kept in mind the results that I had to achieve in my work. *Saya ingat tentang hasil yang perlu saya capai dalam kerja saya.*	0	1	2	3	4
4. I was able to separate main issues from side issues at work. *Saya dapat memisahkan isu-isu utama daripada isu-isu sampingan di tempat kerja.*	0	1	2	3	4
5. I was able to perform my work well with minimal time and effort. *Saya dapat melaksanakan kerja saya dengan baik dengan minimum yang masa dan usaha.*	0	1	2	3	4
6. I took on extra responsibilities. *Saya mengambil tanggungjawab tambahan.*	0	1	2	3	4
7. I started new tasks myself, when my old ones were finished. *Saya sendiri memulakan tugasan baru, apabila tugasan lama telah selesai.*	0	1	2	3	4
8. I took on challenging work tasks, when available. *Saya mengambil tugasan kerja yang mencabar, jika ada.*	0	1	2	3	4

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Seldom	Sometimes	Frequently	Often	Always
Jarang-Jarang	*Kadang-Kadang*	*Agak Kerap*	*Kerap*	*Selalu*
0	1	2	3	4

Please rate how often have you engaged in each behaviour for the **past 3 months**.
*Sila nilaikan berapa kerap anda terlibat dengan setiap tingkah laku yang dinyatakan **dalam 3 bulan ke belakang**.*

9. I worked at keeping my job knowledge up-to-date.
   Saya bekerja untuk memastikan pengetahuan kerja saya pada tahap terkini.

   0 1 2 3 4

10. I worked at keeping my job skills up-to-date.
    Saya bekerja untuk memastikan kemahiran kerja saya pada tahap terkini.

    0 1 2 3 4

11. I came up with creative solutions to new problems.
    Saya memberikan penyelesaian kreatif kepada masalah baharu.

    0 1 2 3 4

12. I keep looking for new challenges in my job.
    Saya berterusan mencari cabaran baru dalam kerja saya.

    0 1 2 3 4

13. I actively participated in work meetings.
    Saya secara aktif mengambil bahagian dalam mesyuarat kerja.

    0 1 2 3 4

14. I am willing to work harmoniously with others.
    Saya mahu bekerja dengan orang lain secara harmoni.

    0 1 2 3 4

15. I meet the norms of my workplace.
    Saya mememenuhi norma-norma/budaya di tempat kerja saya.

    0 1 2 3 4

16. I am always ready to offer help to my co-worker.
    Saya selalu bersedia untuk menawarkan bantuan kepada rakan sekerja saya.

    0 1 2 3 4

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Never	Seldom	Sometimes	Frequently	Often
Tidak Pernah	Jarang-Jarang	Kadang-Kadang	Agak Kerap	Kerap
0	1	2	3	4

Please rate how often have you engaged in each behaviour for the **past 3 months**.
*Sila nilaikan berapa kerap anda terlibat dengan setiap tingkah laku yang dinyatakan **dalam 3 bulan ke belakang.***

17. How often was the quality of your work below it should have been for the past 3 months?
    Berapa kerap kualiti kerja anda berada di bawah tahap yang sepatutnya dalam 3 bulan ke belakang?

    0 1 2 3 4

18. How often was the quantity of your work less than it should have been for the past 3 months?
    Berapa kerap kuantiti kerja anda kurang dari yang sepatutnya dalam 3 bulan ke belakang?

    0 1 2 3 4

Insufficient	Quite Insufficient	Average	Good	Very Good
Tidak Mencukupi	Agak Tidak Mencukupi	Sederhana	Baik	Sangat Baik
0	1	2	3	4

Please rate the level of your work quantity and quality.
Sila nilaikan tahap kualiti dan kuantiti kerja anda

19. How do you rate the quality of your own work in the past 3 months?
    Bagaimana anda menilai tahap kualiti kerja anda dalam 3 bulan ke belakang?

    0 1 2 3 4

20. How do you rate the quantity of your own work in the past 3 months?
    Bagaimana anda menilai tahap kuantiti kerja anda dalam 3 bulan ke belakang?

    0 1 2 3 4

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Much Worse Lebih Teruk 0	Worse Teruk 1	Same Sama 2	Better Lebih Baik 3	Much Better Jauh Lebih Baik 4

Please rate the level of your work quality and quantity.
Sila nilaikan tahap kualiti dan kuantiti kerja anda

21. Compared to last year, I judge the quality of my work in the past 3 months to be... *Berbanding dengan tahun lepas, saya menilai kualiti kerja saya dalam 3 bulan ke belakang sebagai...*	0 1 2 3 4
22. Compared to last year, I judge the quantity of my work in the past 3 months to be... *Berbanding dengan tahun lepas, saya menilai kuantiti kerja saya dalam 3 bulan ke belakang sebagai...*	0 1 2 3 4

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Strongly Disagree *Sangat Tidak Bersetuju* 1	Disagree *Tidak Bersetuju* 2	Slightly Disagree *Agak Tidak Bersetuju* 3	Uncertain *Tidak Pasti* 4	Slightly Agree *Agak Setuju* 5	Agree *Setuju* 6	Strongly Agree *Sangat Bersetuju* 7

To what extent do you agree with the following statements?
Sejauhmana anda bersetuju dengan kenyataan berikut?

23. I have never been issued a letter because of disciplinary problem.
Saya tidak pernah menerima surat kerana masalah disiplin.

   1   2   3   4   5   6   7

24. On average I see myself as a top performer
Secara purata saya melihat diri saya sebagai seorang yang berprestasi tinggi.

   1   2   3   4   5   6   7

25. My superior is always satisfied with my job performance.
Ketua saya selalu berpuas hati dengan prestasi kerja saya.

   1   2   3   4   5   6   7

26. My co workers are always satisfied with my job performance.
Rakan sekerja saya selalu berpuas hati dengan prestasi kerja saya

   1   2   3   4   5   6   7

27. My clients are always satisfied with my job performance.
Pelanggan saya selalu berpuas hati dengan prestasi kerja saya.

   1   2   3   4   5   6   7

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28. What are among the actions taken to curb job performance problem in your organisation?
   Apakah di antara tindakan yang diambil untuk membendung masalah prestasi kerja dalam organisasi anda?

   a. _____

   b. _____

   c. _____

29. Please stated your Annual Appraisal Marks for the last 3 years. If you do not know the exact marks, you can fill in an average mark that you received for the past three years.
   Sila nyatakan markah nilaian prestasi anda 3 tahun kebelakang. Jika anda tidak mengetahui markah yang tepat, anda boleh mengisi tempat kosong dengan markah purata yang anda terima tempoh tiga tahun yang lalu.

   a. 2014 _____

   b. 2013 _____

   c. 2012 _____

   This is a confidential information. This survey form will only be known to the research team members. If you feel hesitated in answering any of the questions, you are most welcome to contact the researcher for explanation. Thank You.
   Maklumat ini adalah sulit, borang soal selidik ini hanya akan dilihat oleh kumpulan pengkaji sahaja. Jika anda berasa ragu-ragu untuk menjawab mana-mana soalan, anda amat dialu-alukan untuk menghubungi penyelidik untuk penjelasan. Terima Kasih.

- YOUR COMMENTS – on Job performace in the Public Service)

  (KOMEN ANDA – *Tentang Prestasi Kerja Dalam Perkhidmatan Awam)*

  _____

  _____

  _____

  _____

  _____

  _____

  _____

  _____

  _____

  _____

  _____

THANK YOU-TERIMA KASIH

Appendix 4 - Cover Letter (Malay)

Fatimah Hanum binti Mohamad Hajari
No 68, Jalan Warisan Indah 8/6
Kota Warisan
43900 Sepang
Selangor

YBhg. Dato' Dr. Hj. Bahari bin Dato' Tok Muda Hj. Awang Ngah
Pengarah
Hospital Sultan Haji Ahmad Shah
Jalan Maran
28000 Temerloh
Pahang Darul Makmur   26 Februari 2015

YBhg. Dato,

PERMOHONAN MENJALANKAN KAJIAN "JOB PERFORMANCE IN MALAYSIAN PUBLIC SERVICE : THE ROLES OF JOB DEMANDS-RESOURCES AND SUBJECTIVE WELLBEING"

Adalah saya dengan hormatnya merujuk kepada perkara di atas.

2.   Sukacita saya Fatimah Hanum binti Mohamad Hajari (No. KP: 740101-06-7508), merupakan seorang Pegawai Tadbir dan Diplomatik yang telah diberi kelulusan Cuti Belajar Bergaji Penuh untuk melanjutkan pengajian PhD di Faculty of Arts and Social Science, University of Nottingham Malaysia Campus. Salah satu syarat untuk saya mendapatan PhD saya adalah dengan melaksanakan kajian sistematik bagi penulisan tesis.

3.   Sehubungan dengan itu, sukacita saya memohon kelulusan pihak YBhg. Dato untuk melaksanakan kajian seperti tajuk di atas bersama kakitangan Hospital YBhg. Dato mulai 2 Mac 2015 hingga selesai kajian dilaksanakan. Untuk makluman YBhg. Dato, kajian ini bertujuan untuk melihat prestasi kerja dalam perkhidmatan awam iaitu Hospital daripada perspektif kakitangan hospital. Hasil kajian adalah sulit dan digunakan untuk tujuan penulisan dalam PhD saya sahaja. Kajian ini mempunyai dua peringkat, iaitu satu peringkat soal selidik

dengan temuduga dan satu peringkat edaran soal selidik (survey). Setiap peringkat kajian akan mengambil masa maksimum 2 minggu dan dijalankan pada bulan tertentu seperti di lampiran yang saya sertakan.

4.   Untuk makluman YBhg. Dato, saya telah pun memperolehi kelulusan daripada pihak Jawatankuasa Etika dan Penyelidikan Perubatan, Kementerian Kesihatan Malaysia dan bersama sama ini saya lampirkan surat kelulusan berkenaan.

Di atas kerjasama dan kesudian pihak YBhg. Dato menerima kehadiran saya untuk melaksanakan kajian berkenaan amatlah saya hargai. Budi baik YBhg. Dato dan kakitangan yang sudi membantu saya menyiap kajian tesis PhD saya ini, saya dahului dengan ucapan ribuan terima kasih.

Sekian.

Yang Benar,

(FATIMAH HANUM BINTI MOHAMAD HAJARI)
No. Telefon: 012-3221246
Emel: fhmh_2012@yahoo.com
        kscx2fha@nottingham.edu.my

Appendix 4

<p style="text-align: center; font-weight: bold;">JADUAL PELAKSANAAN KAJIAN
"JOB PERFORMANCE IN THE MALAYSIAN PUBLIC SERVICE: THE ROLES OF JOB DEMANDS-
RESOURCES AND SUBJECTIVE WELLBEING"</p>

HOSPITAL: SULTAN HAJI AHMAD SHAH, TEMERLOH, PAHANG

Bil.	Jenis Kajian	Tarikh Mula Kajian
1.	Kajian Kualitatif – Temuduga	2 Mac 2015
2.	Kajian Kuantitatif – edaran soal selidik	1 June 2015

Appendix 4

Ruj. Kami : (5) KKM/NIHSEC/P15-120
Tarikh :11hb Februari 2015

Fatimah Hanum Binti Mohamad Hajari
The University Of Nottingham Malaysia Campus

Tuan/Puan,

NMRR-14-1460-23395 (IIR)
Job Performance In Malaysia Public Hospitals: The Roles Of Job Demand-
Resources And Subjective Wellbeing

Lokasi Kajian :

Bil	Site Conducted
1	Hospital Kuala Lumpur
2	Hospital Putrajaya
3	Hospital Serdang
4	Hospital Tuanku Jaafar, Seremban
5	Hospital Sultan Haji Ahmad Shah, Temerloh
6	Hospital Tampin

Dengan hormatnya perkara di atas adalah dirujuk.

2. Jawatankuasa Etika & Penyelidikan Perubatan (JEPP), Kementerian Kesihatan Malaysia (KKM) tiada halangan dari segi etika ke atas pelaksanaan kajian tersebut. JEPP mengambil maklum bahawa kajian tersebut tidak mempunyai intervensi klinikal ke atas subjek dan hanya menggunakan **borang kaji soal selidik** sahaja untuk mengumpul data kajian.

3. Segala rekod dan data subjek adalah **SULIT** dan hanya digunakan untuk tujuan kajian ini dan semua isu serta prosedur mengenai data confidentiality mesti dipatuhi. Kebenaran daripada Pegawai Kesihatan Daerah/Pengarah Hospital dan Ketua-Ketua Jabatan atau pegawai yang bertanggung jawab disetiap lokasi kajian di mana kajian akan dijalankan mesti diperolehi sebelum kajian dijalankan. Tuan/Puan perlu akur dan mematuhi keputusan tersebut.

540

4. Adalah dimaklumkan bahawa kelulusan ini adalah sah sehingga **11hb Februari 2016**. Tuan/Puan perlu menghantar dokumen-dokumen seperi berikut selepas mendapat kelulusan etika . Borang-borang berkaitan boleh dimuat turun daripada laman web MREC (http://www.nih.gov.my/mrec).

I. 'Continuing Review Form' selewat-lewatnya 2 bulan sebelum tamat tempoh kelulusan ini bagi memperbaharui kelulusan etika.
II. Laporan tamat kajian pada penghujung kajian.
III. Laporan mengenai "All adverse events, both serious and unexpected"/Protocol Deviation atau Violation kepada Jawatankuasa Etika & Penyelidikan Perubatan, KKM jika berkenaan.
IV. Memaklumkan jika terdapat pindaan keatas sebarang dokumen kajian.

5. Sila ambil maklum bahawa sebarang urusan surat-menyurat berkaitan dengan penyelidikan ini haruslah dinyatakan nombor rujukan surat ini untuk melicinkan urusan yang berkaitan.

Sekian terima kasih.

BERKHIDMAT UNTUK NEGARA

Saya yang menurut perintah,

(DATO' DR CHANG KIAN MENG)
Pengerusi
Jawatankuasa Etika & Penyelidikan Perubatan
Kementerian Kesihatan Malaysia

Pengarah
Hospital Kuala Lumpur

Pengarah
Hospital Putrajaya

Pengarah
Hospital Serdang

Pengarah
Hospital Tuanku Jaafar, Seremban

Appendix 5 - Cover Letter (English)

Fatimah Hanum binti Mohamad Hajari
No 68, Jalan Warisan Indah 8/6
Kota Warisan
43900 Sepang
Selangor

YBhg. Dato' Dr. Hj. Bahari bin Dato' Tok Muda Hj. Awang Ngah
Director
Hospital Sultan Haji Ahmad Shah
Jalan Maran
28000 Temerloh
Pahang Darul Makmur   26 February 2015

YBhg. Dato,

APPLICATION REQUEST TO UNDERTAKE RESEARCH ON "JOB PERFORMANCE IN THE MALAYSIAN PUBLIC SERVICE: THE ROLES OF JOB DEMANDS-RESOURCES AND SUBJECTIVE WELLBEING"

With reference to the abovementioned subject.

2.   I am Fatimah Hanum binti Mohamad Hajari (Identification Number: 740101-06-7508), is an Administrative and Diplomatic officer who has been granted the approval to pursue my PhD at the Faculty of Arts and Social Science, University of Nottingham Malaysia Campus. One of the main requirements for my PhD is to undertake a systematic research and produce a thesis based on the findings.

3.   I would like to seek your approval to run a research as per the above topic using your hospital's employee data and also conduct a survey to complete the study. My plan is to start this activity on 2nd March 2015. For your information, the purpose of this study is to explore the job performance in public service, specifically from the perspective of the hospital's employees. All data collected is confidential and only be used for the PhD purposes. There are two parts of this study; the interview and the survey part. Each part will take two weeks maximum as detailed out in the attachment.

4.   For your information, I have already received the approval from Medical Research and Ethics Committee, Ministry of Health Malaysia and herewith I attach the approval letter for your reference.

I seek your support and approval to proceed with this study and really appreciate it if you could accommodate my request. I would like to thank you and your hospital employees in advance for your participation and support in kind.

Thank you.

Yours truly,

(FATIMAH HANUM BINTI MOHAMAD HAJARI)
Mobile Telephone Number: 012-3221246
Email: fhmh_2012@yahoo.com
         kscx2fha@nottingham.edu.my