

IMPACT OF SERVICE ORIENTATION ON JOB SATISFACTION IN HOSPITAL: SEMEN PADANG HOSPITAL EMPLOYEE STUDY, INDONESIA

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ABSTRACT

Improving the competitiveness of health services at Semen Padang Hospital (SPH) Indonesia requires internal orientation in implementing strategies and improving employee performance involving all components of the company. This service orientation plays a very important role in the company's operations, where the role of this service orientation can be felt by hospital employees. This study aims to determine the effect of service orientation on job satisfaction at SPH Indonesia. The study used a survey method using questionnaire data on employees of the SPH Padang Hospital, Indonesia, with as many as 120 respondents with the criteria of at least two years of work. The analysis used in this study used a validity test, the reliability of the criminal validity test, and the data were analyzed using the PLS-SEM method. The results of the study found that there was an influence between service orientation and job satisfaction. Service orientation has a positive influence on job satisfaction, and it can be seen that the value of the service orientation coefficient on job satisfaction (t statistic $> t$ (table) $0.809 > 1.96$, which is the magnitude of the influence given by the service orientation construct on job satisfaction in hospital employees SPH Padang, Indonesia. Service orientation indirectly has a significant effect on job satisfaction.

Keywords: Service Orientation, Job Satisfaction, Semen Padang Hospital, PLS-SEM.

1. Introduction

The development of advances in science and technology in the field of medicine has a good impact on education, the social economy of the community, and the quality of health services. The quality of health services, such as hospitals, must be considered because it relates to patient safety. Service quality is a standard level of perfection that satisfies consumers and service providers, while the organization is defined as a group of people who interact with each other to achieve goals. One example of an organization is a hospital. A hospital is a place for providing health services where employees interact directly with customers (Yao, et al., 2019).

Hospitals, as organizations that provide health services to the community, are faced with an increasingly competitive environment. With the emergence of several private hospitals, in terms of cost escalation, patient needs for complete health facilities and good services continue to increase. Minimum service standards for hospitals have been set in law number 44 of 2009 Kepmenkes no. 129 of 2008, but people prefer hospitals with the best services. To face global competition, the hospital must improve the management of the provision of health services in order to provide better services to patients. The paradigm of the hospital as a place for social organization makes hospital managers change the stigma because the hospital is not merely a place of an organization but an orientation with a business approach. Improvements in facilities such as medical technology and several facilities to support maximum service make hospital

managers continue to try to improve hospital management both socially and economically, especially in government hospitals; this is due to the limitations of facilities and technology in serving the community. Kunto, 2004). The limitations of health facilities in serving patients in hospitals make people turn to private hospitals in the hope that private hospital services for patients are more important (Yiyang, 2012). A private hospital is a type of business that is engaged in health services, good service, and profit-oriented (Chen, et al., 2015). To increase attractiveness to consumers and increase competitiveness against other hospitals, the management of a private hospital must have components such as operating costs, maintenance costs for a hospital and development costs for new hospital investments, all of which are obtained from the hospital's own income (Warsi, et al., 2009). One of the private hospitals in the city of Padang, Indonesia, is Semen Padang Hospital (SPH).

SPH Indonesia is a private hospital in the city of Padang, Indonesia. In 2013 this SPH started running; the initial establishment of this hospital started with the establishment of a foundation from the company PT. Semen Padang is a health clinic that was built in 1970, later changed its name to the Health Bureau Unit. Along with the need for health services, in 1997, the Health Bureau Unit developed into SPH. The role of a hospital began to be carried out by the management of PT. Padang Cement. It's not enough, management continues to develop by changing the Legal Entity of the Semen Padang Hospital Foundation to the Semen Padang Foundation in 2009. Evidence of the performance of standardized SPH services to patients, in 2012, SPH fully passed three years of national accreditation with five fields of service to patients. In 2020, SPH carried out the operational cooperation of the State-owned enterprises (BUMN) Hospital phase III, the operational management cooperation model covering 5 main scopes including operations, assisted human resources, marketing, scientific development and information and technology systems which will later become the holding of BUMN Hospitals in Indonesia. (Semen Padang Hospital, 2020).

One of the important activities in improving services is service orientation activities. This service orientation plays a very important role in the company's operations, where the role of this service orientation can be felt both at the employee and organizational level (hospital). Hogan et al., 2004; Saura et al. 2005) explains that service orientation at the individual level can be defined as a set of attitudes and behaviors that affect the quality of interaction between organizational employees and consumers. At the same time, service orientation at the organizational level is an internal design characteristic such as organizational structure, atmosphere, and culture (Kim et al., 2004). The results of the research by Imannury and Syafrizal (2020) state that COSE has a positive and significant effect on customer satisfaction, customer commitment, and relationship outcomes. Given the important role of employee behavior in influencing customer and service outcomes, it becomes an important factor to identify the factors that drive this behavior. Research shows that employee performance attributes are influenced by the prevalent leadership style in organizations (Harter et al., 2002; May et al., 2004; Schaufeli et al., 2002). Apart from leadership, another variable that seems to drive positive employee behavior and highly significant employee engagement. The effect of employee engagement on profitability through its impact on productivity, sales, customer satisfaction and retention, increased security, and customer loyalty (Hewitt Associates, 2004;

Markos and Sridevi, 2010; Ellis and Sorensen, 2007). The relationship between leadership and employees is a very important relationship in an organization (Carasco et al., 2014). Based on the description above, research on the impact of service orientation on satisfaction for analysis of the quality of employee service to patients at SPH, Indonesia, needs to be done to see how satisfied an employee is with his work at the hospital.

2. METHODS

2.1 Types of research

The type of research used in this research is field research, which is looking at the internal service orientation data of SPH Padang, Indonesia.

2.2 Research methods

Data were taken primary and secondary. Primary data is generated directly by the researcher for a specific purpose in answering the research [Malhotra (2004)]. Primary data was obtained from survey data by distributing questionnaires. Questionnaires were distributed to all employees of SPH Padang Hospital, Indonesia, including medical personnel, administration and other employees. Meanwhile, formal interviews were conducted with the SPH hospital manager or assistant manager, and informal interviews with SPH hospital employees. The questionnaire was filled in self-administered, ie the questionnaire was filled in directly by the respondent. Questionnaires that have been filled out by employees are collected in the human resources department of SPH. Secondary data is data collected from pre-existing sources for various purposes, such as journal literature, website sites regarding the object of this research (Malhotra, 2004).

2.3 Research Population and Sampling Method

The population in this study were all SPH employees. The research sample size was 120 employees. In this study, the sampling technique was purposive sampling with special characteristics of the respondents, such as a minimum working period of 1 year. The purpose of this purposive sampling is to make it easier for sampling and a relatively fast time (Santoso, 2004).

2.4 Research variable

2.4.1 Service Orientation

The questionnaire for service orientation was taken from the SERV*OR questionnaire developed by Robert S. Lytle (1998) with ten variables, namely: service vision, servant leadership, customer treatment, employee empowerment, service rewards, service training, service technology, service failure prevention, service failure recovery, and service standard communication. The SERV*OR questionnaire consists of 36 questions on the observed variable; service vision consists of 3 questions, servant leadership six questions; customer treatment three questions, employee empowerment three questions, service rewards two questions, service training three questions, service technology three questions, service failure

prevention three questions, service failure recovery five questions and service standard communication five questions.

2.4.2 Job satisfaction

Job satisfaction questionnaire is used to measure employee satisfaction with their work. The job satisfaction questionnaire was taken from the Minnesota Satisfaction Questionnaire developed by Weiss et al., (1979). The job satisfaction questionnaire consists of 5 variables, namely the work itself, co-workers, salary, promotion and supervision with 40 questions with each variable consisting of 8 questions.

2.5 Data analysis technique

2.5.1 Variable Relationship Analysis using PLS-SEM

When using PLS-SEM, researchers need to follow several stages of the process involving specification of inner and outer models, data collection and examination, estimation of actual models, and evaluation of results. This study refers to the three stages used by Hair et al., (2014), which are as follows: model specification, evaluation of the outer model, evaluation of the inner model, and specification of the model.

2.5.2 Outer Model Evaluation

Another assessment of the structural model involves the model's ability to predict. The main measure of predictive relevance is Q-Squares which postulates that the model should be able to adequately predict each indicator of endogenous latent variables. The Q-Squares value was obtained by using the blindfolding procedure. The blindfolding procedure is only applied to endogenous latent constructs that have a reflective measurement model specification. Q-Squares comes in two forms, namely the cross-validated redundancy construct and the cross-validated communality construct. The cross-validated redundancy construct fits perfectly with the PLS-SEM approach. If the value of Q-Squares > 0 indicates that the exogenous variable has predictive relevance to the endogenous variable (Hair et al., 2011). Q-Squares value 0.02; 0.15; and 0.35 indicates that the model has weak, moderate, and strong predictive relevance (Hair et al., 2013).

2.5.3 Path Coefficients- Bootstrapping

To test the direction and significance of the influence of each construct or variable, the bootstrapping method can be used by looking at the values in the path coefficients table. The significance value used (two tailed) t-value 1.65 (significance level, p-value 5%); 1.96 (significance level, p-value 10%); and 2.58 (significance level, p-value 1%).

3. RESULT AND DISCUSSION

Table 4.1 can be seen that the rate of return of the questionnaire (response rate) is 100%, which is calculated from the percentage of the number of returned questionnaires divided by the number of questionnaires distributed.

Table 1. Response Rate

Information	Amount
Distributed Questionnaire	120
Questionnaire that does not return	0
Questionnaire returned and processed	120
Response rate = (120/ 120x 100%)	100%

3.1 Characteristics of Respondents by Gender

Based on the results of the questionnaire distribution, the characteristics of respondents based on gender can be presented in Table 5.

Table 2. Characteristics of Respondents by Gender

No	Gender	Amount	
		Respondent	Percentage
1	Man	25	20.83%
2	Woman	95	79.17%
Amount		120	100%

Table 5 can be seen that from 120 respondents, 25 respondents were male or 20.83%, while 95 respondents were female or 79.17%. This shows that SPH employees are dominated by female employees.

3.2 Characteristics of Respondents Based on Age

Based on the results of the questionnaire distribution, the characteristics of respondents based on age can be presented in Table 5. In Table 4.3 it can be seen that respondents aged 1-25 years were 26 respondents or 21.67%, respondents aged 26-35 years were 71 respondents or 59.15% , respondents aged 36-45 years were 21 respondents or 17.5%, respondents aged 46-55 years were 2 respondents or 1.67%. This shows that SPH hospital employees are dominated by employees aged 26-35 years, amounting to 59.15%. This age is the productive period of the employees at SPH, because their retirement period is 56 years old.

Table 3. Characteristics of Respondents Based on Age

No	Age	Amount	
		Respondent	Respondent
1	17- 25 Years	26	21.67%
2	26 - 35 Years	71	59.15%
3	36 - 45 Years	21	17.5%
4	46 -55 Years	2	1.67%
Amount		120	100%

3.3 Characteristics of Respondents Based on Last Education

Based on the results of the questionnaire distribution, the characteristics of the respondents based on the last education can be presented in Table 6.

Table 4: Characteristics of Respondents Based on Last Education

No	Last education	Amount	
		Respondent	Respondent
1	Senior High School	7	5.83%
2	Associate Degree	52	43.3%
3	Bachelor degree	55	45.83%
4	Undergraduate	4	3.33%
5	Nurse Profession	2	1.67%
	Jumlah	120	100%

Table 6 can be seen that respondents with high school education are 7 respondents or 5.83%, respondents with D3 education are 52 respondents or 43.3%, respondents with undergraduate education are 55 respondents or 45.83% and respondents with master education as many as 4 respondents or 3.33% and respondents with professional nursing education as many as 2 respondents or 1.67%. This shows that SPH Padang hospital employees are dominated by employees with the latest education diploma 3 (D3), which is 43.3%. This is because the number of questionnaires distributed to hospitals is limited and the questionnaires returned after the questionnaires are distributed are dominated by D3 graduates, namely nurses.

3.4 Characteristics of Respondents Based on Length of Work

Based on the results of distributing questionnaires, the characteristics of respondents based on length of work can be presented in Table 7.

Table 5: Characteristics of Respondents Based on Length of Work

No	Long Working	Amount	
		Respondent	Respondent
1	6 Months-1 Year	3	2.5%
2	1-2 Years	40	33.33%
3	>2 Years	77	64.17 %
	Amount	120	100%

Table 7 shows that respondents have worked 6 months - 1 year as many as 3 respondents or about 2.5%, respondents have worked 1-2 years as many as 40 respondents or about 33.33% and respondents have worked longer than 2 years as many as 77 respondents or approx. 64.17%. This shows that the employees of the Padang SPH Hospital are dominated by employees with a length of service or working period of > 2 years. Based on the table above, it was found that the most employees at the Padang SPH Hospital were found to have worked in the hospital for a long time, with a percentage of 64.17% categorized as employees who persisted in working at the SPH hospital. According to Herviani (2019), there is a relationship between length of work and organizational commitment and there is a significant correlation between length of work and organizational commitment. Riggio (2009) adds that employees who have high organizational commitment tend to create positive behavior and increase employee contributions to a job.

3.5 Service Orientation Variables

Service orientation is measured using a Likert scale using 19 (nineteen) statement items, the average of each statement in this study can be seen in table 8.

Table 6: Distribution of Service Orientation Frequency Based on Likert Scale

No	Variables and Statements	STS	TS	N	S	SS	average
		1	2	3	4	5	
Service Orientation							
a. Customer Treatment							
1.	Do you think the employees at this hospital care about customers the way they want to be cared for	2	2	13	83	20	3.98
2.	Do you think the employees at this hospital try very hard for the customers	-	1	12	76	31	4.11
3.	Do you think this hospital looks more friendly and polite than other hospitals.	-	-	17	68	35	4.08
b. Employee Empowerment							
4.	Do you think the employees at this hospital have their own way of reducing inconvenience to customers	1	2	19	80	18	3.84
5.	Do you think decisions at this hospital were made "close to the customer". In other words, employees often make important decisions without seeking management approval.	6	42	28	34	10	2.90
6.	Do you think that employees at this hospital have the freedom and authority to act independently to produce the best service?	1	20	36	53	10	3.29
c. Service Technology							
7.	In your opinion, does this hospital improve service capabilities through the use of the most up-to-date technology.	-	2	26	79	13	3.29
8.	In your opinion, is this hospital technology used to build and develop a higher level of quality of care	-	1	20	82	17	3.67
9.	whether the hospital uses advanced technology to support the actions of front-line employees.	1	3	30	72	14	3.74
d. Service Failure Prevention							
10.	Do you think this hospital provides its own way of preventing customer problems	-	-	25	87	8	3.55
11.	Do you think this hospital provides its own way of preventing customer problems rather than reacting to every problem that arises.	-	4	40	67	9	3.59
12.	Do you think this hospital actively listens to customers.	-	1	21	81	17	3.39
e. Service Failure Recovery							
13.	Do you think this hospital has a telephone service to confirm that the service has been best provided	-	2	23	78	17	3.62
14.	In your opinion, does this hospital provide a real guarantee of service to every customer.	-	3	32	67	18	3.56
15.	Do you think that every employee at this hospital knows what factors determine the good or bad of the services provided?	-	-	20	86	14	3.46
f. Service Standar Communication							
16.	Do you think this hospital makes every effort to explain the results of customer research to employees in an understandable way.	-	4	49	54	13	3.23
17.	Do you think that every employee in this hospital understands all the service standards that have been set by each department.	-	5	26	70	19	3.40
18.	Do you think this hospital has developed a chain of objectives connecting each department in support of the company's (hospital) vision.	-	2	37	69	12	3.29
19.	In your opinion, is the measurement of service performance at this hospital delivered openly to all employees regardless of position or function?	1	6	42	62	9	3.13

Information:

Based on Likert scale: STS (1): TS (2): N (3): S (4): SS (5)

Based on Table 8, it can be seen that each of the indicators of the research variables that assessed the questionnaires chose neutral and agreed, so that when this questionnaire was analyzed based on the validity and reliability tests, it can be concluded that the statement above is declared feasible or valid for research use and can be used for further analysis. Carry on.

Job Satisfaction Variable

Job satisfaction is measured using a Likert scale using 40 (forty) statement items, the average of each statement in this study can be seen in Table 9.

Based on table 9, it can be seen that each of the indicators of the research variables have an assessment of the hospital, namely neutral and agree, meaning that from the table data above, many employees of the SPH Padang Hospital give a good assessment of the SPH Padang Hospital, so it can be concluded that the statement above declared feasible or valid for research use and can be used for further analysis.

Table 7: Job Satisfaction Variables Based on Likert Scale

Job satisfaction		STS	TS	N	S	SS	Average
a. The work itself		1	2	3	4	5	
1.	Living my work	-	-	16	71	33	4.14
2.	Workload balanced with my ability	1	9	50	49	11	3.50
3.	The hospital company provides complementary facilities according to my needs	-	6	35	65	14	4.73
4.	Hospital companies provide opportunities for employees to transfer to other divisions.	2	6	42	62	8	3.57
5.	The work I do matches my interests	1	2	32	67	18	3.83
6.	Employees have the freedom to develop new ways of presenting problems	1	9	34	58	18	3.46
7.	The job responsibilities given are in accordance with my abilities.	1	5	25	71	18	3.77
b. Wages							
8.	The salary I have received is commensurate with the responsibilities imposed on me.	5	14	37	49	15	3.66
9.	The bonus given by the company is appropriate	1	5	33	63	18	3.54
10.	The company (hospital) provides adequate health benefits to employees.	1	6	40	59	14	3.77
11.	The work facilities of employees with the same position appear uniform.	2	9	44	52	13	3.54
12.	There is a leave policy given by the company to employees	-	14	39	55	12	3.54
c. Promotion							
13.	Employees have the opportunity to participate in training and development programs to improve their abilities	1	3	36	70	10	3.71
14.	Fair career promotion criteria	1	3	46	57	13	3.65
15.	Career development opportunities are determined based on the quality of work performance	-	4	47	61	8	3.61
16.	Every employee has the opportunity to achieve a certain position	-	8	43	55	14	3.63
d. Supervision							
17.	Leaders motivate employees to improve work results.	-	4	39	66	11	3.70
18.	Leaders pay attention to employee ideas	1	2	41	64	12	3.70
19.	Leaders are able to be firm with employees at the right time	-	-	48	63	9	3.68
20.	Leaders provide support in improving work results	1	4	46	56	13	3.63
21.	Leaders are willing to help employees in completing tasks for the common good.	-	2	41	67	10	3.71
22.	Leaders give praise for the success of employees' work.	-	1	31	76	12	3.83

3.6 The Influence of Service Orientation on Job Satisfaction

Based on the results of testing the data using the Smart PLS program version 3.3 as presented in table 4.14, it can be seen that the regression coefficient value of service orientation on job satisfaction is 0.809 which is the magnitude of the influence given by the service orientation construct on job satisfaction for SPH Padang Hospital employees. Where the standard error value of 0.041 is the level of estimation error that cannot be explained by this construct and with a (t) statistic or (t) count of 19.501. To find out whether this hypothesis is accepted or rejected, then the comparison between the value of (t) statistic or (t) count with (t) table 1.96 at 5% alpha. Where the value of (t) statistic > (t) table or 19.501 > 1.96 and with (p) values

smaller than alpha 5% or $0.000 < 5\% (0.05)$, therefore H_0 is rejected and H_a is accepted, In other words, there is a significant positive effect on job satisfaction for SPH Padang Hospital employees. Based on statistical data in this study, service orientation has a significant effect on job satisfaction.

3.7 The Influence of Service Orientation on Job Satisfaction

The results showed that service orientation had a significant effect on job satisfaction. This is in line with the results of research conducted by Vahid (2014) showing that there is a very influential relationship between job satisfaction and job satisfaction, besides that job satisfaction is a good mediating object in a job satisfaction in a company. Furthermore, Teresa (2005) states that there is a structural relationship between service orientation and job satisfaction, where service orientation is a series of activities carried out in a company to create excellent service for a company. Furthermore, Sceneider (1988) added that internally management must commercialize the "service mentality" and manage practices effectively so as to create employee attitudes that show attitudes and behaviors that provide quality services.

In the service orientation there are several indicators such as customer care (customer treatment) is an attitude regarding employee perceptions of how employees can pay attention to customers, employee empowerment is employee perceptions about how to increase the freedom of the tasks and authority they receive, service technology (service technology) namely employee perceptions of the use of technology provided by the organization to deliver good service, service failure prevention (service failure prevention) is an employee's perception of the expansion of the organization's ability to prevent service failures from only adhering to organized planning to an extended system of prevention, Service failure recovery is an employee's perception of the organization's strategy when dealing with existing service problems and communication of service standards (service standards). Communication) namely employees' perceptions of the organization's ability to communicate what is expected of employees regarding service standards and behavior practices.

4. CONCLUSION

Based on the results of research that has been carried out through testing using the PLS-SEM method, it can be concluded as follows: Service orientation has a positive influence on job satisfaction. SPH Padang Hospital. Where the standard error value is 0.041 with a p (value) of 0.000. Service orientation indirectly has a significant effect on job satisfaction.

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