



Employees as reputation advocates: Dimensions of employee job satisfaction explaining employees' recommendation intention

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ABSTRACT

Reputation is a crucial asset for service organizations, in particular when actual service quality is hard to assess, e.g. in the context of hospitals. Employees and their recommendation intentions to other professionals and potential patients are crucial in the reputation building process. Against this background, we test with a quantitative-exploratory approach, for 1,022 employees in two German hospitals, how eleven dimensions of employees' job satisfaction explain their recommendation intention on behalf of the hospital they work. Moreover, we explore this for different employee groups. Our results show that there are different employee job satisfaction dimensions explaining recommendation intention for different employee groups such as nurses, doctors, or employees in the administrative field. We frame our findings against the broad but scattered management literature that is relevant for job satisfaction and organizational reputation, and discuss implications for practice and further research.

1. Introduction

An organizations' reputation is an important factor in creating valuable stakeholder relationships and gaining public trust (Helm, 2011). This is particularly true for service providers, as the intangibility of their offerings makes the assessment of their quality vague and incomplete (Su, Swanson, Chinchanchokchai, Hsu, & Chen, 2016; Wang, Lo, & Hui, 2003). A strong and favourable reputation reduces, ab initio, consumers' risk of choosing an incompetent or incapable service provider. Consequently, a solid reputation is essential for the survival of any service provider.

While there is extant research on how customers influence an organization's reputation, research to explore the crucial role other stakeholders – especially employees – play in reputation management has begun (Helm, 2011; Lages, 2012; Shamma & Hassan, 2009). Because employees act as service providers and communicate about their employer, they become advocates for the organization's reputation (Helm, 2011). Following the rationale of stakeholder theory and resource dependence theory, employees control a vital organizational resource – the organization's reputation – by their intention to recommend an organization to potential employees and clients. Literature provides evidence that this behaviour is related to employee job

satisfaction (Lages, 2012). However, there has been no research, as yet that examines the relationship between employee job satisfaction in service organizations and its relatedness with employees' recommendation intentions. Hence, our study focusses on employees' job satisfaction and its relationship with their recommendation intention as an active act of reputation building by employees.

Research has shown, that various stakeholders perceive the antecedents of organizational reputation differently (Ali, Lynch, Melewar, & Jin, 2015) and in particular, employees are a rather heterogeneous group (Willems & Ingerfurth, 2018). Consequently, a better understanding of the differences between various employee groups is needed to analyse employees' role in the reputation-building process, particularly of their intention to recommend the organization to others. These differences can be explained by the coexisting and, sometimes even competing, institutional logics within organizations (Reay & Hinings, 2009).

To explain the above-mentioned differences, this study focuses on hospitals as service organizations. By their very nature, hospitals are hybrid service providers whose reputation is crucial for attracting patients. Research on hospitals' occupational groups shows that they differ in their work-related attitudes and, therefore, respond in various ways to management interventions, which in turn can affect the way they

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communicate about the hospital (e.g., Oppel, Winter, & Schreyögg, 2017). Hence, it is necessary to look into the differences among heterogeneous employee groups when analysing their job satisfaction. Against this background, we aimed at answering the following research questions:

RQ1: How do different dimensions of employees' job satisfaction relate to their hospital recommendation intentions; and which of those dimensions best explain recommendation intentions?

RQ2: How do job satisfaction dimensions vary in their relative importance for the recommendation intentions of different employee groups?

To answer these research questions, we took a practical, quantitative-exploratory approach. This means that we first reviewed the literature, and formulated theory-driven propositions as the starting point for our quantitative exploration. Subsequently, using a sample of 1,022 respondents from two hospitals, we first explored how different dimensions of employee job satisfaction relate to the recommendation intentions of employees. Second, we tested whether this finding was different for various employee groups (doctors, nurses, administrative staff, and therapists).

2. Background: Reputation building behaviour, recommendation intentions, and employee satisfaction

2.1. Reputation building behaviour and employees' recommendation intentions

Reputation is a very central construct to management research. Reputation is an intangible asset, as a strong and favourable organizational reputation is associated with various desirable outcomes, mostly among customers, in the form of an increase in willingness to pay for the services, increased purchasing frequency, loyalty, and retention. Consequently, reputation becomes an important strategic resource that supports an organization's positive image and sustainable competitive advantage (Capozzi, 2005; Fombrun & Van Riel, 1997). Various definitions of reputation exist within the literature. However, the researchers agree that it is a temporarily stable, evaluative, and collective judgement about an organization's general conduct and achievements held by individuals and influenced by others' perceptions (Fombrun, 2001; Helm, 2011).

Although the body of literature on organizational reputation is extensive, research falls short of providing comprehensive conceptualizations, and especially on agreement over measurements and data to capture organizational reputation (Veh, Göbel, & Vogel, 2018; Wartick, 2002). Nevertheless, the central role that the stakeholders play antecedent to the establishment of reputation is unquestionable (Ali et al., 2015) and a general agreement exists that "corporate reputation measurements have to focus on the relevant stakeholders" (Tischer & Hildebrandt, 2014, p. 1008). Consequently, reputation among external stakeholders has often been studied, mainly in the context of customers and commercial organizations (Fischer & Reuber, 2007; Fombrun, Gardberg, & Sever, 2000; Fombrun & Van Riel, 1997).

Of the internal stakeholders, employees play an important role in shaping an organization's reputation by influencing other stakeholders' perceptions (Harris & Chernatony, 2001). Their reputation-building behaviour "encompasses all activities or behaviours employees exhibit in order to contribute to the formation of corporate reputation" (Helm, 2011, p. 658). Various researchers argue that, especially in the service context, employees are the crucial stakeholders for influencing an organization's reputation (e.g., Davies & Chun, 2002; Dortok, 2006; Helm, 2011; Lages, 2012). Stakeholder theory and resource dependency theory provide the reason for the identification of employees as key resource providers. Stakeholder theory argues that paying attention to multiple stakeholders is necessary, as they provide both tangible and intangible resources. Consequently, the theory points to the imperative of taking the legitimate interests of all relevant stakeholders into account

(Donaldson & Preston, 1995; Hillebrand, Driessen, & Koll, 2015). In a regular profit-oriented context, external and internal stakeholder groups include customers, suppliers, employees, investors, and local communities (Gatzert, 2015). Depending on the organizational context, this list can include more stakeholder groups, making their management even more complex. To identify the most relevant stakeholder groups, resource dependence theory suggests that organizations must attend to the demands of stakeholders who control the resources that are most important for the organizations' survival (Pfeffer & Salancik, 1978).

As employees can influence the opinions of other stakeholders to enhance corporate reputation (Clardy, 2005), they control, to a certain extent, an organization's crucial resource: its reputation. Thereby employees can be the primary advocates for their organizations (Fombrun et al., 2000). Especially in service organizations, employees with close and direct contact with the customers become corporate ambassadors and "part-time marketers [...] who safeguard the corporate reputation and spread goodwill in support for the firm" (Helm, 2011, p. 658). In particular, employees voluntarily influence other stakeholders' perceptions by communicating about their organization (Helm, 2011; Lages, 2012). Based on the theoretical foundation that reputation is a communicated signal and employees represent a crucial resource, within our conceptualization of reputation, we focus on the communicative aspect by analysing how employees intend to recommend their organizations.

Recommendation intention is peoples' will to provide others with their recommendation and to say positive things about an organization, such as recommending it as a place to shop, to work or expressing positive attitudes about other stakeholder-relevant functions of the organization. It is often studied in the context of post-service consumer behaviour and often synonymously used with positive word of mouth (Jones, Reynolds, & Arnold, 2006; Maxham & Netemeyer, 2002; Rychalski & Hudson, 2017; Su et al., 2016; Wang, 2013).

2.2. Employee job satisfaction and its relationship with employees' recommendation intentions

The recommendation intention of employees can be understood as pro-social employee behaviour. These are behaviours and actions that benefit the organization and are performed by employees although not included in any job description (Bettencourt & Brown, 2003; O'Reilly & Chatman, 1986). Literature provides evidence that other pro-social behaviours of employees such as organizational citizenship behaviour (Ackfeldt & Coote, 2005; Paulin, Ferguson, & Bergeron, 2006; Yoon & Suh, 2003), extra-role behaviours (MacKenzie, Podsakoff, & Ahearne, 1998), and favourable external representation of workplace (Lages, 2012) are associated with employee job satisfaction. Consequently, we argue that employee job satisfaction is related to employees' recommendation intentions. This relationship can be explained by the norm of reciprocity of social-exchange theory – employees not only respond with indifference or hostility when they are not treated well by the employer but, more importantly, react positively when they are helped or benefitted by the employer (Gouldner, 1960). In particular, satisfied employees reciprocate with the feeling of satisfaction expressed as pro-social or extra-role behaviours that favour the organization (Lages, 2012; MacKenzie et al., 1998; Yoon & Suh, 2003). In the case of this study, this is the intention to recommend the organization from which to seek service of and as a place to work.

Employee job satisfaction has been researched extensively over the last decades within management research (e.g., Lages, 2012; Snipes, Oswald, LaTour, & Armenakis, 2005). Spector (1985) first conceptualized employee job satisfaction, especially in the context of human service, public, and nonprofit organizations. Job satisfaction is defined as employees' affective or attitudinal reaction to a job which arises from employees' satisfaction with particular job aspects such as pay, promotion, supervision, benefits, contingent rewards, operating procedures, co-workers, nature of work, and communication (Spector, 1985). It

is common within the literature to subdivide job satisfaction into various satisfaction dimensions like pay satisfaction or supervisor satisfaction (DeConinck, 2009; DeConinck, 2010), as well as satisfaction with promotions, rewards, co-workers, or communication (Snipes et al., 2005). Additionally, these results provide valuable insights for the management, as the results show which dimensions of employee job satisfaction have to be addressed when looking for a certain outcome.

In terms of organizational reputation, research shows that the extent to which employees are satisfied with their workplace environment is a crucial factor that affects the external stakeholders' perception of an organization (Shamma & Hassan, 2009). Managers can substantially influence their organization's reputation by creating an organizational culture that contributes to overall employee job satisfaction, which, in turn, can lead to more favourable recommendations from these employees (Djukic, Jun, Kovner, Brewer, & Fletcher, 2017; Harris & Chernatony, 2001). Here, the literature focuses on how mission statements and related management tools can help in setting a collective agenda for employees and in promoting the collective process of organizational sense-making (Büchner, Schreyögg, & Schultz, 2014; Cattinelli et al., 2012; Desmidt & Heene, 2007). This internal culture can particularly enhance employees' recommendation intentions. Based on the elaborated theories and research, we formulated the following theory-driven proposition, which we further explored and complemented with our quantitative-exploratory analysis:

Proposition 1:

- Employee job satisfaction is positively related to employees' recommendation intentions.

2.3. Differences between employee groups

When analysing employees' impact on organizational reputation, research shows that it is not only one employee subgroup that has an impact on the organization's reputation but rather a combination of various subgroups (Plewa, Ho, Conduit, & Karpen, 2016). Ali et al. (2015, p. 1105) explain that "different stakeholders can have different perspectives on the antecedents [...] of corporate reputation." Accordingly, numerous researchers argue that employees, instead of being treated as one large but heterogeneous group for the purpose of analysis, should be divided into homogeneous subgroups based on the function the employees have in the organization, (e.g., Ang, Bartram, McNeil, Leggat, & Stanton, 2013; Willems & Ingerfurth, 2018). Differences between occupational groups are demonstrated through research in the hospital human resource management field. Opper et al. (2017) provide evidence that physicians interpret and perceive strategic human resource management in a more positive way and, consequently, engage more often in word of mouth promotion of their organisation than nurses do. Ang et al. (2013) demonstrate the differences between occupational groups' perceptions of high-performance work systems. Moreover, within one employee sub-group, differences of perception can also be found arising from such factors as the employees' age, for instance, older nurses have specific needs and preferences that are not shared by young nurses (Armstrong-Stassen & Schlosser, 2010) or on the type of employment, e.g., it is a fact that temporary nurses experience greater job stress and show a lower level of affective organizational and occupational commitments compared to nurses in permanent employment (Yeh, Ko, Chang, & Chen, 2007). Most often in service research, frontline and non-frontline employees are analysed separately (Riggle, Edmondson, & Hansen, 2009; Wangenheim, Evanschitzky, & Wunderlich, 2007). The differentiation between occupational groups is considered necessary because every occupational group has its own history, work structures, and occupational values (Ang et al., 2013). Hence, different employee subgroups follow different internalized logic in their behaviour.

Going beyond the existing research, we argued that the differences among the perceptions of employee groups are based on the hybrid

nature of some organizations. Hybrid organizations combine different and sometimes even conflicting or competing institutional logics (Bartilana & Dorado, 2010). Institutional logics are defined as "the socially constructed, historical pattern of material practices, assumptions, values, beliefs, and rules" (Thornton & Ocasio, 1999, p. 804) according to which individuals act. Within an organization, different logics facilitate or strengthen the different identities of actors, whereby they can coexist and guide actors' behaviour (Reay & Hinings, 2009). Therefore, different employee groups value different aspects of their jobs more or less and show different reciprocity to management practices. Hence, just as interests vary across employee groups, so does satisfaction with the organization.

It is adequately documented that substantial differences exist in the assessment of satisfaction and reputation among different stakeholder groups, among employee groups in particular (e.g., Riggle et al., 2009; Tischer & Hildebrandt, 2014; Wangenheim et al., 2007). In terms of employee job satisfaction, research argues that to measure specific employee behaviour, a subdivision is advisable as it allows to focus on the individual relationship of each job satisfaction dimension with an outcome variable, as shown when for example studying dimensions' impact on the quality of customer service (Snipes et al., 2005) or performance (Schwab & Cummings, 1970). As this study focusses on the recommendation intention of employees as an outcome variable, we summarised these theoretical considerations as follows:

- Proposition 2: The dimensions of employee job satisfaction differ in their relative importance as explanations for variations in recommendation intentions shown by various employee groups.

Both the above propositions were the starting point for our data analysis and will be elaborated further based on the respective findings.

3. Research method

3.1. Sample

Data were collected in collaboration with a practitioner partner whose goal was to provide assessments on patient and/or employee job satisfaction levels. The dataset of this study consisted of 1,022 employees of two German hospitals ($n_1 = 588$, $n_2 = 434$). Employees completed a questionnaire on a broad range of employee job satisfaction dimensions. Additionally, they were asked about the likeliness of their recommending the hospital to potential patients, friends, and family, which we had earlier conceptualized as recommendation intentions.

To maintain high ethical standards, the top management and board of employees' representatives (German: *Betriebsrat*) in each hospital – they had full insight into the content of the questions and the collection procedure – formally approved the participation of the employees in the survey and agreed that the data could be used for scientific purposes. Respondents were informed that their responses would remain completely anonymous and voluntary. Hence, no personal identifiers were asked or recorded in any way.

In all, 1,084 completed questionnaires were returned. However, only 1,022 were used for the analyses in this study because of missing values. For example, when no construct mean could be calculated for any of the independent and dependent variables in this study. Construct values were calculated averaging the items scored for each construct. If for an item, no score was given (i.e. missing value) the item was ignored on a respondent-by-respondent basis (i.e. a respondent score for that construct was calculated based on the remaining items for that construct). However, this was done after verifying the overall high internal consistency per construct of the items for the total population (see factor analysis reporting and construct measures in Appendix 1) and only for respondents where no more than one-third of the items in a construct were missing. If for at least one construct no construct average could be calculated, the respondent was list-wise deleted from further

analysis in this study.

The survey included three demographic variables; Gender (681 female; 248 male; 155 did not state – “NA”); Age (‘Under 30’ – 169; ‘31–40’ – 241; ‘41–50’ – 316; ‘51 or more’ – 156; NA’s – 202); and Tenure in the Organization (‘3 years or less’ – 216; ‘4 to 10 years’ – 265; ‘11 to 15 years’ – 169; ‘15 to 20 years’ – 127; ‘more than 20 years’ – 148; NA’s – 159). As ‘no answer’ was possible for these demographic variables, further analyses including these variables are performed based on list-wise deletion.

3.2. Measures

We measured recommendation intentions as a dependent variable with three items that are commonly used in the literature for measuring recommendation intentions. These are listed in Appendix 1 (Cronbach’s alpha = 0.85) (e.g., Rychalski & Hudson, 2017; Wang, 2013). Following the conceptualisation of employees’ job satisfaction as a multi-dimensional scale, this study splits employees’ job satisfaction into satisfaction with eleven dimensions measured with 48 satisfaction items. These satisfaction items were identified after an intensive and repetitive brainstorming procedure, mainly developed by our partner through interactions with several high-level managers in the hospital sector. The identified employee job satisfaction dimensions that were incorporated in the questionnaire were: Satisfaction with (1) work atmosphere, (2) working conditions, (3) work time, (4) line manager, (5) salary, (6) development opportunities, (7) flow of information, (8) overall hospital management, (9) mission statement, (10) social benefits, and (11) job content. These items are also included in Appendix 1 and were included in the relevant blocks of items in the questionnaire.

3.3. The method of analysis

As the main goal of our analysis was the identification of those factors – from a broad range – that best explain a single variable of interest, we decided to use different steps to provide a robust understanding of the underlying data.

As a first step, we reported on item loadings, internal consistency, discriminant validity, and double loading items for the broad range of satisfaction dimensions that we aimed to explore in relation to recommendation intention. The goal of this step was to assess the quality of measurement of the broad range of items in various dimensions, which we could and should take into account for the subsequent steps in the analysis. As the second step, we analysed the data with multi-level regression analysis and also performed a dominance analysis (Azen & Budescu, 2003). A dominance analysis starts from a regression analysis with different independent variables and reports – based on comparing different model specifications – which of the independent variables are dominant over other independent variables in explaining the dependent variable. The method is particularly suitable for analyses where the independent variables are correlated. By conducting the regression and dominance analyses for the overall sample, we could provide an insight into the employee job satisfaction dimensions that relate to recommendation intentions (Research Question 1 and Proposition 1). By comparing the dominance analyses per employee group, we could provide an answer to Research Question 2 and build on and elaborate Proposition 2. We performed the dominance analysis based on a multi-level regression of respondents nested in two hospitals. This was done for methodological reasons only, to control our analysis because the data were collected in two different hospitals.

4. Results

4.1. Step 1: Measurement of constructs and descriptive statistics

Appendix 1 shows item loading on eleven independent and one dependent constructs. Appendix 1 also reports composite reliability

(CR), and average variance extracted (AVE). All AVE values are above 0.50, except for social benefits (AVE = 0.38) (Fornell & Larcker, 1981). We can conclude that we have reliable measures, overall. However, it is necessary to be cautious in our analysis of results related to social benefits. Moreover, we assessed discriminant validity between latent concepts using heterotrait-monotrait ratio of the correlations (HTMT) (Henseler, Ringle, & Sarstedt, 2015). This value is preferably lower than 0.90, which was the case for all combinations of latent variables in the model. Therefore, we have sufficient discriminant validity between the dimensions. However, when applying an additional confirmatory factor analysis (Rosseel, 2012), the initial fit-indices are only moderate (root mean square error of approximation (RMSEA) = 0.087; comparative fit index (CFI) = 0.748; Tucker-Lewis index (TLI) = 0.724). This is ascribed to (1) large number of items, and (2) broad range of satisfaction dimensions that we focus on – consistent with our exploratory aim – and several items load to a certain extent to multiple pre-defined factors. For example, the highest modification indices of the structural equation model suggest allowing cross-loadings for some items on multiple dimensions. In Appendix 1 we have added notes on the strongest double loading items, which should prove informative for future research and other research in less exploratory contexts and purposes.

However, acknowledging these double loading items and also considering the other discriminant validity metrics reported herein and the fact that the items were included in the questionnaire in blocks consistent with their dimensions, we continued with the eleven employee job satisfaction dimensions in the rest of the analysis. Correlations are reported in Appendix 2, and we take these high correlations as well as partial conceptual overlap into account as we pursue further the exploratory approach of our study. Correlations are overall significantly positive across all constructs. That is why we perform the dominance analysis. Descriptive statistics for the aggregated scales are given in Appendix 3.

4.2. Step 2: Regression and dominance analysis

In Table 1, we report the multi-level regression analysis of respondents nested within two hospitals. We report the null model, the model that included the main independent variables, the model with only control variables, and the model containing the main independent variables and control variables.

Satisfaction dimensions that significantly relate to recommendation intentions are, with coefficients from Model 1, (1) information flow ($\beta = 0.12$; $p < 0.005$), (2) job content ($\beta = 0.14$; $p < 0.005$), (3) mission statement ($\beta = 0.30$; $p < 0.001$), (4) overall hospital management ($\beta = 0.10$; $p < 0.005$), (5) social benefits ($\beta = 0.18$; $p < 0.001$), (6) work atmosphere ($\beta = 0.12$; $p < 0.010$), and (7) work conditions ($\beta = 0.23$; $p < 0.005$).

Additionally, based on the dominance analysis for multi-level analysis (Luo & Azen, 2013), we report the average contribution of each variable based on the R&B and S&B R^2 -values at level 1. These are two different fit statistics for multi-level regressions that approximate R^2 values. As it only concerns two organizations at the second level, pseudo- R^2 for the second level are not important enough to report. Similar results are obtained also from single-level OLS regression.

For the dominance analysis, the null model and Model 1 were compared. Concrete calculations were done in R, with the package ‘dominance analysis’ (Budescu, 1993; Luo & Azen, 2013).

Ranking the factors based on the R&B R^2 (level 1) criterion results show the following rankings (the average contribution of each variable is shown in parentheses): Mission Statement (0.090), Working Conditions (0.077), Information Flow (0.051), Overall Hospital Management (0.050), Work Atmosphere (0.046), Social Benefits (0.044), Job Content (0.043), Salary (0.036), Learning Opportunities (0.034), Line Manager (0.028), and Work Time (0.023).

Ranking the factors based on the S&B R^2 (level 1) criterion results in the following ranking (with the average contribution of each variable

Table 1
Regression analysis explaining employees' recommendation intentions.

Predictors	Model 1			Model 2		
	Estimates	CI	p	Estimates	CI	p
(Intercept)	-1.05	-1.30 – -0.80	<0.001	-1.07	-1.35 – -0.78	<0.001
Information Flow	0.12	0.04 – 0.20	0.002	0.09	-0.00 – 0.18	0.058
Job Content	0.14	0.06 – 0.21	0.001	0.15	0.06 – 0.24	0.001
Learning Opportunities	-0.02	-0.09 – 0.05	0.519	-0.07	-0.14 – 0.01	0.087
Line Manager	0.03	-0.02 – 0.08	0.207	0.03	-0.02 – 0.09	0.236
Mission Statement	0.30	0.23 – 0.38	<0.001	0.31	0.23 – 0.39	<0.001
Overall Hospital Management	0.10	0.03 – 0.16	0.004	0.10	0.03 – 0.18	0.008
Salary	0.03	-0.03 – 0.09	0.296	0.04	-0.03 – 0.10	0.298
Social Benefits	0.18	0.11 – 0.26	<0.001	0.15	0.06 – 0.23	<0.001
Work Atmosphere	0.12	0.04 – 0.21	0.005	0.13	0.03 – 0.23	0.011
Working Conditions	0.23	0.09 – 0.37	0.002	0.28	0.12 – 0.44	<0.001
Work Time	0.00	-0.07 – 0.06	0.899	-0.01	-0.09 – 0.07	0.8
Gender (Dummy: male = 1)				0.00	-0.11 – 0.10	0.943
Years working: 4 to 10 years				0.07	-0.05 – 0.19	0.248
Years working: 11 to 15 years				0.04	-0.10 – 0.18	0.537
Years working: 15 to 20 years				-0.04	-0.19 – 0.12	0.642
Years working: more than 20 years				0.22	0.07 – 0.36	0.004
Doctors				0.05	-0.12 – 0.21	0.579
Therapeutics field				-0.03	-0.16 – 0.10	0.672
Administrative field				0.30	0.15 – 0.45	<0.001
Other work fields				0.02	-0.16 – 0.20	0.838
Random Effects						
σ^2	0.39			0.38		
τ_{00}	0.00 _{Org}			0.00 _{Org}		
ICC	0.01			0		
N	2 _{Org}			2 _{Org}		
Observations	1,022			828		
Marginal R ² /Conditional R ²	0.523/0.528			0.517/0.520		

Null model, without predictors: Intercept = 2.44; 95% Confidence interval = 2.35 – 2.52; p < 0.001; σ^2 = 0.81; τ_{00} = 0.00; ICC = 0.00; Marginal R² = 0.000; Conditional R² = 0.002. Comparison between this null model and Model 1 was built on to perform the dominance analysis.

Ranking the factors based on the R&B R² (level 1) criterion, results in the following ranking (with the average contribution of each variable given in parentheses): Mission Statement (0.090), Working Conditions (0.077), Information Flow (0.051), Overall Hospital Management (0.050), Work Atmosphere (0.046), Social Benefits (0.044), Job Content (0.043), Salary (0.036), Learning Opportunities (0.034), Line Manager (0.028), Work Time (0.023).

Ranking the factors based on the S&B R² (level 1) criterion, results in the following ranking (with the average contribution of each variable between parentheses): Mission Statement (0.082), Working Conditions (0.080), Social Benefits (0.052), Work Atmosphere (0.047), Overall Hospital Management (0.046), Information Flow (0.045), Job Content (0.042) Salary (0.036) Learning Opportunities (0.035) Line Manager (0.028), Work Time (0.024).

shown in parentheses): Mission Statement (0.082), Working Conditions (0.080), Social Benefits (0.052), Work Atmosphere (0.047), Overall Hospital Management (0.046), Information Flow (0.045), Job Content (0.042) Salary (0.036) Learning Opportunities (0.035) Line Manager (0.028), and Work Time (0.024).

In sum, to answer our first research question, both rankings show that several satisfaction dimensions significantly relate with and explain recommendation intentions. In particular, mission statement and work conditions are consistently the most dominant factors for explaining recommendation intentions.

Table 2 reports separate regression analyses for the different employee groups. We analysed doctors, nurses, therapists, and employees in the administrative field. These are people who, for example, settle accounts with health insurance funds and other cost units, manage the hospital's finance and accounting systems, or are responsible for processing human resources transactions. This time, OLS regressions were applied and it was verified in the overall analysis that the hospital-level variance could be ignored. Results showed that satisfaction with the hospital's mission statement consistently explain recommendation intentions for all employee groups. However, results for other variables, we noted, were not consistent across all employee groups. This might indicate that different job satisfaction dimensions have different relevance for different employee groups. However, this might also be because the number of employees of certain employee groups in the sample was comparatively small. Therefore, we compare the ranks of the independent variables – from the dominance analysis – per employee group. For this, we look at the top-three dominant explanatory variables per employee group. This gives the first indication of whether various employee groups placed different relative importance on various

satisfaction dimensions.

For doctors, the most dominant factors are (1) mission statement (0.093), working conditions (0.085), and learning opportunities (0.069). For nurses, the top-three explaining factors are working conditions (0.083), mission statement (0.078), and work atmosphere (0.070). For the employees in the therapeutics field, these factors are mission statement (0.131), overall hospital management (0.060), and job content (0.048). Finally, for the administrative field, these factors are working conditions (0.163), mission statement (0.130), and overall hospital management (0.092).

From the above results of analyses, the answer to our second research question is that satisfaction with the hospital's mission statement is consistently among the top-three dominant explaining variables for every employee group. However, other top-three explaining variables are different for each employee group. Also, the ranking of the factors (based on the measure of relative importance) varies. Consequently, we can claim for Research Question 2 that satisfaction with the hospital's mission statement is consistently among the dominant explaining variables for different employee groups. However, additional nuances and more adjusted management approaches are needed for the organisation to benefit from the various satisfaction dimensions by stimulating the recommendation intentions of employees in different employee groups.

5. Discussion and avenues for future research

In this exploratory-quantitative analysis, we aimed to get a better insight into the employee job satisfaction dimensions and how they relate to employees' recommendation intentions. As we have emphasised in the conceptual part of this paper, this research can be placed in at

Table 2
Regression analyses, with recommendation intentions as a dependent variable for various employee groups: Doctors, Nurses, Therapeutics field, and Administrative field.

	Doctors			Nurses			Therapeutics Field			Administrative Field		
	Estimates	CI	P	Estimates	CI	P	Estimates	CI	P	Estimates	CI	P
(Intercept)	-0.78	-1.54 – -0.03	0.044	-1.04	-1.40 – -0.69	<0.001	-1.05	-1.84 – -0.25	0.011	-0.96	-1.72 – -0.20	0.015
Information Flow	0.09	-0.18 – 0.36	0.533	0.21	0.09 – 0.32	0.001	0.19	-0.04 – 0.42	0.115	-0.11	-0.33 – 0.12	0.356
Job Content	-0.07	-0.33 – 0.20	0.622	0.11	-0.01 – 0.23	0.073	0.21	0.01 – 0.42	0.042	0.27	0.04 – 0.51	0.027
Learning Opportunities	0.26	0.01 – 0.50	0.043	-0.09	-0.19 – 0.00	0.063	0.11	-0.11 – 0.33	0.314	-0.26	-0.49 – -0.03	0.026
Line Manager	0.09	-0.08 – 0.25	0.298	-0.02	-0.09 – 0.06	0.652	0.00	-0.14 – 0.14	0.966	0.13	-0.02 – 0.29	0.089
Mission Statement	0.39	0.14 – 0.64	0.003	0.24	0.14 – 0.34	<0.001	0.43	0.24 – 0.63	<0.001	0.48	0.20 – 0.77	0.001
Overall Hospital Management	-0.12	-0.34 – 0.09	0.267	0.03	-0.07 – 0.14	0.523	0.12	-0.07 – 0.31	0.227	0.26	0.06 – 0.46	0.013
Salary	-0.00	-0.18 – 0.18	0.993	0.04	-0.05 – 0.14	0.371	0.11	-0.05 – 0.28	0.182	-0.26	-0.47 – -0.06	0.014
Social Benefits	0.18	-0.04 – 0.40	0.111	0.17	0.06 – 0.27	0.002	0.18	-0.03 – 0.39	0.098	-0.00	-0.24 – 0.24	0.989
Work Atmosphere	-0.09	-0.38 – 0.20	0.537	0.27	0.13 – 0.40	<0.001	0.03	-0.21 – 0.27	0.817	0.02	-0.25 – 0.30	0.873
Working Conditions	0.40	-0.07 – 0.88	0.098	0.29	0.08 – 0.50	0.008	-0.32	-0.69 – 0.04	0.088	1.17	0.69 – 1.64	<0.001
Work Time	0.02	-0.19 – 0.22	0.862	-0.02	-0.11 – 0.08	0.713	0.14	-0.07 – 0.35	0.189	-0.36	-0.63 – -0.09	0.010
Observations	111			474			136			107		
R ² /R ² adjusted	0.529/0.477			0.524/0.513			0.444/0.395			0.664/0.625		

least three research domains – human resources management, institutional logics and hospital management. Hence, we discuss in this section how our results enrich knowledge within all three domains. Overall, the data support both propositions. Also, we were able to elaborate these propositions because we could, for Proposition 1, show which satisfaction dimensions significantly relate with the recommendation intentions and which of those dimensions are most dominant in explaining recommendation intentions. For Proposition 2, we could elaborate the existing insights and found that satisfaction with the hospital’s mission statement is strongly related to recommendation intentions for all employee groups, while other factors varied from employee group to employee group. Consequently, the results from our analysis are summarised in three main findings: (1) employee job satisfaction is positively related to recommendation intentions, (2) recommendation intentions of different employee groups are likely to be motivated by different satisfaction dimensions, and (3) except for doctors, the hospital’s mission statement has a relatively strong explanatory value for employees’ recommendation intentions.

Our study confirms the conclusions arrived at by stakeholder theory and the resource dependency theory that it is imperative to take internal stakeholders into account when looking for possibilities to strengthen organizational reputation (Donaldson & Preston, 1995; Hillebrand et al., 2015; e.g., Lages, 2012; Pfeffer & Salancik, 1978). Employees are, for good reason, considered a vital resource for enhancing the organization’s reputation. Because service organizations in general, and hospitals, in particular, provide mainly intangible services, employees have a significant impact on the quality of these services. Employees in contact with patients influence the latter’s perception of quality of service directly and, thereby, the overall performance of the hospital indirectly. Our study enriches this picture by exploring the relationships between various types of employee job satisfaction and employee recommendation intentions based on the norm of reciprocity. This relates back to the idea of the signalling theory, which states that organizations communicate favourable information to their stakeholders to build a good reputation (Brower, Kashmiri, & Mahajan, 2017). Based on our findings, hospital managers should strive to satisfy the employees so that they become advocates to send out favourable signals for the hospital.

Research has already shown that employees build or reduce an organization’s reputation when they engage with the organization’s customers (Helm, 2011). A study by Kvist, Voutilainen, Mäntynen, & Vehviläinen-Julkunen (2014) shows that the general job satisfaction of nursing staff positively influences patients’ perceptions of overall quality of care. Our study enhances this knowledge by providing evidence that it is not related to one overall satisfaction construct that relates to employee recommendation intentions, but to several employee satisfaction dimensions. Across employee groups, satisfaction with work atmosphere, working conditions, information flow, overall hospital management, mission statement, social benefits, and job content are related most strongly to recommendation intentions. This confirms Spector’s (1997) understanding of satisfaction as an attitude about different aspects of a workplace within the service sector. Yet, we could also see that employee groups like doctors and those in the therapeutics field are likely to be motivated by just one dimension to recommend their organization. This leads us to the first research proposition for further scientific verification: Based on the idea that antecedents of satisfaction are compensatory in nature (Alegre, Mas-Machuca, & Berbegal-Mirabent, 2016), future research should analyse whether the different dimensions of satisfaction themselves share this characteristic. Moreover, as research on factors that diminish satisfaction already exists (e.g., Ashill & Rod, 2011; Mulki, Jaramillo, & Locander, 2006), our research did not include any negative work experiences such as stress or conflicts. However, to create a more holistic picture of the interplay between satisfaction and recommendation intentions, the inclusion of negative aspects is advisable. Another challenge of researching employees’ satisfaction and recommendation intentions is that there is a clear research stream missing as the evidence is fragmented and

dispersed across various disciplines. So far, there has been substantial research on satisfaction outcomes. However, this research is often done in very diverse literature streams and with diverse theoretical foci. On this observation we base our call for a more systematic and integrative approach regarding literature streams, theories and empirical testing of the various sub-dimensions of employee satisfaction.

We argue that different employee groups follow different kinds of institutional logic in their daily work, which they internalize as the individual patterns, assumptions, and beliefs of their professional field. Such a range of logics can coexist within one organization (Reay & Hinings, 2009). Our research shows that the idea of institutional logic can be applied to service, more particularly to hospital management research. This is reflected in the differences in the combined evaluation of the dimensions of job satisfaction and recommendation intentions by the four employee groups. We find that the mission statement is related to recommendation intentions for three out of the four employee groups (all except the doctors). For employees in the therapeutics field, this is the sole dimension significantly related with recommendation intentions. This leads us to the conclusion that the mission statement, as proclaimed by many strategic management scholars, is of central importance for the leadership of employees (e.g., Brown & Yoshioka, 2003). This finding can be framed in the HR and healthcare-specific management literature that focusses on how mission statements and related management tools can help in setting a collective agenda for employees, and in the collective process of organizational sense-making (Büchner et al., 2014; Cattinelli et al., 2012; Desmidt & Heene, 2007). As mission statements focus on the shared context, i.e., on an organization in which different employee groups cooperate to achieve a common goal by providing the explicit components that serve individual identification with the organization. This identification with their organization contributes to the individuals' own identity. This also means, building the organization's reputation is a form of building individual identity (Ashforth & Mael, 1989; Hatch & Schultz, 1997).

For the employees in the administrative field, such contribution to the individual's identity is accompanied by satisfaction with the overall hospital management. This can be explained by the fact that in recent decades higher market- and competitor-orientation has found its way into the management and organization of hospitals (Reay & Hinings, 2009). This has forced hospitals to deploy more employees in the administrative field to take care of finance, market-orientation, human resource management, and overall management of the hospital and these professionals bring their own business logic to hospitals. We therefore conclude that these three employee groups follow the overarching logic behind a hospital, with a higher focus on the business-like management aspects by the administrative field employees.

However, while we contend that mission statements help define organizational and individual identities, which in turn results in recommendation intentions, it must be noted that doctors seem to be less susceptible to this effect of the mission statement. Despite the crucial role doctors have in hospitals, their belonging to an organization in itself may not be a major part of their professional identity. On the contrary, the only factor for doctors that seems to explain whether they will recommend the hospital to others is their satisfaction with their working conditions. For them, where or for whom they work seems less important than their personal daily work experiences, e.g., for them the equipment and the supporting processes provided at the hospital are of the utmost importance. We conclude that these aspects must play a central role in the conceptualization of their institutional logic. From this perspective, they are different from the other employee groups. This conclusion agrees with other empirical findings that doctors have different motives and perceptions, e.g., of the hospital's quality (Willem & Ingerfurth, 2018) or hospitals' strategic human resource management (Opper et al., 2017). Additionally, doctors may be affiliated with several hospitals and/or each doctor's standing and repute in each hospital of affiliation may vary based on the professional reputation of doctors, which may, in turn, be based on the doctor's specialisation and

where the doctor earned his degree. The doctors' high level of specialization and their very specific role in the overall healthcare process might be the reason for their distinct nature of relatedness to employee job satisfaction and recommendation intentions. This might explain why doctors' recommendation intentions are less strongly related to organizational mission statements, but rather by their working conditions, to recommend hospital services to others. As a result, the second set of propositions for further verification could focus on the role of identification with a particular profession, which potentially might overrule identification with an organization. Within this context, doctors and healthcare specialists might, in particular, be a relevant sub-population to study to gauge the extent to which their association with multiple hospitals could potentially influence our empirical findings. Moreover, this proposition can be further elaborated and/or verified in other contexts, where we start from the observation that such multiple identifications, i.e., with multiple organizations and in particular fields of specialization, is also very evident in academics. Academics often have multiple institutional affiliations and might identify more strongly with their "academic community" than with the universities they serve.

The nurses' group draws the most differentiated picture: Their satisfaction with two more aspects that are important to them relates to their recommendation intentions. These are aspects closely related to their daily work and aspects that benefit them personally. In terms of their work, nurses are more likely to recommend a hospital that provides the work atmosphere that satisfies them and the content of their work, and when it is supported by constant information flow. We assume that these things make their work likable and fulfilling to them and that is the central aspect of their institutional logic. This result is in line with findings in the existing research, which points out that organizational factors such as culture and teamwork may be more powerful sources of nurses' satisfaction (Vainieri, Smaldone, Rosa, & Carroll, 2019). Besides, having personal social benefits from their work is also related to recommendation intentions. We conclude that there are wide variances among the factors of job satisfaction that stimulate the various employee groups' recommendation intentions. Therefore, managers must realise that they cannot pursue a one-size-fits-all strategy to increase hospital employees' satisfaction.

Given our pragmatic approach, it is also worth mentioning that other elements of satisfaction for particular groups or hospital employees in general, do not explain recommendation intentions to a significant extent. Dimensions that are less manageable or that are inherent to the hospital sector, in general, are not significantly related to differences in recommendation intentions. For example, we can assume that work time, salary, and learning opportunities are more sector-specific and even regulated on a regional or national level. Hence, it is more difficult for managers to differentiate themselves from other hospitals on these dimensions, and employees also would thus be less likely to recommend a particular hospital over another hospital on these satisfaction dimensions.

6. Limitations and further research

This study has several limitations that can provide subjects for further scientific verification and elaboration. First, we relied on cross-sectional survey data from two hospitals. For our exploratory purposes, such a sample could give the first insights on the relatedness of a broad set of employee job satisfaction dimensions and recommendation intentions. However, a more elaborate and representative sampling, along with a measure of actual recommendation behaviour, might support the findings from this study more strongly. For example, actual referral behaviour reported by a third party or supporting actions on social media might be quantified and used for further analysis and also reduce the common method biases. However, such an approach might come at a disproportionately high cost and/or might compromise respondents' anonymity, which could introduce other biases in the findings. Hence, further replications, with similar and/or different

measurement instruments and research designs could provide an insight into the generalizability of our initial findings and interpretations.

Our study has focused on dimensions of employee job satisfaction, rather than on management actions and strategies that can improve job satisfaction, which, in turn, can lead to encouragement for more hospital recommendation intentions. A valuable next step in this stream of research would be the identification and testing of concrete management actions that lead to higher satisfaction and recommendation intentions, e.g., in a field-experiment setting.

Moreover, we have used recommendation intention as the main dependent variable in this study to get a closer insight into how hospitals are perceived by important stakeholders. However, while a positive reputation might be desirable, e.g., for attracting promising employees and/or investments and funding, it may not necessarily be the main and final desired outcome for a hospital. Hence, further research could also reveal the complex dynamics that give rise to a hospital's reputation and other measures and dimensions of true and perceived quality.

7. Practical implications

In this study, we focused on explaining the recommendation intentions of employees and found that satisfaction with the organization's mission is an important factor. Hence, hospital managers should invest sufficiently in a mission statement and in communicating it in such a way that it accords with what employees consider important. This may lead to greater employee satisfaction and encourage them to recommend the hospital to patients and other potential employees.

However, our empirical analysis also shows that for different employee types, the strength of the relationship between employee job satisfaction and recommendation intentions varies. Consequently, a one-size-fits-all approach to encourage recommendation intentions might not work. Therefore, it may be advisable for the managers to develop strategies that are differentiated and adjusted to the specific preferences and needs of each employee group. Our study has in this context opened the pathway for exploring how different types of employee job satisfaction are relevant for different employee groups. For organizations, the challenge lies in identifying the relevant employee groups and, for each of these groups, develop a clear understanding of the satisfaction dimensions that matter for their concrete behaviour in supporting the hospital.

Declaration of Competing Interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

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Appendix A. Supplementary data

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References

- Ackfeldt, A.-L., & Coote, L. V. (2005). A study of organizational citizenship behaviors in a retail setting. *Journal of Business Research*, 58(2), 151–159. [https://doi.org/10.1016/S0148-2963\(03\)00110-3](https://doi.org/10.1016/S0148-2963(03)00110-3).
- Alegre, I., Mas-Machuca, M., & Berbegal-Mirabent, J. (2016). Antecedents of employee job satisfaction: Do they matter? *Journal of Business Research*, 69(4), 1390–1395. <https://doi.org/10.1016/j.jbusres.2015.10.113>.
- Ali, R., Lynch, R., Melewar, T. C., & Jin, Z. (2015). The moderating influences on the relationship of corporate reputation with its antecedents and consequences: A meta-analytic review. *Journal of Business Research*, 68(5), 1105–1117. <https://doi.org/10.1016/j.jbusres.2014.10.013>.
- Ang, S. H., Bartram, T., McNeil, N., Leggat, S. G., & Stanton, P. (2013). The effects of high-performance work systems on hospital employees' work attitudes and intention to leave: A multi-level and occupational group analysis. *The International Journal of Human Resource Management*, 24(16), 3086–3114. <https://doi.org/10.1080/09585192.2013.775029>.
- Armstrong-Stassen, M., & Schlosser, F. (2010). When hospitals provide HR practices tailored to older nurses, will older nurses stay? It may depend on their supervisor. *Human Resource Management Journal*, 20(4), 375–390. <https://doi.org/10.1111/j.1748-8583.2010.00143.x>.
- Ashforth, B. E., & Mael, F. (1989). Social identity theory and the organization. *Academy of Management Journal*, 14(1), 20–39. <https://doi.org/10.5465/amr.1989.4278999>.
- Ashill, N. J., & Rod, M. (2011). Burnout processes in non-clinical health service encounters. *Journal of Business Research*, 64(10), 1116–1127. <https://doi.org/10.1016/j.jbusres.2010.11.004>.
- Azen, R., & Budescu, D. V. (2003). The dominance analysis approach for comparing predictors in multiple regression. *Psychological methods*, 8(2), 129–148. <https://doi.org/10.1037/1082-989x.8.2.129>.
- Battilana, J., & Dorado, S. (2010). Building sustainable hybrid organizations the case of commercial microfinance organizations. *Academy of Management Journal*, 53(6), 1419–1440. <https://doi.org/10.5465/amj.2010.57318391>.
- Bettencourt, L. A., & Brown, S. W. (2003). Role stressors and customer-oriented boundary-spanning behaviors in service organizations. *Journal of the Academy of Marketing Science*, 31(4), 394–408. <https://doi.org/10.1177/0092070303255636>.
- Brower, J., Kashmiri, S., & Mahajan, V. (2017). Signaling virtue: Does firm corporate social performance trajectory moderate the social performance-financial performance relationship? *Journal of Business Research*, 81, 86–95. <https://doi.org/10.1016/j.jbusres.2017.08.013>.
- Brown, W. A., & Yoshioka, C. F. (2003). Mission attachment and satisfaction as factors in employee retention. *Nonprofit Management and Leadership*, 14(1), 5–18. <https://doi.org/10.1002/nml.18>.
- Büchner, V. A., Schreyögg, J., & Schultz, C. (2014). The impact of the board's strategy-setting role on board-management relations and hospital performance. *Health Care Management Review*, 39(4), 305–317. <https://doi.org/10.1097/HMR.0b013e31829fca10>.
- Budescu, D. V. (1993). Dominance analysis: A new approach to the problem of relative importance of predictors in multiple regression. *Psychological Bulletin*, 114(3), 542–551. <https://doi.org/10.1037/0033-2909.114.3.542>.
- Capozzi, L. (2005). Corporate reputation: Our role in sustaining and building a valuable asset. *Journal of Advertising Research*, 45(3), 290–293. <https://doi.org/10.1017/S0021849905050324>.
- Cattinelli, I., Bolzoni, E., Barbieri, C., Mari, F., Martin-Guerrero, J. D., Soria-Olivas, E., ... Gatti, E. (2012). Use of Self-Organizing Maps for Balanced Scorecard analysis to monitor the performance of dialysis clinic chains. *Health care management science*, 15(1), 79–90. <https://doi.org/10.1007/s10729-011-9183-6>.
- Clardy, A. (2005). Reputation, goodwill, and loss: Entering the employee training audit equation. *Human Resource Development Review*, 4(3), 279–304. <https://doi.org/10.1177/1534484305278243>.
- Davies, G., & Chun, R. (2002). Gaps between the internal and external perceptions of the corporate brand. *Corporate Reputation Review*, 5(2–3), 144–158. <https://doi.org/10.1057/palgrave.crr.1540171>.
- DeConinck, J. B. (2009). The effect of leader-member exchange on turnover among retail buyers. *Journal of Business Research*, 62(11), 1081–1086. <https://doi.org/10.1016/j.jbusres.2008.09.011>.
- DeConinck, J. B. (2010). The influence of ethical climate on marketing employees' job attitudes and behaviors. *Journal of Business Research*, 63(4), 384–391. <https://doi.org/10.1016/j.jbusres.2008.11.009>.
- Desmidt, S., & Heene, A. (2007). Mission statement perception: Are we all on the same wavelength? A case study in a Flemish hospital. *Health Care Management Review*, 32(1), 77–87. <https://doi.org/10.1097/00004010-200701000-00010>.
- Djukic, M., Jun, J., Kovner, C., Brewer, C., & Fletcher, J. (2017). Determinants of job satisfaction for novice nurse managers employed in hospitals. *Health Care Management Review*, 42(2), 172–183. <https://doi.org/10.1097/HMR.0000000000000102>.
- Donaldson, T., & Preston, L. E. (1995). The Stakeholder theory of the corporation: Concepts, evidence, and implications. *The Academy of Management Review*, 20(1), 65–91. <https://doi.org/10.5465/amr.1995.9503271992>.
- Dortok, A. (2006). A Managerial look at the interaction between internal communication and corporate reputation. *Corporate Reputation Review*, 8(4), 322–338. <https://doi.org/10.1057/palgrave.crr.1540258>.
- Fischer, E., & Reuber, R. (2007). The good, the bad, and the unfamiliar: The challenges of reputation formation facing new firms. *Entrepreneurship Theory and Practice*, 31(1), 53–75. <https://doi.org/10.1111/j.1540-6520.2007.00163.x>.

- Fombrun, C. J. (2001). Corporate reputations as economic assets. In M. Hitt, R. Freeman, & J. Harrison (Eds.), *The Blackwell Handbook of Strategic Management* (pp. 289–312). Maiden, MA: Blackwell.
- Fombrun, C. J., Gardberg, N. A., & Sever, J. M. (2000). The reputation quotientSM: A multi-stakeholder measure of corporate reputation. *Journal of Brand Management*, 7(4), 241–255. <https://doi.org/10.1057/bm.2000.10>.
- Fombrun, C. J., & Van Riel, C. (1997). The reputational landscape. *Corporate Reputation Review*, 1(1–2), 5–13. <https://doi.org/10.1057/palgrave.crr.1540008>.
- Fornell, C., & Larcker, D. F. (1981). Evaluating structural equation models with unobservable variables and measurement error. *Journal of Marketing Research*, 18(1), 39–50. <https://doi.org/10.1177/002224378101800104>.
- Gatzert, N. (2015). The impact of corporate reputation and reputation damaging events on financial performance: Empirical evidence from the literature. *European Management Journal*, 33(6), 485–499. <https://doi.org/10.1016/j.emj.2015.10.001>.
- Gouldner, A. W. (1960). The norm of reciprocity: A preliminary statement. *American Sociological Review*, 25(2), 161–178. <https://doi.org/10.2307/2092623>.
- Harris, F., & de Chernatony, L. (2001). Corporate branding and corporate brand performance. *European Journal of Marketing*, 35(3/4), 441–456. <https://doi.org/10.1108/03090560110382101>.
- Hatch, M. J., & Schultz, M. (1997). Relations between organizational culture, identity and image. *European Journal of Marketing*, 31(5/6), 356–365. <https://doi.org/10.1108/eb060636>.
- Helm, S. V. (2011). Employees' awareness of their impact on corporate reputation. *Journal of Business Research*, 64(7), 657–663. <https://doi.org/10.1016/j.jbusres.2010.09.001>.
- Henseler, J., Ringle, C. M., & Sarstedt, M. (2015). A new criterion for assessing discriminant validity in variance-based structural equation modeling. *Journal of the Academy of Marketing Science*, 43(1), 115–135. <https://doi.org/10.1007/s11747-014-0403-8>.
- Hillebrand, B., Driessen, P. H., & Koll, O. (2015). Stakeholder marketing: Theoretical foundations and required capabilities. *Journal of the Academy of Marketing Science*, 43(4), 411–428. <https://doi.org/10.1007/s11747-015-0424-y>.
- Jones, M. A., Reynolds, K. E., & Arnold, M. J. (2006). Hedonic and utilitarian shopping value: Investigating differential effects on retail outcomes. *Journal of Business Research*, 59(9), 974–981. <https://doi.org/10.1016/j.jbusres.2006.03.006>.
- Kvist, T., Voutilainen, A., Mäntynen, R., & Vehviläinen-Julkunen, K. (2014). The relationship between patients' perceptions of care quality and three factors: Nursing staff job satisfaction, organizational characteristics and patient age. *BMC Health Services Research*, 14(1), 466. <https://doi.org/10.1186/1472-6963-14-466>.
- Lages, C. R. (2012). Employees' external representation of their workplace: Key antecedents. *Journal of Business Research*, 65(9), 1264–1272. <https://doi.org/10.1016/j.jbusres.2011.10.044>.
- Luo, W., & Azen, R. (2013). Determining predictor importance in hierarchical linear models using dominance analysis. *Journal of Educational and Behavioral Statistics*, 38(1), 3–31. <https://doi.org/10.3102/1076998612458319>.
- MacKenzie, S. B., Podsakoff, P. M., & Ahearne, M. (1998). Some possible antecedents and consequences of in-role and extra-role salesperson performance. *Journal of Marketing*, 62(3), 87–98. <https://doi.org/10.1177/002224299806200306>.
- Maxham, J. G., & Netemeyer, R. G. (2002). A longitudinal study of complaining customers' evaluations of multiple service failures and recovery efforts. *Journal of Marketing*, 66(4), 57–71. <https://doi.org/10.1509/jmkg.66.4.57.18512>.
- Mulki, J. P., Jaramillo, F., & Locander, W. B. (2006). Emotional exhaustion and organizational deviance: Can the right job and a leader's style make a difference? *Journal of Business Research*, 59(12), 1222–1230. <https://doi.org/10.1016/j.jbusres.2006.09.001>.
- Oppel, E.-M., Winter, V., & Schreyögg, J. (2017). Evaluating the link between human resource management decisions and patient satisfaction with quality of care. *Health Care Management Review*, 42(1), 53–64. <https://doi.org/10.1097/HMR.000000000000087>.
- O'Reilly, C. A., & Chatman, J. (1986). Organizational commitment and psychological attachment: The effects of compliance, identification, and internalization on prosocial behavior. *The Journal of Applied Psychology*, 71(3), 492–499. <https://doi.org/10.1037/0021-9010.71.3.492>.
- Paulin, M., Ferguson, R. J., & Bergeron, J. (2006). Service climate and organizational commitment: The importance of customer linkages. *Journal of Business Research*, 59(8), 906–915. <https://doi.org/10.1016/j.jbusres.2006.03.004>.
- Pfeffer, J., & Salancik, G. R. (1978). *The external Control of Organizations: A Resource Dependence Perspective*. New York: Harper & Row.
- Plewa, C., Ho, J., Conduit, J., & Karpen, I. O. (2016). Reputation in higher education: A fuzzy set analysis of resource configurations. *Journal of Business Research*, 69(8), 3087–3095. <https://doi.org/10.1016/j.jbusres.2016.01.024>.
- Reay, T., & Hinings, C. R. (2009). Managing the rivalry of competing institutional logics. *Organization Studies*, 30(6), 629–652. <https://doi.org/10.1177/0170840609104803>.
- Riggall, R. J., Edmondson, D. R., & Hansen, J. D. (2009). A meta-analysis of the relationship between perceived organizational support and job outcomes: 20 years of research. *Journal of Business Research*, 62(10), 1027–1030. <https://doi.org/10.1016/j.jbusres.2008.05.003>.
- Rosseel, Y. (2012). Lavaan: An R package for structural equation modeling and more: Version 0.5-12 (BETA). *Journal of Statistical Software*, 48(2), 1–36. Retrieved from <http://www.jstatsoft.org/v48/i02/>.
- Rychalski, A., & Hudson, S. (2017). Asymmetric effects of customer emotions on satisfaction and loyalty in a utilitarian service context. *Journal of Business Research*, 71, 84–91. <https://doi.org/10.1016/j.jbusres.2016.10.014>.
- Schwab, D. P., & Cummings, L. L. (1970). Theories of performance and satisfaction: A review. *Industrial Relations*, 9(4), 408–430. <https://doi.org/10.1111/j.1468-232X.1970.tb00524.x>.
- Shamma, H. M., & Hassan, S. S. (2009). Customer and non-customer perspectives for examining corporate reputation. *Journal of Product & Brand Management*, 18(5), 326–337. <https://doi.org/10.1108/10610420910981800>.
- Snipes, R. L., Oswald, S. L., LaTour, M., & Armenakis, A. A. (2005). The effects of specific job satisfaction facets on customer perceptions of service quality: An employee-level analysis. *Journal of Business Research*, 58(10), 1330–1339. <https://doi.org/10.1016/j.jbusres.2004.03.007>.
- Spector, P. E. (1985). Measurement of human service staff satisfaction: Development of the job satisfaction survey. *American Journal of Community Psychology*, 13(6), 693–713. <https://doi.org/10.1007/BF00929796>.
- Spector, P. E. (1997). Job satisfaction: Application, Assessment, Cause, and Consequences. Advanced Topics in Organizational Behavior. Thousand Oaks, Calif.: Sage. Retrieved from <http://www.loc.gov/catdir/enhancements/fy0655/97004598-d.html>.
- Su, L., Swanson, S. R., Chinchanchokchai, S., Hsu, M. K., & Chen, X. (2016). Reputation and intentions: The role of satisfaction, identification, and commitment. *Journal of Business Research*, 69(9), 3261–3269. <https://doi.org/10.1016/j.jbusres.2016.02.023>.
- Thornton, P. H., & Ocasio, W. (1999). Institutional logics and the historical contingency of power in organizations: Executive succession in the higher education publishing industry, 1958–1990. *American Journal of Sociology*, 105(3), 801–843. <https://doi.org/10.1086/210361>.
- Tischer, S., & Hildebrandt, L. (2014). Linking corporate reputation and shareholder value using the publication of reputation rankings. *Journal of Business Research*, 67(5), 1007–1017. <https://doi.org/10.1016/j.jbusres.2013.08.007>.
- Vainieri, M., Smaldone, P., Rosa, A., & Carroll, K. (2019). The role of collective labor contracts and individual characteristics on job satisfaction in Tuscan nursing homes. *Health Care Management Review*, 44(3), 224–234. <https://doi.org/10.1097/HMR.0000000000000177>.
- Veh, A., Göbel, M., & Vogel, R. (2018). Corporate reputation in management research: A review of the literature and assessment of the concept. *Business Research*, 12(2), 315–353. <https://doi.org/10.1007/s40685-018-0080-4>.
- Wang, R.-T. (2013). Modeling corporate social performance and job pursuit intention: Mediating mechanisms of corporate reputation and job advancement prospects. *Journal of Business Ethics*, 117(3), 569–582. <https://doi.org/10.1007/s10551-012-1538-5>.
- Wang, Y., Lo, H.-P., & Hui, Y. V. (2003). The antecedents of service quality and product quality and their influences on bank reputation: Evidence from the banking industry in China. *Managing Service Quality: An International Journal*, 13(1), 72–83. <https://doi.org/10.1108/09604520310456726>.
- Wangenheim, F. v., Evanschitzky, H., & Wunderlich, M. (2007). Does the employee-customer satisfaction link hold for all employee groups? *Journal of Business Research*, 60(7), 690–697. doi:10.1016/j.jbusres.2007.02.019.
- Wartick, S. L. (2002). Measuring corporate reputation. *Business & Society*, 41(4), 371–392. <https://doi.org/10.1177/0007650302238774>.
- Willems, J., & Ingerfurth, S. (2018). The quality perception gap between employees and patients in hospitals. *Health care management review*, 43(2), 157–167. <https://doi.org/10.1097/HMR.0000000000000137>.
- Yeh, Y.-J. Y., Ko, J.-J. R., Chang, Y.-S., & Chen, C.-H. V. (2007). Job stress and work attitudes between temporary and permanently employed nurses. *Stress and Health*, 23(2), 111–120. <https://doi.org/10.1002/smi.1128>.
- Yoon, M. H., & Suh, J. (2003). Organizational citizenship behaviors and service quality as external effectiveness of contact employees. *Journal of Business Research*, 56(8), 597–611. [https://doi.org/10.1016/S0148-2963\(01\)00290-9](https://doi.org/10.1016/S0148-2963(01)00290-9).

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