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## Middle Managers Working beyond Senior Management's Expectations: A Phenomenological Study of the Managed Healthcare Industry in Southern California

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Middle Managers Working beyond Senior Management's Expectations: A  
Phenomenological Study of the Managed Healthcare Industry in Southern California

A Dissertation by

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Irvine, California

School of Education

Submitted in partial fulfillment of the requirements for the degree of

Doctor of Education in Organizational Leadership

April 2018

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April 2018

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Phenomenological Study of the Managed Healthcare Industry in Southern California

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My dissertation journey goes back several decades when I had a conversation with my mother, Ms. Emma J. Baker, and I stated one day I would become a doctor and accomplish many things, which I have now done. For quite some time it was my ambition to earn a doctoral degree. As life evolved, this dream became a greater challenge to achieve. As time went on, my wife, Jerelyn, never let me lose sight of my goal. First, I would like to thank Jerelyn Dugas for helping me to achieve this goal as she read, wrote, and studied along side of me to finish her own doctoral degree. With the loving support of Jerelyn and my family, I finally succeeded in accomplishing my goal! I will always be grateful to my wife and two children, Dr. Christi Dugas-Cramer and Gerald Dugas, Jr., and my son-in-law, Norman Cramer II, for your uplifting comments and telephone calls.

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## ABSTRACT

Middle Managers Working beyond Senior Management's Expectations: A  
Phenomenological Study of the Managed Healthcare Industry in Southern California

by Gerald Dugas

**Purpose.** The purpose of this qualitative study was to explore how middle managers and senior managers working in the managed healthcare industry in southern California perceive what factors motivated middle managers to work beyond senior management's expectations.

**Methodology.** A qualitative phenomenology study was chosen because it allowed the researcher to acquire a firm understanding of the nature of everyday lived experiences. This methodology was used to capture the meaning of experiences that motivated middle managers to work beyond expectations. The researcher conducted semi-structured, face-to-face interviews to gain a deeper understanding of the lived experience of the participants. Participants were six middle managers and six senior managers.

**Findings.** The data analysis resulted in 106 themes with 890 references across the two research questions. Twenty key findings emerged from the data relating to the lived experience of middle and senior managers working in the managed healthcare field.

**Conclusions.** Examination of the key findings resulted in seven conclusions demonstrating actions that should be taken to motivate middle managers. Findings focused on recognition, management support, a positive work environment, exceeding expectations through motivation, improved productivity through enhanced communication, a collaborative work environment, transparent communication, and a sense of pride.

**Recommendations.** How senior managers motivate middle managers to exceed expectations is in the early stages of research development. There are recommendations to conduct further research to broaden the scope and add to the current body of literature available.



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## CHAPTER I: INTRODUCTION

Major United States companies compete in a global marketplace. Given the dynamic environment of uncertainty and unpredictability required to develop products and services, many organizations are in a state of constant change. To be successful in this dynamic environment, organizations need leaders who can consistently motivate their employees (Sturman & Ford, 2011).

Sociologists discussed motivation and leadership for several decades. Maslow (1943) argued people cannot satisfy a higher-level need until they satisfy a need lower in the hierarchy. Skinner's (1953) theory held that individual performance was based on the amount of support and motivation received. Hence, motivation was considered a blend of needs, ambitions, and rewards (Luthans, 1992). Herzberg (1959) authored a seminal study on motivation, which stated motivation and job satisfaction led to quality work. Collectively, the theories on motivation were all based on drives, desires, and relationships needed to achieve and excel at work performance (Uzonna, 2013). De (1982) offered a framework that encompassed important attributes of motivation in the workplace. Lawler (1973) asserted the applied application of managerial leadership, which was key to employee motivation, was an essential ingredient in understanding workplace motivation.

Due to the increased demands of technological breakthroughs and a shrinking labor force, businesses need to increase productivity within the workforce (Bisson, Stephenson, & Viguerie, 2010). Many studies were conducted on the roles of managers in motivating staff (Gaines & Wilson, 2004; Harter & Adkins, 2015; Sturman & Ford, 2011). Buchanan (1974) addressed varying degrees of motivation and commitment

displayed by senior and middle managers based on their experiences and tenure. Also, Birken et al. (2015) reported that top managers directly influenced middle managers' commitment and execution on the job. The interaction between a middle and senior manager was crucial to increase motivation and productivity within an organization (Sullivan, 2011). Consequently, middle managers served as the bridge that connected senior managers with support staff (Birken, 2011).

Within healthcare organizations, senior managers have an interest in finding and motivating high-performing leadership talent who can assume the responsibility and carry forward the important work of the organization (Thompson, Buchbinder, & Shanks, 2012). According to Bajwa et al. (2010), motivation is a continual process and should be maintained and developed as individual and organizational factors transform over time.

If the sole purpose is to improve efficiency and effectiveness of organizations, research on motivating employees is not receiving enough attention (Rainey & Steinbauer, 1999; Wright, 2001). Few researchers delved into the relationship between senior managers and middle managers, and how their roles impact staff motivation (Birken, 2015; Davison, 2013). Consequently, the perceptions of both middle and senior managers in determining what factors influence middle managers to work beyond expectations would be invaluable.

## **Background**

Four major areas were addressed in the background of this research. First, the concept of human motivation and theories on human motivation were explored. Second, a theoretical framework, which supports motivation in the workplace, was examined. Third, the role of managers in impacting workforce motivation was reviewed. Finally,

the manager's role in the healthcare profession was reviewed, and the gap in the literature regarding this topic was discussed.

### **Motivational Theories**

Sociologists explored motivation and leadership for the past 70 years. In *A Theory of Human Motivation*, Maslow (1943) categorized the various human needs based on a hierarchy. These needs were prioritized as: physiological needs, safety needs, social needs (love and belonging), self-esteem, and self-actualization. Maslow (1943) argued people could not satisfy a higher-level need in the hierarchy until they met a need lower in the hierarchy. The logical sequence of Maslow's (1943) theory was that one basic need must be satisfied before moving on to the next need.

Skinner's (1953) theory of motivation conveyed the message that when an individual modeled a particular behavior, others would likely replicate the same behavior. He also noted that punishment could be used as a catalyst to change unwanted behavior to ensure it did not occur in the future. Skinner (1953) also stated how positive reinforcement was carried out was more influential than the amount or frequency of the reinforcement. Overall, Skinner's (1953) theory held that the individual's performance was based on the amount of support and motivation received.

Other researchers took different approaches to defining motivation. Dörnyei and Ushioda (2013) contended that motivation moves people to make decisions and engage in actions to reach an attainable goal, whereas Weiner (1986) introduced the role of unconscious processes in explaining motivation. Gupta and Tayal (2013) noted that various "push-pull" factors, such as needs for achievement, power, position, and recognition, should be included in the definition of motivation.

## **Workplace Motivation**

Various factors affect workplace motivation. Luthans (1992) stated motivation was a blend of needs, ambitions, and rewards. Motivation was considered a course of action that started with a physiological or psychological insufficiency or need that triggered behavior aimed at a goal or reward (Luthans, 1992). Uzonna (2013) offered several key factors, such as objectives and aspirations, recognition, achievement, and the need for success, to define motivation in the workplace. Collectively, theories on motivation were based on drives, desires, and relationships needed to achieve and excel at work performance (Uzonna, 2013).

Moynihan and Pandey (2007) stated there were different aspects of work motivation that had varying degrees of influence over work motivation. Often, employee motivation depended on the particular individual and what levers need to be pulled to shape motivation and performance (Harrison, Newman, & Roth, 2006; Moynihan & Pandey, 2007). As Moynihan and Pandey (2007) noted, how managers operated these levers affected job satisfaction, organizational commitment, and job engagement.

To encapsulate a workable definition of motivation in the workplace, De (1982) offered a framework that encompassed the essential attributes of workplace motivation. De (1982) provided a sampling of authors on workforce motivation. Lawler (1971) analyzed various theories such as the drive theory, expectancy theory, the revised expectancy theory, equity theory, and two-factor theory. Lee (1980) scrutinized economic theories, expectancy/path-goal theories, and theories related to need, work environment, job characteristics, and economic theories. Schein (1980) also added to the discussion on motivation by introducing the notion of an array of needs or complex



motives that influenced workplace motivations. Lastly, Handy (1981) addressed various theories such as the satisfaction theory, incentive theory, intrinsic theory, and the motivational calculus theory that affect workplace motivation.

Gagné and Deci (2005), along with other theorists (Mitchel, 1974; Porter & Lawler, 1968), built on Vroom's (1964) theory of motivation using intrinsic and extrinsic loci to postulate what motivated people in the workplace. Similarly, other researchers (Amabile, DeJong, & Lepper, 1976; Lepper & Greene, 1975; Smith, 1975) suggested a cognitive evaluation theory using intrinsic and extrinsic factors to motivate people in the workforce. However, on closer inspection, the results uncovered that positive feedback facilitated intrinsic motivation and negative feedback decreased perceived competence, which caused individuals to be unmotivated (Deci & Ryan, 1985a). After that, the theorists postulated self-determination theory, which distinguished between autonomous motivation and controlled motivation as applied to the workplace (Deci & Ryan, 1985b; Ryan & Deci, 2000). Gagné and Deci (2005) defined autonomy as acting with a sense of volition (intrinsic motivation) and control (extrinsic motivation). The connection between intrinsic and extrinsic motivation helped to define when individuals are intrinsically motivated and felt great, which was positively related to self-actualization (Gagné & Deci, 2005).

Wright (2001) added to the body of the research and helped address the limited work motivation research related to the public sector. Gabris and Simo (1995) stated it was difficult to define public sector motivation for employees and, if it existed, it exerted only a small influence on the career.

## **Workplace Motivation Theories**

**Hygiene theory.** Theoretical frameworks have roles that improve the quality of research (Caliendo & Kyle, 1996). Of the many studies conducted on motivation, Herzberg's two-factor theory, also known as the motivation-hygiene theory, played a significant role. Herzberg (1987) asserted motivation was the reason or reasons one had for acting or behaving in a particular way. Herzberg (1987) acknowledged human action would never be taken without a motivating factor, which was encompassed in the desire to achieve results. Herzberg's (1959) study categorized various alternative motivational factors as intrinsic or extrinsic. Maidani (1991) referred to intrinsic factors as "content" or "motivators" and noted they included achievement, advancement, the work itself, responsibility, and recognition. Extrinsic factors, or "hygiene," included company policy and administration, technical supervision, working environment, salary, and interpersonal supervision (Maidani, 1991).

Over the last 60 years, researchers dissecting Herzberg's theory reached different conclusions regarding the effectiveness of his approach. For instance, House and Wigdor (1967), after reviewing and summarizing 31 separate investigations, concluded Herzberg's study was based on faulty research and his methodology skewed the results. Additionally, Gaziel (1986) criticized the theory based on the confusion of Herzberg's interpretation of satisfaction and dissatisfaction by the agent. According to Gaziel (1986), Herzberg's data were presented negatively, which could have negatively swayed the employee. Gaziel (1986) also stated Herzberg did not adequately characterize the individual differences of the employee. More recently, Stello (2011) concluded Herzberg's theory was never validated or invalidated. The author's fundamental concern

was that Herzberg did not conclusively demonstrate motivational factors would provide job satisfaction or that hygiene factors would prevent dissatisfaction (Stello, 2011).

**Theory X and Theory Y.** McGregor (1960) proposed two theories, Theory X and Theory Y, to view employee motivation. Theory X assumed the individual lacked drive, resisted change, and did not care about the company whereas Theory Y assumed the person was self-directed and committed with a higher need and purpose to self-actualize. Over 50 years later, McGregor's pioneering leadership theories, which address organizational outcomes, remain significant today (Gürbuz, Sahin, & Koksall, 2014).

### **Role of Managers in Workplace Motivation**

Understanding employee motivation in the workplace could lead to benefits such as cost savings, increased quality, reduced turnover, swiftness to market, and improved value and services (Lawler, 1973). According to Lawler (1973), managerial leadership was an essential ingredient in understanding workplace motivation. Employee motivation techniques included empowering employees, developing trust, and sharing thoughts. Using these techniques helped managers focus on understanding employee behavior, empowered employees, and achieved win-win scenarios (Lawler, 1973).

Analoui (2000) identified nine factors that could be used to motivate senior managers, which in turn increased their effectiveness. Analoui (2000) concluded that of those nine factors, the driving motivators for improving the efficiency of senior managers were recognition and appreciation, responsibility, the nature of the job, and the psychological need for achievement. Birken (2011) suggested the support of senior managers could facilitate the bond between innovation effectiveness and middle managers' obligation to implement change. Further, Uzonna (2013) observed that

companies faced a challenge in retaining employees as their skills failed to keep pace with technological advances. One of the few current solutions was to motivate senior managers to increase employee retention and the desire to exceed expectations (Uzonna, 2013).

Middle managers were considered the bridge in the organization that connects senior managers and support staff. Middle managers act as the connector between strategy and regular work activities (Birken, 2011). Sullivan (2011) noted that increasing productivity was crucial to the bottom line and goals of the organization. Middle managers were one means of substantially impacting individual and team performance in an organization. Middle managers provided direction and purpose, set goals, hired staff, and retained motivated employees with the right technical skill sets. They also recognized and rewarded performance while communicating and providing support to the staff (Sullivan, 2011). On the other hand, Westley (1990) asserted that staff remuneration accounted for 70% of the impact that numerous factors had on the performance of team members.

### **Relationship between Senior Managers and Middle Management**

Middle management implements the goals and objectives of senior management (Burgess, 2013). According to Basford, Offerman, and Witz (2012), middle management's role is to encourage retention loyalty and to empower the staff to provide their best work efforts. Buchanan (1974) addressed varying degrees of motivation and commitment displayed by middle managers and senior managers based on their experiences and tenure. Birken et al. (2015) reported that top managers directly influenced middle managers' commitment and execution on the job. For middle

management to achieve great management, middle managers need to clarify the work expectations of senior management and generate a common language that catalyzed and reinforced changes in individual behavior (Davison, 2013).

### **Managers Role in Promoting Exceeding Expectations in the Workplace**

According to Thompson et al. (2012), regardless of the leader's role as a manager or senior manager, common task completion was essential to ensure excellent delivery of services. Exceeding expectations in the workplace could be defined as having superior knowledge of work requirements, exhibiting leadership responsibility beyond direct reports, and addressing customer needs beyond those initially covered (Shim & Rohrbaugh, 2014). Another definition addressed the degree of support and productivity that would benefit the organization, and that went beyond existing role expectations (Ritz, Giaque, Varone, & Anderfuhren-Biget, 2014). The main role of the managers was to ensure the organization they led achieved high performance (Thompson et al., 2012). Moreover, to understand and influence the staff, the manager must stay abreast of current policy and regulatory changes (Thompson et al., 2012).

### **Role of Managers in Healthcare Profession**

According to Madden (2015), the evolving leadership ranks of healthcare organizations saw a generation of new functions and an alteration of traditional ones. For example, some new job titles included chief experience officer, patient rights officer, chief administrative officer, chief quality officer, and analysis officer (Madden, 2015). Increased turnover resulted because of this evolution (Lawler, 1973).

To be effective, the leader's "responsibility includes strategically addressing the organization's culture, acquiring and allocating resources, planning, and provision of

services, providing sufficient staff and setting priorities for improvement” (Schyve, 2009, p. 3). Moreover, based on the essential competencies for new leaders—intellect, interpersonal ability, integrity, and intensity—organizations should continue to seek traditional skills and executive experience, and overlook less conventional and more forward-thinking candidates (Madden, 2015).

Locsin (2017) stated the roles of healthcare managers varied according to titles and functions, but the primary responsibility was to foster an environment that provided quality care and maximum profit. The crucial managerial roles for senior healthcare managers were leader, monitor, liaison, resource allocator, disturbance handler, and strategist (Guo, 2003). Birken et al. (2015) noted, however, that senior managers within the healthcare sector tended to focus on policy. After further examination, Guo (2003) concluded that human relations skills, including motivation, partnering, coaching, influencing, persuading, and listening, were required for performing interpersonal roles. Similarly, Thompson et al. (2012) stated senior managers had an interest in finding and motivating high-performing leadership talent within the healthcare organization who could assume responsibility and carry forward the important work of the organization.

### **Research Gap**

“Leaders who perform beyond expectations bring a clear focus together with high motivation, disciplined innovation, and a clear strategy to achieve their objectives” (Hargreaves & Harris, 2011, p. 8). Guo (2003) asserted that practical knowledge and experience was a necessity for senior managers. Many motivating factors could steer employees into performing and carrying out their duties in a given manner (Birken et al., 2015). Hargreaves and Harris (2011) asserted that leadership in organizations that beat

expectations require definable objectives connected to the desired goal and, over time, results in high staff retention rates.

More emphasis should be directed to the influence of senior managers on middle managers in the healthcare profession (Parand, Dopson, Renz, et al., 2014). The majority of data involving managerial influence was collected on top management (Birken, 2011). If the sole purpose of leadership was to improve efficiency and effectiveness of organizations, research on motivating employees was not receiving enough attention (Rainey & Steinbauer, 1999; Wright, 2001). Additionally, career-related attitudes were not frequently studied (Carmeli, Casper, Lockwood, Bordeaux, & Brinley, 2005). Reviewing common research outcomes that identified how and why employees exceeded managers' expectations would enable the creation of shared work themes (Parker & Hall, 1992).

A detailed examination of the criteria related to employee behavior, job performance, and organizational outcomes could lead to an understanding of the factors that motivate middle managers in the healthcare profession to work beyond the expectations of their supervisors. The healthcare profession experiences constant change in technological and regulatory requirements. Additional factors that aid senior managers in their supervision of middle managers in this dynamic environment are needed (Rivers & Glover, 2008). Consequently, this study compared and contrasted the perceptions of both middle and senior managers to identify the factors that influenced middle managers to work beyond expectations.

## Statement of the Research Problem

Due to the dynamics of rapidly evolving technology in the healthcare industry, the demand for qualified personnel is increasing. Accordingly, some considered the role of the manager is to deliver excellent service to the customer (Thompson et al., 2012). Birken et al. (2015) reported that top managers directly influenced middle managers' commitment and execution on the job, and Buchanan (1974) addressed varying degrees of motivation and commitment displayed by middle managers and senior managers. Therefore, middle managers were one means of substantially impacting team performance in an organization (Sullivan, 2011). As a result, effective middle managers provided direction, set goals, and retained motivated employees with the necessary skill set. For that reason, understanding the significance of middle managers in the managed healthcare industry could lead to long-term retention and provide substantial organizational benefits (Belasen & Belasen, 2016).

Senior managers should have an interest in finding and motivating high-performing leadership talent within a healthcare organization who can assume responsibility and carry forward the important work of the organization (Thompson et al., 2012). Senior management's focus on middle managers inspired middle managers to increase their own performance and potentially work beyond expectations (Belasen & Belasen, 2016). Thus, senior managers needed specific guidance on employee engagement and motivation to aid in their supervision of middle managers (Rivers & Glover, 2008; Shah & Beh, 2016; Silva, 2016;).

The demand for quality service in the healthcare profession continues to increase (Sturman & Ford, 2011), yet the industry has a shortage of managers (Uzonna, 2013).



Insufficient human capital exists in the managed healthcare field to adequately support the medical requirements of the nation's growing and aging population (U.S. Bureau of Labor Statistics [BLS], 2017). By the end of 2020, the managed healthcare profession is expected to need to fill three times more managerial positions than other fields (BLS, 2017). Hence, more attention on workplace motivation in the managed healthcare industry is required to increase productivity and retention (Bission et al., 2010).

The interactions between senior and middle managers demonstrated why motivating middle managers had a significant impact on the attrition of middle managers and organizational productivity (Belasen & Belasen, 2016). Embertson (2006) asserted the role of middle managers had been overlooked in the healthcare industry. Moreover, senior managers' influence on middle managers was deemed worthy of further research to determine if middle managers' commitment increases when senior managers offer direct support and motivation (Birken et al., 2015).

### **Purpose Statement**

The purpose of this phenomenological study was to explore how middle managers and senior managers working in the managed healthcare industry in southern California identify what factors motivated middle managers to work beyond senior management's expectations.

### **Research Questions**

Based on the literature and the purpose of the study, the following general research questions guided the study:

1. What are the lived experiences middle managers identify as the motivating factors that influence them to work beyond expectations?

2. What are the lived experiences senior managers identify as the motivating factors that influence middle managers to work beyond expectations?

### **Significance of the Problem**

Leadership is critical to the success of any organization. Burns (1978) introduced leadership as a process whereby leaders and employees helped each other to advance to an enhanced level of morale and motivation. De Poel, Stoker, and Van der Zee (2014) asserted that leadership motivated and stimulated employees to excel in their performance. Leadership that beat expectations required definable objectives connected to the desired goal and, over time, resulted in high staff retention rates (Hargreaves & Harris, 2011).

Human capital is critical to an efficient managed healthcare system (Vujicic & Zurn, 2006). An ongoing demand for managed healthcare managers results from an increased need for medical services to accommodate the large and aging Baby Boomer population (BLS, 2017). Hence, more attention on workplace motivation is required in the managed healthcare industry to increase productivity and retention, improve communications, and provide appropriate training (Bisson et al., 2010). According to Wright (2001) and Rainey and Steinbauer (1999), research on motivating employees is not receiving sufficient attention.

This study was significant because it provided business leaders and managed healthcare managers with a fundamental understanding of work performance, motivation, and its effects on employee effectiveness. With an understanding of the factors senior managers use to motivate middle managers, senior management can motivate employees to work beyond expectations (Aina, 2013; Burgess, 2013; Uzonna, 2013). The findings

may provide information to bolster employee retention, increase overall work productivity, and provide motivational tools and skill sets for managed healthcare leadership (Bisson et al., 2010).

Only a few studies have been conducted on how to motivate managers to exceed expectations in the workforce. Researchers indicated a more detailed study should examine why and how middle managers exceed the expectations of senior managers (Barbosa-McCoy, 2016; Hargreaves & Harris, 2011; Stum, 2001). As Thompson et al. (2012) noted, senior managers have an interest in finding and motivating high-performing middle managers within the managed healthcare organization.

The goal of this research was to identify specific factors that play a significant role in motivating middle managers in a managed healthcare industry. Managed healthcare senior managers and executive leadership can integrate this information into strategies for retaining employees and increasing work productivity. This research could provide both senior and middle managers with a better understanding of how motivation plays a role in getting employees to work beyond what is required. Collectively, the study results and recommendations could be utilized in personal development plans for leaders in the managed healthcare industry to enhance the healthcare managers' skill set. The contributions of this study may not be exclusive to the managed healthcare industry and could be of value to other organizations aiming to increase productivity and reduce attrition.

### **Definitions of Terms**

This section provides definitions of key terms germane to the motivation for purposes of this study.

**Ambition.** Ambition in the workplace was defined as workers accepting personal responsibility for their individual goals, although it was noted ambition should not lead to greed, rushing to complete the task, or putting one's personal goals above the company's goals (Gaston, 2017).

**Expectations on the job.** Expectations on the job were defined as arriving on time for duty and being actively engaged in completing eight hours of work five days per week.

**Extrinsic motivation.** Extrinsic motivation was defined as a reward or inducement provided by an external person or entity to compel a person to act, or anything a person may need to increase to motivation (Kretchmar, 2017).

**Extrinsic rewards.** Extrinsic rewards were considered rewards provided outside of the job itself and could be financial or non-financial, such as job flexibility (Biddle, 2015).

**Intrinsic motivation.** Intrinsic motivation was defined as a behavior or action driven by internal rewards (Kretchmar, 2017).

**Intrinsic rewards.** Intrinsic rewards were considered those derived from the work itself, such as job satisfaction, camaraderie, and feelings of self-worth (Biddle, 2015).

**Managed healthcare.** A healthcare delivery focusing on collaboration and coordination of services to avoid overlap, duplication, and delays to reduce costs. There is an emphasis on timeliness of interventions to prevent unnecessary delays in discharge from the hospital; government programs i.e. Medicare and Medicaid (Miller-Keane

Encyclopedia and Dictionary of Medicine, Nursing, and Allied Health, 2003; Mosby's Medical Dictionary, 2009).

**Middle manager.** Middle managers were those who operated at the intermediate level of the corporate hierarchy, typically a level below senior management that includes general managers who monitor many multifunctional operations.

**Motivation.** Motivation was defined as an internal drive that encompasses the strength and intensity necessary to guide an individual's actions and behavior toward achievement of a specific goal (Analoui, 2000).

**Productivity.** Productivity in the workplace linked the employee's behavior to organizational performance that resulted in positive practices and outcomes (Gunderson, 2002).

**Rewards.** Rewards in the workplace consisted of what individual employees received due to how well they performed their tasks and were typically used to motivate employees to improve productivity (Biddle, 2015).

**Self-Actualization.** Self-actualization referred to an individual developmental process from selfishness to selflessness that followed a growth motivation path and enabled the realization of one's true potential (D'Souza & Gurin, 2016).

**Self-Determination.** Self-determination is a theory of motivation based on change and growth due to inherent psychological needs, which include competence, connectedness, and autonomy (Gagné, & Deci, 2005).

**Working beyond expectations.** Working beyond expectations was defined as exceeding regular duty hours without additional compensation or expectation of recognition and being visible at the workplace in advancing new ideas (Garrin, 2013).

Additionally, it is the employee experience of belonging to the organization, understanding a sense of purpose in job contributions, achievement in worked completed, a sense of happiness at work and a lot of vigor (excitement) at work (Lesonsky, 2017).

**Work performance.** Work performance was defined as outcomes based on an individual's ability and motivation for accomplishing the job, inclusive of an individual's capacity to perform, willingness to perform, and the opportunity given to perform (Blumberg & Pringle, 1982).

### **Delimitations**

The study used data collected from a healthcare facility in southern California and was delimited to those employed by the healthcare organization for more than one year. The study was delimited to middle and senior managers who supervised a minimum of three people or worked in a non-supervisory capacity as part of a unit with a minimum of three employees working for the same supervisor. The study was delimited to a combined sample total of 12 senior and middle manager participants.

### **Organization of the Study**

This study is divided up into five chapters. Chapter I introduced the study, background information, the statement of the problem, the purpose of the study, the significance of the problem, definitions of terms, and study delimitations. Chapter II examines the literature relevant to how senior managers motivate middle managers to work beyond expectations given their various roles and responsibilities. Chapter III delineates the research design used in the study, including the population and sample, as well as the instrumentation, data collection and analysis, and limitations of the study. Chapter IV offers the findings of the study, which includes a detailed analysis of the data.

Chapter V provides an interpretation of the data, draws conclusions based on the analysis, and offers unexpected findings and recommendations for further study.

## CHAPTER II: REVIEW OF THE LITERATURE

This chapter presents the literature pertinent to the purpose of the study. It addresses motivation in the workplace, specifically the managed healthcare industry and the role senior management plays in motivating middle managers to work beyond expectations to increase efficiency and profit. The literature review begins with a summary of general theories of human motivation and then moves to consider motivation specifically in the workplace. After a discussion of both seminal and recent scholarly works on workplace motivation, the review focuses on the dynamics between senior and middle managers as a key factor in improving workplace efficiency. The literature review concludes with a look at recent studies specific to the managed healthcare industry.

Leadership is crucial to success within any organization. Young (2002) asserted any form of significant leadership was based mainly on motivation. The author suggested real leadership was tied closely to being able to motivate employees. A review of the literature often concluded leaders who motivated and increased morale among their employees demonstrated transformational leadership. Northouse (2013) defined transformational leadership as

A process through which a person engages with others and creates a connection that boosts the level of motivation and morality in both the leader and employee while trying to help the employee reach their full potential for achieving organizational excellence. (p. 186)

Notably, Bass (1985) defined transformational leaders as those who motivated, raised awareness about important matters, increased achievement, and led people to



surpass self-interest to identify what was best for the organization. Similarly, Becker (1960), Burns (1978), Bass (1985), and Bass and Avolio (1990) addressed detailed views on transformational leadership and its connection to employees working beyond performance expectations. Additionally, Windodo (2014) asserted the work environment, good or bad, had a direct impact and influence on leadership and, to an extent, the motivation and performance of the employee. Several studies documented a correlation between transformational leadership, employee empowerment, and leader influence through motivation on the outcomes of employees (Ahmad, Abbas, Latif & Rasheed, 2014; Givens, 2008). Consequently, the success of any organization was in the level of staff members' motivation, which was proportionate to management's policies and practices (Balogun & Johnson, 2004; Thompson et al., 2012). Thus, managers were central to the staff's motivational levels and the organization's success. Many studies were conducted on the roles of managers in motivating staff (Gaines & Wilson, 2004; Harter & Adkins, 2015; Sturman & Ford, 2011). However, few researchers delved into the relationship between senior managers and middle managers, and how their roles impacted staff motivation (Birken, 2015, Davison, 2013). Although literature was abundant on senior and middle management interface, motivation, and fostering a climate where employees worked beyond expectations, little literature synthesized these three topics.

### **Human Motivation**

The importance of motivation is seldom understated; hence, the research on motivation in academia and business had an abundant and complicated history. Recently, Dörnyei and Ushioda (2013) attempted to summarize the cognitive theories on

motivation, suggesting motivation was located within the individual and could be influenced by social and environmental factors. To link historical perspectives to current thinking, Dörnyei and Ushioda (2013) discussed theories on motivation, such as Atkinson and Raynor's (1974) achievement motivation theory; Weiner's (1992) attributional theory; Locke and Latham's (2002) goal setting theory; and Deci and Ryan's (1985a) self-determination theory. This review was Dörnyei and Ushioda's (2013) attempt to provide a standard reference for management and psychological motivation.

Many authors proposed theories on human motivation (Chemolli & Gagne, 2014; Morgenroth, 2015; Murayama, Kitagami, Tanaka, & Raw, 2016; Neel, 2016; Patall, 2013; Reinboth & Duda, 2016; Winston, 2016; Zhou, 2014). Most of these based their work on classical researchers. The most popular theories in the literature were Maslow's (1943) hierarchy of needs, Skinner's (1953) reinforcement theory, Deci and Ryan's (1985a) self-determination theory, Weiner's (1985) attributional theory, and Locke's (2004) goal setting theory.

### **Hierarchy of Needs**

A considerable amount of information was published over the last 75 years on human motivation, beginning as early as 1943 with Abraham Maslow. In a paper titled *A Theory of Human Motivation* (1943), Maslow categorized essential human needs based on a hierarchy, which was a pyramid diagram comprising the following levels: physiological needs, safety needs, social needs, self-esteem, and self-actualization.

Basic needs, which form the bottom tier of the hierarchy, included physical necessities such as oxygen, food, and water to sustain the human body, and sexual fulfillment (Maslow, 1943). Safety concerns referred to things such as the need for

shelter from the environment and protection from enemies. According to Maslow (1943), the middle tier transitions from primal human needs to social needs, and the top two levels concern self-esteem, self-fulfillment, a sense of accomplishment, and self-actualization. Maslow (1943) argued that unsatisfied needs on the lower tiers of the pyramid prevented someone from moving to the next step. For example, if someone is starving or freezing from the elements, they would be less concerned about self-esteem. He called individuals who dealt with managing the higher needs self-actualizing people. The distinctive feature of Maslow's (1943) theory concerned the sequence: basic needs had to be fulfilled before people were motivated by higher needs. Maslow (1943) argued that humans did not satisfy requirements randomly; instead, they sought to meet their needs through dealing with the most basic needs before addressing higher-level needs.

D'Souza and Gurin (2016) stated that Maslow (1973) went on to expand self-actualization into four needs: cognitive, aesthetic, self-actualization, and self-transcendence. Since there were eight needs, Maslow (1973) categorized the four top needs as D-needs, referring to deficient needs, and the bottom four into B-needs, referring to being needs (D'Souza & Gurin, 2016).

### **Reinforcement Theory**

Skinner (1953) originated reinforcement theory, which is considered one of the oldest theories of motivation, to help explain behavior. Reinforcement theory stated that if the consequences of certain behaviors were bad for an individual, there was a high probability the action would not be repeated, and if the consequences of certain behaviors were good, there was a high probability the action would be repeated (Skinner, 1953). A positive reinforcer was defined "as any stimulus the *presentation* of which bolsters the

behavior upon which it is made contingent” (Skinner, 1953, p. 185). In contrast, a negative reinforcer (or aversive stimulus) was defined “as any stimulus the *withdrawal* of which strengthens behavior” (Skinner, 1953, p. 185). Skinner’s (1953) theory of reinforcement also included the concept of schedules of reinforcement, a strategy to shape an individual’s behavior through the repetition of positive or negative consequences for specific actions. Four approaches to reinforcement theory were described: positive reinforcement, negative reinforcement, positive punishment, and negative punishment. Skinner (1953) promoted the notion of operant conditioning—responses to environmental stimuli—that change or condition human behavior

Applying this to the workplace, managers attempting to motivate their employees must ensure they do not reward all employees altogether. Rather, each employee should be provided feedback on behaviors that should be corrected and how he or she can achieve positive reinforcement. Although Skinner’s reinforcement theory has been around for decades and taught ways to modify the behavior of individuals for the better of mankind, others such as Hocutt (2013) suggested Skinner was skewed in his conclusion that everyone’s behavior was controlled by an elite group, which would be tantamount to top-down management of the behavior of everyone.

### **Self-Determination Theory**

Deci and Ryan (1985a, 1985b, 2000) posited self-determination theory (SDT), which addresses the study of human motivation and personality. According to Deci and Ryan (1985a), the theory defined intrinsic and extrinsic sources of motivation. The intrinsic and extrinsic motivations were the sources of rewards that motivate individuals to discover their energy and work in a particular fashion. Deci and Ryan (2000) stated

that motivation was often treated as a singular construct; however, people acted for different reasons, and with different experiences and consequences. Extrinsic motivation refers to the enactment of activity to attain some outcome, whereas intrinsic motivation refers to performing an activity for the simple pleasure inherent in the activity itself (Deci & Ryan, 2000).

Ryan and Deci (2000) asserted SDT comprised six facets of motivation:

1. Cognitive Evaluation Theory (CET), which involves intrinsic motivation based on the personal satisfaction of behaving in a particular manner.
2. Organismic Integration Theory (OIT), which involves extrinsic motivation and details the different forms of extrinsic motivation and related factors that promote or hinder internalization of the behaviors.
3. Causality Orientations Theory (COT), which describes individual differences in the various ways people relate to external environments and self-regulate behavior.
4. Basic Psychological Needs Theory (BPNT), which proposes a person's psychological health and well-being are based on the fulfillment of advanced psychological needs such as autonomy, competence, and relatedness.
5. Goal Contents Theory (GCT), which developed from the differences between intrinsic and extrinsic goals and their impact on motivation and wellness.
6. Relationships Motivation Theory (RMT), which describes how people develop and sustain interpersonal relationships (e.g., close friends, intimate partners) and participate in groups (e.g., religious, professional, or recreational organizations).

Moreover, motivation was considered highly valued, produced results, and was essential to managers, coaches, and healthcare providers that involve mobilizing others to act (Ryan & Deci, 2000).

Patall (2013) addressed the effect of providing choices to determine the impact on motivation and performance. This hypothesis was focused on uncovering if any factors influenced motivational benefits offered by the choices selected (Patall, 2013).

According to SDT (Deci & Ryan, 1985; Ryan & Dec 2000), intrinsic motivation was enhanced when people could make choices. In a similar fashion, Patall (2013), suggested choice led to heightening interest, enjoyment, and effort, and in specific instances could be a powerful motivator. Patall (2013) suggested choices may be powerful when a task was perceived as boring, but still beneficial when the task was considered interesting, implying that individuals may be more interested and motivated when they influence their circumstances. In brief, Patall (2013) concluded individuals who made choices about tasks were motivated and outperformed those who did not make choices about the tasks.

In a related article on motivation, Chemolli and Gagne (2014) disputed SDT noting it represented a long a continuum of relative autonomy. Chemolli and Gagne (2014) provided information highlighting contradictions in the motivation regulations, adding to the body of knowledge that different types of motivation cannot be illustrated using a continuum. However, Suri, Sheppes, Leslie, and Gross (2014) focused on SDT in the context of increasing intrinsic motivation; they found promoting autonomy may increase participants' intrinsic motivation and thereby produce more durable behavioral changes than practices that did not emphasize autonomy (Suri et al., 2014).

Ullrich-French and Cox (2014) conducted a study using SDT to identify changes in motivation regulators among middle school students. Although there was paucity about autonomous motivation in physical education during childhood and adolescence, significant data supported the view that autonomous motivation in physical education predicted autonomous motivation for physical activity outside of school (Ullrich-French & Cox, 2014). Moreover, Ullrich-French and Cox (2014) defined intrinsic motivation as being completely autonomous, characterized by enjoyment and stimulation, and extrinsic motivation as doing something leading to a separate outcome. Their study contributed to the body of research explaining various forms of autonomous motivation and the changes that occurred at the middle school, which had a declining effect on autonomous motivation and an increase in external regulation (Ullrich-French & Cox, 2014).

Hadden, DiBello, and Rodriquez (2015) presented research using SDT to determine if motivation had a role in commitment. The research involved 121 diverse students at a southwestern university. Hadden et al. (2015) suggested SDT as being self-determined and people engaged in activities due to free choice rather than external pressures or internal expectations. The findings advanced the understanding of how motivation functioned in the commitment process; individuals with high self-determination displayed high commitment (Hadden et al., 2015).

Garaus, Furtmüller, and Güttel (2016) conducted research adding key data to advance the literature on motivation that small rewards increased autonomous motivation. Autonomous motivation pertained to intrinsic motivation and types of extrinsic motivation in which individuals integrated the significance of the activity into their sense of self-support and self-advocacy (Deci & Ryan, 2000). According to Garaus

et al. (2016), autonomously motivated people acquired knowledge since they recognized the significance of the content, which then justified the behavior. Notably, rewarding individuals appeared to be an attractive and promising method to influence motivation; verbal rewards such as positive feedback boosted autonomous motivation. Based on the data analysis and findings, small rewards increased autonomous motivation and performance, in contrast to large rewards that tended to reduce performance (Garaus et al., 2016).

In their study, Murayama et al. (2016) sought to prove or disprove the premise that extrinsic motivation was slightly more powerful than intrinsic motivation. The findings indicated when people engaged in a task that interested them (intrinsic motivation), and extrinsic incentives were introduced, there was a decrease in intrinsic motivation and performance. This pinpointed meta motivation, which led people to adopt ineffective motivational strategies. The results indicated there were less than optimal benefits of extrinsic incentives on recipients with high intrinsic motivation (Murayama et al., 2016).

Poile (2017) used SDT as the backdrop for a study to understand whether an individual's task affected another person's task, which may be dependent on the first-person task completion to be successful. Poile (2017) suggested that asymmetric task dependence could promote the internalization process, which brought about a feeling of responsibility for the dependent's task and motivated helping behavior.

### **Goal Setting Theory**

Locke (2004) suggested goal setting had a positive influence on business organizations with performance measurements and incentives. Goal setting theory was



categorized as a process describing how people created choices to work hard and the choices were based on individual preferences, existing rewards, and possible results (McCuddy, 2007). Locke and Latham (2006) stated specific demanding goals led to a higher level of mission performance than easy goals and hard goals were motivating because attainment led to personal satisfaction. According to Locke and Latham (2002), goals affected accomplishments through four processes:

- a. Goals serve a directive function; they guide attention and effort toward a specific pursuit or objectives
- b. Goals affect determination
- c. Goals have an energizing function, with lofty goals leading to larger efforts than smaller goals
- d. Goals affect action in a roundabout way, leading to the arousal, discovery, and use of a task

Werner and DeSimone (2012) stated goal setting theory maintained that performance goals provided a crucial role in motivation. According to goal setting theory “an employee who establishes career goals is more likely to advance his or her career, especially if the goals are specific, challenging and accompanied by regular feedback on progress toward the goals” (Werner & De Simone, 2012, p. 51). Therefore, Werner and DeSimone (2012) asserted employ-driven goals would steer higher levels of performance than simple, vague, or nonexistent goals. Locke and Latham (2002) created goal-setting theory to understand the motivation surrounding the choices people made and to understand how goals influenced one’s performance.

Motivation was examined as a concept for achievement. Zhou (2014) sought to determine what motivated individuals to continue their pursuit despite obstacles and perceived dissatisfaction. The study asked Chinese doctoral students what motivated them to continue when they encountered challenges and what cultural factors may contribute to their persistent motivation. Zhou (2014) mentioned achievement motivation and goal setting theory to proffer the reasoning that perceptions of value and expectancy of the task shaped motivation; intrinsic motivation was deemed to be the engagement factor. This study highlighted one of few who focused on the interaction of motivation challenges and cultural dimensions to promote motivation. According to Zhou (2014), some of the cultural aspects were considered demotivating, such as extreme competition, arduous study hours, high possibility of dropout, and an overwhelming workload.

Other researchers, such as Landau, Kay, and Whitson (2015), contended people were motivated by control over their daily activities. Although not readily acceptable data to the general populous, Landau et al. (2105) suggested having and maintaining personal control required knowledge about contingencies such as potential actions and outcomes. Hence, people were motivated to sustain a high level of apparent control to project an image that they were capable of attaining desired goals, avoiding the wrong outcomes, and achieving the anticipated goal (Landau et al., 2105).

### **Motivational Theory of Role Modeling**

Morgenroth (2015) suggested role models were a positive way to motivate people to perform beyond expectations and set ambitious goals. This theory was similar to Vroom's (1964) expectancy theory, which stated a person was driven to achieve a specific goal if the outcome aligned with the individual's expectations and values.

However, Morgenroth (2015) offered a slight nuance to this framework, motivational theory of role modeling (MTRM), which suggested role models could shape motivation and goals. A role model could influence a follower's performance, motivation, and goals by acting as a model, which represented the possible inspirations. Data on this model was limited and more research needs to be conducted on MTRM as a framework for motivation (Morgenroth, 2015).

### **Achievement Goal Theory**

Achievement goal theory has been around for more than 30 years (Dweck, 1986; Nicholls, 1984). Achievement goal theory was developed to describe achievement and behavior in the work environment. Consequently, achievement goal theories represent a combined and organized pattern of beliefs about the general reasons for achievement and the standards used to judge efficient performance (Urduan, 1997). According to Nicholls (1984), achievement goal theory provided details that a critical criterion for a motivated behavior was needed to feel competent. Complementary to this, Pintrich and Schunk (1996) asserted that achievement goals referred to reasons an employee pursued an achievement task, although this could be applied to other achievement contexts such as sports or business settings. Similarly, Pintrich (2000) stated achievement goal theory assumed goals were cognitive representations of what individuals were trying to accomplish and their reasons for performing the task.

Murphy and Alexander (2000) added to the body of research with a discussion about key aspects of motivation theories. Based on their review of achievement goal theory, other goal theories, and other motivational theories, they drew four primary conclusions:

1. Goal theories need to develop more homogeneous terms and labels for its concepts but maintain different terms when they reflect important theoretical and empirical differences.
2. In contrast to some motivational theories, goal theory assumed goals were cognitive representations and were potentially accessible and conscious. These representations had essential consequences on how goals were motivated and influenced various outcomes.
3. Mastery and performance goals were traditionally theorized as oppositional, but more recent work moved toward a more detailed and complex perspective.
4. Goals were not traits in the characteristic personality sense, but rather cognitive descriptions that may manifest within the individual.

Reinboth and Duda (2016) stated that achievement goal theory recognized two states of involvement, task and ego. Task-involved (mastery) focused on one's effort and improvement (self-referenced). Ego-involved (performance) focused on comparing oneself to others (normatively referenced). Reinboth and Duda (2016) pointed out that motivation and performance could work together so people who appreciated what they spent more time developing their skill set, which ultimately led to increased performance.

### **Motivation in the Workplace**

#### **Theory X, Theory Y**

Douglas McGregor (1960) created Theory X and Theory Y, suggesting two aspects of human motivation and management. Theory X projected a negative viewpoint and Theory Y projected a positive viewpoint, both of which were based on various assumptions. Theory X assumptions suggested the employee had little ambition and did

not want to work, and therefore needed to be persuaded or punished to complete the goals; these were the employees who disliked responsibilities and resisted change. In contrast, Theory Y assumptions suggested employees were internally motivated and driven to accomplish goals; these employees viewed their job as relaxing, did not need constant supervision, and were resourceful and innovative (McGregor, 1960).

Correspondingly, Gürbüz et al. (2014) asserted Theory X managers assumed their employees disliked work, needed constant direction, and avoided taking on responsibility. Conversely, Theory Y managers assumed their employees were creative, liked work, and accepted responsibility. Although Gürbüz et al. (2014) stated McGregor's Theory X and Theory Y had for a long time described how an employee was motivated, the results of McGregor's study were only revisited recently to address military leaders. These study findings concluded military leaders could increase subordinates' approval of the leader and their organizational commitment by assuming their followers were capable of self-control and self-direction, and could accept responsibility (Gürbüz et al., 2014).

In conclusion, Theory X employees required a certain amount of direction and supervision. It was most often used with labor-intense jobs (Sager, 2008). However, Theory Y employees took initiative and were self-directed to accomplish the job, and often made significant contributions to the organization. This theory was most associated with employees who sought increased responsibility and were entrepreneurial (Sager, 2008).

## **Equity Theory**

Adams developed equity theory in the 1960s. The theory focused on how employees strived to retain equity between the inputs they brought to the job and the outcomes they received from it compared to the supposed inputs and outcomes of others (Adams, 1963). Equity theory was categorized as a process theory describing how people created choices whether to work hard and the choices were based on individual preferences, existing rewards, and possible work results (McCuddy, 2007). Equity theory was based on a comparison of individuals' job inputs and their outcomes with respect to others to avoid or eliminate any disparities or inequities. The overall premise of this theory was that people valued fair treatment that promoted motivation in the workplace (Adams, 1963).

The fundamental understanding of equity theory was the balance in the ratio of inputs to outcomes. Inputs included all things (education, effort, experience, etc.) an individual perceived as pertinent for obtaining some return, whereas outcomes included all things seen to be gained on the individual's job investment (Cosier & Dalton, 1983). Adams (1963) proposed equity theory based on four propositions:

1. Individuals try to find ways to maximize their outcomes.
2. Groups can amplify collective rewards by creating accepted systems for equitably allocating rewards and costs among members.
3. Individuals participating in inequitable relationships become distressed.
4. Individuals in a perceived inequitable relationship attempt to eliminate their distress by restoring equity.

Cosier and Dalton (1983) asserted that inequities caused grievances, turnover, absenteeism, and low productivity, which were posited to be outcomes that occurred as a function of some general level of employee discontent and amotivation in the workplace. Moreover, equity theory was useful in describing elements that contributed to a lack of motivation rather than increasing motivation in the workplace. According to Mitchell and Daniels (2003), when workplace processes were recognized as fair, the benefits to an organization were high and employees were more likely to abide with policies even if their outcome was less than optimal. Likewise, when workplace policies were recognized as unfair, risks for retaliation and related behaviors such as sabotage and workplace violence escalated (Mitchell & Daniels, 2003).

### **Expectancy Theory**

Vroom (1964) posited expectancy and motivation theory, stating motivation was used to understand employee performance. Expectancy theory differed from other theories because it did not offer specific ideas on what motivated employees. Expectancy theory was categorized as a process theory describing whether people decided to work hard based on individual preferences, existing rewards, and possible work results (McCuddy, 2007). Expectancy theory was relevant because it provided different variables that motivate employees (Lunenburg, 2011). Equally, expectancy theory foretold that employees within an organization would be motivated when they considered that contributing more effort would generate better job performance, which led to organizational rewards that were appreciated by the employee (Montana & Charnov, 2008; Vroom, 1964).

Vroom (1964) introduced three assumptions within expectancy theory: expectancy (E), instrumentality (I), and valence (V). Expectancy referred to the belief that a particular action would lead to a particular desired outcome. Instrumentality referred to the belief that an individual would receive a reward (e.g., promotion, recognition, pay increase) if performance expectations were met. Valence referred to the value an individual placed on a particular outcome. For the valence to be positive, the person must prefer achieving the outcome to not achieving it (Vroom, 1964).

Expectancy theory was based on individual recognition. From the perspective of expectancy theory, all three assumptions (expectancy, instrumentality, and valence) must be reached for motivation and for the resultant performance to be high.

### **Hygiene Theory**

Herzberg (1959) first described hygiene theory, also known as two-factor theory, in his book *The Motivation to Work*. Herzberg (1959) identified certain factors that caused job satisfaction and a different set of factors that caused job dissatisfaction. He identified job dissatisfiers (also known as hygiene factors) and job satisfiers (also known as motivational factors). Herzberg (1959) presented the critical aspects of hygiene factors and motivational factors as:

- **Hygiene factors:** Hygiene factors were described as job factors essential for motivation in the workplace. These factors did not lead to real satisfaction for the long-term; however, if these factors were absent or non-existent at a workplace, they could lead to dissatisfaction. Hygiene factors were extrinsic to work because they were required to avoid job dissatisfaction and described the work environment. Hygiene factors included items such as pay, fringe



benefits, job security, company policies and administrative policies, status, physical working conditions, and interpersonal relations (Herzberg, 1959).

- **Motivational factors:** Motivational factors, also called satisfiers, were defined as inherent to work and motivated employees toward excellent performance. Employees usually found these factors intrinsically rewarding. Motivational factors included such things as the sense of achievement; recognition, growth, and advancement opportunities; responsibility; and the significance of the work (Herzberg, 1959).

Foundational to this, Herzberg (1959) argued that dissatisfaction resulted from factors that were neither identical nor opposite to the factors responsible for satisfaction. The most significant motivational factors were recognition, work-quality, responsibilities, and growth opportunities—not necessarily pay, work conditions, job security, or fringe benefits. Albeit Herzberg was most noted for his two-factor theory, he was principally concerned with the employee's wellbeing at work.

According to Herzberg (1987), motivation could be defined as a reason or reasons that compel a person to behave in a particular manner. Herzberg (1987) acknowledged that human action would never be taken without a motivating factor. The desire to achieve the result was considered a motivating factor. Managers who grasped the factors that de-motivated workers found they were often connected to concerns other than the work itself, which could lead to expanded motivation, better job satisfaction, and enhanced organizational performance (Strong & Harder, 2009).

## **Transformational**

Lewin, Lipitt, and White (1939) introduced the exploration of leadership styles and their effects on employee motivation. Leadership was considered a commodity that was both highly-valued and avidly sought after; as a process, leadership involved one person influencing a group of people to achieve a common goal (Northouse, 2013).

Different leadership approaches were described in the literature, such as transformational leadership, transactional leadership, and laissez-faire leadership; however, this literature review focused on transformational leadership and its effect on the organization. A great deal of information published was over the last century on transformational leadership and how the leader affects the organization in some manner. Northouse (2013) concluded a transformational leader was different because this leader was attentive to the needs and motives of employees and tried to help employees reach their fullest potential. Another author on transformational leadership stated transformational leadership was a style whereby a leader articulated the vision and values necessary for the organization to succeed (Westcott, 2014). Bass (1985) described four components of transformation leadership: (1) idealized influence, (2) inspirational motivation, (3) intellectual motivation, and (4) individualized consideration.

1. Idealized influence was characterized by strong role models with high ethical behaviors who instilled pride, gained respect, and built trust; they provide employees with a vision and sense of mission to excel.
2. Inspirational motivation described leaders who articulated an appealing vision to inspire employees; they challenged employees with high standards,

communicated optimism about future goals; and used emotional appeals to focus group members' efforts to achieve more.

3. Intellectual stimulation described leaders who stimulated and encouraged creativity in their employees to challenge their own beliefs and values, as well as those of the leader and the organization; they nurtured and developed people to think independently, valued learning, and viewed unexpected situations as opportunities to learn and excel.
4. Individualized consideration described leaders who provided a supportive climate to meet the individual needs of employees; they acted as a coach, offered empathy and support, maintained open communication, and placed challenges before the employees (Bass, 1985).

Northouse (2013) stated transformational leadership was one of the most talked about leadership approaches because of how management utilized it to motivate people to excel.

The seminal studies by Burns (1978) and Bass (1985) addressed detailed views on transformational leadership and its connection to employees working beyond expectations. These two landmark seminal studies were considered acceptable and offered a valid perspective on transformational leadership research. Richardson and Vandenberg (2005) presented data on the connection between transformational leadership and its effects on leveraging human capital to achieve a competitive advantage in the workforce.

Burns (1978) first introduced transformational leadership as “a process whereby leaders and employees help each other to advance to a higher level of morale and

motivation” (p. 20). Motivation was considered central to getting someone moving toward the desired behavior, which was the most difficult and challenging effort a leader encountered. Also, Malone and Lepper (1987) asserted employees were motivated to partake in work activities with no reward other than the enjoyment of performing a good job. Individuals were motivated when working toward common meaningful goals.

Bass (1985) defined transformational leaders as individuals who motivated, raised awareness about important matters, helped others achieve self-actualization, and led employees to surpass their own needs to identify what was best for the organization. Dvir, Eden, Avolio, and Shamir (2002) asserted transformational leaders exercised added influence through broadening and elevating employees’ goals and providing them with self-assurance to perform beyond the expectations specified in the implied exchange agreement. Still, another theorist concluded a transformational leader stimulated emotion in employees and motivated them to act beyond the framework of what was described as exchanged relations (Singh, 2013). Lastly, Lowe, Kroeck, and Sivasubramaniam (1996) affirmed transformational leadership exposed a positive relationship with performance.

Burns (1978) and Bass (1999) described transformational leadership with regard to motivation for employees. Similarly, Bass and Avolio (1990a) and Becker (1960) concluded transformational leadership provided employees’ confidence to go beyond minimally acceptable expectations of performance and encouraged them to commit to the organization through their actions and choices over time. Other theorists described motivation and its relationship to organizational behavior, and how it could be used as a tool to assess if the goals of the organization were met and if a good organizational culture was attained (Gagné & Deci, 2005; Uzonna, 2013).

Northouse (2013) suggested transformational leadership provided a better opportunity and environment for getting people to work beyond requirements. For one thing, the correlation between transformational leadership and working beyond expectations revealed key data showing transformational leaders were more likely to have high-performing collaborative teams (Cha, Kim, Lee, & Bachrach, 2000). This theme was also supported by Camgemi and Miller (2007), and Wofford, Whittington, and Godwin (2001), who concluded transformational leaders had greater expectations for employees while providing well-defined expectations that enticed them to go well beyond job requirements; often exceeding them. Consequently, the overall research provided a connection between transformational leadership and motivation, and a more in-depth engagement by the employees in working beyond expectations.

Some researchers argued no gender differences existed in the leadership styles used by men and women. However, compelling evidence concluded transformational leadership was not gender neutral; women tended to be more transformational and men tended to be more transactional (Bass, 1999; Bass & Avolio, 1990; Rosener, 1990). Bass (1999) noted transformational leadership was gender specific. Although literature was abundant on transformational leadership, motivation, and employees working beyond expectations as individual topics, literature that synthesized these three topics was only beginning to emerge.

### **Attribution Theory**

Attribution theory examined why individuals acted in certain ways using retrospective causal attributions that influenced present and future motivation and achievement (Weiner, 1972). Attribution theory strove to explain how past success and

failure influenced current and future motivation and success (Huitt, 2011; Weiner, 1974). Weiner (1986) developed a form of attribution theory mainly about achievement, explaining the emotional and motivational involvement of success and failure. Weiner (1985, 1992) noted achievement attribution had three groupings:

1. Stable theory
2. Locus of control (internal and external)
3. Controllability

Based on the discoveries by Weiner and Kukla (1970) it was argued that attribution analysis of achievement motivation led to the following assumptions:

1. Individuals high in achievement motivation were more likely to consider achievement activities because they tended to attribute success to themselves, and therefore experienced higher rewards for goal achievement.
2. Individuals high in achievement motivation endured longer given failure because they were more likely to attribute the failure to a lack of effort rather than ascribe failure to a lack of ability.
3. Individuals high in achievement motivation chose tasks of intermediate difficulty with greater frequency because accomplishing those tasks was more likely to produce information about one's capabilities than selecting easy or extremely difficult tasks.

### **Outcomes of A Motivated Workforce**

Based on the findings of Feldman, Reitz, and Hilterman (1976), it was argued that expectancy theory was one of the most powerful applications to study motivation and job satisfaction. According to Maehr and Mayer (1997), two different theories of motivation

were categorized as intrinsic (internal) and extrinsic (external). More importantly, motivation was found to be a factor that significantly influenced higher productivity (Halepota, 2005). Thus, employee motivation is crucial to every organization.

Adenle (2005) concluded turnover was not fundamentally due to an increased salary in another company. Rather, it was due to a lack of employee engagement and opportunity for advancement, which strongly indicated manager's needs to discover what, motivates employees positively in the workforce. Further, Adenle (2005) stated the following elements provided lasting positive results in motivating employees to feel a part of, and invested in, the workplace, which in turn led to increased productivity:

- Trustworthy leadership
- Career advancement and stability
- High-quality training and development
- Camaraderie, peer motivation and an 'open door' policy
- Regular appraisal and feedback
- Set clear objectives, expectations, and rewards
- Fairness
- Meaningful ties to the company's
- Putting employees above customers
- Avoidance of incessant downsizing
- Gratifying work and appreciation
- Overall sound corporate culture
- Proactive and regular communication.
- Minimal bureaucratic hurdles, rigid policies and rules
- Empowerment
- Autonomy and having a sense of independence demonstrates trust
- Attention to bad performance and
- Sense of belonging
- Eliminate a culture of blame
- Respect for a good work-life balance

A plethora of literature addressed motivation from the perspective of managers, with an affinity for Theory X or Theory Y. Some employees strove for a balance between their inputs and outputs on the job. Researchers such as Bass and Riggio (2008) added to the development of the theory of motivation by asserting that transformational leaders stimulated individuals to achieve extraordinary outcomes and empowered employees to achieve more by aligning their goals with those of the organization. Although, transformational leadership was a relatively new participant in the leadership thought process; in fact, the bulk of the data were published in the past 20 years. Nevertheless, many of the theory's ideas were extremely helpful in aiding leaders in increasing productivity by motivation or incentives, and many of these concepts were found in the writings of earlier leadership theorists. Recent research on transformational leadership involved expanding and raising employees' goals and providing them with the values, improved skills, and confidence to go beyond minimally acceptable expectations of performance (Bass & Avolio, 1990).

Boz (2013) stated maintaining a well-motivated workforce through best practices in human resources (HR) was key to sustaining organizational success. Tackling work absenteeism through motivation supported a sustainable competitive edge over competitors in the industry. For example, High-Performance Work Practices (HPWP) is an HR employee involvement tool to reduce absenteeism and improve performance and motivation of employees—the results showed employees within a working environment of involvement were more motivated to attend work, thus decreasing absenteeism (Boz, 2013). Similarly, Engonopoulos (2014) stated motivation was important to management thereby transmuting employee efforts directly into productivity and team effectiveness.



Moreover, motivation in the context of business affairs was a passion and desire to get things done. It was that specific thing and inward drive that urged everyone to set and achieve goals (Engonopoulos, 2014).

Other researchers (Gichure, 2014; Windodo 2014; Wright, 2001) concluded key factors affecting employee motivation were pay, work environment, work conditions, goal commitment, recognition, and fringe benefits. The most compelling evidence offered was that motivated employees could establish a work environment that inspired employee commitment to the organization; it was likely that working beyond what was required ultimately resulted in enhanced productivity (Gichure, 2014). Zhang, Cao, and Tjosvold, (2011) concluded that flexibility was the main reason for positively motivated employees to continue working beyond what was required.

In summary, a motivated workforce provided improved productivity, lowered absenteeism, lowered personnel turnover, improved industrial relations, and provided a good employment reputation, which made it easier for recruitment and enhanced product quality. Halepota (2015) succinctly stated that all these theories helped to motivate individuals to higher productivity.

### **Management in Workplace Motivation**

The responsibility for motivation was found to be multi-level: it fell on the senior manager, middle manager, and employees where the resultant objective was to successfully retain talent, meet goals, and go beyond expectations (“Motivation in Today’s Workplace Motivation,” 2010). According to Sanders (2011), senior managers needed to provide a strong sense of strategic direction and middle managers needed to be involved in the strategy-making process.

## **Role of Senior Management**

Analoui (2000) conducted a study on senior managers in 23 different organizations to better understand what motivated senior managers to seek improved performance and effectiveness from employees. The study revealed nine indicators that motivated senior managers toward increased effectiveness: management recognition and appreciation, money, task performance, managerial styles, promotional status, teamwork, job satisfaction, self-development and discipline, and ability and confidence.

Psychological motivators such as responsibility, nature of the job, appreciation, recognition, and the need for achievement appeared to be the greatest influential forces regarding increased effectiveness (Analoui, 2000). Nordblom (2006) supported these findings and contended that senior leadership must ensure middle managers are involved when important changes occur in the organization. Likewise, senior management and HR should be in lockstep to understand what is important to the employees and work to foster a motivated workplace based on trust, recognition, engagement, and performance (“Motivation in Today’s Workplace Motivation,” 2010).

## **Role of Middle Management**

According to Dutton and Ashford (1993), middle management included those managers who operated at the intermediate level of the corporate structure, one level below senior management. Middle managers were considered vital to influence strategy development with top management through direct interaction with employees (Dutton & Ashford, 1993). Carney (2004) identified specific factors that affected the success of middle managers: (a) involvement in shaping strategy, (b) access to key operational information, (c) involvement in the decision-making process, and (d) communication,

informally and formally, internal to the organization. Carney (2004) argued effective communication could be achieved by involving middle managers in defining goals. On the other hand, poor communication and atomization of the team resulted from excluding middle managers from such strategizing (Carney, 2004). Sanders (2011) suggested the inclusion of middle managers in strategy development could result in higher levels of strategic accord between levels of management that could lead to progress in decision-making, strategy implementation, and organizational effectiveness.

### **Healthcare Management**

According to Kaufman et al. (2017), the new Trump administration was expected to have a profound impact on managed healthcare and major healthcare issues. For healthcare organizations to succeed in the changing landscape, they need new capabilities, such as well-planned services across the care continuum in strategic locations that require integrated resources and health system consolidations (Kaufman et al., 2017). CEOs, senior managers, and middle managers must prepare to transform the organization to provide increased services, with a different set of new tools, that undoubtedly will present challenging issues in achieving goals in an unpredictable healthcare setting.

### **Managed Care**

Managed care is a term used to define a range of practices intended to make health benefits more affordable while improving delivery and quality of care (Sekhri, 2000). The National Library of Medicine (2017) stated managed care included plans to reduce unnecessary healthcare costs through incentives for physicians and patients to select less costly care procedures, increase beneficiary cost sharing, and control

admission lengths of stay. Managed care programs exist in different settings, such as Health Maintenance Organizations (HMOs) and Preferred Provider Organizations (PPOs; National Library of Medicine, 2017).

According to Kane et al. (1996), the origins of managed dated back to 1929 when Michael Shadid, a physician in Oklahoma, established a health cooperative association for farmers in a small community. Subsequently, Congress passed the Health Maintenance Organization Act in 1973, which stimulated rapid growth of HMOs, the first usage of managed care (Dorsey, 1975). President Richard Nixon signed Bill S.14 into law on December 29, 1973 (Patel & Rushefsky, 2006).

Iglehart (1994) pinpointed details that throughout the 1980s and 1990s, managed care plans were recognized with curtailing the soaring growth of healthcare costs by eliminating unwarranted hospitalizations and forcing participating physicians and other healthcare providers to offer discounted services. By 1993, many Americans (51%) receiving health insurance through their employers were enrolled in managed healthcare plans (Iglehart, 1994).

States also adopted managed care principles. Arizona was the first state to employ managed care principles to the delivery and financing of managed care programs such as Medicaid (Saucier, 2012). California created the California Department of Healthcare as a regulatory body to govern managed healthcare plans, often referred to as HMOs in California (Saucier, 2012).

Burton (2015) asserted healthcare organizations must look forward to what lies ahead to adjust and develop strategies to ensure future success. The managed healthcare industry is highly complex and faces landmark regulatory and technological changes,

which are continually changing, and the management and leadership associated with high performance and employee motivation must adapt and change (Nielsen, Yarker, & Munir, 2009). Developing and retaining an effective workforce within the competitive, yet consumer-oriented marketplace requires skills not previously demanded of managed healthcare professionals. It remains to be seen how these new and different employees will be lead and motivated, and a deficiency in empirical research exists on new leadership approaches required to develop and retain employees in this evolving industry (Rivers & Glover, 2008).

### **Role of Management in Managed Care**

Likert (1961) pointed out that motivation was crucial for senior managers in the organization. The role of managers differed according to their job responsibilities within the respective facilities. The role of management in managed care spanned from assistant hospital administrators and health information managers, to specific clinical managers focused on departments such as nursing and surgery, to the chief administrator of the medical facility (Locsin, 2017). Each manager had a specific job and defined responsibilities.

Presently, there is a projected shortage of managers and senior managers in healthcare. According to the BLS (2017), from 2010 to 2020 predictions showed healthcare managers would encounter job increases three times more than those for the average manager. There is an anticipated 20% increase in demand for motivated managers and senior managers in healthcare over the next 10 years because of the rise in demand for medical services due to the large and aging Baby Boomer population (BLS, 2017).

Stefl (2008) argued current healthcare executives and managers must have sophisticated talent to match the increased difficulty of the ever-changing healthcare environment, which is being influenced by complex social and political forces including shrinking reimbursements and a constant change to performance and safety indicators. Since running a managed healthcare organization required specialized skills, a task force was established to address deficiencies in the competencies needed to operate a healthcare facility (Stefl, 2008). A consortium of six professional organizations bonded together under the umbrella of the Healthcare Leadership Alliance (HLA) and identified five competency areas common among all practicing healthcare managers that incorporated specific knowledge, skills, and abilities that all future employees would require:

1. **Communication and Relationship Management:** An innate ability to communicate clearly and succinctly with external and internal customers, while establishing and maintaining relationships.
2. **Professionalism:** The ability to be trustworthy, self-confident, self-motivated, and reliable. Moreover, an adherence to norms and expectations with the highest respect and integrity for dealing with clients and maintaining privacy standards.
3. **Leadership:** The ability to work independently, inspire others, and develop a common vision, while managing innovation to attain the organization's strategic ends and successful performance. Leadership also requires teaching, empowering, and implementing change, and the ability to motivate employees to perform beyond expectations.

4. **Knowledge of the Healthcare Environment:** Having a proven track record of success in managing the healthcare system, including staff, customers, systems, and the environment in which healthcare managers function, to facilitate decision-making capabilities.
5. **Business Skills and Knowledge:** The ability to perform professionally within an organization using business principles such as effective communication, financial management, strategic planning, marketing, information management, risk management, and quality improvement (Stefl, 2008).

Due to the dynamics of an ever-evolving managed healthcare environment, Griffith (2007) and Kaufman et al. (2017) asserted the increased difficulty in operating a healthcare organization led to the need for managers with more specific and sophisticated capabilities. Managers must adapt to changes for lower-cost quality healthcare and be ready to embrace different cost-saving breakthroughs such as wearables, computer algorithm diagnostics, robotic surgeries, and stem cell treatments, which may not be accepted because of old healthcare rules and the current political environment (Kaufman et al., 2017).

**Senior management.** According to Birken, Lee, and Weiner (2012), a great deal of information focused on the role of senior managers in terms of innovation and implementation of programs in the healthcare field. For example, Guo (2003) guided research to identify and analyze the jobs of 10 senior-level managers, noting all managers needed human relation skills such as motivation, leadership, and communication to interact and accomplish work. This was more necessary for healthcare managers because

of the many challenges facing them, such as the dramatic changes in long-term care benefits, healthcare benefits, and the statutory changes facing all HMOs (Guo, 2003).

Managers should evaluate their circumstances and utilize different roles for different job situations (Guo, 2003). Mintzberg (1973) developed a list of 10 managerial roles asserting that managers perform them to varying degrees: leader, figurehead, liaison, monitor, spokesperson, negotiator, disseminator, resource distributor, conflict manager, and entrepreneur. Building on Mintzberg's (1973) work, Gou (2002) defined six roles essential for healthcare managers:

1. **Leader** - responsible for providing the organization with purpose, direction, and motivation
2. **Liaison** - creates a network of connections and contact points to enhance organizational goals
3. **Monitor** - collects information to detect and identify problem areas
4. **Disturbance (conflict) handler** - tackles all major problems when first identified as an issue
5. **Resource distributor** - distributes appropriate resources to various projects according to priority
6. **Strategist** - initiates, innovates, and takes calculated risks, and embraces opportunities to enhance the organization

In brief, Guo (2003) found senior managers in healthcare organizations required human relations skills (communication, motivation, and leadership), technical skills, and visionary skills to succeed in the rapidly changing healthcare environment. Similarly, Nicol, Mohanna, and Cowpe (2014) stated that attributes required to be a successful



senior healthcare leader in managed healthcare were relationship skills, great personality, leadership style, technical competence, and political awareness.

Although a significant amount was written on senior leadership in health management studies, health services research, and medical sociology literature, little discussion or literature pervaded into the managed healthcare and administrative management arenas (Nicol et al., 2014). The takeaway message was that the success of current and future managed healthcare leaders was dependent on the ability to take an inclusive approach while understanding the organizational system, which would allow them to amplify their chances of increased success (Nicol et al., 2014).

**Middle management.** According to Birken et al. (2012), middle managers in the healthcare field were experiencing increased responsibilities. In current literature, the role of middle managers and their influence in healthcare received little attention (Birken et al., 2012). Judge and Stahl (1995) stated there was growing recognition of the importance of middle managers in the implementation of new strategic directions. Middle managers' personal qualities were found as predictors for two key contributing factors in the implementation effort: identified probability of success and identified consistency of interests between the managers' goals and the strategic program goals. Middle managers served as the linchpin between senior managers and employees in the execution of strategic initiatives within the organization (Judge & Stahl, 1995).

Woolridge and Floyd (1997) maintained that middle managers experienced a great deal of influence on their supervisors and frontline employees given their position spanned many functions within the organization. Birken (2011) and Birken et al. (2012) argued that middle managers filled critical positions with bidirectional influence in the

healthcare organization by bridging the gaps in information to ensure employees efficiently implemented healthcare strategies and initiatives by:

- Diffusing information
- Synthesizing information to integrate and interpret facts
- Mediating strategies and working day-to-day activities
- Encouraging employees to use innovations

Middle managers in the healthcare field functioned in different positions (Birken, 2012), and were the bridge between senior management and frontline employees helping with information necessary for execution and feedback (Currie & Proctor, 2005; Huy, 2001).

### **Workplace Motivation to go Beyond Expectations**

Dewhurst, Guthridge, and Mohr (2010) contended that employee motivation was declining at a time when organizations required engaged managers and other employees to go above and beyond expectations. Correspondingly, Bal, De Jong, Jansen, and Bakker (2012) asserted variables that predicted employees working beyond expectations were gender, age, educational level, job level, health, and the organization of employment. In the same way, Garrin (2013) and Lesonsky (2017) stated similar concepts for going beyond job expectations, such as:

- Belonging and feeling a part of the organization
- Understanding and having a sense of purpose that your efforts matter
- Considering new ideas and concepts, then planning to implement them
- Advancing the concepts and positions of the organizational team
- Having a sense of pride and accomplishment in work completed

- Preparing to intervene and offering to help everyone in the office
- Avoiding complaining
- Having a sense of well-being and happiness in your job and work environment
- Being visible on the job
- Putting forth a lot of enthusiasm and eagerness at work

In contrast to motivating employee beyond expectations, Honeycutt (1989) contended that managers should define goals and avoid the appearance or use of demotivating factors such as minimal job training, lack of clearly defined goals, lack of performance feedback, inefficient work areas, environmental distractions, and limited monotony compensation, which increased turnover and decreased productivity.

Uzonna (2013) suggested a dire need for senior managers to engage employees to increase retention and exceed expectations. Managers recognized good performance was a strategic factor in employee retention (“Motivation in Today’s Workplace,” 2010). Unequivocally, once senior and middle managers determine what motivates the staff, this crucial information would help to determine job satisfaction, organizational commitment, and job involvement, which cause employees to work beyond expectations.

Markman (2014) suggested an ambitious employee was inclined to develop new skills or take on a stretch assignment to advance, which boosted the employee’s desire to explore new options through motivation. Also, McKinney (2013) argued as organizations became lean and flatter, active middle managers played an increasingly important role in influencing and driving momentum for future growth. Another essential point was that most employees who wanted to develop in the company were striving for ways to boost their value in the organization and go above and beyond their

job (Wolf, 2017). In every organization, several employees were self-motivated and continuously worked toward going above and beyond requirements by following four simple yet important steps: (1) putting feedback into action; (2) anticipating the needs of the organization; (3) continuously bringing new ideas to the table to improve efficiency, reduce process time, and boost company profits; and (4) taking time to work outside the box to make changes that may transformation the organization (Wolf, 2017).

Often, individuals made choices about whether they were inclined to go the extra distance in ways that contributed to the organization's accomplishments (Bolini & Klotz, 2017). According to Bolini and Klotz (2017), research showed that when employees were willing to go beyond their formal roles by volunteering to help coworkers, take on special assignments, proposing new ideas and work practices, and putting in extra hours to complete important projects within their organization, the result was a more efficient and effective company. This type of motivated behavior was identified among high-potential managers (ones who excel in their current role and senior management expects to rise through the ranks) who demonstrated the drive and motivation to take the business to the next level because their goals aligned with management's goals and the organization's future (Uhlig, 2017). Accordingly, Bolini and Klotz (2017) suggested a critical task for successful managers was to motivate their employees to engage in these added role behaviors, which was referred to as *citizenship behaviors*. The benefits of citizenship behaviors were apparent, and many employees demonstrated such behavior based on loyalty and positive regard for their peers, supervisors, and organization. Ultimately, employees were rewarded for this behavior, which made the work more meaningful and contributed to better performance evaluations. On the other hand, Bolini

and Klotz (2017) stated a few studies indicated employees pressured to be organizational citizens and go the extra mile depleting the employee's resources and led to stress and work-family conflicts. Another key point of working beyond expectations was citizenship crafting, which was based on the notion that employees could proactively affect the ways in which they exceeded expectations such that they contributed to the organization and provided meaningful, value-added skills consistent with the employees' intrinsic motives, resulting in a significant increase in job performance (Bolini & Klotz, 2017).

### **Summary**

Strong leadership was considered crucial to any successful business or organization. Drucker (1999) argued that increasing employee productivity was one of the most challenging issues facing organizations in the 21<sup>st</sup> century. Effective internal communication was necessary for leadership to develop and sustain a competitive advantage for organizational performance and improvement (Singh, 2013). A transformational leader was defined as someone who aroused emotions in their employees and motivated them to exceed the limits of what was described as exchanged relations (Singh, 2013). If an organization wanted to succeed in a rapidly changing business environment, it was better for managers to use transformational leadership because managers who demonstrated these behaviors efficiently increased the success of their organization (Erkutlu, 2008).

Critical drivers in the healthcare industry need to be identified to understand the motivational conceptual framework of the interrelationship of leaders and employees working beyond expectations. This motivational framework would allow a focus on

retention of managed healthcare industry employees and examine any link between transformational leadership behavior and motivation of healthcare workers.

The literature review presented a great deal of information on human motivation and motivation in the workplace. Several theories were presented, which distinguish and delineated why motivation was needed in the workplace and how it increased productivity. Middle management served as the bridge between senior management and employees. Birken et al. (2012) contended that middle managers filled strategic positions with bidirectional influence in the healthcare industry by bridging the gaps to ensure employees efficiently implemented healthcare strategies and initiatives. Judge and Stahl (1995) stated that middle managers served as the linchpin between senior and middle managers in the execution of strategic initiatives within the organization.

Moreover, the healthcare industry was recently overwhelmed with numerous political and economic factors considered leading influencers, urging U.S. healthcare leaders to concentrate on increasing quality and efficiency while regulating costs (Longenecker & Longenecker, 2014; Toussaint & Berry, 2013).

Competition and customer expectations also drove the need for new strategies. Healthcare leaders (especially middle managers) were under increasing pressure to continue providing superior services while maintaining profitability within their organizations (Alipour & Karimi, 2011). According to Alipour and Karimi (2011), an organization's competitive advantage was the result of middle managers addressing new strategies to drive higher performance. The underpinning framework that appeared to resonate with the healthcare industry was that well-motivated middle managers were possibly transformational leader who could positively change organizational culture and

outcomes (Burns, 1978). This literature review sought to identify critical factors that influence middle managers to work beyond what was usually required of them. The resultant responses on how senior managers' motivation of middle managers to work beyond expectations were the purpose of this study.

## CHAPTER III: METHODOLOGY

This study provided research to help senior management gain a better understanding of how to motivate middle management to work beyond expectations. The study identified the perceptions of both manager groups on the potential factors that may motivate middle managers to work beyond expectations.

This chapter describes the methods and procedures used to conduct this study. It includes the purpose of the study, the research questions, the research design, the population and target population, and sample. It also provides descriptions of the instrument, data collection procedures, analysis, and study limitations.

### **Purpose Statement**

The purpose of this phenomenological study was to explore and identify how middle managers and senior managers working in the managed healthcare industry in southern California identify what factors motivated middle managers to work beyond senior management's expectations (Garrin, 2013; Lesonsky, 2017).

### **Research Questions**

Based on the literature and the purpose of the study, the following general research questions guided the study:

1. What are the lived experiences middle managers identify as the motivating factors that influence them to work beyond expectations?
2. What are the lived experiences senior managers identify as the motivating factors that influence middle managers to work beyond expectations?



## Research Design

The research design for this dissertation was a qualitative phenomenological approach. Often in research, obtaining information relevant to the research questions involves specifying the type of evidence required to test a theory, to evaluate a program, or to describe and assess meaning related to an observable phenomenon. Patton (2015) stated “the core questions helps the researcher to design the study and carry out the purpose of the study by responding to the meaning, structure and essence lived experience of this phenomenon or the person or group” (p. 98).

The research design specified the plan and defined the conditions and procedures for collecting and analyzing data for this research project. De Vaus (2001) stated the research design provides the overall strategy to integrate the different sections of a study in a clear and logical way to ensure the study cogently addressed the research problem; it established the roadmap for data collection, measurement, and analysis. The objective of the research design was to ensure the evidence obtained enabled the researcher to effectively address the research problem rationally and transparently. Furthermore, McMillian and Schumacher (2010) stated the purpose of a research design was to sketch a plan for collecting evidence that would result in drawing valid and reliable conclusions from the responses to the research questions. Gorard (2013) asserted any well-developed design would:

- Identify the research problem clearly and justify its selection
- Review and synthesize previously published literature
- Clearly and definitively specify research questions central to the research problem

- Effectively describe the data required for adequate testing of the research questions and explain how such data would be acquired
- Define the methods of analysis

Likewise, Patten (2012) stated qualitative research was presented in the form of discussions and the results were shown as word statements and not statistics. Usually, a qualitative study included multiple data collection methods: interpersonal interviews, fieldwork observations, and artifact review (Patton, 2015). The framework of working beyond expectations as defined by Garrin (2013) and Lesonsky (2017) served as the theoretical filter through which the research questions were created.

### **Methodology Selected**

The most suitable qualitative research methodology for this study was phenomenology. Strauss and Corbin (1990) stated qualitative research provided an opportunity to make known and understand what lay behind any phenomenon. The researcher's goal was to capture the real meaning of the experience as perceived by the participants (McMillan & Schumacher, 2010). Creswell (2014) stated that qualitative research examined and tried to understand the significance people attributed to a social issue by posing questions and collecting data.

Per Patton (2015), phenomenological studies focused on acquiring a firm understanding of the nature of everyday lived experiences. Similarly, Creswell (2007) noted a phenomenological study described the lived experiences of individuals. Similarly, Roberts (2010) asserted that phenomenology centered on individuals' experiences from their frame of reference. Moreover, phenomenology looked at change process over a designated period and adjusted to new issues and ideas as they developed.

This study design typically used extensive interviews with the participants to gain a better understanding of their perspectives on their experiences with the phenomenon (McMillan & Schumacher, 2010). Phenomenological inquiry required the researcher to spend a considerable amount of time with data collection. Phenomenology was selected as the approach for this study because it most aligned with the lived experience that motivated middle managers to work beyond expectations.

### **Population**

A population was defined as a group of individuals or events that met specific criteria and, therefore, the researcher could generalize the results of the research (McMillan & Schumacher, 2010). The researcher selected a sample from the population to perform the study (McMillan & Schumacher, 2010). For this study, the population was mid- and senior-level managers in the managed healthcare industry in California. The researcher chose a managed healthcare industry based on a professional referral. These selected in the population were selected by senior level administrators in the healthcare industry. All meetings were scheduled by the organization. The organization has 208,975 employees and from these employees 12 were interviewed.

### **Target Population**

The target population referred to individuals in a geographic area or different age groups (McMillan & Schumacher, 2010). A target population for a study is the entire set of individuals chosen from the overall population for which the study data are to be used to make inferences. The target population defines the population to which the findings are meant to be generalized. It is important that target populations are clearly identified for the purposes of research study (McMillan & Schumacher, 2010). It is typically not

feasible, due to time or cost constraints, to study large groups; therefore, the researchers chose population samples from within a larger group. The target population was identified as selected senior and middle managers in a managed healthcare organization in southern California.

### **Sample**

McMillan and Schumacher (2010) described a sample as a group of subjects from whom the data were collected. Purposive sampling referred to when “the researcher selects particular elements from the population that will be representative or informative about the topic of interest” (McMillian & Schumacher, 2010, p. 138). Snowball sampling started with one relevant interviewee who was asked for other relevant contacts (Patton, 2015). This effort led to a chain of other sources, such that one person recruited another person until enough people were identified for the study (Patton, 2015).

A blend of purposive and snowball sampling was used for this study. A managed healthcare company in southern California employs all those interviewed. The sample for this study includes personnel in middle and senior management. The participants were screened and selected through the organization’s Human Resources manager based on the middle manager and senior manager both having at least one subordinate and each middle manager and senior manager have a functional knowledge and understanding of managed healthcare organization which are similar to Medicare and Medicaid.

In this study, snowball sampling was used in addition to purposeful sampling to obtain the required number of sample participants. The characteristics of the sample participants selected via snowball sampling were similar to those of the middle and senior managers in the managed healthcare population. Snowball sampling consisted of

participants providing referrals for future participants (McMillan & Schumacher, 2010; Patton, 2015). “The researcher develops a profile of attributes or particular trait required and asks each participant to suggest others who fit the profile or have the attribute” (McMillan & Schumacher, 2010, p. 327).

The healthcare management agency used in this study, was familiar with government managed healthcare programs such as Medicare and Medi-Cal. Approximately 208,975 total employees worked for this organization during the 2017 calendar year with approximately 307 employees working at this facility in southern California.

Qualitative analyses typically require a smaller sample size than quantitative analyses. Obtaining most or all of the perceptions will lead to the attainment of saturation. Saturation occurs when adding more participants to the study, which does not result in additional perspectives or information. Glaser and Strauss (1967) recommended the concept of saturation for achieving an appropriate sample size in qualitative studies. Other guidelines have also been recommended. For ethnography, Morse (1994) suggests approximately 30 – 50 participants. For grounded theory, Morse (1994) has suggested 30 – 50 interviews, while Creswell (2013) suggests only 20 – 30. And for phenomenological studies, Creswell (2013) recommends three to 10 and Morse (1994) suggests at least six. There are no specific rules when determining an appropriate sample size in qualitative research. Qualitative sample size may best be determined by the time allotted, resources available, and study objectives (Patton, 2015). For this study, six senior managers and six middle managers were selected.

Qualitative sample sizes should be large enough to obtain feedback for most or all perceptions. Patton (2015) stated there were no hard-fast rules for a sample size in a qualitative study; the sample size depended on what the researcher wanted and needed to answer the research questions in the allotted time with the resources available. However, Patten (2012) also stated that as a rule, small, unbiased samples were inclined to yield more accurate results than biased samples and increasing sample size was a benefit in research because it increased precision (up to a point considering the principle of diminishing returns). The sample for this study consisted of six middle managers and six senior managers.

### **Instrumentation**

Patten (2012) stated instruments were the measurement tools identified for the research effort. However, McMillan and Schumacher (2010) asserted a threat to internal validity occurred if instruments changed so that unreliability affected the results. The researcher developed specific interview questions to answer the research questions.

### **Instruments**

Employees working in a managed healthcare facility in southern California participated in the study via interviews conducted by the researcher. Interviews and observations were the primary forms of data collection for this study. When piloting qualitative research, the researcher is known as the instrument (Patten, 2012; Creswell, 2013; Patton, 2015). Due to the researcher being the instrument in a qualitative study, Pezalla, Pettigrew, and Miller-Day (2012) contended that the unique personality, characteristics, and interview techniques of the researcher may influence how the data is

collected. As a result, the study may contain some biases based on how the researcher influenced the interviewee during the qualitative interview sessions.

As a result, the researcher brought a potential bias to the study based on personal experiences in a setting similar to those that were studied. The researcher conducted qualitative interviews with the research participants. The interview questions and responses were conducted face-to-face and were recorded digitally via a hand-held recording device.

According to Patton (2015), the best method in qualitative research to understand the perceptions, feelings, experiences, and knowledge of people was in-depth, intensive interviews and avoiding sole dependency on open-ended questionnaires. More importantly, developing the right interview questions was crucial to the study. Maxwell (2013) asserted good interview question required resourcefulness and depended on understanding the framework of the research. Additionally, Creswell (2014) argued the researcher in a qualitative interview should establish protocols for a semi-structured interview and record information, along with taking handwritten notes, and later transcribe the data as required. Standardized, open-ended interview questions were developed and utilized to minimize variations in the questions (Appendix A). The use of interview protocols helped maintain the integrity of the interview across respondents and over time (McMillan & Schumacher, 2010; Patten, 2012; Patton, 2015). At the same time, semi-structured protocols allowed researchers flexibility to clarify the wording of questions and to ask additional probing questions (McMillan & Schumacher, 2010; Patten, 2012; Patton, 2015). The expectation was that during the interview, process each participant was asked open-ended questions to capture their lived experiences (Patton,

2015). The interview protocol began with a set of demographic questions designed to build trust and relax the respondents.

### **Validity and Reliability**

Validity was defined as how closely a test measured what it intended to measure (Roberts, 2010). McMillan and Schumacher (2010) delineated internal validity (causal links) and external validity (the generalization of the results) when designing a study. McMillan and Schumacher (2010) stated threats to internal validity stemmed from the instrumentation used. Also, bias in qualitative research affected the validity and reliability of findings (Patton, 2015). Further, validity focused on the accuracy of the study from the vantage point of the researcher, participants, and readers, whereas reliability examined stability (Creswell, 2014). The level of validity was also impacted by the credibility of the data analysis procedures (Roberts, 2010).

Validity was established for this study through participant language, recorded interviews, interpersonal validity, and a pilot test of the interview script. Participant language consisted of utilizing easy to understand terms to ensure mutual understanding of definitions and terms (McMillan & Schumacher, 2010). All interviews were audio recorded and transcribed to provide proper documentation of exact statements and quotations from study participants. To enhance the accuracy and validity of the data collected, participants reviewed their interview transcript to identify any discrepancies, which were corrected by the researcher. Through interpersonal validity, the researcher communicated purposefully and efficiently with study participants.

Before the interviews, a pilot test of the interview script was conducted utilizing one middle manager and one senior manager who matched the criteria of the sample



population. Each of the pilot test participants, who will not be included in the study, were required to have at least one subordinate and a functional knowledge and understanding of a managed healthcare organization which is similar to Medicare and Medicaid. A pilot test was performed to check for bias in the protocol procedures, the interviewer's technique, and the questions. Accordingly, the pilot test provided feedback and clarity on the interview script, the actual interview questions, the readability of the questions, intention of the questions, and the length of the interview (Appendix B). The researcher revised and refined the protocol and techniques based on the feedback provided during the pilot testing.

Patton (2015) described triangulation within and across data sources and methods as a means of comparing and crosschecking the similarity of information derived at different times from multiple sources. Denzin (1978) defined four basic types of triangulation: (a) data triangulation (the use of different data sources in a study); (b) investigator triangulation (the use of multiple researchers); (c) theory triangulation (the use of various perspectives to interpret a single set of data); and (d) methodological triangulation (the use of multiple methods to study a single problem). Further Patton (2015) asserted triangulation within a qualitative study could be achieved by combining interviews and observations and mixing different types of purposeful sampling. For this study, the researcher triangulated data by using multiple methods for collecting data, interviews, artifact review, and observations. The use of triangulation served to strengthen the study and reduce researcher bias.

Reliability was characterized as the consistency of a test (Roberts, 2010). Salkind (2014) stated reliability was whether a test or instrument measured something

consistently. A test was deemed reliable if it produced consistent results. Salkind (2014) delineated different types of reliability, such as test-retest reliability, parallel forms reliability, internal consistency reliability, and inter-rater reliability. For example, test-retest reliability was used “when you want to know whether a test is reliable over time” (Salkind, 2014, p. 111). Likewise, Roberts (2010) contended that interrater reliability was a check on the coherence between raters, or between a rater and a knowledgeable professional, especially when using open-ended questions.

### **Data Collection**

Qualitative data typically consisted of interviews, observations, and collection of documents or artifacts (Patton, 2015). Data will be collected from middle and senior management personnel at a healthcare facility in southern California. An email will be sent to the identified target population to recruit them for the study and ask them to participate in an interview (Appendix C). The interviews will last 45-60 minutes and will be conducted at a mutually agreed time and location. The researcher used a pre-determined protocol to facilitate each interview (Appendix A); however, participants could add other information they desired to share. The interview questions were formulated to elicit (a) what middle managers perceived as the motivating factors that influenced them to work beyond expectations, and (b) what senior managers perceived as the motivating factors that influenced middle managers to work beyond expectations. The data were gathered and coded for potential themes in the responses.

Based on this study purpose, the researcher applied practical qualitative inquiry principles to frame the interview questions. The data collection occurred at a southern California facility in a setting that was conducive and relaxing to the interviewees. The

researcher concentrated primarily on the collection of interviews. Although, the researcher was conducting interviews, being onsite provided an opportunity for observations.

All data collected during this study were safeguarded to ensure the privacy of study participants. Only the researcher was privy to the identities of study participants. The researcher reiterated the use of confidentiality for all information obtained to each participant before each interview. Any identifiable information (e.g., names, departments) mentioned by study participants during the recorded interview process was later replaced with pseudo-names. The recorded audio files were stored securely on a password protected electronic device to which only the researcher had access. Once the audio files were transcribed, the files were destroyed.

### **Human Subjects Consideration**

No data were collected for this study until permission to conduct the study was obtained from the Brandman University Institutional Review Board (BUIRB) (Appendix G) and the researcher completed the National Institutes of Health (NIH) certification for the protection of human research participants for this study (Appendix H). Data on middle and senior managers were collected at a healthcare facility in southern California. An invitational email was sent to potential participants to get their consent to participate in the study (Appendix C). Additionally, all participants were emailed a copy of an informed consent (Appendix D), an audio release form (Appendix E), Brandman University's Participant Bill of Rights (Appendix F), and the interview protocol (Appendix A).

## **Site and Participant Selection Process**

All interviews and observations were conducted at a healthcare facility located in southern California. Twelve people were selected to participate in the study, six senior managers and six middle managers. During an interview, they were asked about their experiences with increased workforce productivity. Creswell (2014) asserted “the idea behind qualitative research is to purposefully select participants or sites that will help the researcher comprehend the problem and research question” (p. 239). As such, the location and participants were purposefully selected based on the information and rich detail they could provide to address the research questions. In addition, snowball sampling was used to obtain the required number of sample participants. Snowball sampling consisted of participants providing referrals for future participants (McMillan & Schumacher, 2010; Patton, 2015). “The researcher develops a profile of attributes or particular trait required and asks each participant to suggest others who fit the profile or have the attribute” (McMillan & Schumacher, 2010, p. 327). The characteristics of the sample participants selected through snowball sampling were similar to those of the middle and senior managers in the managed healthcare population.

Interview data were gathered in the work environment and at the work site of middle and senior managers at a healthcare facility in southern California. When the specific medical healthcare leadership approved the study, a transmittal letter from the company was sent to staff explaining the purpose of the study and encouraging supervisors and employees to participate. The participants were informed that all responses were for research purposes only and their names would not be included in the research.

## **Interview Procedures**

All interviews were scheduled in advance. The interview protocol was followed with all participants. An email was sent to all study participants one week before their scheduled interview date to confirm the date and time. Also, each participant was sent a copy of the informed consent (Appendix D), the interview questions (Appendix A), the audio release form (Appendix E), and Brandman University's Participant's Bill of Rights (Appendix F).

All 12 study participants agreed to be interviewed in-person and for the interview to be audio recorded. The researcher followed the interview protocol and introduced himself to every study participant, reiterating the purpose of the study and collecting the signed consent forms. Time was provided for participants to ask questions before the interview began, the researcher addressed the confidentiality of the data, participants were informed they could terminate the interview process at any time. The interview then proceeded with the researcher asking the pre-determined questions and taking notes that served as a platform for any probing questions. At the completion of each interview, the researcher thanked the participant and the recording stopped. Later all the interviews were transcribed to facilitate the data coding and analysis process.

After transcription, the researcher reviewed the documents three times to ensure accuracy and familiarize himself with the data. To strengthen the validity of the transcriptions, the study participants were asked to review their transcription for accuracy or to provide additional detail. All participant's comments and edits were documented and corrected by the researcher.

## **Data Analysis**

Qualitative analysis was described as a process of recording, categorizing, and interpreting data into categories to identify patterns and relationships among the categories (Creswell, 2014; McMillan & Schumacher, 2010). The most significant challenge was making sense of vast amounts of data (Patton, 2015). Data analysis will help the researcher derive meaning from the data and help interpret the data to avoid misleading the reader or omitting negative results (Roberts, 2010). Data analysis for this study will be performed using NVivo.

Creswell (2014) maintained there are six steps to create a strong foundation for qualitative data analysis: (1) organizing and preparing the data, (2) reviewing all the data, (3) coding all the data, (4) using coding process to generate themes, (5) consider how the findings will be presented in the narrative, and lastly, (6) interpret the data.

### **Collecting and Documenting the Data**

The primary instrument used in this study was a semi-structured interview protocol. The researcher took notes to enhance data analysis and to address nonverbal responses and document probing follow-up. A total of twelve (12) interviews were conducted and transcribed.

### **Coding and Categorizing the Data**

Most of the data were collected through interviews with different employees at a healthcare facility in southern California. The interviews and artifacts gathered provided some insight into what conditions contributed to an employee working beyond what was required. McMillan and Schumacher (2010) stated the planning and organization of data was an important step in preparation toward coding. The interview data were collected

and transcribed for all participants. After data transcription, the ideas and phrases, which referenced the research questions, were separated and categorized.

Next, the researcher read each interview transcription several times to gain a deeper connection to the data and to get a sense of the overall impressions. Some categories were combined into one theme. The themes were entered into NVivo and used to code the data. Codes were words and phrases that gave meaning to fragments of data (Creswell, 2014; Patton, 2015). Tesch (1990) included eight steps involved in preparing to code: (1) read all transcriptions carefully and make notes, (2) pick one interview and write down the underlying message discovered, (3) list the underlying message gained from all participant interviews and cluster the topics, (4) review the list of topics and create a code for each one, (5) take the most descriptive words to create categories and reduce categories by grouping related topics, (6) decide on final abbreviations for each category and alphabetize the codes, (7) bring together data from each category into separate groups and execute a preliminary analysis, and (8) record data and recode where necessary.

The actual coding process included reviewing the transcription notes from the interviews and reviewing for common themes and wording. McMillan and Schumacher (2010) and Patton (2015) asserted throughout the coding process, the researcher should constantly review the codes to perfect the coding system to ensure accuracy, comprehensiveness, and avoid duplication of codes. Once reviewed, these themes were highlighted and counted for frequencies. The themes identified factors that motivate employees to work beyond expectations at a healthcare facility in southern California.

An intercoder reliability process was used to guard against researcher bias. Colleagues familiar with the study reviewed the data, code 10% independently, and then compare their results with those of the researcher. This process diminished the risk of researcher bias entering the data analysis process.

Once the researcher completes the data collection, transcribes the data, and codes the data, the researcher moves into validating the data. Patton (2015) describes intercoder reliability as the process of utilizing a third-party evaluator to analyze, verify, and determine the same conclusion for the data collected. For this study, the researcher provided a peer researcher with one of the 12 transcribed interviews. After the researcher completes the verification of the data, the researcher looked for the level of intercoder reliability. Lombard, Synder-Duch, and Campanella Bracken (2004, p. 3) establish intercoder reliability as, “coefficients of .90 or greater are nearly always acceptable, .80 or greater is acceptable in most situations, and .70 may be appropriate in some exploratory studies for some indices.” The process of crosschecking the data with an independent researcher created a level of reliability (Patton, 2015).

### **Identifying Patterns and Themes**

McMillan and Schumacher (2010) explained that once data segments were extracted, categories selected, and data coded by category, the researcher must look at the data again to discover patterns amid the categories. Hence, the coding and categorization of data resulted in the identification of patterns and themes. Codes with identical meaning were grouped to identify themes and were classified as major or minor in significance. McMillan and Schumacher (2010) declared researchers should try to



understand patterns, which link various aspects of people's situations, mental processes, beliefs, and actions.

In this study, once a potential pattern was identified, the researcher used triangulation to verify authenticity through the comparison of interviews, observation, and artifacts to detect a recurrence of the pattern. Again, two independent colleagues familiar with but not part of the study coded the data separately as an intercoder reliability measure as a means of minimizing the impact of researcher bias on the data analysis process.

### **Depicting and Displaying the Findings**

According to McMillan and Schumacher (2010) and Patton (2015), qualitative data consist of words, observations, and documents. This qualitative study used a phenomenological approach, resulting in long, thick, and informative narratives by process of in-depth interviews. Roberts (2010) stated qualitative data were usually presented in a narrative form where data was organized into themes, categories, or patterns, often accompanied by tables that augmented and simplified large amounts of information. Moreover, qualitative analysis was a creative process and required thoughtful judgments about what was significant and meaningful in the data (Roberts, 2010).

The descriptions in this study purposefully included direct language from the interview participants to accurately frame how the participants experienced the phenomenon of the working beyond expectations. McMillan and Schumacher (2010) suggested the narrative structure of phenomenology studies should emphasize the lived experience of participants experiencing the phenomenon in question.

## **Limitations**

Simon (2011) stated limitations were potential weaknesses in a study out of the researcher's control. A limitation of this study was that the target population was employed at a single healthcare facility located in southern California. As such, the findings from this study may not be generalized to other healthcare facilities or other industries. Another limitation was the use of interviews because the information gathered was based on the recollection of the participants and their willingness to disclose information. A third limitation was time; this study was on a compressed timeline with interviews occurring over a one-month period.

## **Summary**

This chapter described the overall design of the research study. The purpose of this qualitative research study was to determine what motivated people to work beyond job requirements. This research study used a qualitative phenomenological approach. The chapter described the population, sample, data collection procedures, and data analysis. Chapter IV presents the findings from the data collected.

## CHAPTER IV: RESEARCH, DATA COLLECTION, AND FINDINGS

This study examined the lived experience of middle managers motivated to work beyond expectations in the managed healthcare industry. In this chapter, data are presented and analyzed from 12 interviews conducted with exemplary middle and senior managers in the managed healthcare industry in southern California. Chapter IV includes a review of the purpose statement, research questions, methodology, data collection procedures, population, and sample. Then, the findings of each research question are presented.

### **Purpose Statement**

The purpose of this phenomenological study was to explore how middle managers and senior managers working in the managed healthcare industry in southern California identify what factors motivated middle managers to work beyond senior management's expectations.

### **Research Questions**

Based on the literature and the purpose of the study, the following general research questions guided the study:

1. What are the lived experiences middle managers identify as the motivating factors that influence them to work beyond expectations?
2. What are the lived experiences senior managers identify as the motivating factors that influence middle managers to work beyond expectations?

### **Methodology**

This study employed a qualitative, phenomenological methodology to achieve the purpose of sharing the lived experiences of middle and senior managers working in the

managed healthcare industry. Because this study sought to examine the lived experiences of middle managers influenced to work beyond expectations, it was determined in-depth, semi-structured interviews would be most suited for data collection. The researcher conducted 12 interviews, 6 with senior managers and 6 with middle managers. All 12 participants were interviewed face-to-face at their medical facilities in March 2018.

Data analysis occurred to identify frequent themes. Coding of collected data started with preliminary reviews of the data to identify any segments that contained ideas or bits of information relevant to the study. Codes were used to give meaning to segments of data. The emerging codes from this analysis were then compared to the study's research questions, which resulted in the findings of this study. Additionally, to ensure against researcher bias, the researcher used intercoder reliability through collaboration with a peer researcher to code a portion of the data. A total of 106 codes result from the data coding process for middle and senior managers.

### **Population and Sample**

The population for this study consisted of 10,500 middle and senior managers employed by a managed healthcare organization in California. The researcher targeted a smaller group of middle and senior managers at a single managed healthcare organization in southern California. Approximately 209,000 employees worked for this organization during the 2017 calendar year with approximately 300 middle and senior management employees in southern California. The researcher chose a managed healthcare industry based on a professional referral. Those selected in the population were selected by senior level administrators in the healthcare industry. All meetings were scheduled by the organization.

Purposive sampling was used for this study. A single managed healthcare company in southern California employed all the participants interviewed. The participants were screened and selected through the organization’s Human Resources manager based on the middle and senior managers having at least one subordinate and functional knowledge and understanding of managed healthcare organizations. The organization scheduled all interviews.

Table 1 displays the age of study participants, showing senior managers were typically older than middle managers.

Table 1

*Participant Age Ranges*

	18-29	30-39	40-49	50-59	60+
Middle Managers	0	3	1	1	1
Senior Managers	0	0	3	1	2

Table 2 displays their gender and ethnicity. There was a cross-section of male and female interviewees from various ethnicities over the age of 18.

Table 2

*Participant Gender and Ethnicity*

Participant	Gender	Ethnicity
1	Male	Iranian
2	Female	Caucasian/non-Hispanic
3	Female	Caucasian
4	Female	Asian American
5	Female	Caucasian
6	Female	Caucasian
7	Female	Caucasian
8	Male	Caucasian
9	Female	Caucasian
10	Female	Native American
11	Male	Caucasian
12	Male	Caucasian

*Note.* The researcher interviewed a total of 14 participants and the first two individuals were part of the pilot test and were not part of the study.

Participant demographics regarding their highest level of education completed is displayed in Table 3.

Table 3

*Highest Level of Education Completed*

	High School	Some College	Bachelor's Degree	Master's Degree	Doctorate
Middle Managers	0	0	2	3	1
Senior Managers	0	0	1	5	0

Participants were also queried on the number of years they served as a manager or senior manager. The results are listed in Table 4.

Table 4

*Total Number of Years Served as a Manager*

	1-5 Yrs.	6-10 Yrs.	11-15 Yrs.	16-19 Yrs.	20+ Yrs.
Middle Managers	1	3	1	0	1
Senior Managers	1	3	1	0	1

**Presentation and Analysis of Data**

The research questions for the study sought to discover the lived experiences of middle and senior managers in identifying the motivating factors that influence middle managers to work beyond expectations. The data were coded and organized into specific themes and categorized to address the two research questions. The findings are presented by question and include the significant themes related to the two-research questions.

## Findings for Research Question 1

The first question of the study was, “What do middle managers identify as the motivating factors that influence them to work beyond expectations?” The top 10 themes from the six middle manager participants were identified, with frequencies ranging from 31 to 12 references. Table 5 illustrates the top 10 themes.

Table 5

### *Factors that Motivate Middle Managers*

	Frequency
Extrinsic motivation	31
Recognition	26
Exceeding expectations through motivation	22
Supporting	18
Empowering overachievement	17
Opportunities	16
Improved productivity through enhanced communication	15
Pride and accomplishment	14
Motivating factors for excellence	13
Advancement opportunities	12

**Extrinsic motivation.** All six (100%) middle managers made a total of 31 references noting the vast majority of factors that motivated middle managers to work beyond expectations resulted from upper management, other staff, and outside influences. The motivation of middle managers was identified as anything that provided an incentive for a middle manager to engage in the work beyond expectation. Participant 4 offered several ideas on where motivation originated from in the workplace, sharing,

Motivation means at the end of the day I always do what’s right for the patient. As a single wage owner, I am motivated to go to work every day to receive my paycheck to support my basic family needs.

Participant 5 provided a plethora of information on the benefits middle management had on motivation in the workplace, saying:

What keeps me motivated is improving care among the masses.

Motivated is when they see the goals and a constant progression of where we're at toward meeting the goals, and it keeps us more motivated. And I think motivation is your involvement with this success of that department and the organization it all ties back too... It's the understanding of what our goals are and the level of understanding I think the staff is able to feel motivated to meet the ultimate goals of the organization. While we're also improving the care of our members, we're also understanding the bigger picture and how this highly motivates the staff. When I first got on here, I learned what motivates them and how they would like to be recognized, and it motivates them and me to do so. I have an understanding of where and what my role is in support our organizational goals, so that drives us to do better and my path going back to my passion of wanting to improve care among the masses is what motivates me.

Participant 6 stated, "My husband motivates." Additionally, she said, "I am motivated due to the staff support and the support from my unit as well." Participant 7 shared how she felt about motivation in the workplace and where her motivation originated, commenting "motivation to me is something you know whatever it is it keeps me going and it keeps me wanting to perform. It keeps me going the extra mile." Also, participant 7 commented on the outside influence of her husband stating, "my husband will tell me and has told me many times that if everybody is motivated like you-you



would not have any problems in your department at all.” Participant 8 commented on her thoughts on motivation in the workforce and how she is motivated, explaining, “My supervisor is remarkable, so she is extremely inspirational and motivational in her own right. Finding joy in what you’re doing is motivation in itself and is something that is igniting the flame to continue to create those outcomes.”

**Recognition.** All six (100%) middle managers made a total of 26 references to highlight recognition and its influence on motivation. Participants pointed out recognition was not just monetary. Usually, recognition occurred between a supervisor and employee, but could occur peer-to-peer. Participant 3 said, “What I find rewarding is that when a person feels invested in the organization and they feel rewarded through these different avenues...then the likelihood of the engagement is much higher.” Further Participant 4 reported, “They have a program hardwired to the reward and recognition either for your line of sight goals for all the daily rewards, monthly rewards, and yearly national rewards.” The point made by Participant 4 was the recognition reward program was used to motivate people to do the right thing at the job. Participant 5 explained how “feedback and recognition entice people to stretch for the good of the organization.” Additionally, Participant 5 stated, “Recognition of the quality team continues to drive me to exceed expectations.” Also, Participant 5 said, “Recognition from my manager and the leadership team is the recognition and support needed to achieve our goals.” Similarly, Participant 8 added to this idea of recognition and motivation, sharing, “I said with the one employee, I have an opportunity for improving productivity because I have identified that recognizing her tends to motivate her.”

**Exceeding expectations through motivation.** All six (100%) middle managers made a total of 22 references about exceeding expectations. The researcher established the definition of exceeding expectations as functioning outside the scope of their normal work and performing beyond management's expectations. Participants identified several behaviors that they considered as exceeding expectations:

- Functioning outside of the scope of their normal work duties
- Driven to perform beyond management's expectations
- Being given a choice on work assignments
- Being a self-starter and being accountable
- Taking a proactive approach and anticipating the challenges of the job on the horizon
- Significantly contributing to the goals of the organization.

Participant 3 noted that “with every project that I get, I want to make sure that I’m exceeding expectations.” Participant 5 commented, “Give them the tools that they need to be successful because once they feel supported, they’re more driven to perform and exceed their manager’s expectations.” Participant 6 added to the idea of working beyond expectations, saying,

Management outwardly entices you, motivates you or your employees to work beyond expectations. They would work beyond expectation because also I think they are more comfortable with me in doing so and they have the choice to do things that way. They would be willing to do more and go beyond expectation if they feel motivated, like the more you motivate them, the more they would be willing to work beyond expectation.

Lastly, Participant 8 shared “working beyond expectations is taking that proactive approach anticipating what the needs are, challenges on the horizon, and then doing your due diligence to contribute beyond expectations of your position.”

**Supporting.** Half of the middle managers made a total of 18 references discussing working in a supportive organization was a motivator. Participant 3 commented on his views of support in the organization sharing,

They challenge your way of thinking about things to constantly go above and beyond, but also offer support for you to succeed as well. I feel it’s a very supportive organization, but also there to help and cross-collaborate when necessary. I find the culture here to be very supportive and kind in achieving great care. They’re always also looking on how to support one another and better their professional development, their abilities.

Participant 5, as a middle manager, recalled all the support provided that motivated her and the team to aspire to exceed expectations, sharing,

I’ve been fortunate enough to go through the middle management program and feel support from the team and our leadership team. The oversight and work done in the other departments...support this department. I understand that in my role I can impact certain things with the help of my team or having even my team lead and have me support them. I would never want to see anything fall through the cracks that we could have prevented. My upbringing, but also the support that I have now with my family, continues to support and push me to want to do more. My boss continually supports us, even during her leave.

Based on the level of support received from the organization, Participant 6 commented,

I have the support from my management team and my supervisors and as well as from the staff, and I can feel that I was able to gain respect and trust from myself. I know that I have the support of my staff and I am motivated. I'm also here as a support to them so that they can be successful on their job. For me, I feel that I have the support that I can make the decision, and I can decide.

**Empowering overachievement.** Half the middle managers made a total of 17 references regarding going above and beyond expectations in the workplace. The majority of the comments focused on challenging typical ways of thinking, wanting to excel, going above the call of duty, putting in extra effort, feeling empowered to do things to increase productivity, and emulating supervisors. Participant 3 commented on his views of support in the organization, saying,

They challenge your way of thinking about things to constantly go above and beyond. Above and beyond is trying to excel in what you do and exceed expectations of your role and position at the organization. I think there's many attributes or reasons why people go above and beyond their call of duty. I think it's important to recognize each and every individual for what they do if they go above and beyond. We do have people go above and beyond. To do that, they often take on extra responsibilities to show that they're capable. They're willing to go above and beyond the call of duty because often managers, they have to do that as well. As a

manager, I can't be expected to not go above and beyond myself but expect my staff to go above and beyond. If I find a project is especially interesting to me, then it helps me achieve going above and beyond.

Participant 6 stated, "I have their support on whatever they do, and I can see these people that you know are going above and beyond feel empowered to do things by just giving that support to them." More so, Participant 6 shared, "so you can see that productivity increases with more work and more staff willing to do all to go above and beyond."

**Opportunities.** All six (100%) middle managers made a total of 16 references addressing opportunities and challenges in the workplace and their effect on motivation to work beyond expectations. Participants identified workplace challenges as opportunities to:

- Engage employees to think outside the box
- Support the mission and vision of the organization
- Sharpen the skill set of the individuals
- Help employees grow to support the overall team
- Work collaboratively and delve into a situation to understand the cause

Participant 3 indicated, "I try to challenge their goals...perspective on how we do things here, and that helps with that engagement piece." Additionally, Participant 3 shared, "Challenges help us to focus on vision and mission and align with those of the organization...it is an opportunity to sharpen our skill set as a manager." Further, Participant 5 said, "challenges is an everyday occurrence and allows us to work

collaboratively, and Participant 7 stated, “challenges help to reinforce what you are doing matters.”

**Improved productivity through enhanced communication.** Five of six (83%) middle managers made a total of 15 references regarding how the absence of complaining in the workplace led to improved productivity. Most comments concentrated on the positive side of complaining, looking for solutions to problems brought forth as complaints, and turning complaints into an identified opportunity for correction. Participants suggested the absence of complaining promoted a harmonious, productive work environment. Participant 3 suggested, “It’s hard for people sometimes to get out of the rut of just negativity and the complaining and not look at the brighter picture.” Similarly, Participant 4 added, “in the absence of complaining, don’t bring me your problems, bring me some solutions. Nothing can change unless I hear there’s a problem.” Participant 5 stated, “The absence of complaining and having the sense of happiness in the workforce can contribute to improving productivity...rather than complaining about a disjointed process, identify an opportunity how the team can be successful.” Lastly, Participant 7 shared, “People don’t perform as well if something is bothering them outside of their job; it’s hard to work great if you’re unhappy.”

**Pride and accomplishment.** Four of six (67%) middle managers made a total of 14 references focused on a sense of pride and accomplishment in the workplace. Most comments concentrated on a sense of pride related to:

- A sense of pride and accomplishment go hand in hand
- When you feel good about yourself and your accomplishments, you have pride in yourself

- When you are valued you have a sense of pride and are motivated
- Have a sense of pride, elicits support from the team
- When you have a sense of pride you know, you are doing a great job

Participant 3 said, “I feel I take a sense of pride and a sense of accomplishment to be able for my team to go into that kind of situation.” Participant 4 shared, “I think it’s just something that you want to feel proud of yourself and your accomplishments.” In the same way, Participant 6 stated, “I like a sense of pride, and I did something good because I gained their respect and trust and that’s how I see that they are going to do their job right... And I have support from them.” Additionally, Participant 8 asserted,

I have a great deal of pride, and it’s largely because of the people... I have the opportunity to look at how we develop professionally as a profession within this organization. What you do on the job that makes a difference to the mission.

**Motivating factors for excellence.** All six (100%) middle managers made 13 references to addressing how overcoming barriers motivated employees. Participants offered a discourse on how barriers could motivate one to excel such as:

- Barriers are opportunities to grow and overcome,
- Removing barriers created success
- Barriers may drive frustration but do not necessarily hinder motivation
- Reducing barriers in staffing, labor and purchasing provides the highest quality products.

Participant 5 stated she did not have “any barriers that are worth mentioning... because none of them have been so much that we couldn’t overcome it as a group.”

Additionally, Participant 6 commented, “I asked them what their barriers are to be successful, why are they not doing well.” Furthermore, Participant 8 stated, “I wouldn’t say that there were barriers that hindered my motivation.

**Advancement opportunities.** Four of six (67%) middle managers made a total of 12 references focused on motivation and opportunities to excel in the workplace.

Participant declared,

I can always come up with opportunities, and they’re always willing to brainstorm with me about opportunities. I communicate and I’m free about opportunities, but I like to get their input as well and communicate that input downstream to my staff. In the staff meeting and our one-on-one, I help prioritize some of the opportunity that we are trying to accomplish. Okay, we have all these opportunities or things we want to work on; be cognizant that we all have opportunities.

Participant 5 stated, “I feel like for my staff there are opportunities as far as compensation.” Additionally, Participant 5 described the importance of “letting them have that opportunity to have the dialogue and a higher level and their collaboration with the team and to expose them to more.”

## **Findings for Research Question 2**

The second question of the study was, “What do senior managers identify as the motivating factors that influence middle managers to work beyond expectations?” The top 10 themes were identified between the six senior manager participants, with frequencies ranging from 46 to 16. Table 6 illustrates the top 10 findings.



Table 6

*Factors Senior Managers Perceive as Motivating Middle Managers*

	Frequency
Extrinsic Motivation	47
Leadership	43
Quality management	40
Collaborative work environment	40
Recognition	38
Positive work environment	24
Toxic environment and unhealthy competition	19
Adherence to compliance	18
Transparent communication	18
Culture	16

**Extrinsic motivation.** All six (100%) senior managers made 47 combined references that underscored the perspective on how senior management motivation influenced middle managers to work beyond expectations. The motivation of middle managers was identified as anything that provided an incentive for a middle manager to engage in the work beyond expectation. Most comments concentrated on senior management and outside influences affecting motivation of middle managers, such as:

- Barriers are opportunities to overcome
- Motivation helps to produce great outcomes
- Recognition program motivates
- Motivation provides an ability to influence and voice an opinion
- Create an inspiring environment
- Offering food as a reward
- Extrinsic motivation increase productivity and can lead to working beyond expectations

- Empowerment to do the job right
- Finding appropriate motivators

Participant 9 stated, “The recognition program motivates you... Motivating gives me the ability to influence and voice my opinion.” Additionally, Participant 9 said, “I motivate my leaders... I wanted to give back to the organization to help grow as well.” Furthermore, Participant 12 noted, “The biggest motivation is the empowerment to do my job right, having the resources to do my job right and pretty much, letting me make decisions of what I think would be good for my operations.” In contrast, Participant 13 offered, “They need to be self-motivated. High-potential individuals are self-motivated.” On the other hand, Participant 14 described middle managers as standing out “as a role model for this whole area of motivation... A critical risk-taker, somebody who is innovative, and not scared to take a chance.” Additionally, Participant 14 stated “encourage people to look beyond meeting their goals but look at surpassing expectation... Surpass or exceed your goals, then you’re doing something a little different. You’re doing something more than actually what’s expected.”

**Leadership.** All six (100%) senior managers made a total of 31 references to addressing leadership in the workplace and its effect on motivation and working beyond expectations. Collectively, the leadership provided by middle managers was viewed as:

- Having the ability to lead and see potential
- Having the ability to mentor and inspire
- Support leadership development activities
- Encourage performance improvement
- Eliminate waste

- Be mindful of authentic leadership
- Be collaborative

Participant 9 describe how seeing “the potential in somebody else is significant to the ability to mentor somebody.” Likewise, Participant 12 shared “true leadership is about sharing what we’ve done and bringing others to the same level...consider authentic leadership.” Also, Participant 13 indicated the need to “hire somebody who has leadership capability and leadership skills, and not just management skills.” Participant 14 said, “Integrated quality management program... is all about providing seamless care.”

**Quality management.** All six (100%) senior managers made 40 references to addressing quality care and service in the workplace and its effect on motivation and working beyond expectations. Collectively, quality of care and services was discussed in terms of:

- Being innovative and using technology
- Fostering a collaborative environment
- Engaging with staff and clients
- Having a long-term vision of growth,
- Outperforming satisfaction benchmarks
- Monitoring improvement
- Seeking innovative opportunities to deliver new forms of healthcare services

Participant 9 stated the drive was to “provide the finest healthcare and to serve our community and to reflect the needs of their communities with their membership.”

Participant 10 fondly recalled comments he made, sharing “we have to innovate clinically

because of technology... I think we have a unique perspective on delivering healthcare.” Additionally, Participant 12 said the organization “outperformed on our satisfaction benchmark.” Similarly, Participant 14 stated, “this organization’s mission is to continue to provide affordable care that is quality-driven... IQM, integrated quality management, the first goal of this philosophy of service delivery is to provide quality care.”

**Collaborative work environment.** All six (100%) senior managers made 40 references to addressing a collaborative work environment and its effect on motivation and working beyond expectations. Collectively, the collaborative work environment provided by middle managers at the workplace was viewed as cooperative and creating an environment that was:

- Cohesive
- Motivational
- Trusting
- Focused on making a difference
- Promoted teamwork, partnerships, and relationship building

Participant 9 said, “Everybody has to put their effort and work together to make things happen. It’s all about the behavior of collaboration and teamwork.” Also, Participant 10 offered, “Most of our work environments are collaborative because you always have a customer relationship; if you’re not collaborative, you don’t exist for long.” Similarly, Participant 11 shared, “Our work environment is one of expectations and collaboration.” Participant 12 stated, “At the end of the day, it’s all about relationships.”

**Recognition.** All six (100%) senior managers made a total of 38 references addressing recognition for workers and its effect on motivation and working beyond expectations. Collectively, the recognition of employees in the workplace was viewed as:

- Validation by the team and supervisor
- Recognition created visibility, productivity, and enthusiasm

Further, Participants described recognition in the following ways:

- A consistent and abundant reward and recognition program
- Recognition at senior leadership meetings
- Recognition of high-potential employees, and how recognition

Participant 9 recommended “to start looking at some of the rewards programs.” Participant 10 stated, “The visibility of managers and senior managers help to promote productively.” Similarly, Participant 11 said, “We do some different rewards and recognition for motivation... It is very much focused on rewards of recognition no matter how small.” Also, Participant 12 stated, “I made sure that we have a consistent reward and recognition program... We have an abundance of reward and recognition programs for our staff.” Moreover, Participant 13 described getting “some recognition at a senior leadership meeting where they called a couple of us out to provide some additional recognition.” Participant 14 noted “managers that they recognize they believe have high potential here.”

**Positive environment.** Four of six (67%) senior managers made a total of 24 references addressing the work environment and its effect on motivation and working beyond expectations. Collectively, senior managers described the work environment experienced by middle managers as:

- Transparent environment
- Inclusive
- Team oriented
- Focuses on growth
- Cutting edge, open to innovation and new ideas
- Productive union environment
- Motivate work environment
- Strong work ethic
- Environment where people naturally want to exceed

Participant 9 stated, “We have a very transparent environment... I think the work environment is inclusive and they understand.” Further, Participant 11 said, “I come into the organization with a strong work ethic.” Additionally, Participant 14 noted, “This is an environment that is the very cutting edge, very open to innovation, new ideas, and thoughts. The union environment is a productive environment in the sense that we have a labor-management culture.” Also, Participant 14 discussed feeling “this organization attracts people that naturally want to do better, and want to improve systems, and do the right thing.”

**Opportunity for healthy competition.** All six (100%) senior managers made a total of 19 references addressing a toxic environment and unhealthy competition in the workplace and its effect on motivation and working beyond expectations. Collectively, the toxic environment and unhealthy competition being experienced by middle managers at the workplace were viewed as:

- Not contributing to the team or mission

- Inappropriate behavior—argumentative
- Constant complaining about the job without offering any solutions

The removal of this unhealthy competition by senior managers provided a greater opportunity for healthy competition and increased productivity. According to Participant 12, “If you are not pulling your weight, then this is not the team for you.” Participant 13 said “it is a toxic work environment because of an individual’s behavior.” Lastly, Participant 14 stated, “I think complaining on the job can foster a very toxic work environment. I don’t bring a toxic, negative air to my leadership, and I would expect that in return.”

**Adherence to compliance.** Four of six senior managers (67%) made a total of 18 references addressing adherence to compliance standards and its effect on motivation and working beyond expectations. Collectively, middle managers identified the following related to adhering to compliance standards:

- Standardize operations across the managed healthcare organization
- Striving to reach identified goals
- Maintaining high standards
- Maintain compliance and work within regulations
- Use metrics to measure success or failure

Participant 9 and 10 discussed standardization of protocols for consistency and compliance. Participant 11 said “it’s expected that you adhere to the goals that are set forth throughout the organization.” More importantly, Participant 12 stated, “Standard practices overall could see our reduction in overtime and reduction in contract staff.”

**Transparent communication.** All six (100%) senior managers made a total of 18 references addressing two-way communication and its effect on motivation and working beyond expectations. Collectively, transparent two-way communication provided by middle managers was viewed as:

- Offering feedback
- Helping with communication of positives and negatives to increase productivity
- Promoting effective communication at all levels in the organization
- Helping build strong teams
- Fostering healthy communication which eliminates toxicity and gossip

Participant 10 stated “two-way communication is encouraged. A good part of it is this staff will tell me things that they won’t even tell their manager.” Also, Participant 11 said, “By having that sense of transparency and focus communication it does give you a sense of belonging to the organization because there is that communication that’s going on.” Similarly, Participant 12 commented, “If you cannot connect with people, you are not going to be able to build a team that you want to create that will align with your mission, vision, and values and move your outcomes.” More so, Participant 14 described how communication “tries to eliminate innuendo, and gossip, and toxicity.”

**Culture.** Five of six (83%) senior managers made a total of 16 references addressing culture in the workplace and its effect on motivation and working beyond expectations. Collectively, the culture experienced by middle managers at the workplace was viewed as:

- Important to the organization



- Helping to set the norms of the organization
- Interdependent as opposed to independent is important to the organization
- A healthy culture is desirable

### **Summary**

Chapter IV presented the data and findings of this qualitative study. The study explored the lived experiences of middle and senior managers in identifying the motivating factors that influence middle managers to work beyond expectations. The population of this study consisted of middle and senior managers employed by managed healthcare organizations in California. The target population was a small group of middle and senior managers at a single managed healthcare organization in southern California. A total of 12 middle and senior managers participated in this study.

An interview protocol was created with demographic questions, background questions, and seven primary interview questions that addressed the two research questions. All interviews were conducted face-to-face and recorded using a digital recording device. Each recording was transcribed and participants were offered a copy of the transcription. The data were coded and analyzed for themes, which resulted in the findings of this study. An independent review of portions of the data was conducted by a peer researcher familiar with the study to ensure intercoder reliability.

Findings from this study related to the lived experience of middle managers motivated to work beyond expectations in the managed healthcare industry with the most references were:

- |                        |                                  |
|------------------------|----------------------------------|
| • Extrinsic motivation | • Leadership                     |
| • Quality management   | • Collaborative work environment |
| • Recognition          | • Positive work environment      |

- Opportunity for healthy competition
- Transparent communication
- Recognition
- Supporting
- Opportunities
- Pride and accomplishment
- Improve productivity through enhanced communication
- Adherence to compliance
- Culture
- Advancement opportunities
- Empowering overachievement
- Motivating factors for excellence
- Exceeding expectations through motivation

There were commonalities between the findings from middle and senior managers. The first commonality was relative to what middle and senior managers identified as motivating factors for working beyond expectations. Although they have two different jobs and duties, both managers found that motivation helped produce great outcomes and overall it reduced barriers that impacted the institution or the organization. Also, both managers mentioned that motivation provided the confidence for one to voice and influence others' opinions. Further, both managers mentioned that when achieving work expectations or working beyond work expectations recognition is a positive, motivating force. Another theme that both managers conveyed was that it is empowering to go above and beyond expectations. Lastly, both managers believe that leadership created an environment which inspired people to be motivated to work beyond expectations.

Chapter V of this study provides conclusions derived from these findings. Moreover, Chapter V offers suggestions for actions and recommendations for further research based on the findings and limitations of this study.

## CHAPTER V: FINDINGS, CONCLUSIONS, AND RECOMMENDATIONS

Chapter V includes a review of the purpose of this study, the research questions, the methodology, and the population and sample. This is followed by a summary of the major findings. Then, Chapter V presents a report of the unexpected findings, conclusions, implications for action, and recommendations for further research.

### **Purpose Statement**

The purpose of this phenomenological study was to explore how middle managers and senior managers working in the managed healthcare industry in southern California identify what factors motivated middle managers to work beyond senior management's expectations.

### **Research Questions**

Based on the literature and the purpose of the study, the following research questions guided the study:

1. What are the lived experiences middle managers identify as the motivating factors that influence them to work beyond expectations?
2. What are the lived experiences senior managers identify as the motivating factors that influence middle managers to work beyond expectations?

### **Research Methods**

This study employed a qualitative, phenomenological methodology to identify the lived experiences of middle and senior managers working in the managed healthcare industry. This study sought to examine the lived experiences of middle managers influenced to work beyond expectations, so a phenomenological approach using in-depth, semi-structured interviews was the most suitable. The researcher conducted 12

interviews, 6 with senior managers and 6 with middle managers. All 12 participants were interviewed face-to-face at their medical facilities during March 2018.

NVivo software was used in the coding process. Data analysis occurred to identify frequent themes. Coding of collected data started with preliminary reviews of the data to identify any segments relevant to the study. The emerging codes from this analysis were compared to the study's research questions. Additionally, to ensure against researcher bias, the researcher used intercoder reliability through collaboration with a peer researcher to code a portion of the data. A total of 106 codes resulted from the coding process.

### **Population and Sample**

The general population of this study consisted of 10,500 middle and senior managers employed by a managed healthcare organization in California. To better manage the study, the researcher targeted a smaller group of middle and senior managers at a single managed healthcare organization in southern California. Approximately 209,000 employees worked for this organization during the 2017 calendar year with approximately 300 middle and senior management employees working at this facility in southern California. The researcher chose a managed healthcare industry based on a professional referral. Those selected in the population were selected by senior level administrators in the healthcare industry. The organization scheduled all interviews.

Purposive sampling was used for this study. The participants were screened and selected through the organization's Human Resources manager based on the middle manager and senior manager both having at least one subordinate and a functional knowledge and understanding of managed healthcare organizations. For this study, six

senior managers and six middle managers were selected to have a large enough sample size to obtain the necessary data to respond to the research questions.

### **Research Question 1: Major Findings**

The major findings of this qualitative study are organized and presented by research question.

#### **Major Finding One**

One of the major findings was that all participants' responses indicated extrinsic motivational factors were the most significant aspect of motivation and working beyond expectation in the workplace. Participants shared similar comments that motivation originated from within the workplace and was something that kept them striving to do great things in the workplace. Middle managers identified extrinsic motivation as a factor for working beyond expectations. Thus, managers are central to the staff's motivational levels and the organization's success. This finding was consistent with Balogun and Johnson (2004) and Thompson et al. (2012) where the success of any organization was determined by the level of staff members' motivation, which was proportionate to management's policies and practices. More so, Engonopoulos (2014) stated motivation was important to management thereby transmuting employee efforts directly into productivity and team effectiveness.

#### **Major Finding Two**

All participants indicated recognition was a motivational factor for working beyond expectations in the workplace. Rewards and motivation emerged as the second highest motivational factor for working beyond expectations. Participants noted recognition was not just monetary and could occur from supervisor to employee or

between peers. Participants explained the recognition and reward program was used to motivate people to do the right thing when working. This finding was consistent with the research by Gichure (2014), Windodo (2014), and Wright (2001) who concluded one key motivating factor for working beyond expectations was recognition.

### **Major Finding Three**

All participants revealed that challenges were a motivational factor for working beyond expectations. The major finding was addressed through interview questions 2 and 5. Universally, challenges in the workplace were viewed as engaging employees to think outside the box, helping to sharpen the skill set of individuals, creating opportunities for employee growth, fostering autonomy, supporting the team, and sharpening the skill sets of workers and managers. More so, the challenges helped the employees focus on the vision and mission of the organization and allow the employees to work collaboratively.

### **Research Question 2: Major Findings**

Research question 2 of the study was, “What do senior managers identify as the motivating factors that influence middle managers to work beyond expectations?”

### **Major Finding One**

A major was that 100% of participants indicated extrinsic motivation was a significant motivational factor for working beyond expectations. Anything that provided middle managers an incentive to engage in the work beyond expectation was a motivator. The majority of the comments concentrated on senior management and outside influences to produce great outcomes and overcome barriers and empowerment to do the job right, Motivation stemmed from the ability influence and voice opinions, and having a good

work ethic. External motivation increased productivity and led to working beyond expectations. Participants highlighted the rewards and recognition program as an external motivator, as well as having the power and resources to do the job.

### **Major Finding Two**

The second major finding related to leadership. All senior managers discussed leadership in the workplace and its effect on motivation and working beyond expectations. The senior managers provided data on leadership by addressing interview questions 1, 2, 5, 6 and 7. Collectively, the leadership provided by senior managers was viewed as offering the ability to lead, see potential, mentor, inspire and be collaborative.

Participants captured the essence of leadership qualities, describing inspiration, mentorship, and authenticity. This was consistent with Lawler (1973) who stated managerial leadership was key to employee motivation in the workplace. Similarly, Shim and Rohrbaugh (2014) defined exceeding expectations in the workplace as having superior knowledge of work requirements, exhibiting leadership responsibility beyond direct reports, and addressing customer needs beyond those initially covered. Equally, Thompson et al. (2012) stated senior managers had an interest in finding and motivating high-performing talent within the healthcare organization who could assume responsibility and carry forward the important work of the organization.

### **Major Finding Three**

The third major finding was that all participants indicated collaboration was a significant motivational factor for working beyond expectations. All of the senior managers participants reported instances of collaboration in the workplace and its effect

on motivation and working beyond expectations. The senior managers provided data on collaboration by addressing interview questions 1, 2, 4, 5, and 6.

#### **Major Finding Four**

The last major finding related to the work environment, which was described by senior managers as collaborative, cooperative, team oriented, and cohesive, and that it made a difference in fostering cooperation and team building. This was consistent with Garrin (2013) and Lesonsky (2017) who offered similar concepts for going beyond job expectations, such as belonging to and feeling as part of the organization, preparing to intervene, and offering to help everyone in the workplace.

#### **Unexpected Findings**

Overall, the literature supported the major findings of this study. However, two unexpected findings were not anticipated by the researcher. These unexpected findings appear to be missing critical drivers in the healthcare industry that need to be identified to understand the motivational interrelationship of leaders and employees.

#### **Unexpected Finding 1**

An unexpected finding was a low incidence of some key attributes as delineated by Garrin (2013), Markman (2014), and Lesonsky (2017). A review of the frequencies across all codes for the middle managers, references to a sense of belonging, empowerment, and cohesive environment was expected to be higher. Garrin (2013) and Lesonsky (2017) noted these were key concepts for going beyond job expectations. Similarly, Markman (2014) suggested an ambitious employee was inclined to develop new skills or take on a stretch assignment to advance, which boosted the employee's desire to explore new options, but such intrinsic motivation was not found in this study.



## **Unexpected Finding 2**

The next unexpected finding was few references to a sense of belonging, enthusiasm, eagerness, and commitment, which were expected to be higher. Garrin (2013) and Lesonsky (2017) suggested these were key for going beyond job expectations. Similarly, Uzonna (2013) suggested a dire need for senior managers to engage employees in increasing retention and exceeding expectations. Based on the frequencies for these themes, there were few references to these attributes compared to what was delineated by Garrin (2013), Uzonna (2013), and Lesonsky (2017).

## **Conclusions**

Based on the findings of this study and as supported by the literature, the researcher drew six conclusions which infer a deeper insight into exploring how middle managers and senior managers working in the managed healthcare industry in southern California identify what factors motivated middle managers to work beyond senior management's expectations.

### **Conclusion 1**

Based on the findings of this study and as supported by the literature, it is concluded that extrinsic motivation was needed to go above and beyond in the workplace. However, the research still suggested other factors such as a sense of belonging, empowerment, and a cohesive environment were relevant to motivation. Additionally, this effort was supported by the research Adenle (2005) and his listing of attributes that positively motivates managers in the workplace and leads to increased productivity. Similarly, Garrin (2013) and Lesonsky (2017) stated comparable concepts required for going beyond work expectations were consistent with the findings. "Leaders who

perform beyond expectations bring a clear focus together with high motivation, disciplined innovation, and a clear strategy to achieve their objectives” (Hargreaves & Harris, 2011, p. 8). Lastly, the literature review supported the notion that a detailed examination of criteria related to employee behavior, job performance, and organizational outcomes could lead to an understanding of factors that motivate middle managers in the healthcare profession to work beyond the expectations of their supervisors.

### **Conclusion 2**

All participants identified employee recognition as needed for working beyond expectations, although the research still suggested a sense of belonging, enthusiasm, eagerness, and commitment were necessary. Guo (2003) asserted practical knowledge and experience were necessary for senior managers. Many motivating factors could steer employees into performing and carrying out their duties in a given manner (Birken et al., 2015). Likewise, Hargreaves and Harris (2011) asserted leadership in organizations that beat expectations required definable objectives connected to the desired goal and, over time, resulted in high staff retention rates. Guo (2003) found senior managers in healthcare organizations required human relations skills (communication, motivation, and leadership), technical skills, and visionary skills to succeed in the rapidly changing healthcare environment. Lastly, Nicol, Mohanna, and Cowpe (2014) stated attributes required to be a successful leader in managed healthcare were relationship skills, great personality, leadership style, technical competence, and political awareness.

### **Conclusion 3**

All middle manager participants identified challenges as a motivational factor for working beyond expectations. Challenges were viewed by the middle managers as an

opportunity to engage on the job and become more productive while performing at a higher level. Sherk (2014) stated the critical challenge facing middle and senior managers was how to become more skilled or find new ways to use existing skills in a changing economy. Additionally, government policies added to the challenges facing middle and senior managers in the healthcare industry.

McFarlin (2018) stated there were many challenges such as diversity, employee interaction, and handling clients/patients, which directly impacted workforce motivation and employee productivity. Resolving challenges occurred when there was buy-in from all participants on the team and the challenge was of a shorter duration. This type of situation enabled everyone to be more focused and effective for shorter burst of time while focusing on the challenge.

#### **Conclusion 4**

All senior manager participants identified extrinsic motivation as a motivational factor for working beyond expectations. Extrinsic motivation was viewed by senior managers as the self-desire to seek out new things and new challenges and normally occurred when an individual was motivated by external factors which induced an increase in productivity. Extrinsic motivation propelled managers and senior managers to do the right thing for the organization. Ryan and Deci (2000) described three drivers that lead to extrinsic motivation:

- Competence: succeeding in what you do
- Relatedness: connecting with others
- Autonomy: being in control of your life

Similarly, Hargreaves and Harris (2011) stated managers who perform beyond expectations are focus, highly motivated, disciplined, innovative, highly competent and display autonomy when achieving their objectives.

### **Conclusion 5**

Based on the interviews and literature, it was concluded that leadership was a key principle, which included role modeling, transparency, and open communication. As a result, senior level managers demonstrated a willingness to assist middle level managers in excelling in their careers. Moreover, middle managers were open to this type of mentorship to advance in their careers. This study demonstrated that for the organization to be successful, middle and senior level managers needed to work collaboratively for the overall performance of the organization and put forth the leadership necessary to enhance organization performance. Rivers and Glover (2008) asserted that it remains to be seen how employees will be lead and motivated with new leadership approaches required to develop, motivate and retain employees in an evolving industry.

### **Conclusion 6**

Participants identified collaboration as a source of working beyond expectations. Clay et al. (2018) stated collaboration provided potential for improving problem-solving in the workplace. Collaboration reflected a high importance for outcomes and a high concern for the relationship resulting from give more than they take rather than withdraw (Clay et al., 2018). Collaboration between middle managers and peers, senior and middle managers, senior managers and peers, and between middle managers and subordinates must be developed and maintained among the individuals.

## **Conclusion 7**

Based on the interviews with senior level participants, it was concluded a collaborative work environment is crucial for motivating middle managers to exceed expectations where collaborative, cooperative, and cohesive relationships increase productivity and retention. The basic infrastructure to building a collaborative working environment is to establish an environment of trust, transparency, and open communication. According to Updegraff (2013), a collaborative work environment benefits the organization and furthers the development of employees on professional and personal levels. A collaborative work environment resulted in significant improvement in organization readiness, system integration, and strategic planning for future growth. Team-oriented work environments allow exemplary middle managers motivated to work beyond expectations to emerge more frequently (Updegraff, 2013).

### **Implications for Action**

Implications for action directly related to the conclusions and major findings. Current and future managed healthcare leaders should strongly review the recommendations from this study, which could have broader applications for managed healthcare facilities beyond southern California.

#### **Implication for Action 1**

The first implication for action is for healthcare leaders to develop strategies for senior and middle managers to work beyond expectations, focusing on motivational leadership and using transparent and open communication to create a collaborative and supportive culture. Motivation is an overarching concept and important component of effective leadership that provides the impetus to do great things. Many of the participants

emphasized the importance of having recognition, offering quality care, and utilizing the two-way open communication policy as motivational factors.

### **Implication for Action 2**

The second implication for action is for healthcare leaders to create an organization-wide recognition program that is well documented and rolled out to all employees. The company-wide program should delineate the types of available awards and recognition programs available to be given by peers, supervisors, and senior leadership to each permanent and temporary employee. Recognition and rewards should be considered for presentation in an appropriate setting for peers, supervisors, and management to acknowledge the contribution of the individual to the team and organization. The goal of the recognition efforts is to act as a motivational factor for working beyond expectation in the workplace. Each middle manager and senior manager should be responsible for ensuring employees are recognized and rewarded for valued-added work going beyond expectations.

### **Implication for Action 3**

The third implication for action is for healthcare leaders to create a formal, organizational-wide coaching program to help grow and develop middle manager careers. This program should be well-documented throughout the entire organization. More so, senior leadership should establish and encourage an informal mentoring program for all new employees and those promoted into new positions. The informal mentoring program should be publicized and supported by senior leadership throughout the organization. These two companywide programs would assist all employees, especially middle managers who are the linchpin between workers and senior management, to address

challenges encountered on the job. Addressing challenges helped sharpen an individual's skill set and provided an opportunity for employee engagement and growth.

#### **Implication for Action 4**

Managed healthcare organizations must develop programs that intentionally engage middle managers with learning opportunities. Every leader aspiring for greater leadership at the organization should have active relationships and knowledge of leadership challenges in other managed healthcare industries or regions. A simple action step for a managed healthcare organization would be to offer a program in which current and prospective leaders spend intentional and structured time with other managers. This type of program would return significant dividends regarding leadership lessons, employee engagement, institutional branding, recruitment, and academic partnership opportunities, which would aid middle managers to work beyond expectations. This effort would provide an opportunity to become familiar with other metrics used as a measure of success outside of the service area.

#### **Implication for Action 5**

Healthcare leaders should establish measures to encourage leadership opportunities within the organization by seeking mentoring opportunities. Senior managers should understand their employees' aspirations and the difference between incentives relating to motivational leadership strategies to motivate employees to increase job satisfaction and performance. Middle and senior managers must demonstrate a drive for results, understand the issues, make informed decisions, and demonstrate courage to address challenges in a positive manner. Senior leadership must prepare for engaging

clients on a regional and national level. Senior leadership should consider incorporating leadership training programs such as:

- a. The United States Department of Agriculture (USDA) Leadership Essentials Certificate Program, which enhances leadership competencies, develops trained leaders, and prepares leaders for organizational succession planning to meet complex challenges.
- b. The Harvard University Leadership Program, which implements an outcome-based measuring system to identify the total care of medical conditions. This program focuses on the role of value measurement as part of a strategic agenda to transform quality and cost in healthcare. Other aspects covered include organizing into integrated practice units around patient medical conditions, moving to value-based bundled prices for care cycles, and integrating care delivery across facilities.
- c. The Kellogg Executive Development program at Northwestern University which focuses on results, helping organizations succeed by equipping and empowering top-performing managers to realize their potential for assuming general management roles. The program stimulates new thinking and encourages individuals to re-examine and reformulate both professional and personal goals and strategies.

### **Implication for Action 6**

Managed healthcare organizations must reevaluate their hiring, promotion, and diversity policies and practices to maximize the leadership pipeline for middle and senior managers. The hiring landscape is more competitive than ever. Advances in technology,



ease of movement, and ever-changing healthcare regulations and policies means leaders should be current with compliance requirements and where the industry is headed. Increasingly, leaders working beyond expectations are opting for work environments offering superior resources, development, and opportunities for increased collaboration. If managed healthcare organizations want to be serious about maximizing the pipeline of future leaders, they need to ask serious questions about their hiring and promotion practices.

### **Implication for Action 7**

Healthcare leaders need to articulate the vision and goals of the organization and communicate it repeatedly through different mediums. They need to ensure the organization vision and mission is aligned with the goals and values of the workers. This will help ensure a collaborative work environment and empower middle and senior managers to contribute to and develop strategies for the organization's strategic plan. More so, leadership has to stay motivated and vigilant in adjusting to the ever-increasing changes in healthcare compliance regulations and use cutting edge administrative, diagnostic and surgical technology to collaborate between specialties to reduce cost and improve productivity.

### **Recommendations for Further Research**

This study was limited to a single organization in southern California as it related to the lived experience of middle managers motivated to work beyond expectations in the managed healthcare industry. Further investigation into different populations, along with an expanded scope, are areas that could benefit from further research. The researcher

offers the following recommendations to continue and expand further research based on the findings and conclusions of this study:

- Conduct a similar study at other types of managed healthcare facilities with different influences based on a for-profit healthcare organization. It would be valuable to explore how other institutional cultures inform, shape, and embrace the efficacy of middle management aspirations to exceed expectations in the workplace.
- Replicate this study at other types of managed healthcare facilities with a more proportionate sample representative of the managed healthcare field.
- Replicate this study with a larger sample and an even split between males and females selected as study participants.
- Undertake a more comparative study on the differing effects between males and females related to the lived experience of middle managers motivated to work beyond expectations in the managed healthcare industry.
- Explore the impact of motivational coaching conversations on middle managers in the managed healthcare field to exceed expectations.
- Explore the effects of unions on the productive work environment of middle managers motivated to work beyond expectations.
- Conduct a mixed-methods study on the retention on middle managers who exceed expectations in a healthcare organization.
- Conduct a mixed-methods study on how senior managers' motivational attributes affect the retention of middle managers in a healthcare organization.

- Explore the lived experiences and impact of recognition and rewards on motivating middle managers.
- Explore the lived experiences of senior managers in the healthcare industry in improving productivity and retention of middle manager through effective motivational coaching conversations that influence them to work beyond expectations.
- Conduct a qualitative study on how senior managers motivate middle managers from different generational groups (e.g., Baby Boomers, Gen X, Millennials).

### **Concluding Remarks and Reflections**

I am thankful I was able to explore this topic on how middle and senior managers working in the managed healthcare industry identify what factors motivated middle managers to work beyond senior management's expectation, which I believe has lots of future value and purpose. At the beginning of my doctoral journey, I did not know what my dissertation topic would be; however, I wanted to select a topic of interest to the military and industry. I was looking for a specific area of focus that not too many researchers had thought to study. It came to me during one of our exercises at Immersion when someone on my team was giving their all, not just to complete the exercise, but exceed expectations. This situation reminded me of a younger person in my group who I observed on a Friday afternoon when everyone else had gone for the day. This young person was still working, and he did not have a Friday night shift; there was no overtime offered nor was he going to get recognition or a promotion for these efforts. Regardless, he persisted in getting his job completed and exceed his work expectations. I wondered

what motivational attributes caused him to stay when he was not required to do so and why he was always willing to lend a hand to help others. I finally got the opportunity to answer these questions that plagued me for years. I selected this as an area of interest in the managed healthcare field because little research was done in this area.

As I am complete my dissertation, I am excited and inspired by what I accomplished and the challenges offered by my dissertation committee. They continually asked me to stretch and grow during this process. They engaged me in something I was passionate about. This study helped me understand what motivates individuals, especially middle managers who work beyond expectations. When I was writing, no alarm clock was needed because my passion woke me up every morning to continue my journey in hopes of getting further down the path. I set goals to complete and have faith everything in the middle will happen. I was successful and want to continue to be successful. It was my focus to accomplish my goal alongside my cohort, which was accomplished. Now every year my appetite goes up, and I have new goals to achieve. This journey was exciting and I look forward to a new chapter in my life wherever it leads me.

My dream would be the President or CEO of a managed healthcare organization would read this study, even if only the parts about major findings, implications, and recommendations, and be inspired to start leadership training for all middle and senior managers. This initiative would help senior leadership to engage in a special program supported by HR to groom high potential managers for necessary succession planning.

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## APPENDICES

### APPENDIX A – INTERVIEW PROTOCOL

#### **Introduction**

My name is Gerald Dugas and I am a doctoral candidate at Brandman University in the area of Organizational Leadership. I am conducting research in a managed healthcare organization. Specifically, I am looking at what motivates middle and senior management to go above and beyond in the workplace.

I am conducting approximately 14 interviews with individuals like you. One (1) middle manager and one (1) senior manager from the interviewees listed above will not be part of the study. These individuals will be used for pilot testing to check for bias in the protocol procedures, the interviewer's technique, and to provide feedback on the interview questions and the length of the interview. The information you provide, along with the others, hopefully will provide a clear picture of the perceptions of middle and senior management going above and beyond in the workplace.

#### **Informed Consent (required for Dissertation Research)**

I would like to remind you any information that is obtained in connection to this study will remain confidential. All of the data will be reported without reference to any individual(s) or any institution(s). After I record and transcribe the data, I will send it to you via email, so you can make sure that I accurately captured your thoughts and ideas.

1. Did you receive the Informed Consent and Brandman Bill of Rights I sent you via email?
2. Do you have any questions or need clarification about either document?

We have scheduled an hour for the interview. At any point during the interview you may ask that I skip a particular question or stop the interview altogether. For ease of our discussion and accuracy I will record our conversation as indicated in the Informed Consent.

Do you have any questions before we begin? Okay, let's get started, and thanks so much for your time.

#### **Background Questions:**

1. Tell me a few things about your background in the managed healthcare field?
2. How long have you served as a manager or senior manager in the healthcare industry? What were some of your positions prior to this one?
3. What is most challenging about your work at this managed healthcare organization?

#### **Interview Questions**

1. Describe your work environment and sense of belonging at the organization and how you are motivated at the job? Please explain?



- a. Probe: Describe any barriers you have experienced that have prevented you from being motivated at the workplace?
  - b. Probe: Name two factors or attributes of an individual you consider as a high potential person in the workplace whom you consider has worked beyond expectation based on your observations?
  - c. Probe: How do you get subordinates to work at their peak potential or beyond expectations? Please give an example?
  - d. Probe: Describe the mission and vision of the organization and describe your individual or team effort in implementing these new ideas and concepts?
2. Describe the company work environment and culture?
- a. Probe: Explain how the company culture promotes independent decision-making and values the efforts you make?
  - b. Probe: Describe a time when you exceeded your manager's expectation? Do you feel that you were valued at that moment?
  - c. Probe: Describe outside factors, which motivated you in excelling on your job? How are you advancing the concepts and current position of the organization team?
  - d. Probe: How do you view challenges in the workplace? Please explain
  - e. Probe: Focusing on company reward programs, how do you feel about the rewards and recognition program at your company? How does it recognize individuals' displaying high achievement and working beyond expectations required for your job?
3. What aspect of your job do you feel a sense of pride and accomplishment on work completed? Please explain?
- a. Probe: Describe a time when you exceeded your manager's expectation? Do you feel that you were valued at that moment?
  - b. Probe: How is open, honest, and two-way communication encouraged by your manager/supervisor at the workplace?
  - c. Probe: How does your values align with the company's values? Please explain?
  - d. Probe: How do your supervisors/managers reinforce what you are doing on the job makes a difference to the company as a whole?
  - e. Describe how management conveys to you that your opinion matters on how your work is done?
  - f. Probe: Describes how management provides autonomy to make decisions about work and flexibility to balance work life?
4. Describe a work environment, which fosters cooperation, not unhealthy competition among employees?
- a. Probe: Describe where you have observed employees intervene and offer to help everyone in the office regardless of their job description?
  - b. Probe: Describe a work environment where people naturally want to exceed expectations? Please explain?
  - c. Probe: Describe a situation in which regular ongoing feedback and recognition help workers feel satisfied and entice them to stretch their goals?

5. Describe how the absence of complaining on the job and having a sense of well-being and happiness in the work environment can contribute to improved productivity and working beyond expectations?
- Probe: How do you view challenges in the workplace? Please explain?
  - Probe: Describe any barriers you have experienced that have prevented you from being motivated at the workplace?
  - Probe: Describe a strategy you have used to address the challenges of a toxic work environment to overcome barriers and produce a safe productive work environment where everyone is valued and have the opportunity to succeed?
6. Describe a situation on the job where being visible and putting forth a lot of enthusiasm and eagerness to work can lead to higher productivity and working beyond expectations?
- Probe: Describe specific behaviors displayed by management, which entices and/or promotes employees to work beyond expectations?
  - Probe: Describe a time when you were actively involved in different projects and exceeded your manager's expectation? Do you feel that you were valued and recognized for exceeding expectations?
  - Probe: When an individual exceeds expectations on the job, please explain how are they contributing to the mission and goals of the organization?
  - Probe: Describe how you get subordinates to become visible and put forth the necessary effort to advance new concepts and support them through a difficult startup on through implementation? Please give an example?
7. Do you have any additional information you would like to offer in regard to motivation in the workplace?

### **Conclusion of Interview**

Those are all the questions I have for you. I will send you a copy of the transcription once it is ready. Please review it for accuracy and let me know if you want to revise or add to any response. Thank you for your time today; it is greatly appreciated.

## APPENDIX B – INTERVIEW QUESTIONS PILOT TEST FEEDBACK FORM

As a doctoral student and researcher at Brandman University your assistance is appreciate in designing this survey instrument. Your participation is crucial to the development of a valid and reliable instrument. Below are some questions that I would appreciate you answering after completing the survey. Your answers will assist me in refining both the directions and the survey items.

You have been provided with a paper copy of the interview questions, just to jog your memory if you need it. Thanks so much.

1. Were the directions straightforward and complete, and you understood what to do? If not, would you briefly state the problem?
2. Was the Introduction sufficiently clear (and not too long) to inform you what the research was about? If not, what would you recommend that would make it better?
3. Please list any questions, by number, that were ambiguous to you. If there were any items that caused you say something like, “*What does this mean?*” Which item(s) were they?
4. Please make any suggestions that will make the format of the interview questions easier to follow or easier to understand.
5. Can you give me any other suggestions that would improve the interview questions?
6. How many minutes did it take you to completely answer the interview questions, from the moment you first started reading until the time you completed it?

Thank you for taking the time to respond to the interview questions and for providing your valuable feedback. Please deliver or email your completed feedback form to Gerald Dugas (gdugas@mail.brandman.edu) by \_\_\_\_\_. Please feel free to contact me with any suggestions or questions. Thank you again for your help.

Sincerely,

Gerald Dugas  
Principal Investigator  
Brandman University Doctoral Candidate

## APPENDIX C – INVITATION LETTER

Invitation letter for Middle and Senior Managers in a Managed Healthcare Organization

Date:

Dear Potential Study Participant,

My name is Gerald Dugas, and I am a doctoral candidate in Brandman University's Organizational Leadership program. For my dissertation, I am researching how middle managers and senior managers working in the managed healthcare industry in southern California perceive what factors motivated middle managers to work beyond senior management's expectations. My research focuses solely on the employees themselves and their perspectives in regard to motivation to go above and beyond.

I am writing to introduce myself to you and to ask if you would be willing to consider participating in this research to provide a perspective on motivation and how it does or does not affect middle and senior level management. I am asking your assistance in the study by participating in an interview, which will take from 45 to 60 minutes and will be set up at a time convenient for you.

If you agree to participate in an interview, you may be assured that it will be completely confidential. A coding system will be used so that no names will be attached to any notes, recording, or transcripts from the interview. The interview will be audio-recorded with your consent, and the audio recording will be destroyed once the interview has been transcribed. All information will remain in locked files accessible only to the researchers and no other individuals will have access to the interview information. You will be free to stop the interview and withdraw from the study at any time.

I am available by email and phone to discuss this research. Additionally, my dissertation chair may be contacted to answer any questions you may have: Dr. Shalamon Duke, available at [sduke@brandman.edu](mailto:sduke@brandman.edu).

It would be an honor to be able to hear your experiences and perspectives regarding your participation as a middle or senior manager. I know that your time is incredibly valuable, and I appreciate your consideration of this request.

Sincerely,

Gerald Dugas  
Doctoral Candidate, Brandman University  
Email: [gdugas@mail.brandman.edu](mailto:gdugas@mail.brandman.edu)  
Phone: 310-XXX-XXX

## APPENDIX D – INFORMED CONSENT

### **Informed Consent Form**

**INFORMATION ABOUT:** Middle Managers Working beyond Senior Management's Expectations: A Phenomenological Study of the Managed Healthcare Industry in Southern California

**RESPONSIBLE INVESTIGATOR:** Gerald Dugas, Doctoral Candidate

**PURPOSE OF THE STUDY:** You are being asked to participate in a research study conducted by Gerald Dugas, a doctoral student from the Doctor of Education in Organizational Leadership program at Brandman University. The purpose of this qualitative study was to explore how middle managers and senior managers working in the managed healthcare industry in southern California perceive what factors motivated middle managers to work beyond senior management's expectations.

In participating in this research study, I agree to partake in a recorded semi-structured interview, which will be conducted in person at your workplace. The interview will take up to one hour and will be audio-recorded. During this interview, I will be asked a series of questions designed to allow me to share my experiences as a member of a managed healthcare organization. The interview will take place during February thru March 2018.

I understand that:

- a) There are minimal risks or discomforts associated with this research. It may be inconvenient to spend up to one hour in the interview. However, the session will be held at my workplace to minimize this inconvenience. Some interview questions may cause mild emotional discomfort. I understand that the investigator will protect my confidentiality by keeping the identifying codes and research materials in a locked file drawer that is available only to the researcher and that digital information will be password-protected and only available to the researcher.
- b) There are no major benefits to me for participation, but a potential benefit may be that I will have the opportunity to share my expertise with other leaders in the managed healthcare field. The information from this study is intended to inform researchers, policymakers, and educators on best practices. I understand that I will not be compensated for my participation.
- c) Any questions I have concerning my participation in this study will be answered by Gerald Dugas, Brandman University Doctoral Candidate. I understand that Mr. Dugas contacted by phone at (310) XXX-XXXX or email at [gugas@mail.brandman.edu](mailto:gugas@mail.brandman.edu). Mr. Dugas' advisor, Dr. Shalomon Duke, can also be contacted at [sduke@brandman.edu](mailto:sduke@brandman.edu).

- d) I understand that I may refuse to participate or withdraw from this study at any time without any negative consequences. I can also decide not to answer particular questions during the interview. Also, the investigator may stop the study at any time.
- e) I understand that the study will be audio-recorded, and the recordings will not be used beyond the scope of this project.
- f) I understand that the audio recordings will be used to transcribe the interviews. Once the interviews are transcribed, the audio and electronic interview transcripts will be kept for a minimum of two years by the investigator on an electronic storage device in a locked file cabinet.
- g) I also understand that no information that identifies me will be released without my separate consent and that all identifiable information will be protected to the limits allowed by law. If the study design or the use of the data is to be changed, I will be so informed, and my consent re-obtained. I understand that if I have any questions, comments, or concerns about the study or the informed consent process, I may write or call of the Office of the Executive Vice Chancellor of Academic Affairs, Brandman University, and 16355 Laguna Canyon Road, Irvine, CA 92618, (949) 341-7641. I acknowledge that I have received a copy of this form and the Research Participant’s Bill of Rights.

I have read the above and understand it and hereby voluntarily consent to the procedures(s) set forth.

\_\_\_\_\_  
**Signature of Participant or Responsible Party**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Signature of Witness (if appropriate)**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Signature of Principal Investigator**

\_\_\_\_\_  
**Date**

Brandman University IRB \_\_\_\_\_ 2018

APPENDIX E – AUDIO RELEASE FORM

**RESEARCH STUDY TITLE:** Middle Managers Working beyond Senior Management’s Expectations: A Phenomenological Study of the Managed Healthcare Industry in Southern California

**BRANDMAN UNIVERSITY  
16355 LAGUNA CANYON ROAD  
IRVINE, CA 92618**

I authorize Gerald Dugas, Brandman University Doctoral Candidate, to record my voice. I give Brandman University and all persons or entities associated with this research study permission or authority to use this recording for activities associated with this research study.

I understand that the recording will be used for transcription purposes and the information obtained during the interview may be published in a journal or presented at meetings/presentations.

I will be consulted about the use of the audio recordings for any purpose other than those listed above. Additionally, I waive any right to royalties or other compensation arising or related to the use of information obtained from the recording.

By signing this form, I acknowledge that I have completely read and fully understand the above release and agree to the outlined terms. I at this moment release any and all claims against any person or organization utilizing this material.

\_\_\_\_\_  
Signature of Participant or Responsible Party

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Witness (if appropriate)

\_\_\_\_\_  
Date

## APPENDIX F – PARTICIPANT BILL OF RIGHTS



### BRANDMAN UNIVERSITY INSTITUTIONAL REVIEW BOARD

#### Research Participant's Bill of Rights

Any person who is requested to consent to participate as a subject in an experiment, or who is requested to consent on behalf of another, has the following rights:

1. To be told what the study is attempting to discover.
2. To be told what will happen in the study and whether any of the procedures, drugs or devices are different from what would be used in standard practice.
3. To be told about the risks, side effects or discomforts of the things that may happen to him/her.
4. To be told if he/she can expect any benefit from participating and, if so, what the benefits might be.
5. To be told what other choices he/she has and how they may be better or worse than being in the study.
6. To be allowed to ask any questions concerning the study both before agreeing to be involved and during the course of the study.
7. To be told what sort of medical treatment is available if any complications arise.
8. To refuse to participate at all before or after the study is started without any adverse effects.
9. To receive a copy of the signed and dated consent form.
10. To be free of pressures when considering whether he/she wishes to agree to be in the study.

If at any time you have questions regarding a research study, you should ask the researchers to answer them. You also may contact the Brandman University Institutional Review Board, which is concerned with the protection of volunteers in research projects. The Brandman University Institutional Review Board may be contacted either by telephoning the Office of Academic Affairs at (949) 341-9937 or by writing to the Vice Chancellor of Academic Affairs, Brandman University, 16355 Laguna Canyon Road, Irvine, CA, 92618.



## Appendix G

### **BUIRB Approval**

**From:** Institutional Review Board [mailto:[my@brandman.edu](mailto:my@brandman.edu)]  
**Sent:** Thursday, February 22, 2018 1:52 PM  
**To:** gdugas Student <[gdugas@mail.brandman.edu](mailto:gdugas@mail.brandman.edu)>  
**Cc:** Duke, Shalomon <[sduke@brandman.edu](mailto:sduke@brandman.edu)>; buirb <[buirb@brandman.edu](mailto:buirb@brandman.edu)>; Devore, Douglas <[ddevore@brandman.edu](mailto:ddevore@brandman.edu)>  
**Subject:** BUIRB Application Approved As Submitted: Gerald Dugas

Dear Gerald Dugas,

Congratulations, your IRB application to conduct research has been approved by the Brandman University Institutional Review Board. This approval grants permission for you to proceed with data collection for your research. Please keep this email for your records, as it will need to be included in your research appendix.

If any issues should arise that are pertinent to your IRB approval, please contact the IRB immediately at [BUIRB@brandman.edu](mailto:BUIRB@brandman.edu). If you need to modify your BUIRB application for any reason, please fill out the "Application Modification Form" before proceeding with your research. The Modification form can be found at the following link:  
<https://irb.brandman.edu/Applications/Modification.pdf>.

Best wishes for a successful completion of your study.

Thank you,  
**Doug DeVore, Ed.D.**  
Professor  
Organizational Leadership  
BUIRB Chair  
[ddevore@brandman.edu](mailto:ddevore@brandman.edu)  
[www.brandman.edu](http://www.brandman.edu)

**Appendix H**  
**National Institutes of Health (NIH) Clearance**

**Certificate of Completion**

The National Institutes of Health (NIH) Office of Extramural Research certifies that **Gerald Dugas** successfully completed the NIH Web-based training course "Protecting Human Research Participants".

Date of completion: 05/14/2016.

Certification Number: 2074028.