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THE EFFECT ANALYSIS OF ORGANIZATIONAL CULTURE AND PERCEIVED ORGANIZATIONAL SUPPORT ON INNOVATIVE WORK BEHAVIOUR IN HASANUDDIN UNIVERSITY HOSPITAL MAKASSAR: A CROSS SECTIONAL STUDY

Andi Raisyiah Akrimah Imran [1]*, Syahrir A. Pasinringi [2], Fridawaty Rivai [3], Alimin Maidin [4], Andi Indahwaty Sidin [5] and Herlina A. Hamzah [6]

[1] Master's Student of Hospital Administration Study Program,
Faculty of Public Health, Hasanuddin University, Indonesia.
*Corresponding Author Email: rimaraisyiah@gmail.com
[2,3,4,5,6] Hospital Administration Study Program, Faculty of Public Health,
Hasanuddin University, Indonesia.
Email: [2]syahrir65@gmail.com, [3]fridarivai@yahoo.com, [4] aliminmaidin@gmail.com,
[5]idhasidin@yahoo.com, [6]herlinahamzah@yahoo.com

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Abstract

Background: Today, hospitals are required to implement innovative strategies to overcome various challenges in order to achieve their organisational goals. Innovative work behaviour (IWB) is considered a vital asset in the implementation of innovation through employee work practices in the hospitalisation sector. Organisational culture (OC) and Perceived Organizational Support (POS) are two main organisational factors that can influence IWB practices. This study aims to analyse the effect of OC and POS on IWB among employees at Hasanuddin University Hospital Makassar. **Methods:** This research was a quantitative study with cross-sectional design, which conducted at Hasanuddin University Hospital Makassar City, from May to June 2023. The sample in this study was hospital employees (n = 265), selected using proportional random sampling method. Data were collected using questionnaires. The statistical data was compiled and analyzed using statistical tools (AMOS, SmartPLS3). **Results:** This study has shown the dominance of the Clan culture type from the perspective of employees at Unhas Hospital. Based on descriptive analysis, it is known that the three research variables (OC, POS, and IWB) mostly show scores with high levels. Furthermore, statistical analysis implies that the four relationship paths between research variables, namely the effect of OC on IWB (p = 0,026, β = 0,178), the effect of OC on POS (p = 0,000, β = 0,501), the effect of POS on IWB (p = 0,006, β = 0,228), and the effect of OC on IWB mediated by POS (p = 0,013, β = 0,114), overall show a positive and significant relationship. **Conclusions:** It is concluded that the that each of OC and POS showed a significant positive relationship with IWB. OC also showed a significant positive relationship with POS. In addition, the effect of OC on IWB mediated by POS showed a significant positive relationship.

Keywords: Organizational Culture, Perceived Organizational Support, Innovative Work Behaviour

INTRODUCTION

In today's era of intense business competition, a rapid transformation is taking place in the hospital sector worldwide, which encourages every hospital as a healthcare organisation to adopt modern management practices to ensure its sustainability and success (1). In addition, the present of various challenges ranging from clinical, managerial, social and environmental issues, the massive development of technology, the increasing public demand for quality services, require hospitals, as public sector organisations, to be more innovative in order to improve the efficiency and effectiveness of public services, gain competitive advantage and reduce operational costs (2,3). Innovation and its current paradigms in the form of products, services, market strategies, processes and working methods are more likely to be seen as outputs of the thought, knowledge and creativity of human (4). Employees have the intellectual capital to develop innovation, which can be achieved by implementing

Innovative Work Behaviours (IWB) (5). The concept of IWB refers to an employee's ability to identify problems, generate new ideas, disseminate and implement potential ideas into work practices to create better processes or products that increase individual, group and organisational performance (6). IWB is considered as vital asset that enables organisations to succeed in enhacing workplace innovation (3), improving financial performance (7–9), increasing efficiency (10), improving business activities in terms of profitability and organisational revenue (11).

One manifestation of the hospital's commitment to implementing innovation practice can be seen in the hospital's strategic identity, which can be reflected in the vision, mission, goals and core values of organization. As one teaching hospitals in Makassar City, Hasanuddin University (Unhas) Hospital has strategic commitment towards innovation practice through its "Innovation" core value and one of its missions, namely "*Pioneering health care innovation through excellent research and continuous improvement of service quality*". Moreover, there is a fact that the trend of innovation programmes developed by Unhas Hospital in the last 3 years (2020 - 2022) has continued to decrease, where the hospital management has never conducted specific analysis related to the innovations implementation. The gap between those problems and hospital's commitment to innovation indicates the urgency of studying innovation practices in depth within the Unhas Hospital, where this study based on brief theoretical framework above, specifically wants examines IWB and its determinant factors. One of the organizational factors that dominantly influences IWB is Organizational Culture. Schein (1997) defined Organizational Culture (OC) as a pattern of basic assumptions invented, discovered, or developed by a given group as it learns to cope with the problems of external adaptation and internal integration (12). OC does not produce innovation itself, but OC can encourage (or prevent) various behaviours, including IWB (13). Organisational culture that supports IWB is characterised by openness to change, encouragement of open communication for new or unique ideas, risk-taking, error tolerance for experiment, enhacing intrinsic motivation in employees (14,15).

Cameron and Quinn (1999) developed the Organizational Culture Assessment Instrument (OCAI) that provide a comprehensive framework for understanding and evaluating OC. OCAI originally based on Competing Value Framework (CVF) then decisively identifies four core values that characterize an organization, namely (1) Internal Focus and Integration, (2) External Focus and Differentiation, (3) Flexibility and Discretion, and (4) Stability and Control. These values created opposing assumptions that distinguish four possible types of OC : (1) Clan Culture, (2) Adhocracy Culture, (3) Hierarchical Culture, and (4) Market Culture (16). Theoretically, OC with flexibility-orientation may promotes innovation due to its association with creativity, freedom, and risk-taking attitudes. Conversely, OC with stability and control-orientation may inhibit innovation. In addition, an-externally focused OC may fosters innovation more than an internally focused one, due to customer orientation may directs product developers to external users, stimulating new product ideas, and discovers opportunities outside the business or beyond current technical or operational capabilities (17). Therefore, understanding the aspects of innovation of OC that may affect employee's IWB is crucial for organizations, especially when the culture is strongly and positively perceived by employees (18).

Another organizational factor that also dominantly influences IWB is *Perceived Organizational Support* (POS). Eisenberger (1986) defines POS as an employee's

belief about the extent to which the organisation values their contributions, cares about their well-being, and considers the needs and desires of its employees (19). POS concept is firmly established by Social Exchange Theory and Organizational Support Theory which underpin the positive relationship of feelings of support perceived by employees from their organization (20). When the organization provides support to its employees, positive behavior will be shown by employees to respond to this support (21). Organisational support is an crucial factor in fostering and enhacing employees' ability to contribute to organizational growth and development by emphasising commitment, valuing employees and inspiring them to generate new ideas (22,23). In relation to IWB, through POS, there can be an increased tendency to generate creative ideas, explore opportunities, solve problems, and translate them into innovative forms of output (24).

According to Van Beek and Gerritsen (2010), personal perceptions of OC can be seen as an indicator of the quality of organisational support (25). Organisations are perceived by employees as having a distinct personality, with their actions reflecting their traits, motives, and values. When an employee's values and goals align with those of the organisation, it affirms their self-identity, and it may contribute to individual's POS. Thus, POS is closely related to OC, which is reflected in its values. A supportive organisational culture can be highly effective in enhancing POS through continuous reinforcement of employees' positive appraisals (26). With regard to IWB, employees are expected to identify opportunities to generate innovative ideas for service quality improvement (8). Therefore, appropriate managerial interventions are required that focus on creating a more conducive organisational environment (through OC), and providing support for innovative ideas (through POS), ultimately leading to successful innovation implementation (through IWB). In research location, no previous study has measured the three variables examined in this study (OC, POS, and IWB) and also inter-variable relationships. Based on the background described above, this study will analyze the effect of Organizational Culture and Perceived Organizational Support on Innovative Work Behavior in Hasanuddin University Hospital, utilizing the field paradigm of Organizational Behavior study.

MATERIAL AND METHODS

Methodology of the Study and Subjects

This research was a quantitative study with cross-sectional design, which conducted at Hasanuddin University Hospital Makassar City, from May to June 2023. The study population consisted of 848 hospital employees. Proportional random sampling was utilized to obtain sample a representative sample based on types of employment. The sample size of 265 employee was determined using the Lemeshow formula (1997). Data were collected using questionnaires. Then, the statistical data was compiled and analyzed using statistical tools.

Instruments

The questionnaires was in Bahasa Indonesia that had been tested for validity and reliability before being used as a survey instrument to respondents. The questionnaire's validity was tested using the Pearson correlation method. Each item was assigned a correlation coefficient value, indicating its degree of validity. An item is considered valid if its significance value is greater than 0.05 (95% CI), which is then adjusted to the r table based on the number of respondents (N). For a sample size of

30 respondents, the r table indicates that a minimum Pearson Correlation value of 0.361 is required. Furthermore, reliability testing uses Cronbach's Alpha formula. In this model, a questionnaire is considered reliable if its Cronbach's Alpha coefficient value is greater than 0.6. Excluding question items that do not meet the validity and reliability test coefficient standards is necessary.

1. Organizational Culture

Organisational culture is measured using the Organisational Culture Assessment Instrument (OCAI) questionnaire developed by Cameron & Quinn (2011). This questionnaire consists of 6 dimensional items including: *Dominant Characteristics, Organisational Leadership, Management of Employees, Organisational Glue, Strategic Emphasis,* and *Criteria of Success*. Each dimensional item consists of 4 alternative choices (A, B, C, D) with a total of 24 questions. The questions were modified by the researcher using a Likert scale ranging from (1) strongly disagree to (5) strongly agree. The results of the assessment score for each dimension are summed up and then the proportion of the value of each alternative answer (A, B, C, D) is looked at to see the tendency of the alternative suitability to the organisational conditions. Each alternative choice (A, B, C, D) is calculated as the average score expressed as a percentage. Then, the average score is plotted on the Organizational Culture Profiles diagram, each point in the four quadrants is connected with a straight line to form a quadrilateral kite. All question items in this questionnaire meet the standard coefficient values, both validity and reliability tests (Cronbach's α = 0.929).

2. Perceived Organizational Support

Perceived Organizational Support is measured using the Innovation Support Inventory questionnaire developed by Lukes & Stephan (2017). This questionnaire consists of 3 dimensional items, namely: *Managerial Support* (5 question items)*, Organizational Support* (4 question items)*,* and *Cultural Support* (4 question items), with a total of 13 question items using a five-point Likert scale, ranging from (1) strongly disagree to (5) strongly agree. All question items in this questionnaire meet the standard coefficient values, both validity and reliability tests (Cronbach's α = 0.930).

3. Innovative Work Behavior

Innovative Work Behaviour was measured using the Individual Innovativeness Scale questionnaire developed by Yigit & Aksay (2017) which was modified by the researcher. This questionnaire consists of 4 dimensional items, namely: Opinion-leadership (6 question items), Openness to Experience (4 question items), Risk-taking (4 question items), and Resistance to Change (6 question items), with a total of 20 question items. With the exception of the Resistance to Change dimension consisting of negatively scaled questions, the other three dimensions are positively scaled questions. A total of 14 positively scaled question items used a five-point Likert scale, ranging from (1) strongly disagree to (5) strongly agree, and vice versa ranging from (1) strongly agree to (5) strongly disagree for 6 negatively scaled question items. Two question items from *Resistance of Change* dimension (RC 1 and RC 5) were excluded from the questionnaire during the validity test as they did not meet the standard coefficient value. Meanwhile, all question items in this questionnaire meet the standard coefficient values of reliability tests (Cronbach's α = 0.8730). Finally, the validity and reliability tests for the IWB questionnaire were successfully passed with 18 questions.

Statistics Analysis

The results of the study will be presented in the form of univariate analysis and multivariate analysis. Univariate analysis is a statistical analysis to describe each respondent's characteristics and the distribution of data from each research variable. Multivariate analysis is a statistical analysis to find the amount of direct and indirect influence between several variables. In this study, path analysis was used to explain the causal relationship between OC, POS, and IWB simultaneously. For the data analysis process, researchers used two statistical analysis programmes. Descriptive statistical analysis using IBM SPSS 25. While inferential statistical analysis uses AMOS or SmartPLS3, adjusting to the results of the data normality test.

Ethical Considerations

This study received ethical approval from the Health Research Ethics Commission, Faculty of Public Health, Hasanuddin University on 27 June 2023, number: 4248/UN4.14.1/TP.01.02/2023.

RESULTS

Univariate Analysis

Table 1: Frequency Distribution based on Respondent Characteristics

No	Respondent Characteristics	n	%
1	**Age (years)**		
	20 – 30	43	16,2%
	>30 – 40	182	69,1%
	>40– 50	25	9,4%
	>50	15	5,7%
	Total	**265**	**100%**
2	**Gender**		
	Male	84	31,7%
	Female	181	68,3%
	Total	**265**	**100%**
3	**Education Level**		
	Senior high school	15	5,7%
	Associate's Degree	47	17,7%
	Bachelor Degree	64	24,1%
	Professional Degree	77	29,1%
	Magister Degree	41	15,5%
	Doctoral Degree	21	7,9%
	Total	**265**	**100%**
4	**Length of work in Hospital**		
	1 – 5 years	21	7,9%
	>5 – 10 years	110	41,5%
	>10 years	134	50,6%
	Total	**265**	**100%**
5	**Employment Status**		
	Civil Servant	76	28,7%
	Non- Civil Servant	189	71,3%
	Total	**265**	**100%**

Source: Primary Data, 2023

Table 1 indicates that out 265 respondents, the highest percentage of respondents based their age group is > 30 - 40 years, namely 182 respondents (69.1%). Regarding

the gender, 181 (68,3%) were female and 84 (31,7%) were female. The data also shows that based on level of education, majority respondents had professional degree, namely 77 respondents (29,1%). Concerning length of work in Hospital, the majority of had a tenure of over 10 years, with 134 people (50,6%). Additionally, based on employment status, the majority of respondents were non-civil servants, namely 189 people (71.3%).

Table 2: Frequency Distribution based on Respondent's Perception of Research Variables

Variable	Score Level	Cut-off score	n	%
Organizational Culture	High	(≥72)	235	88,7%
	Low	(<72)	30	11,3%
	Total		265	100%
Perceived Organizational Support	High	(≥39)	231	87,2%
	Low	(<39)	34	12,8%
	Total		265	100%
Innovative Work Behavior	High	(≥54)	238	89,8%
	Low	(<54)	27	10,2%
	Total		265	100%

Source: Primary Data, 2023

Table 2 demonstrates that majority respondents had high score for all research variables. On Organizational Culture, 88.7% (235 respondents) had high score and 11.3% (30 respondents) had low score. On Perceived Organizational Support, 87.2% (231 respondents) had high score and 12.8% (34 respondents) had low score. On Innovative Work Behaviour, 89.8% (238 respondents) had high score and 10.2% (27 respondents) had low score.

Table 3. Frequency Distribution based on Respondent's Perception of Organizational Culture Dimensions

No	Dimension	Score Level (*cut-off score*)	n	%
1	*Dominant Characteristics*	High (≥12)	248	93,6%
		Low (<12)	17	6,4%
		Total	**265**	**100%**
2	*Organizational Leadership*	High (≥12)	249	94,0%
		Low (<12)	16	6,0%
		Total	**265**	**100%**
3	*Management of Employees*	High (≥12)	245	92,5%
		Low (<12)	20	7,5%
		Total	**265**	**100%**
4	*Organizational Glue*	High (≥12)	251	94,7%
		Low (<12)	14	5,3%
		Total	**265**	**100%**
5	*Strategic Emphases*	High (≥12)	247	93,2%
		Low (<12)	18	6,8%
		Total	**265**	**100%**
6	*Criteria of Success*	High (≥12)	252	95,1%
		Low (<12)	13	4,9%
		Total	**265**	**100%**

Source: Primary Data, 2023

Table 3 clearly demonstrates that the *Criteria of Success* dimension has the highest percentage among the Organizational Culture variables, with 95.1% (252 respondents), while the Management of Employees dimension has the lowest percentage, with 92.5% (245 respondents).

Figure 1: Diagram of Organisational Culture Profile

Figure 1 shows that Clan Culture is organisational culture profile that dominates respondents' perceptions, with the largest percentage score (28.22%). The next rank followed by Hierarchy Culture (24.36%), then Adhocracy Culture (24.27%) Meanwhile, market Culture has the smallest percentage score (23.15%).

Table 4: Frequency Distribution based on Respondent's Perception of Perceived Organizational Support Dimensions

No	Dimension	Score Level (*cut-off score*)	n	%
1	*Managerial Support*	High (≥15)	249	94,0%
		Low (<15)	16	6,0%
		Total	**265**	**100%**
2	*Organizational Support*	High (≥12)	233	87,9%
		Low (<12)	32	12,1%
		Total	**265**	**100%**
3	*Cultural Support*	High (≥12)	251	94,7%
		Low (<12)	14	5,3%
		Total	**265**	**100%**

Source: Primary Data, 2023

Table 4 shows that the *Cultural Support* dimension has the highest percentage among the Perceived Organizational Support variables, with 94.7% (251 respondents), while the *Organizational Support* dimension has the lowest percentage, with 87,9% (233 respondents).

Table 5: Frequency Distribution based on Respondent's Perception of Innovative Work Behavior Dimensions

No	Dimension	Score Level (*cut-off score*)	n	%
1	*Opinion-Leadership*	High (≥18)	254	95,8%
		Low (<18)	11	4,2%
		Total	**265**	**100%**
2	*Openness to Experience*	High (≥12)	247	93,2%
		Low (<12)	18	6,8%
		Total	**265**	**100%**
3	*Risk-taking*	High (≥12)	238	89,8%
		Low (<12)	27	10,2%
		Total	**265**	**100%**
4	*Resistance to Change*	High (≥12)	229	86,4%
		Low (<12)	36	13,6%
		Total	**265**	**100%**

Source: Primary Data, 2023

Table 5 shows that the *Opinion-Leadership* dimension has the highest percentage among the Innovative Work Behavior variables, with 95.8% (254 respondents), while the *Resistance to Change* dimension has the lowest percentage, with 86,4% (229 respondents).

Multivariate Analysis

In multivariate analysis, this study utilized path analysis to explain the causal relationship between multiple variables. Before conducting statistical tests for causality, a normality test was first conducted on the research data by using the AMOS software with the following results.

Table 6: Normality test of data

Variable	Min	Max	Skew	CR.	Kurtosis	CR	Interpretation
OC	58	119	-,910	-6,045	1,049	3,486	**Non-normal distribution**
POS	29	65	-,738	-4,905	1,238	4,115	
IWB	45	90	-,574	-3,815	1,949	6,475	
Multivariate					7,991	11,875	

Source: Primary Data, 2023

Based on Table 6, both univariate and multivariate analyses showed that the study data were not normally distributed. It is known that the CR value for multivariate analysis for Skewness criteria and Kurtosis criteria is 11.785, which is greater than the standard value of ± 2.58. Therefore, the researcher continued to test the hypothesis with path analysis using Smart PLS3 software.

In this multivariate analysis, hypothesis testing is carried out to see the effect of the independent variable (OC) on the dependent variable (IWB) directly and through the intervening variable (POS) indirectly using path analysis which is presented in the following table:

Table 7: Path Analysis Results of Direct and Indirect Effects between Organizational Culture, Perceived Organizational Support, and Innovative Work Behaviour

No	Variable Relationship	Path Coefficients (β)	p-value	Interpretation
1	*Organizational Culture → Innovative Work Behavior*	0,178	0,026	**Significant**
2	*Organizational Culture → Perceived Organizational Support*	0,501	0,000	**Significant**
3	*Perceived Organizational Support → Innovative Work Behavior*	0,228	0,006	**Significant**
4	*Organizational Culture → Perceived Organizational Support → Innovative Work Behavior*	0,114	0,013	**Significant**

Source: Primary Data, 2023

Table 7 shows that OC (β = 0.178; p = 0.026) as well as POS (β = 0.228; p = 0.006) directly has a positive and significant effect on IWB. The results also indicate OC (β = 0.501; p = 0.000) directly has a positive and significant effect on POS. Furthermore, it was found a positive indirect effect which POS mediates the relationship between OC to IWB significantly (β = 0.114; p = 0.013). So it can be concluded that the direct effect of OC --> IWB is stronger than the indirect effect through the mediation of POS.

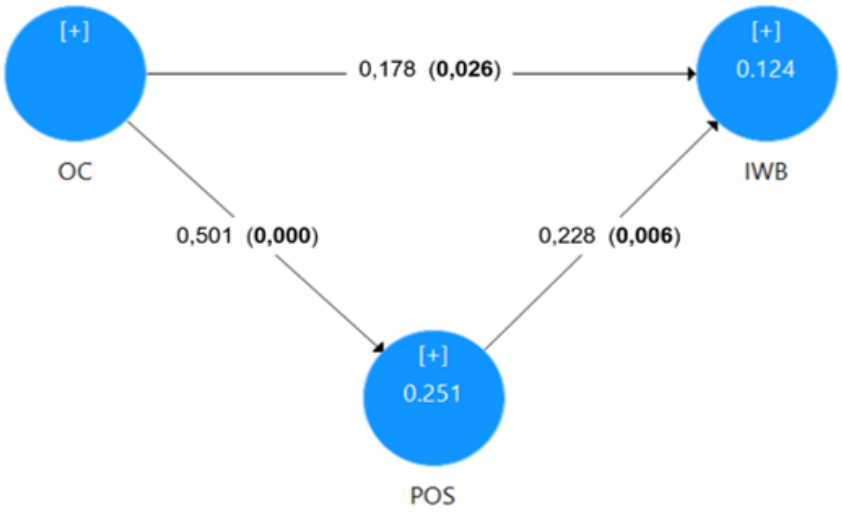

Figure 2: Path Analysis Model of the Relationship between Variables of Organisational Culture, Perceived Organizational Support, and Innovative Work Behaviour

Based on Figure 2, the R square value of POS is 0.251 (moderate effect), meaning that 25.1% of the distribution of POS can be explained by the OC variable, while the remaining 74.9% is explained by other factors not examined. Meanwhile, the R square value of IWB is 0.124 (weak effect), meaning that 12.4% of the distribution of IWB can be explained by POS and OC simultaneously, while the remaining 87.6% is explained by other factors not examined.

DISCUSSION

The concept of Organisational Culture (OC) refers to the shared values, norms, attitudes, expectations, practices, assumptions and beliefs held by all members of an organisation (1). Given that organisational culture acts as a key factor in shaping employee behaviour, so it is very essential to assess how employees perceive the organisational culture where they work. In this study, the research respondents clearly identified the Clan culture type (28.22%) as the dominant organizational culture type, surpassing the other three types of OC, namely Hierarchy Culture (24.36%), Adhocracy Culture (24.27%), and Market Culture (23.15%). Theoretically, through the six dimensions of culture based on the CVF framework, Clan culture can be characterised as follows: (1) *Dominant Characteristics* dimension is characterised by the organisation providing a friendly place to work like a big family; 2) *Organizational Leadership* dimension is characterised by the leader as a mentor or facilitator and perhaps even a parent figure; 3) *Management of Employees* dimension is characterised by teamwork, consensus, and participatory employee empowerment; 4) *Organization Glue* dimension is characterised by a tradition of high employee loyalty and commitment; 5) *Strategic Emphases* dimension is characterised by the development of a humanistic work environment and facilitating trust, openness, communication and employee participation; and 6) *Criteria of Success* dimension is characterised by strong internal climate, solidarity, and concern for people (16).

The results of this study can be linked to the strategic identity of the organisation, where Unhas Hospital adheres to five Basic Values, three of which reflect a value framework that is in accordance with Clan culture, they are 1) *Trustfullness* which means firmly trusted and honest in the development of science and professionalism; 2) *Togetherness* which means working together in togetherness; and 3) *Compassion* which means sincerely serving with compassion and care. The results of this study are similar to Lee et al. (2021) study which showed the dominance of internally focused cultural types (Clan culture and Hierarchical culture) (27), but in otherwise, this findings differ from the research by Ovseiko and Buchan (2012), which contrary showed the dominance of externally focused cultural types (Market culture and Adhocracy culture) (28). Theoritically, Clan culture is important in creating teamwork, trust, leadership, empowerment and employee commitment in providing healthcare services to patients On the other hand, hierarchical culture is important in maintaining stability and consistency in hospital operations through compliance and control of established procedures, regulations and policies (27). Additionaly, the external focus on Market Culture is characterised by a primary orientation towards results, high productivity, and achieving goals to win market competition, while Adhocracy Culture is characterised by a primary orientation towards freedom, risk-taking, innovation and creativity (1).

Despite the four typologies of organisational culture from CVF, in reality an organisation can have all four types of organisational culture to some degree (16). The multidimensional organisational culture paradigm divides two clusters of organisational cultures known as Strong Multidimensional Culture (SMC) and Weak Multidimensional Culture (WMC). Based on the scores for culture profiles with all four culture types, SMC refers to high scores while WMC refers to low scores (27). In this study, the dominance of respondents with scored high (88.7%) indicates that proportionally, the organisational culture perceived by employees at Hasanuddin University Hospital is classified as Strong Multidimensional Culture. This finding is also consistent with the six dimensions of OC showing SMC conditions (proportion of high

level ranging from 92.5% to 95.1%). The results also show that the overall POS variable is also in the high level category, namely 87.2%. This findings are in line with Wang, Wang, Lu (2023) study (29), but in contrast show different results with the study by Labrague et all (2018) (30). A high level of POS is a representation of the perception of employees who have gained valuable resources from the hospital as well as the hospital's recognition of their contributions. Based on the literature, according to the principle of reciprocity, employee may exhibit more positive work behaviours and build emotional commitment with the organisation in return (29). Instead, the lower level of POS can be explained as a consequence of the lack of recognition, autonomy, promotion and flexibility of the job. In addition, factors such as low pay, heavy workloads and higher levels of work stress also contribute to decrease work commitment and motivation among employees (30).

Conceptually, the closer the relationship between the contextual level and the individual employee, such as the direct manager's support for the employee, the greater the influence on the employee's behaviour compared to more distant contextual levels, such as organisational support and cultural support. On the other hand, lower contextual levels are part of and influenced by more distant levels. For example, managerial support is shaped and influenced by organisational support, then organisational support is influenced by cultural support (31). This basic concept is not consistent with the results of this study, where the cultural support dimension outperforms the managerial support dimension. This result may be due to the status of Unhas Hospital as a teaching hospital, which has human resources from various professions, both medical and non-medical, who also act as lecturers, students and other educational practitioners. This certainly provides an opportunity to create a more supportive climate and working environment for staff empowerment and development as well as professional and innovative working practices. From the results of this study, it is known that the overall IWB perceived by the respondents is dominated in the high level, namely 89.8%. This findings indicates that in general, from the employees' perspective, the work behaviour embodied in the work practices at Unhas Hospital has led to the implementation of innovation. The results of this study are in line with research conducted by Ismail and Mohamed (2022) and Salah et al (2021) (32,33). Innovative practices tend to be evaluated positively because they aim to improve existing processes and practices (34). This will ultimately have the potential to provide benefits to both personal and organisational performance (35). Conversely, this finding is different from the research conducted by Saleem et al (2015) and Diab and Nagar (2019) which shows the perception of IWB which is at a medium to low level (10,36). The results of this study can be explained that the concept of IWB is a relatively new and unfamiliar concept, so it will weaken the organisation's ability to implement strategies to achieve its goals (36,37).

In this study, the Opinion Leadership dimension which have the largest percentage of high level of IWB (95,8%), so it demonstrated that dimension descriptively outperformed the other three IWB dimensions (Openness to Experience (93.2%), Risk-Taking (89.9%), Resistance to Change (86.4%). This findings are in line with Diab and Nagar's (2020) study (36), but in contrast show different results with the study by Shalby and Al-Tubaity (2022) (38). The fact that Opinion Leadership is the most important element of IWB from the employees' perspective can be explained by the need for leaders to be able to create a work atmosphere in which employees feel psychologically safe to face the challenges of new experiences or ideas (Openness to

Experience) and to take inter-individual risks (Risk-Taking) (39). Opinion leadership is defined as the degree to which a person is able to influence others to make changes in the desired way. In the context of change management, opinion leaders can reduce negative perceptions of change and manage resistance to change, helping organisations to achieve innovation goals (Ilona, 2021). From the results of the multivariate analysis (presented in Table 7 and Figure 2), it is known that statistically in this study, all the relationship paths between the variables studied (direct effects and indirect effects) show significant positive relationships. Based on the results of research conducted to assess the effect of OC variables on IWB, a p-value of 0.026 <0.05 was obtained, with an estimate value of 0.178, which indicates that there is a significant positive effect of OC on IWB, where the stronger the OC perceived by respondents, the more IWB owned by respondents will increase. The results of this study support the results of other empirical research which states that OC is an antecedent factor that has a positive and significant influence on IWB, both in the field of hospital and health service sector ((40–42)), as well as in other organisational fields (43–45) .

According to the literature on CVF grounded theory, Adhocracy culture is the type of OC that best supports employees' IWB. Through its basic values and assumptions, Adhocracy culture is able to encourage employees to be creative, and take risks. In addition, Adhocracy culture also encourages employees to identify new market segments and unique customer needs and exploit opportunities outside the business scope. This will ultimately facilitate innovation and achieve competitive advantage of the organisation (16). Based on this study, the overall Adhocracy culture ranks third according to respondent perceptions. While in terms of per dimension, Adhocracy culture ranks lowest for the Management of Employee dimension. This indicates that from the perspective of employees, the organisational culture at Unhas Hospital has not fully supported the direction of increasing IWB, especially in the aspect of human resource management. In this study, there is a dominance of the Clan Culture type, where cultural characteristics that support innovation include empowering employees to develop human resource capacity, increasing learning ability through education and training oriented towards the value of flexibility so that it is more tolerant of failure as a consequence of learning (46). However, Due to its strong internal orientation, Clan Culture tends to limit information gathering, ignoring environmental, social issues, and external trends and developments. Those characteristics of Clan Culture that are predicted to hinder IWB (47). Taken together with the results of the study, this suggests that there are aspects of the OC that simultaneously support and inhibit IWB among employees at Unhas Hospital.

Instead of comparing the statistical relationship of each of the four typologies of OC, the researcher refers used the multidimensional organisational culture paradigm (SMC vs. WMC) To explain the direct relationship of the two research variables (OC → IWB). This is because the researcher wants to analyze the OC variable as a whole construction of independent variable A strong OC shows a high level of integration and conformity of values and beliefs in the organisation as a whole, which is able to realize problem solving through internal organisational integration and external organisational adaptation effectively (48). When OC is strongly perceived by members of the organisation, it enhances employee performance through a positive impact on employee behaviour and decision-making patterns. In the context of innovation, a strong culture is able to encourage employee creativity and productivity, increase

autonomy and risk-taking propensity, support the exchange of ideas and various resources for innovation (49). Based on the results of research conducted to assess the effect of POS variables on IWB, a p-value of 0.006 <0.05 was obtained, with an estimate value of 0.228, which indicates that there is a significant positive effect of POS on IWB, where the stronger organizational support perceived by respondents, the more IWB owned by respondents will increase. The results of this study support the results of other empirical research which states that POS is an antecedent factor that has a positive and significant influence on IWB, both in the field of hospital and health service sector (24,50–55), as well as in other organisational fields (56–60).

POS can create a conducive and supportive environment and improve practices through proactive management that allows organisational members to interact and exchange resources at the individual level, which ultimately encourages IWB (Munoz et al., 2023). The managerial support dimension describes employees' perceptions that managers are supportive of new ideas and innovation (Lukes and Stephan, 2017). In addition to their role in providing resources and work support, managers are also responsible for providing exemplary behaviour to their subordinates. Thus, any managerial behaviour that encourages and supports innovation will contribute to building perceptions of innovation support among employees as a whole ((61) In relation to the results of this study, the level of the managerial support dimension, which has a high level, implicitly indicates that employees at Unhas Hospital have received support from their superiors in implementing IWB practices at Unhas Hospital. This managerial support is represented by statement items that describe managerial conditions that are pro-innovation, such as support, motivation and appreciation in the generation and implementation of new ideas, as well as a tolerant attitude towards mistakes and failures in the implementation of these new ideas (31).

The organisational support dimension describes employees' perceptions of top management support, including implementing new ideas, providing resources, and offering rewards to encourage innovative work behaviours (31). Employees' perceptions of how they are respected and valued by the organisation, such as receiving promotions, salaries, approval of ideas and development, and free access to information, as well as other forms of resources that support their work performance, will lead to a strong sense of obligation to do so, which will result in positive employee attitudes and behaviours towards achieving organisational goals, one of which is IWB (Park and Kim, 2022). A mission statement that clearly supports innovation is a key factor in predicting the success of the entire innovation process stage (62). One of the missions of Unhas Hospital (3rd mission) is to be a pioneer in healthcare innovation through excellent research and continuous improvement of service quality. The commitment and clarity of the innovation goals at Unhas Hospital are also reflected in the goals, strategic objectives and basic policies as stated in the Unhas Hospital Strategic Plan 2020-2024. And also, one of the resources that embodies organisational support for innovation is the existence of a specific work unit related to innovation in Unhas Hospital, namely the Business Development and Innovation Section, which is tasked with governance related to development strategies to increase innovation in Unhas Hospital.

The next dimension is Cultural Support which describes employee perceptions that the culture that develops in the organisation supports employee innovative behaviour. Organisational culture can facilitate IWB by encouraging organisational members to accept change and increase their commitment to innovation as part of the shared

values of the organisation (63) Normatively, the basic values and cultural norms adopted by Unhas Hospital have supported the implementation of IWB. One of the Basic Values adopted by Unhas Hospital is Innovation, which means that the Hospital is able to create new systems or creativity in improving the quality of education, research, and health care. Departing from the basic value order that is oriented towards innovation in Unhas Hospital is then positively perceived by Unhas Hospital employees as Cultural Support towards innovation practices. In turn, the Cultural Support will influence how the organisation provides various resources through Organizational Support for the implementation of new ideas and encourage innovation. All forms of Organizational Support will ultimately be a key factor in how supervisors support the implementation of innovation (Managerial Support) at the employee level which is manifested as IWB.

Based on the results of research conducted to assess the effect of OC variables on POS, a p-value of 0.000 <0.05 was obtained, with an estimate value of 0. 501, which indicates that there is a significant positive effect of OC on POS, where the stronger organizational culture perceived by respondents, the more POS owned by respondents will increase. The results of this study support the results of other empirical research which states that OC is an antecedent factor that has a positive and significant influence on POS, both in the field of hospital and health service sector (40,64,65) as well as in other organisational fields (66–68). Individuals who are able to adapt to the organisational culture and accept the rules and regulations of the exchange, will be able to obtain the resources needed to complete their routine work efficiently and employees recognise this as organisational support in the workplace (40) In the scope of education in hospitals, easy and targeted access to training and education, regular appraisals and evaluations related to basic tasks, and providing feedback on incidents and/or reports related to services, are some of the activities that are considered capable of developing a supportive culture that values and supports employees, which in turn will increase the perception of organisational support to its employees (69)

A quantitative study by Ballaro & Washington (2016) suggests that the type of clan culture has the strongest positive correlation with POS. The results of this study can be attributed to the results of this study where the dominance of the type of clan culture (Clan Culture) is obtained in the OC variable and there is a significant positive correlation from the OC variable to the POS variable. Theoretically, Clan Culture is characterised by being empowerment-oriented and caring for employees through the development of a humanistic work environment, as well as facilitating employee participation, commitment, and loyalty. In addition, Clan Culture is also characterised by internal climate characteristics that are able to provide a friendly workplace for employees like a big family (16). Contextually, these Clan Culture characteristics are in line with the theoretical concept of POS which describes the extent to which organisational values meet their expectations (70). The results of this study indicate that most of the values of the OC variable are in the high level. So it can be concluded that proportionally, the organisational culture perceived by employees at Hasanuddin University Hospital is classified as SMC. According to the literature, a strong organisational culture refers to values and beliefs that are strongly and widely shared within the organization. In other words, a strong culture manifests in a condition where every member of the organization agrees and follows a pattern of behaviour that has been mutually agreed upon, and proven to be beneficial to the organization as a whole.

In the context of healthcare, a strong organisational culture can provide positive outcomes for employee behaviour and perceptions, including increased work contribution and collaboration, employee motivation and trust, and support for the organisation (71).

Based on the results of research conducted to assess the effect of OC variables on IWB which mediated by POS, a p-value of 0.013 <0.05 was obtained, with an estimate value of 0.114, which indicates that there is a significant positive effect of OC on IWB which mediated by POS , where the stronger organizational culture perceived by respondents, the more IWB will increase through organisational support perceived by respondents. The results of this study support the results of other empirical research by Ekmekcioglu and Oner (2023) which states that there was positive relationship from OC to IWB mediated by POS (65). In an organisational culture that encourages innovation, employees feel that their creative ideas and efforts are valued and that the organisation cares about them, thus increasing IWB (Ekmekcioglu and Oner, 2023). In the hospital sector, an organisational culture that values and supports innovation can encourage innovative work behaviour, which in turn has the potential to drive change and improve the quality of health services. The implementation of an organisational culture that supports innovation is able to provide the necessary resources for hospitals to continue to innovate (Asnany et al., 2023). Thus, the core values and basic beliefs of the organisation that prioritise innovation are able to increase POS for innovation practices. To explain the indirect relationship of the three research variables (OC → POS → IWB), researchers used the multidimensional organisational culture paradigm. In the context of CVF, a strong multidimensional cultural profile is considered more capable of maintaining a balance between competing values, without compromising the effectiveness of each of the other organisational culture types (Lee, Gowen III and Mcfadden, 2018).

Several factors may explain the positive relationship of the three variables. First, Unhas Hospital, which has the status of a teaching hospital, is certainly supported by potential human resources who have various specialisation backgrounds, educational qualifications, and work experience that are able to contribute in building a strong organisational culture, creating high organisational support, and producing superior innovation practices through employee innovative work behaviour. Secondly, organisational commitment to innovation is clearly stated in the strategic identity of Unhas Hospital (mission, core values, goals, strategic objectives and policies), where clarity of purpose in supporting innovation is a key factor influencing employee innovative work behaviour. Strong and clear recognition that Unhas Hospital is always committed and promotes superior innovation practices will in turn create a supportive work environment that is effectively able to empower various resources and will be perceived by employees as a form of organisational support to implement IWB. Furthermore, the direct effect of OC → IWB outweighs the indirect effect of OC → POS → IWB, indicating that the strongly perceived OC (SMC) as an intact construct becomes an antecedent factor that has more impact on increasing IWB than the positive mediating effect of the POS variable. In this study, the relationship can be explained through the basic theory of POS which is theoretically in line with the characteristics of Clan Culture compared to the other three types of organisational culture (30). While in this study, the approach used in assessing the relationship of the independent variable (OC) to the dependent variable (IWB) is not based on each type of the four typologies of OC. Clan culture is theoretically able to partially drive IWB,

but on the other hand, clan culture has the strongest positive correlation with POS than the other three types of OC, while the combination of the four typologies of OC does not predict POS better than clan culture (64)Therefore, it is natural that the mediating role of POS for the OC to IWB relationship in this study is not superior to the direct impact of OC on IWB. In this study, both OC and POS variables were independently significantly positively correlated with IWB, as was the impact of OC variables on IWB mediated by POS. These findings recommend the need for extra efforts to maximise the positive impact of various factors that play a role in increasing IWB, especially for Unhas Hospital employees. The results of this study also provide input for the management of Unhas Hospital, especially in the field of HR management to foster innovative work behaviour as a manifestation of employees' positive work attitudes through the development of a strong organisational culture and improving aspects of organisational support, especially for innovation practices in the field of hospitality.

LIMITATIONS OF THE STUDY

1. The assessment of Organizational Culture using the OCAI does not assess the OC that is the expectation desired by respondents.
2. The proportion of samples for medical personnel and health workers dominates compared to samples from non-health workers and management. This may affect the robustness of the Organizational Culture concept which can be strongly influenced by the diversity of sub-cultures in each work unit.
3. The quantitative method with a cross-sectional design used in this study cannot explain why the relationship between these variables exists or does not exist. Thus, it is necessary to conduct further research using qualitative methods that are able to infer the reasons that explain the relationship in more depth.

CONCLUSIONS

In conclusion, this study has shown the dominance of the Clan culture type from the perspective of employees at Hasanuddin University Hospital. According to descriptive analysis, it is known that the three research variables (OC, POS, and IWB) mostly show scores with high levels. According to statistical analysis, it is known that the four relationship paths between research variables, namely the effect of OC on IWB, the effect of POS on IWB, the effect of OC on POS, and the effect of OC on IWB mediated by POS, overall show a positive and significant relationship. This findings implies that pro-innovation organisational culture and organisational support will be able to maximise employees' innovation capacity. So it is important for the hospital management to adapt innovation into educational, informational, social and procedural contexts as an effort to "normalise" innovation into routine practice, thereby increasing employee innovative work behaviour, and ultimately the overall innovation capacity of the organisation. This can be achieved by developing a pro-innovation and supportive organisational culture through strengthening aspects of the cultural dimensions based on the CVF, as well as facilitating organisational support through the allocation of various strategic resources for the implementation of new ideas and encouragement of innovation in employees.

Conflict Of Interest

There is no conflict of interest

Authorshıp Contrıbutıons

The authors participated in generating the idea, designing the project, collecting and interpreting the data, analysing the results and drafting the manuscript of this research paper.

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References

1) Saif NI. Types of Organizational Culture in Private Jordanian Hospitals. Int Rev Manag Mark. 2017;7(1):53–8.

2) Hashim KL. Enhancing Innovative Work Behaviour of Malaysian Public Sector Employees. Malaysian J Soc Sci Humanit. 2021;6(2):253–65.

3) Carlucci D, Mura M, Schiuma G. Fostering Employees' Innovative Work Behaviour in Healthcare Organisations. Int J Innov Manag. 2019;2050014.

4) Kheng YK, Mahmood R, Beris SJH. A Conceptual Review of Innovative Work Behavior in Knowledge Intensive Business Services among Knowledge Workers in Malaysia Yeoh Khar. Int J Business, Humanit Technol. 2013;3(2):91–9.

5) Abstein A, Spieth P. Exploring HRM Meta-Features that Foster Employees ' Innovative Work Behaviour in Times of Increasing Work – Life Conflict. Creat Innov Manag. 2014;23(2):211–25.

6) Arsawan IWE, Kariati NM, Shchokina Y, Prayustika PA, Rustiarini NW, Koval V. Invigorating Employee's Innovative Work Behavior : Exploring the Sequential Mediating Role of Organizational Commitment and Knowledge Sharing. Bus Theory Pract. 2022;23(1):117–30.

7) Koellinger P. The relationship between technology , innovation , and firm performance — Empirical evidence from e-business in Europe. Res Policy. 2008;37:1317–28.

8) Siddiqi M, Zahoor A. Impact of innovative work behavior on financial performance: The intermediation of customer satisfaction. Int J Adv Soc Sci. 2015;3(4):159–65.

9) Ausat AMA, Widayani A, Rachmawati I, Latifah N, Suherlan S. The Effect of Intellectual Capital and Innovative Work Behavior on Business Performance. J Econ Business, Account Ventur. 2022;24(3):363–78.

10) Saleem M, Tufail MW, Atta A, Ashgar S. Innovative workplace behavior, motivation level, and perceived stress among healthcare employees. Pakistan J Commer Soc Sci. 2015;9(2):438–46.

11) Yonla MN, Johnmark RD, Liman JA, Tatari A, Polytechnic A, Gani JB, et al. The Role of Innovative Behaviour in The Relationship Between Psychological Capital and Self-Employment Among Graduates in Nigeria. Eur J Bus Innov Res. 2019;7(2):57–81.

12) Acar AZ, Acar P. The effects of organizational culture and innovativeness on business performance in healthcare industry. Procedia - Soc Behav Sci. 2012;58:683–92.

13) Barbosa E. Organizational culture oriented for innovation : Influencing variables. Małopolska Sch Econ Tarnów Res Pap Collect. 2014;25(2):37–45.

14) Setyawasih R, Hamidah, Buchdadi AD. Organizational Culture and Innovative Work Behavior in Manufacturing Company : The Role of Employee Engagement as a Mediator. Int J Res Rev. 2022;9(1):360–71.

15) Azeem M, Ahmed M, Haider S, Sajjad M. Technology in Society Expanding competitive advantage through organizational culture , knowledge sharing and organizational innovation. Technol Soc [Internet]. 2021;66(June):101635. Available from: https://doi.org/10.1016/j.techsoc.2021.101635

16) Cameron KS, Quinn RE. Diagnosing and Changing Organizational Culture : Based on the Competing Values Framework. Revised Ed. San Francisco: The Jossey-Bass; 1999.

17) Naranjo-valencia JC, Jiménez-jiménez D, Sanz-valle R. Studying the links between organizational culture , innovation , and performance in Spanish companies &. Rev Latinoam Psicol. 2016;48:30–41.

18) Lukoto K, Chan K. The Perception of Innovative Organisational Culture and Its Influence on Employee Innovative Work Behaviour. In: Proceedings of PICMET '16: Technology Management for Social Innovation The. Pretoria; 2016. p. 972–7.

19) Eisenberger R, Huntington R, Hutchison S, Sowa D. Perceived Organizational Support. J Appl Psychol [Internet]. 1986;71(3):500–7. Available from: https://doi.org/10.1037/0021-9010.71.3.500

20) Agarwal UA. Linking justice , trust and innovative work behaviour to work engagement. Pers Rev. 2014;43(1):41–73.

21) Kurtessis JN, Eisenberger R, Ford MT, Buffardi LC, Stewart KA, Adis CS. Perceived Organizational Support : A Meta-Analytic Evaluation of Organizational Support Theory. J Manage. 2015;20(10):1–31.

22) Arokiasamy ARA, Xuan QLH, Nguyen K-L, Nguyen HTN. A Study on Inclusive Leadership , Innovative Behavior , and Perceived Organizational Support in the Service Sector in Malaysia : A Mediator Approach. Hong Kong J Soc Sci. 2022;58:783–94.

23) Neves P, Eisenberger R. Perceived organizational support and risk taking. J Manag Psychol. 2014;29(2):187–205.

24) Munoz RM, Andrade SM, Pena I, Donate MJ. Wellness programs in times of COVID-19 , perceived organizational support and affective commitment : effects on employee innovative behavior. Eur J Innov Manag. 2023;26(7):23–44.

25) Beek APA Van, Gerritsen DL. International Journal of Nursing Studies The relationship between organizational culture of nursing staff and quality of care for residents with dementia : Questionnaire surveys and systematic observations in nursing homes. Int J Nurs Stud [Internet]. 2010;47(10):1274–82. Available from: http://dx.doi.org/10.1016/j.ijnurstu.2010.02.010

26) Emerson D. Organizational Culture , Job Satisfaction and Turnover Intentions : The Mediating Role of Perceived Organizational Support. Virginia Commonwealth University; 2013.

27) Lee JY, Gowen III CR, Mcfadden KL. An empirical study of U . S . hospital quality : Readmission rates , organizational culture , patient satisfaction , and Facebook ratings. Qual Manag J [Internet]. 2018;25(4):158–70. Available from: https://doi.org/10.1080/10686967.2018.1515523

28) Ovseiko P V., Buchan AM. Organizational culture in an academic health center: An exploratory study using a competing values framework. Acad Med. 2012;87(6):709–18.

29) Wang M, Wang L, Lu C. Nurses' sense of organizational support, Self-esteem and perceived professional benefits: A mediating model. Nurs Open. 2023;10(4):2098–106.

30) Labrague LJ, McEnroe Petitte DM, Leocadio MC, Van Bogaert P, Tsaras K. Perceptions of organizational support and its impact on nurses' job outcomes. Nurs Forum. 2018;53(3):339–47.

31) Lukes M, Stephan U. Measuring employee innovation A review of existing scales and the innovation support inventories across cultures. Int J Entrep Behav Res. 2017;23(1):136–58.

32) Ismail ZI, Mohamed WM. Organizational Climate in Relation to Head Nurses ' Innovative Work Behaviors : Mediating Role of Organizational Innovativeness. Zagazig Nursin. 2022;18(2):146–61.

33) Salah S, Shama A, Ahmad GM. The Relationship between Nurse ' s Innovative Work Behavior and Their Job Satisfaction. 2021;8(1):596–606.

34) Kumi S. Organizational Culture, Workplace Motivation and Innovation Work Behavior in the Healthcare Service Delivery: A Systematic Review. University of Algarve; 2023.

35) Slatten T, Mutonyi BR, Lien G. The impact of individual creativity , psychological capital , and leadership autonomy support on hospital employees ' innovative behaviour. BMC Health Serv Res [Internet]. 2020;20(1096):1–17. Available from: https://doi.org/10.1186/s12913-020-05954-4

36) Diab GM, Nagar MA El. Work Engagement of Staff Nurses and its Relation to Psychological Work Stress. 2019;8(2):72–84.

37) Alheet AF, Adwan A Al, Areiqat AY, Saleh A. The effect of leadership styles on employees' innovative work behavior Ahmad. Manag Sci Lett. 2021;11:239–46.

38) Shalby AYM, AlThubaity DD. Retracted: Innovate a Standard for the Future Model of Nursing Care at Medical-Surgical Units in Najran University. Biomed Res Int. 2022;1–7.

39) Javed B, Khan AK, Arjoon S, Mashkoor M, Haque A ul. Openness to Experience, Ethical Leadership, and Innovative Work Behavior. J Creat Behav. 2020;54(1):211–23.

40) Nazir S, Qun W, Hui L, Shafi A. Influence of Social Exchange Relationships on Affective Commitment and Innovative Behavior : Role of Perceived Organizational Support. Sustainability. 2018;10(4418).

41) Mutonyi BR, Slåtten T, Lien G. Fostering innovative behavior in health organizations : a PLS-SEM analysis of Norwegian hospital employees. BMC Health Serv Res. 2021;21(470):1–15.

42) Prameswari M, Asbari M, Purwanto A, Ong F, Kusumaningsih SW, Mustikasiwi A, et al. The Impacts of Leadership and Organizational Culture on Performance in Indonesian Public Health : The Mediating Effects of Innovative Work Behavior. Int J Control Autom. 2020;13(2):216–27.

43) Stoffers J, Neessen P, Dorp P Van. Organizational Culture and Innovative Work Behavior : A Case Study of a Manufacturer of Packaging Machines. Am J Ind Bus Manag. 2015;5(Mei):198–207.

44) Eskiler E, Ekici S, Soyer F, Sari I. The Relationship between Organizational Culture and Innovative Work Behavior for Sports Services in Tourism Enterprises. Phys Cult Sport Stud Res I. 2016;LXIX:53–64.

45) Marzuki MA, Tunas B, Mukhtadi. The Mediating Effect Of Achievement Motivation On The Relationship Between Organizational Culture And Innovative Behavior In Public Sectorsuryosukmono. Int J Adv Res. 2019;7(6):1101–10.

46) Büschgens T, Bausch A, Balkin DB. Organizational culture and innovation: A meta-analytic review. J Prod Innov Manag. 2013;30(4):763–81.

47) Globocnik D, Rauter R, Baumgartner RJ. Synergy or conflict? the relationships among organisational culture, sustainability-related innovation performance, and economic innovation performance. Int J Innov Manag. 2020;24(1).

48) Kamel FF, Aref MAE. Staff Nurses Perception Toward Organizational Culture and Its Relation to Innovative Work Behavior at Critical Care Units. Am J Nurs Sci. 2017;6(3):251.

49) Thokozani SB. "Strong vs. weak organizational culture: Assessing the impact on employee motivation", Arabian Journal of Business and Management Review, Vol. 7, No. 1, pp. 2-5. 2017;7(1):1–5.

50) Emiralioğlu R, Sonmez B. The Relationship of Nursing Work Environment and Innovation Support with Nurses' Innovative Behaviors and Outputs. J Nurs Manag. 2021;29(7):2132–41.

51) Xerri M. Workplace relationships and the innovative behaviour of nursing employees : A social. Asia Pacific J Hum Resour [Internet]. 2012;51(1):103–23. Available from: https://doi.org/10.1111/j.1744-7941.2012.00031.x

52) Brunetto Y, Xerri M, Farr-wharton B. Comparing the role of personal and organisational support on the innovative behaviour of frontline healthcare workers in Australia and the United States. Aust J Public Adm. 2020;(January):1–19.

53) Akhtar MW, Syed F, Husnain M, Naseer S. Person-Organization Fit and Innovative Work Behavior : The Mediating Role of Perceived Organizational Support , Affective Commitment and Trust. Pakistan J Commer Soc Sci. 2019;13(2):311–33.

54) Cunha AM, Marques CS, Santos G. Organizational and Personal Factors That Boost Innovation : The Case of Nurses during COVID-19 Pandemic Based on Job Demands-Resources Model. Sustainability [Internet]. 2022;14(458). Available from: https://doi.org/10.3390/su14010458

55) Zaman Q, Qureshi FA, Butt M. Mediating Effect of Perceived Organizational Support on the Relationship between Leader-Member Exchange and the Innovation Work Behavior of Nursing Employees : A Social Exchange Perspective. Bus Innov Entrep J. 2020;2(1):68–77.

56) Afsar B, Badir Y. Workplace spirituality , perceived organizational support and innovative work behavior : The mediating effects of person-organization fit Journal of Workplace Learning Article information : J Work Learn. 2017;29(2):95–109.

57) Yildiz B, Uzun S, Semih S, Kun C. Drivers of innovative behaviors : The moderator roles of perceived organizational support and psychological empowerment. Int J Organ Leadersh. 2017;6:341–60.

58) Dogru C. The Relationship between Perceived Support and Innovative Behavior : Analyzing the Mediating Role of Work Engagement. J Bus Res Turk. 2018;10(2):384–402.

59) Aslan H. Mediating Role of Perceived Organizational Support in Inclusive Leadership's Effect on Innovative Work Behavior. Bus Manag Stud An Int J [Internet]. 2019;7(5):2945–63. Available from: http://dx.doi.org/10.15295/bmij.v7i5.1299

60) Lafta RM, Dahi KJ. The Role of Perceived Organizational Support in the Innovative Behavior of Employees : An Analytical Survey of The Opinions of A Sample of Civil University. World Bull Manag Law. 2022;5(11):73–82.

61) Ibrahim G. The relationship between perceived innovation support and its outputs in Egyptian five - star hotels : the mediation role of employee innovative work behavior. 2022;6(June):1–22.

62) West MA, Borrill CS, Dawson JF, Brodbeck F, Shapiro DA, Haward B. Leadership clarity and team innovation in health care. Leadersh Q. 2003;14(4–5):393–410.

63) Hwang K, Choi M. Effects of innovation-supportive culture and organizational citizenship behavior on e-government information system security stemming from mimetic isomorphism. Gov Inf Q [Internet]. 2017;34(2):183–98. Available from: http://dx.doi.org/10.1016/j.giq.2017.02.001

64) Ballaro JM, Washington ER. The Impact of Organizational Culture and Perceived Organizational Support on Successful Use of Electronic Healthcare Record (EHR). Organ Dev J. 2016;11–30.

65) Ekmekcioglu EB, Oner K. Servant leadership , innovative work behavior and innovative organizational culture : the mediating role of perceived organizational support. Eur J Manag Bus Econ [Internet]. 2023; Available from: https://doi.org/10.1108/EJMBE-08-2022-0251

66) Berson Y, Oreg S, Dvir T. CEO values , organizational culture and firm outcomes Linking CEO Values to Organizational Characteristics. J Organ Behav. 2008;29:615–33.

67) Santos JV, Gonçalves G. Journal of Work and Organizational Psychology Support in Portuguese Higher Education Institutions. J Work Organ Psychol [Internet]. 2018;34(1):38–45. Available from: https://doi.org/10.5093/jwop2018a5

68) Salvador M, Moreira A, Pitacho L. Perceived Organizational Culture and Turnover Intentions : The Serial Mediating Effect of Perceived Organizational Support and Job Insecurity. Soc Sci [Internet]. 2022;11(363). Available from: https://doi.org/10.3390/socsci 11080363

69) Beardsmore E, McSherry R. Healthcare workers' perceptions of organisational culture and the impact on the delivery of compassionate quality care. J Res Nurs. 2017;22(1–2):42–56.

70) Dawley DD, Andrews MC, Bucklew NS. Mentoring , supervisor support , and perceived organizational support : what matters most ? Leadersh Organ Dev J. 2007;29(3):235–47.

71) Harhash D, Ahmed M, El-Shereif H. Healthcare Organizational Culture: A Concept Analysis. Menoufia Nurs J. 2020;5(1):55–63.