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Quality of Work Life and Employee Engagement as Determinants of Healthcare Worker Productivity

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ABSTRACT

This study explores the relationship between quality of work life, employee engagement, and their impact on the productivity of healthcare professionals. The healthcare industry plays a vital role in society; therefore, understanding the factors that contribute to the productivity of healthcare workers is of paramount importance. This research employs a quantitative descriptive design with a sample of 140 healthcare professionals at Bayu Asih Regional General Hospital, Purwakarta. Data were collected through questionnaires and analyzed using regression analysis with the F-test. The findings reveal that both Quality of Work Life and Employee Engagement fall into the high category, indicating that healthcare workers demonstrate significant involvement in the performance of their duties. Furthermore, the productivity of healthcare professionals is also categorized as high, as reflected in their ability to complete tasks optimally. Regression analysis results show that Quality of Work Life and Employee Engagement exert a statistically significant influence on work productivity at Bayu Asih Regional General Hospital.

Keywords: Employee engagement, productivity, quality of work life, health worker.

Introduction

Healthcare systems worldwide face significant challenges in maintaining high levels of productivity while simultaneously safeguarding the well-being of their workforce. Among the key determinants of healthcare performance are the quality of work life (QWL) and employee engagement, both of which have emerged as critical factors influencing healthcare professionals' effectiveness. Quality of Work Life (QWL) refers to the extent to which employees' needs, expectations, and aspirations are fulfilled within their working environment (Bhende et al., 2020). It encompasses multiple dimensions, including job security, work—life balance, organizational climate, and opportunities for career advancement (Cascio, 2016). A growing body of research demonstrates that a positive QWL fosters greater job satisfaction, enhances work quality, reduces turnover intentions, and contributes to the overall well-being of healthcare workers (Agustina et al., 2024; Arief et al., 2021; Ko, 2021; Sari et al., 2019). In addition, high levels of employee engagement, which is characterized by dedication, vigor, and absorption in work, have been consistently associated with improved performance outcomes in healthcare organizations. Taken together, these factors highlight the importance of organizational strategies that not only optimize healthcare delivery but also prioritize the holistic welfare of healthcare professionals.

Quality of Work Life (QWL) has become an increasingly important organizational factor in healthcare facilities (Astuti & Soliha, 2021). According to Aruldoss et al. (2021) QWL is defined as the extent to which healthcare professionals feel satisfied with their personal and professional needs at work through active participation in the workplace to achieve organizational goals. Previous studies have found that QWL significantly influences employee commitment and productivity within healthcare organizations (Agustina et al., 2024; Astuti & Soliha, 2021; Fakri et al., 2020; Ibrahim Alzamel et al., 2020; Pio & Lengkong, 2020; Sari et al., 2019). Cascio (2016) identifies nine key components of QWL, namely compensation, career development, workplace safety, communication, employee involvement, problem-solving capacity, availability of facilities, sense of pride in the institution, and job security. Achieving an optimal level of QWL is expected to foster greater work productivity (Bhende et al., 2020). In healthcare settings, employee productivity serves as a critical metric for evaluating organizational performance and implementing continuous improvement strategies. Conversely, low levels of productivity may reduce employee satisfaction, which in turn can negatively affect service quality and decrease patient visit frequency.

Productivity is widely recognized as a fundamental indicator of organizational performance, encompassing dimensions of both efficiency and effectiveness. At the individual and group level, productivity reflects not only the achievement of work outcomes but also the intrinsic drive of employees to develop themselves and enhance their professional competencies (Parasuraman, 2002). In healthcare settings, where service delivery is highly dependent on human capital, productivity becomes a crucial determinant of institutional success. From a quantitative standpoint, productivity is often conceptualized as the ratio between outputs, such as the number of patients served or the total treatment hours provided per day, and inputs, which may include wages, salaries, and operational expenditures (Robbins & Coulter, 2012). This dual perspective highlights that productivity is not solely about

achieving more with fewer resources but also about ensuring quality, continuity, and sustainability of services. The literature provides robust evidence linking Quality of Work Life (QWL) to productivity outcomes in healthcare organizations.

Perangin-Angin et al. (2016) found that QWL significantly contributes to productivity by influencing employees' efficiency, effectiveness, and the overall quality of healthcare services. When healthcare professionals perceive that their working conditions meet their needs, through fair compensation, safe environments, career growth opportunities, and organizational support, they are more likely to be motivated, engaged, and committed to delivering high-quality patient care. Conversely, poor QWL conditions may lead to reduced motivation, higher turnover intentions, and declining performance, ultimately jeopardizing patient satisfaction and institutional reputation. In this sense, productivity in healthcare is not merely a numerical outcome but an integrative measure shaped by the interplay of organizational support, employee well-being, and professional engagement. This perspective reinforces the necessity for hospital management to adopt a holistic approach to productivity, one that emphasizes both operational efficiency and the creation of a supportive work environment that fosters long-term sustainability.

In addition to QWL, employee engagement has been widely recognized as a critical driver in achieving organizational objectives. Employees with higher levels of engagement tend to demonstrate discretionary effort, going beyond formal job requirements, which in turn leads to improved productivity and performance outcomes. Prior research indicates that meaningful work, supportive leadership, and opportunities for skill development are among the most important factors that foster higher levels of employee engagement (Lee et al., 2020; Wiyanto et al., 2023; Zondo, 2020). Within the healthcare sector, the importance of engagement is particularly pronounced, as service delivery depends heavily on the motivation, commitment, and collaborative spirit of healthcare professionals. When employees experience a supportive Quality of Work Life (QWL) environment and demonstrate active engagement, they are more likely to develop a strong sense of commitment to patient care systems. This commitment not only ensures adherence to service standards but also stimulates higher levels of creativity and innovation in problem-solving and clinical practices (Pawar, 2017). Engaged healthcare workers are generally more efficient, more resilient in coping with job demands, and more proactive in contributing to organizational improvement initiatives. Thus, employee engagement, reinforced by a favorable QWL, creates a synergistic effect that enhances both individual and organizational performance. In the context of healthcare institutions, this dynamic becomes essential for achieving sustainable service excellence, improving patient outcomes, and maintaining institutional competitiveness.

There are five commonly implemented strategies to foster a positive Quality of Work Life (QWL) and enhance optimal employee engagement. First, creating a safe and comfortable work environment significantly contributes to the satisfaction and engagement of healthcare professionals, as it ensures both physical security and psychological well-being. Second, implementing systems of recognition and rewards for healthcare workers' contributions strengthens motivation and nurtures a sense of belonging within the organization. Third, providing opportunities for skills enhancement and career development promotes continuous professional growth and reinforces employees' engagement with their work. Fourth, establishing regular communication and feedback mechanisms allows employees to feel valued and included in organizational processes, thereby fostering trust and collaboration. Finally, adopting policies that promote work—life balance helps mitigate burnout, sustain well-being, and ultimately improve overall QWL (Ko, 2021; Ogbuabor & Okoronkwo, 2019). Collectively, these strategies create an organizational climate that not only supports healthcare professionals' needs but also enhances their capacity to contribute meaningfully to patient care and organizational performance. By aligning these approaches with institutional goals, healthcare facilities can cultivate a workforce that is both highly engaged and consistently productive, which is essential for sustaining quality healthcare services.

The phenomenon of the influence of Quality of Work Life (QWL) and employee engagement on productivity is also evident at Bayu Asih Regional General Hospital, which has been providing healthcare services to the community of Purwakarta Regency and its surrounding areas since 1938. Historically, Bayu Asih was the only hospital operating in the region, serving as the primary healthcare provider without any local competitors. However, the emergence of several private hospitals in Purwakarta has reshaped the healthcare landscape, establishing new benchmarks and patient-centered standards of care. This development has intensified competition in service quality among healthcare providers in the region, compelling public hospitals such as Bayu Asih to adapt and continuously improve. Preliminary research data indicate that Bayu Asih Regional General Hospital has experienced an average annual decline of approximately 7% in patient visits during the period 2018–2020 (82% in 2018, 75% in 2019, and 68% in 2020). One key indication of this downward trend is the perceived decline in service quality and the adequacy of facilities provided to patients. These challenges underscore the critical importance of enhancing QWL and fostering stronger employee engagement, as both factors are closely associated with healthcare worker productivity and, ultimately, with the hospital's ability to deliver patient-centered, high-quality services in an increasingly competitive healthcare environment.

In addition to the decline in patient visits, Bayu Asih Regional General Hospital has also experienced a reduction in key inpatient performance indicators, including Bed Occupancy Rate (BOR), Length of Stay (LoS), and fluctuations in Turn Over Interval (TOI). Based on the calculation of inpatient service indicators between 2018 and 2020, the hospital recorded a BOR of 26.6%, an average LoS of 2.78 days, and a TOI of 7.65 days in 2018. In 2019, these figures dropped to a BOR of 16%, an LoS of 2.5 days, and a TOI of 13.15 days. By 2020, the downward trend continued, with BOR reaching only 13.44%, LoS decreasing to 2.1 days, and TOI recorded at 11.46 days.

These indicators are crucial measures of hospital performance, as BOR reflects the extent of hospital bed utilization, LoS indicates the efficiency and effectiveness of patient care, and TOI measures the turnaround time for bed availability. The significant decline in BOR, combined with shortened LoS and unstable TOI values, suggests both reduced service utilization and potential inefficiencies in patient care management. Such trends not only highlight challenges in maintaining hospital competitiveness but also emphasize the importance of strengthening Quality of Work Life (QWL) and employee engagement to improve productivity and service delivery outcomes.

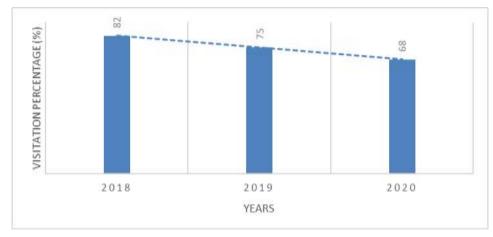


Fig. 1 - Patient Visitation Data in Bayu Asih Regional Hospital Purwakarta (2018-2020).



Fig. 2 - BOR, LOS and TO Reports of Bayu Asih Regional Hospital in 2020.

Based on these phenomena, there are strong indications of a decline in both Quality of Work Life (QWL) and employee engagement, which in turn has contributed to unsatisfactory levels of work productivity at Bayu Asih Regional General Hospital. Preliminary findings further reinforce this indication: out of ten healthcare professionals interviewed in the inpatient ward, several reported that their salaries were insufficient to meet basic needs. This condition was cited as a contributing factor to undesirable practices such as tardiness and suboptimal patient services. In addition, the absence of reward or recognition mechanisms for employees who demonstrate exemplary performance, along with the lack of entitlement to annual leave, further exacerbates dissatisfaction and disengagement among staff. Such conditions diminish the hospital's capacity to create added value for patients and undermine its ability to meet organizational objectives. In the broader context of healthcare competition, these weaknesses threaten the hospital's positioning as a trusted healthcare provider within the community. Consequently, strengthening QWL and employee engagement emerges as a critical necessity for restoring staff motivation, improving service delivery, and ensuring the hospital's long-term sustainability in an increasingly competitive healthcare industry.

Method

This study employed a descriptive and verificative approach, which is a process of generating knowledge by utilizing numerical data as an analytical tool to examine the phenomena under investigation (Sugiyono, 2019). Specifically, the research applied an analytical study design aimed at providing empirical insights into the influence of Quality of Work Life (QWL) and employee engagement on the productivity of healthcare professionals at Bayu Asih Regional General Hospital. A cross-sectional technique was used to collect data from the study sample, allowing for the observation of variables at a single point in time. The data utilized in this study consisted of both primary and secondary sources. Primary data were obtained through the administration of structured questionnaires to healthcare workers, while secondary data were collected from relevant literature, previous research findings, and disseminated reports considered pertinent to the research objectives. The data were then analyzed using regression analysis with an F-test to assess the level of statistical significance in the relationship between the independent variables (QWL and employee engagement) and the dependent variable (work productivity). This methodological approach was chosen to ensure both the rigor of quantitative measurement and the reliability of the findings in addressing the research problem.

Results

The analysis indicates that the Quality of Work Life (QWL) variable was generally categorized as high, with an average score of 2.57. However, several dimensions demonstrated comparatively weaker performance, particularly in the areas of recognition, communication, staff attitudes, and organizational support. Likewise, the Employee Engagement variable also fell within the high category, with an average score of 2.63. Despite this overall positive assessment, certain indicators, such as trust in service delivery, participation in decision-making, and responsibility, were rated relatively low. In terms of work productivity, the average total response score was 2.60, again placing it in the high category. Nevertheless, the lowest-rated indicators were those associated with work quantity, service speed, and work discipline. Taken together, these results suggest that although healthcare professionals at Bayu Asih Regional General Hospital perceive QWL, employee engagement, and productivity to be favorable overall, there are notable dimensions that require targeted managerial intervention. Specifically, strengthening recognition systems, improving organizational communication, fostering greater trust and accountability, and reinforcing work discipline represent critical areas for improvement. Addressing these aspects may not only enhance healthcare workers' engagement and satisfaction but also contribute to sustained improvements in productivity and service quality within the hospital.

Table 1 - Research Variables Measurement.

Dimensions	Total Score	Average	Categories
QWL	2,883	2.57	Tinggi
Employee Engagement	3,683	2.63	Tinggi
Work Productivity	3,683	2.60	Tinggi

In the verificative analysis, multiple regression analysis and the coefficient of determination (R^2) were employed. The results of these analyses are presented as follows:

Table 2 - Regression Analysis Results.

Model		Unstandardized Coefficients		Standardized Coefficients	Т	Sig.
		В	Std. Error	Beta		
1	(Constant)	. 008	. 353		. 021	. 983
	X1	. 241	. 018	. 525	13. 205	. 000
	X2	. 507	. 042	. 484	12. 176	. 002

Based on the regression output, the constant value was 0.008, with regression coefficients of $b_1 = 0.241$ and $b_2 = 0.507$. Thus, the regression equation can be expressed as: $Y = 0.008 + 0.241X_1 + 0.507X_2$. The interpretation of this model is as follows: (a) the constant value of 0.008 indicates that if all independent variables (X_1 and X_2) are equal to zero, the predicted value of work productivity (Y) would be 0.008; (b) the regression coefficient of Quality of Work Life (X_1) on work productivity is 0.241, meaning that a one-unit increase in QWL leads to a 0.241 increase in the work productivity variable, assuming other variables remain constant; and (c) the regression coefficient of Employee Engagement (X_2) on work productivity is 0.507, indicating that a one-unit increase in employee engagement results in a 0.507 increase in work productivity, holding other variables constant.

The coefficient of determination (R²) derived from the regression analysis was 0.912, which implies that 91.2% of the variance in work productivity can be explained jointly by QWL and employee engagement, while the remaining percentage is influenced by other factors not included in this model. This finding underscores the substantial contribution of QWL and employee engagement to productivity but also highlights the presence of external variables, such as organizational culture, leadership style, resource availability, or external environmental pressures, that may also affect productivity levels.

Furthermore, the larger coefficient for employee engagement (0.507) compared to QWL (0.241) suggests that engagement exerts a stronger influence on productivity among healthcare professionals at Bayu Asih Regional General Hospital. This indicates that while improving QWL is important, strategies that directly enhance employee engagement, such as recognition systems, participatory decision-making, and professional development opportunities, may yield more immediate and significant improvements in productivity outcomes. These results are consistent with prior research (Kumar & Pawar, 2017; Lee et al., 2020), which emphasized that highly engaged employees tend to demonstrate greater discretionary effort, creativity, and resilience, thereby driving organizational performance in healthcare settings.

The results of the regression analysis yielded an adjusted R² value of 0.910. This finding indicates that 91.0% of the variance in work productivity can be explained by the two independent variables, namely Quality of Work Life (X₁) and Employee Engagement (X₂). The remaining 8.8% of the variance is attributable to other factors not examined in this study. This exceptionally high coefficient of determination demonstrates that QWL and employee engagement are the dominant determinants of healthcare professionals' productivity at Bayu Asih Regional General Hospital. In practical terms, this suggests that organizational interventions focused on improving the working environment, recognition systems, communication, and employee involvement, while simultaneously fostering engagement through trust-building, participatory decision-making, and responsibility, are highly effective strategies for enhancing productivity.

Table 3 - Determination Coefficient Analysis Results.

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	Conclusion
1	. 955ª	. 912	. 910	1. 183	Significantly Influential

a. Predictors: (Constant), X2, X1

b. Dependent Variable: Y Sumber: Data diolah, 2023

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Nevertheless, the unexplained variance of 8.8% highlights the possibility that other variables, such as leadership style, organizational culture, workload management, or external contextual factors (e.g., policy changes and healthcare competition), may also contribute to productivity outcomes. These findings are in line with previous research (Agustina et al., 2024; Kumar & Pawar, 2017; Lee et al., 2020), which emphasizes that while QWL and employee engagement are critical drivers, a comprehensive approach that integrates multiple organizational and individual factors is extremely essential for sustaining long-term improvements in healthcare performance.

Discussion

Descriptive statistics indicated that the level of EMR adoption in the outpatient department of RSUD Sumedang was categorized as good, with a mean score of 4.12 (SD = 0.41) on a five-point Likert scale. This suggests that most Professional Care Providers (PCPs) perceive the EMR system as well-integrated into their daily workflow.

PCP performance also achieved a good category, with a mean score of 4.09 (SD = 0.39), indicating that staff consistently met professional standards in patient care delivery. Similarly, service quality was rated good, with a mean score of 4.15 (SD = 0.37), reflecting timely, reliable, and patient-centered service delivery in the outpatient department.

Similarly, the relationship between EMR adoption and service quality yields a β coefficient of 0.794, which again reflects a strong positive association. The $R^2 = 63.0\%$ indicates that EMR adoption accounts for nearly two-thirds of the variation in service quality scores, underscoring its importance in shaping patient care experiences. The p-value of <0.001 reinforces the robustness of this relationship, confirming that the effect is highly significant.

Overall, the findings suggest that EMR adoption serves as a critical driver for enhancing both operational effectiveness and patient-centered service delivery. The nearly identical strength of associations with PCP performance and service quality further implies that EMR benefits are multidimensional, improving both the clinical and experiential aspects of care. However, the remaining 37–38% of unexplained variance indicates that other contextual, organizational, and human factors also contribute meaningfully to these outcomes.

Discussion

The findings of this study indicate that the Quality of Work Life (QWL) at Bayu Asih Regional General Hospital was categorized as high, with an average score of 2.57. This issue is of particular importance in healthcare organizations, as reflected in the challenges faced by Bayu Asih, which has been experiencing a shortage of healthcare professionals. According to the Advisory Committee on Health Human Resources (ACHHR), strengthening QWL is identified as a key strategy to mitigate workforce crises in healthcare institutions, including Bayu Asih.

Within an organizational setting, healthcare professionals, as essential human resources, require open and effective communication. Clear, timely, and reciprocal communication fosters job satisfaction and minimizes misunderstandings. However, observations and questionnaire responses from staff at Bayu Asih reveal deficiencies in this area: communication between leaders and subordinates is often poorly established, feedback related to work is limited, information is not consistently delivered in a timely manner, and regular staff meetings are rarely conducted. Ideally, routine meetings should serve as a platform for managers to convey organizational information, clarify job expectations, and foster a collaborative work environment.

QWL at Bayu Asih in 2022 highlights the need for a human resource management approach that prioritizes opportunities for self-development, ensures adequate welfare to meet basic needs, and provides a safe and comfortable work environment. Such measures are expected to stimulate motivation, thereby enabling more effective achievement of organizational objectives. Given the intensifying competition in the healthcare sector, human resources play a decisive role in realizing the hospital's vision and mission. To remain competitive, hospitals must foster a balance between professional responsibilities and personal well-being, which can be achieved through continuous development of QWL practices to create a more humane and supportive workplace.

QWL seeks to meet not only the basic needs of healthcare workers but also their higher-level aspirations. This approach emphasizes the optimal utilization of healthcare professionals' skills while simultaneously providing an environment that encourages continuous learning and improvement. The underlying principle is that healthcare workers should be regarded as assets to be developed rather than merely resources to be utilized. Several factors influence QWL, including conditions at home, workplace conditions, and the adequacy of facilities and infrastructure. When effectively managed, these factors create a conducive work environment that enables healthcare workers to feel comfortable, motivated, and capable of performing at their best, thereby contributing to the hospital's success and growth.

Furthermore, employee participation and reward systems are critical drivers of engagement and performance (Sinaga et al., 2020). Leadership also plays a central role, as hospital leaders hold strategic responsibility for setting goals, making decisions, planning, and organizing all available resources. Leaders are therefore expected to cultivate a supportive and constructive work environment that enhances both productivity and job satisfaction. As emphasized by Kaur (2018), improving healthcare professionals' productivity and satisfaction directly strengthens organizational competitiveness, which is essential in today's highly competitive healthcare industry.

Organizations that fail to give sufficient attention to the Quality of Work Life (QWL) face substantial challenges in sustaining their workforce. Hospitals that neglect this aspect often struggle to recruit and retain qualified healthcare professionals, while simultaneously risking reduced motivation among existing staff. Such conditions increase the likelihood of labor turnover, as healthcare workers tend to move toward institutions offering more supportive and rewarding work environments. Findings from this study indicate that employee engagement at Bayu Asih Hospital falls into the high category, with an average score of 2.63. This aligns with previous research highlighting engagement as a central factor in fostering workforce loyalty (Heslina & Syahruni, 2021; Riyanto et al., 2021; Saks, 2019; Zondo, 2020). Healthcare workers at Bayu Asih Hospital demonstrate positive attitudes and enthusiasm toward their roles. Individuals with high initiative and engagement levels tend to exhibit stronger productivity, perceiving their work as an opportunity for self-actualization rather than as a burden. These results reinforce evidence of a strong positive relationship between employee engagement and organizational productivity (Devi, 2020; Krishnan Rajagopal, 2023; Zondo, 2020).

Beyond productivity, engagement builds emotional attachment and strengthens professional commitment among healthcare workers (Ho et al., 2021; Rasool et al., 2021). Saks (2019), emphasizes that engagement is essentially reciprocal: when employees feel valued by their organization, they respond with deeper involvement and higher discretionary effort. Supporting this view, Jayaraman et al., (2019) demonstrate that healthcare workers who go beyond formal job expectations significantly enhance organizational performance through improved individual productivity. A strong internal drive to excel, therefore, not only elevates service quality but also reinforces emotional bonds with the institution.

Work productivity at Bayu Asih Hospital is likewise categorized as high, with an average score of 2.60. This indicates the hospital's capacity to meet healthcare service needs, both for patients and their families. Nonetheless, maintaining and enhancing productivity growth requires careful attention to several determinants, including employee competence and physical capacity, adequate facilities and infrastructure, and managerial support. Productivity is shaped by the interaction between intrinsic factors, such as achievement, challenging work, and opportunities for self-development, and extrinsic factors such as incentives, supervision, workplace environment, workload, and organizational policies (Crispen et al., 2013). Healthcare workers, moreover, expect not only to provide quality services but also to receive fair treatment and support from hospital management. Human resources must therefore be recognized as the most strategic element within healthcare organizations, as service quality is inherently human-centered. Sustained productivity is a decisive factor in ensuring long-term competitiveness. A conducive and supportive work environment enhances concentration and performance, while an unsupportive climate disrupts motivation and service delivery. Accordingly, hospital leadership carries a crucial responsibility to cultivate an organizational culture that continuously fosters engagement, satisfaction, and productivity among healthcare workers (Saks, 2019).

Conclusion

Healthcare worker productivity constitutes a critical element in ensuring the sustainability and effectiveness of healthcare systems. The findings of this study emphasize that Quality of Work Life (QWL) and employee engagement serve as key drivers of productivity among healthcare professionals. Accordingly, healthcare organizations must prioritize the creation of a supportive work environment that not only enhances staff well-being but also ensures service quality and contributes to improved patient outcomes.

The results further reveal that indicators related to recognition, communication, staff attitudes, and managerial support remain relatively weak. This condition highlights the need for more structured managerial strategies, such as the implementation of fair and competitive compensation programs. Appropriate compensation serves not only as a form of recognition but also as a motivational instrument that can stimulate higher levels of performance among healthcare workers.

In addition, indicators associated with trust in service delivery, decision-making quality, and professional responsibility require further optimization. One potential intervention is the implementation of structured team-building programs aimed at strengthening collaboration, enhancing communication, and fostering a greater sense of unity among healthcare workers. Such initiatives can improve team cohesion and contribute to collective productivity in healthcare service delivery.

Furthermore, weaknesses observed in indicators such as work quantity, service speed, work discipline, and punctuality call for the introduction of a systematic reward system. The application of transparent and consistent reward-and-punishment mechanisms can reinforce discipline and nurture a performance-oriented work culture. Consequently, the optimization of healthcare worker productivity can be effectively achieved through a combined

strategy that integrates the improvement of QWL, the strengthening of employee engagement, and the application of equitable, performance-based human resource management policies.

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