

Organizational flexibility and job security practices in healthcare organizations: nurses' perspectives.

Haiam Mourad Fawzy ¹, Nancy Sabry Hassan ², Azza Hassan Mohamed ³

¹Faculty of Nursing, B.Sc. in Nursing, Nursing Specialist, - Damanhour fever hospital, Haiam shsms0@gmail.com.

²Lecturer of Nursing Administration Department, Faculty of Nursing, Alexandria University, Sabry_nancy@yahoo.com,

³Professor of Nursing Administration Department, Faculty of Nursing, Alexandria University, Azza.hussein@alexu.edu.eg

Abstract

Background: Since organizational flexibility is a global necessity, it has become more and more important in recent years, as demonstrated by the improvements hospitals have made to better explore new opportunities for adapting to or preparing for new events, as well as by increasing employment opportunities, raising salaries, and creating a culture that discourages rapid employment and layoffs. These actions have left a large class of employees feeling secure in their jobs. **Aim:** To assess organizational flexibility and job security practices in healthcare settings; nurses' perspectives. **Settings:** This study was conducted in medical units (24), surgical units (17), critical care units (4) at Alexandria Main University Hospital and Medical Research Institute Hospital in medical units (10), surgical units (5), critical care units (4), as the two hospitals are the largest hospitals, contained a large number of beds and staff nurses with different qualifications. **Subjects:** convenience sample of 284 staff nurses with 6 months experience and more who worked in the previously mentioned units and available at the time of data collection. **Tools:** Two tools were used in this study namely; Organizational flexibility questionnaire and job security questionnaire. **Results:** The study showed there was significant positive high correlation between organizational flexibility and job security where ($r = 0.442, p = 0.000^*$), and significant positive high correlation between employee flexibility, social desirability and job security where ($r = 0.440$ and $0.506, p = 0.000^*$). **Recommendations:** For the health care organization, setting up regular staff meetings and open dialogues to learn about their needs and issues and to help them participate in decisions affecting their workplace and patients in order to enhance their sense of fulfillment, self-worth, intention to stay, and job security; and for the staff nurses, setting up manager-only training sessions and staff meetings to strengthen managers' capacity to consider employees' requests for job security and flexibility.

Keywords: Organization, Flexibility, Organizational flexibility, Job security.

INTRODUCTION

The health of the world community has been greatly impacted by massive layoffs, contractions driven by globalization, rapid technological advancements, an increase in outsourcing opportunities, and even crises, particularly the pandemic crisis. Health care organizations play a critical role in this because they can obtain necessary resources, foster a psychosocial safety climate, and lessen the negative effects of the job. (Loh et al., 2018; Ripp et al., 2020).

The adaptable healthcare organization allows for changes in how functions are used, which may necessitate making structural or organizational adjustments to its facilities and services. (Troisi, De Simone, Vargas, & Franco, (2022). They need to be flexible and adaptable in order for a health organization to reach its full potential in the long run. This includes the ability to respond to changes in the organization's purpose or use that may arise in the future. (Carthey, Chow, Jung & Mills, 2010; Memari, Kocaturk, Lozanovska,

Andrews, & Tucker, R. (2023). According to many writers, organizational flexibility refers to the capacity of the organization to swiftly and simply modify its policies, practices, or procedures in order to respond to changes occurring in its surroundings. (Madhani, (2013); Sharma, Sushil, & Jain, (2010).

According to Dinga, (2023) claimed that the ability of any organization to alter its characteristics and identity in order to confront the factors that lead to such change and prevent a net worsening of the company's situation could be used to characterize the basic idea of organizational flexibility. In healthcare sector, van der (2020) highlighted that organizational flexibility in the healthcare sector is defined as the relations between hospitals and various agents within health-care systems. The term "organizational flexibility" encompasses various types of flexibility defined by a set of resources, processes, and managerial functions. (Madhani, 2013). The relevant literature identifies different constructs including: numerical/temporal flexibility, functional flexibility, financial flexibility, locational flexibility, inflexibility, and out-flexibility demands and procedural flexibility ((Metzner, 2010, Kozjek and Ferjan, 2014). Unlikely, Golden and Powell (2000) examined organization flexibility in four dimensions: time, scope, purposefulness, and impact area. According to the study of Metzner (2010) the results of this study focused on the fact that the studied organization had a specific labor demand, namely locational flexibility. The establishment of a flexible organization necessitates the provision of both flexible structural solutions and the selection of managerial staff who are knowledgeable about the flexible organizational behaviors and can develop them. on a group of employees to assess whether they perceive these types of organizational flexibility in their work place. (Bula & Ziebecki, 2011). This is a special contradiction of the application of flexible management. However, the issue of job security

and organizational flexibility are connected (Kozjek & Ferjan, 2014). Job insecurity is the state of not knowing one's own employment status and the concern that one will lose their current position in the future for a variety of organizational causes. (Mathebulaa, Mukukab, Aigbavboac & Thwalad, 2009; Landsbergis, Grzywacz and Lamontagne, 2014) further claimed that the term "job insecurity" refers to a psychosocial stressor that arises from work organization and employment conditions and is a reflection of an employee's feelings of fear of losing their job or instability in it. Furthermore, De Witte, De Cuyper, Vander Elst, Vanbelle and Niesen, (2012) clarified that the term "job insecurity" refers to a mismatch between what workers hope for—security regarding the continuation of their current employment—and what they "get" (the perception that the present job is insecure).According to Gharib et al. (2017) The definition of job security is an organization's guarantee that its workers will stay with them for a significant amount of time without being wrongfully dismissed. The scholars went on to explain that in order for workers to feel satisfied, supported personally, and motivated at work, there must not be any threats to their jobs. Job insecurity could result from losing a job that could be permanent, fired, or forced into early retirement. (Kwabiah, Hodibert & Robert, 2016). According to Artz and Kaya (2015) The impact of job security on job satisfaction is determined by three factors: three measures of job security increase job satisfaction among private sector workers and reduce worker incentives to quit more when job openings are relatively scarce than when job openings are plentiful. Job security is often measured using the perceived risk of job loss in the near future, which is a significant determinant of job satisfaction. According to the study of Sokhanvar, Kakemam, Chegini and Sarbakhsh, (2018), Job security is a factor that influences the intention of nurses to leave both governmental and private hospitals in Tehran,

Iran. Approximately 22.6% of nurses reported having low job security, and job security was significantly higher in private hospitals than in public hospitals. The measurement of organizational flexibility in healthcare organizations is a complex issue that has not yet received enough attention; in fact, there are few studies that address this variable. Various approaches are used in industry and business practices, including declarative testing, symptom identification, factor analysis, and observation (Golden & Powel, 2000). To date, healthcare organizations have not developed a single, all-inclusive, and objective technique to assess the degree of organizational flexibility. This is confirmed by Bula & Ziebicki, (2011) The study aims to evaluate nurses' perceptions of organizational flexibility and job security practices in healthcare settings because the study hypothesis is that the higher the flexibility of the healthcare organization, the lower the job insecurity in the healthcare settings. This will help determine whether healthcare organizations are able to adopt flexibility to compete on the labor market successfully and are able to afford low staffing levels.

Aim of the study:

To assess nurses' perspectives of the degree of flexible organization and job security practices in healthcare settings.

Research question:

To what extent there are flexible organization practices in healthcare settings.

To what extent there are job security practices in healthcare settings.

MATERIALS AND METHOD

Materials

Research Design

A correlational design was used to conduct this study.

Setting

This study was conducted in all medical units, surgical inpatient care units as well as critical care units within two Alexandria University Hospitals namely: Alexandria Main University Hospital and Medical Research Institute Hospital because of their large size among Alexandria University hospitals, as contained a large number of beds and staff nurses with different qualifications. It provides different services & specialties. It treats & receives large number of patients from different countries & governorates.

Subjects

convenience sample of 284 staff nurses with 6 months experience and more who worked in the previously mentioned units and available at the time of data collection.

Tools:

Two tools were used in this study as follows:

Tool (1): Organizational Flexibility Questionnaire:

It was developed by Metzner (2010), and adapted by the researcher and used to assess nurses' perspectives toward the extent of their organizational flexibility practices. The tool consists of 3 domains:

The first domain assesses the organization flexibility practices, it consists of six dimensions with 39 items classified into: numerical flexibility (7 items), functional flexibility (7 items), financial flexibility (5 items), locational flexibility (7 items), inflexibility (7 items), and out-flexibility demands (6 items). Negatively worded items were reversed coded.

The second domain assesses nurses' perspectives toward their own flexibility in healthcare organization. It consists of eight dimensions with 68 items as follows: proactive personality (17 items), role breadth self-efficacy (10 items), taking charge (10 items), mobility preference (5

items), protean career approach (12 items), boundary-less mindset (8 items), community characteristics (3 items), and workplace characteristics (3 items).

The third domain assesses social desirability of nurses throughout 10 items. For purpose of ease response for the three domains, the scale was adapted to be measured on 6-point Likert scale with response ranging from strongly disagree (1) to strongly agree (6). The overall score ranging from 111 to 666; Low scoring ranging from $111 \leq 296$, indicates that subjects having lower organizational flexibility level. while moderate scoring of organizational flexibility ranging from $296 \leq 481$; and high scoring ranging from $481 \leq 666$. the high score indicates that subjects having higher organizational flexibility level. Cronbach's alpha Coefficient for internal consistency reliability of the tool was (0.714).

Tool (2): Job Security Questionnaire:

This tool was developed by Sokharvar, Kakemam, Chegini, and Sarbakhsh, (2018) and was adapted by the researcher and used to capture nurses' perspectives about job security practices in their hospitals. It consists of 8 dimensions measured throughout 30 items as follows: 4 different items are used to measure each of the following dimensions: comfort in job, job prospect and stability, organizational climate, relationship with managers and colleagues, and rules and regulations. Two other dimensions including wages and salaries and work environment, each of which are measured by two different items, and finally organizational justice was measured by 6 items.

The responses were measured on 5-point Likert scale ranging from strongly disagree (1) to strongly agree (5). The negatively worded items were reversed coded. the overall score ranging from 28 to 150, low scoring of job security ranging from $30 < 70$; moderate scoring of job security ranging from $70 < 110$; and high scoring

of job security ranging from $110 < 150$. the high score indicates high job security practices.

METHOD

The research protocol was submitted to the Ethical Research Committee (ERC), Faculty of Nursing, Alexandria University for obtaining the ethical approval.

An official permission to collect the necessary data for the study was obtained from the Dean Faculty of Nursing University of Alexandria and directed to the administrative authorities of the Main University Hospital and Medical Research Institute Hospital after explanation of the aim of the study.

Backward-forward translation was done for tool I (Organizational Flexibility). The original form was translated from Dutch to English and consequently into Arabic. Back translation was done also by a group of experts in the same field of study. The same process was done for tool II, as it was translated from English version into Arabic and vice versa.

The two tools were tested for their content validity by a jury of six experts in the field of the study from Faculty of Nursing, Alexandria University.

The Content Validity Index of both tools were 0.921 and 0.954, which mean that they are valid.

The two tools were tested for their internal consistency, reliability using Cronbach's alpha Coefficient which proved to be strongly reliable was 0.714 and 0.729, respectively.

A pilot study was carried out on 10 % of nurses ($n=28$) that were not included in the study sample, in order to check and ensure the clarity.

Data collection for this study was conducted through self-administered questionnaire. The confidentiality of the data and the anonymity of the study subjects were assured.

Statistical analysis:

Suitable statistical analysis tests were used to determine nurses' perspectives toward the extent

of the flexibility and job security practices in the organization.

After collecting data, the data were revised coded and fed to statistical software IBM SPSS version 25, appropriate statistical analyses were done using two-tailed tests and an alpha error of 0.05. A P-value less than or equal to 0.05 was considered to be statistically significant. frequency tables and cross-tabulation were used to illustrate the results. Quantitative data were summarized by the arithmetic mean, standard deviation, and mean score percent.

RESULTS

Table (1): Shows that; the majority of the studied nurses were females (79.9%). Nearly half of nurses (48.2) in the age group $20 \leq 30$, while only 14.1% were more than 40 years old. In addition, most of them (90.8%) were married and 8.8% of them were single. Also, more than two thirds of them (70.4%) work at Alexandria Main University Hospital, while 29.6% of studied nurses works at Medical Research Institute Hospital. Additionally, more than half of them (52.5%, 51.1%) work in medical unit and have bachelor degree of nursing science, respectively. Also, 41.2% have 20 to 30 years of experience in nursing, while more than two thirds of them (68.0%) have 1 to ≥ 10 years and (32%) of studied nurses have $10 \geq 20$ of work experience in the hospital.

Table (2): displays that the majority of the studied nurses (73.94%) have moderate level of total organizational flexibility, comparing with 26.06% who have high level of total organizational flexibility with mean score 70.66% and mean \pm SD. 428.20 ± 11.47 . Nearly, two thirds of them (64.79%) have moderate level of organizational flexibility demand comparing with 35.21% of them who have high level of organizational flexibility demand with mean score 70.57% and mean \pm SD. 148.20 ± 4.88 . Moreover, 84.51% of them have moderate level of employee flexibility and 15.49% have high

level of employee flexibility with mean score 70.71% and mean \pm SD 280.00 ± 7.77 . In addition, more than half of them (55.99%) have high level of social desirability and 44.01% have moderate level of social desirability with mean score 75.85% and mean \pm SD 45.48 ± 3.28 .

Table (3): reflects that; 80.99% of studied nurses have high level of the overall job security practices. On the individual level of dimensions, the results show that 19.01% of them have moderate level of job security with mean percent score 77.54% and mean \pm SD 110 ± 7.04 . Also, comfort in job dimensions has the highest mean score (95.25%) and mean \pm SD 19.00 ± 0.79 followed by rules and regulations dimension with mean percent score 83.47% and mean \pm SD 13 ± 1.20 , while wages and salaries and work environment dimensions was found as the lowest one with mean \pm SD (6 ± 1.15 , 6 ± 1.12) which represent mean percent score 67.20% and 65.80%, respectively.

Table (4): illustrated that, there are highly significant statistical positive correlations between the studied nurses' overall organizational flexibility and each of the related domains in terms of; social desirability; employee flexibility and overall job security practices at ($r = 0.425$, 0.506 , and 0.4440 respectively). Unlikely, there was a weak statistical correlation between the studied nurses' overall job security practices and organizational flexibility demand domain with ($r = 0.104$).

Discussion:

Organizations nowadays need to become more flexible and adaptive in order to thrive in challenging circumstances, such as those brought on by globalization. (Eisele, 2017). Organizational flexibility and job security for nurses are key components of today's competitive advantage for providing health care workers with a safe, secure, and healthy work environment that supports the organization's achievement of objectives like productivity, employee

satisfaction, and retention rates, according to researchers and managers of organizations. (Adriana, 2020).

The present study's findings, which were consistent with those of Ferjan (2015), showed that organizational flexibility had a positive impact on job security. These findings may be related to the fact that organizations that can successfully compete on the labor market can also afford higher levels of job security for nurses, which is a prerequisite for maintaining high levels of flexibility.

Also, the study revealed that the majority of the nurses 73.94% perceived moderate level regarding the total organizational flexibility with high mean score percent. This study is consistent with the result of Larsson (2020); Kozjek and Ferjan (2015); Metzner (2010) whose point of view clarified that organizations tend to be flexible by emphasizing idealized influence policies, idealized influence regulations, inspirational motivation, individual consideration and encourage intellectual stimulation and critical thinking, and creativity of their employees to enhance hospital's capability to respond to patients' preference, employee' needs and changes in healthcare needs by offering the required supplies and suitable infrastructure.

Furthermore, this study revealed that the majority of nurses 84.51% perceived moderate level of dimensions toward employee flexibility inform of proactive personality, taking charge, role breadth self-efficacy, protean career attitudes, boundary less mindset, mobility preference, community characteristics, work characteristics. And the majority of nurses 81.42% perceived high level of dimensions toward employee flexibility inform of taking charge This may be due to employee flexibility capabilities as having a powerful force for constructive change in organization, contributing to discussions about the healthcare organization's

strategy and obstacles facing them and flexible ideas and opportunities to solve it, organization provision of lifetime employment and comfortable ways of good transport connection to their employee, all thesis makes highly motivated and satisfied nurses to stay and improve organization level. This result is consistent with result of Wool et al. (2021), Kelliher and Riley (2003); Metzner (2010); Fallman (2020).

In the category of the organizational flexibility demand, this study revealed that the majority of nurses 88.52% perceived high level of dimensions toward employee flexibility inform of numerical flexibility due to increases in the number of health care provider, increase or decrease nurses working hours according shifting tasks, organizational flexibility to design work in a flexible manner as working times and overtime, organization clear regulations or policies with respect to the use of vacations days, nurses' flexible react way to solve customer demands.

This result is consisted with the result of Kok et al. (2013); Ballina et al. (2015); Kato et al. (2018); Wickramasinghe et al. (2019) whose results indicated high perception of nurses toward their numerical organizational flexibility.

The demographic characteristics play significant role on staff nurses' perception of organizational flexibility and also, its related dimension as the study indicates that there was statistically significant relation between nurses' demographic characteristics as age, marital status, working unit, qualification, years of experiences and years of working in hospital. The result was supported by study of Suratno (2018) who clarified that perception of organizational flexibility depends on the nurses' age, gender, and years of experiences.

Also, some demographic characteristics play as a factor in nurses' perception to job security. in the form of age, marital status, qualification, years of experiences and. the result is consistent with

LARSSON (2020) study which revealed age, working unit and years of experiences impact on nurses' perception of organizational flexibility. Also, the result was supported by study of Koçyiğit (2020) who clarified that perception of organizational flexibility depends on the nurses' age, gender, and years of experiences. nurses' perceptions of a organization flexibility are important as they reveal information about how nurses perceive flexibility by which these perceptions translate into the mental health outcomes of the nurses.

Conclusion

Organizational flexibility has a positive impact on job security practices toward staff nurses on healthcare organizations.

RECOMMENDATIONS

Based on the study's findings, the following recommendations are made and are aimed at the various hospital management levels; the health care organization; and the staff nurse. The health care organization should provide a work environment characterized by open communication by staff meetings and holding workshops with managers to enhance the manager's ability to take into account flexibility and job security for their employees. The staff nurse should be facilitated in participating in decisions pertaining to their work environment to identify their needs and problems, discuss issues pertaining to their clinical practice, and identify their needs and problems.

Table (1): Frequency distribution of studied nurses according to their personal and professional characteristics:

Items	N=284	
	Frequency	Percent %
Sex		
▪ Male	57	20.1
▪ Female	227	79.9
Age		
▪ 20 ≤ 30	137	48.2
▪ 31 ≤ 40	107	37.7
▪ More than 40	40	14.1
Marital status		
▪ Single	25	8.8
▪ Married	258	90.8
▪ Divorced	1	0.4
▪ Widow	0	0
Hospital name		
▪ Alexandria Main University Hospital	200	70.4
▪ Medical Research Institute Hospital	84	29.6
Working unit		
▪ Medical units	149	52.5
▪ Surgical units	39	13.7
▪ Critical care units	96	33.8
Qualification		
▪ Bachelor degree of nursing science	145	51.1
▪ Technical nursing institute diploma	139	49.9
▪ Secondary nursing school diploma	0	0
Years of experience in nursing		
▪ 1 ≤ 10 years	53	18.7
▪ 10 ≤ 20 years	114	40.1
▪ 20 ≤ 30 years	117	41.2
Years of experience in the working hospital		
▪ 1 > 10 years	193	68.0
▪ 10 ≥ 20 years	91	32.0

Table (2): The level of organizational flexibility domains and its related dimensions among studied nurses.

N =284						Levels			
Organizational Flexibility	N. of items	Min-Max	Mean ±SD	Mean Score %	Rank	Low level percent	Moderate level percent	High level percent	
Organizational flexibility demand.	35	141-157	148.20±4.88	70.57%		00.00%	64.79%	35.21%	
Numerical flexibility	7	33-40	37.18±1.84	88.52%	1	00.00%	0.00%	100.00%	
Financial flexibility	4	8-15	10.80±2.09	45.00%	6	52.82%	47.00%	0.00%	
Functional flexibility	6	26-32	29.10±1.52	80.83%	2	00.00%	4.93%	95.07%	
Locational flexibility	7	25-30	27.14±1.45	64.62%	4	00.00%	100.00%	0.00%	
In flexibility	7	26-27	26.15±0.36	62.26%	5	00.00%	100.00%	0.00%	
Out flexibility	4	15-20	17.83±1.99	74.29%	3	00.00%	48.24%	51.76%	
Employee flexibility	66	267-295	280.00±7.77	70.71%		00.00%	84.51%	15.49%	
Proactive personality	16	63-85	72.38±5.61	75.40%	3	00.00%	48.24%	80.28%	
Taking charge	10	48-49	48.85±0.36	81.42%	1	00.00%	0.00%	100.00%	
Role breadth self-efficacy (RBSE)	10	34-37	35.01±0.84	58.35%	8	00.00%	100.00%	0.00%	
Protean career attitudes	12	48-51	49.08±1.06	68.17%	6	00.00%	100.00%	0.00%	
Boundary less mindset	8	27-32	29.21±1.58	60.85%	7	00.00%	100.00%	0.00%	
Mobility preference	4	15-21	17.94±1.98	74.75%	4	00.00%	53.17%	46.83%	
Community characteristics	3	12-15	13.24±0.93	73.56%	5	00.00%	70.42%	29.58%	
Work characteristics	3	11-17	14.30±1.71	79.44%	2	00.00%	44.01%	55.58%	
Social desirability	10	40-51	45.48±3.28	75.8%		00.00%	44.01%	55.99%	
Overall organizational flexibility	111	411-449	428.20±11.47	70.66%		00.00%	73.94%	26.06%	

Table (3): The level of job security and its related dimensions among studied nurses.

Organizational flexibility domains	Organizational flexibility demand	Employee flexibility	Social desirability	Overall organizational flexibility
Job security domains				
Comfort in job	0.074	0.122 [*]	0.317 ^{**}	0.140 [*]
Organizational justice	0.203 ^{**}	0.234 ^{**}	0.020	0.308 ^{**}
Job prospect and stability	0.238 ^{**}	0.257 ^{**}	0.251 ^{**}	0.307 ^{**}
Organizational climate	0.217 ^{**}	0.324 ^{**}	0.766 [*]	0.339 ^{**}
Wages and salaries	0.163 ^{**}	0.045	-0.016	0.045
Relationships with managers and colleagues	0.257 ^{**}	0.239 ^{**}	0.562 ^{**}	0.176 ^{**}
Rules and regulations	-0.066	0.378 ^{**}	0.130 [*]	0.279 ^{**}
Work Environment	0.243 ^{**}	0.119 [*]	-0.010	0.030
Overall job Security Practices	0.104	0.440^{**}	0.506^{**}	0.442^{**}

Job Security practices dimensions	(N=284)					Levels(N=284)		
	N. of items	Min- Max	Mean ± SD	Mean score %	Rank	Low Level	Moderate level	High level

Table (4): Correlation matrix between domains of both organizational flexibility and job security practices in the studied healthcare organizations.

Comfort in job	4	17-20	19.00±0.79	95.25%	1	0.00%	0.00%	100.00%
Organizational justice	5	13-21	17±2.05	68.60%	6	0.00%	71.83%	28.17%
Job prospect and stability	4	13-18	15±1.63	78.95%	4	0.00%	14.08%	85.92%
Organizational climate	4	10-19	16±2.61	73.85%	5	0.00%	40.14%	59.86%
Wages and salaries	2	5-9	6±1.15	67.20%	7	0.00%	35.00%	65.00%
Relationships with managers and colleagues	4	14-19	16±1.50	79.90%	3	0.00%	15.49	84.51%
Rules and regulations	3	10-15	13±1.20	83.47%	2	0.00%	21.13%	78.87%
Work environment	2	5-9	6±1.12	65.80%	8	0.00%	21.48%	78.52
Overall job Security Practices	28	97-121	110±7.04	77.54%		0.00%	19.01%	80.99%

REFERENCES

- Adriana A, (2020). "Work Flexibility, Job Satisfaction, and Job Performance among Romanian Employees—Implications for Sustainable Human Resource Management" *Sustainability* 12, no. 15: 6086.
- Artz, B., & Kaya, I. (2016). The Impact of Job Security on Job Satisfaction in Economic Contractions Versus Expansions: *Applied Economics*, 46(24), 2873-2890.
- Bula, P., & Ziebicki, B. (2011). Organizational Flexibility as A Challenge of Contemporary Management: Determinants and Methods of Measurement. *Act Commerce*, 11(1), 171-180.
- Carthey, J., Chow, V., Jung, Y., & Mills, S. (2010). Achieving Flexible and Adaptable Healthcare Facilities –Findings from A Systematic Literature Review: *International Conference*, 16(2), 107-122.
- De Toni, T. (2005). Definitions and Linkages between Operational and Strategic Flexibilities: *The International Journal of Management and Science*, 33(9), 525-540.
- De Witte, H., De Cuper, N., & Vander Eist, T. (2015). Job Insecurity, Health and Well-Being, in *Book: Sustainable Working Lives*. Springer Sciences Business Dordrecht, 12(5), 109-128.
- De Witte, H., De Cuyper, N., Vander Elst, T., Vanbelle, E., & Niesen, W. (2012). Job Insecurity: Review of the Literature and a Summary of Recent Studies from Belgium, *Romanian Journal of Applied Psychology*, 14(4), 11-17.
- Dias, C., & Escoval, A. (2014). Improvement of Hospital Performance through Innovation: Toward the Value of Hospital Care. *Health Care Manager*, 32(2), 129–40.
- Dinga, Florica M, Mariana F, (2023). Job Security and Flexibility: Exploring Labour Market. 266P.23-58.
- Eisele, P. (2017). Assessment of Leadership for Innovation and Perceived Organizational Innovativeness: Differences between Self- Reported Individual and Social Creativity. *International Journal of Organizational Leadership*, 6(2), 470-480.
- Fallman, S. L. (2020). Organizational flexibility and health among line managers and employees in health care (Doctoral dissertation, KTH Royal Institute of Technology).
- Gharib, M. N., Kahwaji, A. T., & Elrasheed, M. O. (2017). Factors affecting staff retention strategies used in private Syrian companies during the crisis. *International Review of Management and Marketing*, 7(2), 202-206.
- Golden, W., & Powel, L. (2000). Towards A Definition of Flexibility: *The International Journal of Management*, 28(4), 373-384.
- Kozjek, T., & Ferjan, M. (2014). Organizational Flexibility, Employee Security, and Organizational Efficiency: A Case Study of Slovenian Public and Private Sector Organizations. *Organizacija*, 48(1), 1-22.
- Krupski, R. (2008). Organizational Flexibility as Source of Competitive Advantage Micro and Small Enterprise: *Journal of Strategic Marketing*, 54 (34), 468-475.
- Kwabiah, A., Hodibert, V., & Robert, A. (2016). Job Security, Job Satisfaction and Organizational Commitment as Correlates of Job Performance among Workers in Takoradi, Ghana: *African Development and Resources Research Institute (ADRRI) Journal*, 25(7), 18-30.
- Landsbergis, A., Grzywacz, J., & La Montagne, A. (2014). Work Organization, Job Insecurity, and Occupational Health

- Disparities: *American Journal of Industrial Medicine*, 57(5), 495-515.
- Madhani, P. (2013). Organizational Flexibility: Real Option Approach. *Journal of Indian Management*, 22(3), 43-54.
- Mathebulaa, L., Mukukab, M., Aigbavboac, C., & Thwalad, W. (2009). A Theoretical Assessment of Causes of Job Insecurity in the Construction Industry: *American Conference*, 46(22), 10-25.
- Loh, M. Y., Idris, M. A., Dollard, M. F., & Isahak, M. (2018). Psychosocial safety climate as a moderator of the moderators: Contextualizing JDR models and emotional demands effects. *Journal of Occupational and Organizational Psychology*, 91(3), 620–644.
- Metzner, F. (2010). Matching Organizational Flexibility Demands and Employee Flexibility – A First Step Towards Unifying Framework for Labour Flexibility: *School of Management and Governance, University of Twente*, 36(2), 1-22.
- Osbert, P.G. (2008). Proaktywne Zarządzanie Elastycznością organizacji (Proactive Management of Organizational Flexibility): *Journal of Organization and management*, 13 (3), 23-42.
- Ripp J, Peccoralo L, Charney D. Attending to the Emotional Well-Being of the Health Care Workforce in a New York City Health System During the COVID-19 Pandemic. *Acad Med*. 2020 Aug;95(8):1136-1139.
- Rowe, W.G., & Wright, P.M. (1997). Related and Unrelated Diversification and their Effect on Human-Resource Management Controls: *Strategic Management Journal*, 18(4), 329-338.
- Sharma, M.K., Sushil, & Jain, P.K. (2010). Revisiting Flexibility in Organizations: Exploring its Impact on Performance. *Global Journal of Flexible Systems Management*, 11, 51-68.
- Sokharvar, M., Kakemam, E., Sokhanvar, M., Chegini, Z., & Sarbaksht, P. (2018). Hospital Nurses' Job Security and Turnover Intention and Factors Contributing to Their Turnover Intention: A Cross-Sectional Study. *Nursing and Midwifery Studies*, 7(3), 133-140.
- Troisi, Troisi, De Simone, Vargas, & Franco, (2022). The other side of the crisis: organizational flexibility in balancing Covid-19 and non-Covid-19 health-care services; *BMC Health Services Research*. 39 (2), 270–273.
- Van der, W. (2022). Organizing for Flexibility: Addressing Dynamic Capabilities and Organization Design, Collaborative Communities of Firms, 12.105-125, DOI:10.1007/978-1-4614-1284-77.