

**A Correlational Study Examining The Relationship  
Between Mental Health and Employee Engagement  
In Regards to Frontline Healthcare Workers During  
the Recent Pandemic**

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# **Abstract**

## **In Terms of Frontline Healthcare Staff During The Recent Pandemic, Is there a Correlation Between Mental Health and Welfare When Considering Employee Engagement**

**By Shannon Byrne**

The purpose of this study is to examine if there is a present correlation in relation to mental health and wellbeing in relation to employee engagement among frontline healthcare staff during the recent pandemic. A sample of sixty-one participants of the research were selected using convenient sampling. This involved the distribution of a confidential survey, ensuring anonymity, which targeted a sample population of frontline healthcare staff working during the recent pandemic. The study evaluated

This study assessed the mental health and employee engagement trends during the recent pandemic, their mental health, engagement, initiatives available etc. The study found that employee engagement is associated with mental health but not associated with overall wellbeing. The research portrayed a significant relationship in regards to mental health and employee engagement amongst frontline healthcare staff in relation to the responses on the research survey

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# **Chapter One: Introduction**

## **1.1 Background**

In January 2020, following the first cases encountered in Wuhan, China, the World Health Organization declared the emergence of a novel coronavirus virus, SARS-CoV2 (COVID-19), a global health emergency. The virus was classified as a pandemic by the World Health Organization in March 2020, two months later (WHO, 2020). The global healthcare system, society, and business operations have all been severely impacted by that of the Coronavirus pandemic (Nicola, et al., 2020). Prior to the pandemic, healthcare professionals routinely supplied long, physically, and psychologically demotivating hours to meet the needs of patients. As a result of these factors, including extended durations, there is less opportunity for nourishment, staying hydrated and maintain personal hygiene habits.

The emergence of novel infectious Covid-19 subtypes, including Delta and Omicron, exacerbates concerns for frontline healthcare professionals. Simultaneously, the time in which the vaccination is deployed at an exceedingly furious pace, a pandemic of complications with mental health and wellbeing is emerging. Recent research and studies indicate that the demographic of healthcare workers will endure prominent levels of psychological distress, melancholy, and anxiousness.

(Shanafelt, et al., 2020) emphasizes that medical and healthcare professionals are subject to extreme fluctuating levels of pressure, working lengthy hours consisting of a lack of sufficient personal protective equipment, fearful of contaminating and endangering themselves, but also the transmission of the infection to their family members. Cultivating a strong organizational culture becomes a crucial leadership obligation in ethical organisations. Furthermore, a comprehensive evaluation of the effectiveness of health promotion programs in organizations should examine not just their wellbeing but also their influence on employee engagement. The intrinsic gap for a progressive paradigm of mental health interventions has made healthcare staff susceptible to the Covis-19's repercussions.

In the Severe Acute Respiratory study, a survey of 549 healthcare professionals in Beijing, China, three years after the pandemic, revealed that 10% of healthcare professionals were still exhibiting symptoms of serious post-traumatic stress (Wu, et al., 2009). The mental health

and wellbeing requirements of frontline healthcare staff responding to the pandemic must not be abandoned.

## **1.2 Identified Problem**

Frontline healthcare professionals are much more susceptible than ever before to considerable levels of mental health and an adverse effect on their well-being, as a result of the Coronavirus pandemic that originated in 2020. Preceding research on mental health during the pandemic in Ireland has emphasized on the employment repercussions for the general populace rather than the front-line healthcare workers. Furthermore, rather than being narrowly focused, the research was designed with the objective of creating holistic interventions for mental health.

More extensive research, assessing the relationship between mental health and wellbeing when considering employee engagement and examining much more evidence-based mental health interventions, is necessary due to the pandemic's evolving threat to the mental health and wellbeing of frontline healthcare professionals.

## **1.3 Rationale for the research**

The purpose of this present research is to examine if there is a correlation between mental health, wellbeing and employee engagement among frontline healthcare workers during the recent pandemic. Through convenient sampling, a sample of sixty-one participants were obtained. This entailed the distribution of a protected and anonymous survey via a link to a sample population of frontline health professionals working during the current epidemic. As mental health and employee engagement become even more of a concern for frontline healthcare workers, particularly during the recent pandemic, it was desired that the present research could provide perspective into frontline healthcare workers' mental health and wellbeing in relation to employee engagement using the DASS Scale, Wellbeing Scale, and the ISA employee engagement scale.

Previous research conducted by (Shannon, 2020) and (De-la-Calle-Durán & Rodriguez-Sánchez, 2021) investigate several aspects of this objective, however it is not recent acknowledging novel strains of Covid-19, and it is not aimed specifically at frontline healthcare staff. As a result, the emphasis of this research will be on the frontline healthcare staff.



This research also intends to give recommendations for evidence-based mental health interventions to appropriately alleviate some of the impacts of Covid-19 on frontline healthcare staff, as well as to investigate the elements that contribute to mental health and wellbeing when considering employee engagement.

### **Hypothesis Questions**

1. There is a variation in the overall wellbeing amongst older and younger frontline healthcare workers.
2. There is a positive correlation between one's mental health and one's level of employee engagement.
3. Wellbeing increases as employee engagement increases, in regards to the ISA engagement scale

### **1.4 Research Objectives**

The initial objective of this study is to evaluate whether there is a link amongst employee engagement, mental health, and wellbeing in regard to frontline healthcare professionals during the recent pandemic. Quantitative data gathered from participants working as frontline healthcare workers in ambulance stations, general hospitals, nursing homes, and pharmaceutical companies throughout Ireland will be used to assess this.

The primary goal of this research was to ascertain how the mental health and welfare of Irish frontline healthcare workers influence their level of employee engagement, notably during the recent Covid-19 pandemic. The DASS 21: Depression Anxiety & Stress Scale, WHO-5 Scale and The ISA Engagement Scale (Soane, et al., 2015), were all used to accomplish this. Following the utilization of these scales, the effectiveness of each scale presented were verified utilizing Cronbach's Alpha.

### **1.5 Overall Structure**

The primary focal point of the dissertation is to provide a research study on whether or not there is a correlation between mental health and wellbeing in terms of employee engagement,

in relation to frontline healthcare staff. Figure 1 : Dissertation Structure illustrates a graphical representation of the thesis construct. The initial phase of this research study, scheduled to commence with the initiation, portraying the foundation of the thesis and connotation for the present research investigation and thus, enabling a strategic vision for the comprehensive research study and therefore, the interpretation of the study .Continuing on, in the following chapter (Chapter 2), the author will assess three primary components referring to the relevant topic of the research. The initial component will look at current and existing literature on mental health and wellbeing during the recent pandemic, contributing factors to mental health and wellbeing amongst healthcare workers, potential causes of stress among healthcare workers and needs for measures, policies, and changes to protect and promote mental health and wellbeing in frontline healthcare staff.

The next component of the research literature review aims to evaluate employee engagement. The review will summarize the significance of employee engagement within the workplace and the advantages for having an engaged workforce for both the employer and the employee. The third component of the literature review will aim to evaluate the aspects of frontline healthcare staff to enhance the perspective that such drivers for employee engagement for this current time and workforce differ from drivers pre pandemic.

Chapter three aims to express the current study's research goals and the three research hypotheses. Chapter four assesses the research methodology approaches that were employed. This section describes the philosophical nature of the current research study, obtaining an understanding of the utilization of a quantitative methodology approach survey in collecting research and furthermore, analysing the implementation of the selected methodology scales for the objective of analyzing the research data: ISA Engagement Scale, Depression, Anxiety and Stress Scale and The Who-5 Scale. This chapter then goes on to assess the emphasis of the relevant ethical implications

The fifth chapter interprets the research methodology findings with the utilization of SPSS, a quantitative research applications, and vindicates the validity with Cronbach's Alpha and correlation evaluations. Finally, Phase 6 of the research study will present the research findings with respect to the existing theoretical goals and objectives and the rationale of the

study. Limitations and potential research guidance are also proposed, and a CIPD Personal Reflective Statement pursues.



*Figure 1 : Dissertation Structure*

## **Chapter Two: Literature Review**

### **2.1 Literature Review Introduction**

Approximately, just over four months following the initial cases of Coronavirus 2, the respiratory syndrome variant were encountered, in Wuhan, China, WHO formally proclaimed the Covid-19 epidemic as a worldwide pandemic in March 2020. Over 5.5 million people have died as a direct result of the coronavirus, which now has contaminated over 349 million people (WHO, 2020). The emergence of novel infectious Covid-19 strains, including Delta and Omicron, expresses concern for front-line healthcare workers. At the same time in which the vaccination program is being implemented at an extraordinarily furious pace, an epidemic of concerns with mental health and wellness is emerging. Due to the anguish of making tough decisions, the trauma of losing patients and colleagues, and the chance of infection for both themselves and their patients, frontline healthcare workers are more susceptible to physical and psychological stress and burnout (Leo, et al., 2021).

A management-led intervention is one that encourages collaboration while integrating innovative forms of leadership support, which reduces workplace stress and increases the probability of establishing an environment of positive mental health and well-being (Kenny & Fluck, 2014).

### **2.2 Mental Health and Wellbeing in Frontline Healthcare Staff**

#### **2.2.1 Contributing factors to mental health and wellbeing amongst healthcare workers**

Healthcare workers including nurses and paramedics is a demanding profession that necessitates great competence, continual vigilance, formidable team collaboration and the provision of round the clock care, healthcare causes a lot of job stress in healthcare staff who are currently bombarded with various physical and psychological obstacles at work. When healthcare workers are exposed to mortality, patients, their families and confrontations with management, their stress levels soar. Workplace stress may be detrimental to a person's health and wellbeing and elevated quantities have also been correlated to high absenteeism and low productivity among employees. The best illustration of this statement is the Irish Post reporting that an anonymous 20-year-old English nurse was found comatose in the intensive care unit at King's College Hospital London and was unable to be revived (Brent & The Irish Post, 2020).

Numerous health care staff were compelled to resign by their relatives, whereas in other circumstances, others were ignored by individuals due to the obvious nature of their jobs, others were subsequently prohibited from engaging in many institutions as a consequence, which therefore put them in financial distress (Xiang, et al., 2020). Chronic stress and mental disorders that emerge among healthcare workers must be accepted in order to ensure that healthcare systems function successful. Individuals who are more susceptible to these difficulties to consequently minimize disengagement and turnover in the workplace and increase employee morale notably over the duration of the recent Covid-19 pandemic, must be distinguished.

To ensure that their employees are capable of giving the maximum standard of care, hospitals must secure their employees safety. Numerous frontline healthcare professionals experienced extreme difficulty in keeping up with the rapid pace of their job and duties as hospitals struggled to maintain adequate safety precautions for their staff at the commencement of the pandemic. Frontline healthcare staff frequently act as substitutes for loved ones, providing them remote access, considering that the isolation legislation dictates that the presence of family members and friends at the hospital bedside is only authorized on exceedingly rare circumstances (Maben & Bridges, 2020).

A significant contribution to mental health and wellbeing and an excellent example is “The Great Resignation”, a phrase invented in May 2021, that refers to the unprecedented quantity of individuals quitting their positions since the outbreak commenced. Numerous individuals have determined that their work-life balance has become more crucial to them following the introduction of working from their homes for a prolonged period of time with no commute (Drenik, 2022).

### **2.2.2 Potential causes of stress for frontline healthcare staff**

Stress is a result of uncertainty and is therefore more prevalent in workplaces featuring impressive expectations on employees, such as strict deadlines and a hectic schedule, however, insufficient work flexibility which includes limited autonomy. Examples of impediments include ambiguous objectives, governmental restrictions, and conflicting desires (Bolino, 2020). Extraordinary grief over a relative’s passing, isolation or quarantine can disrupt work and daily routines, which could be stressful for healthcare workers.

Furthermore, the preoccupation with and hypersensitivity to cleanliness and sanitation (Javadi, et al., 2020). Reintegration into the professional workforce for frontline healthcare workers will prove challenging. Healthcare professionals are required to function in unstructured settings, frequently with unfamiliar teams, treatments, and technology. Additionally, healthcare experts are frequently being discharged from their education premature in order to engage and deliver professional front-line care (Royal College of Nursing, 2020).

Individuals have exhibited anxiety-related behavioural responses to this epidemiological calamity, which has culminated in hand sanitizer, medical masks (Shigemura, et al., 2020) and toilet paper (Corkery & Maheshwari, 2020) being substantially scarce and a limited supply. This statement therefore implies that the Coronavirus certainly poses a threat to individual's mental health in addition to their overall physical health.

### **2.2.3 Needs for measures, policies, and changes to protect and promote mental health and wellbeing in frontline healthcare staff**

An analysis of contemporary research highlighted a wide range of health care professionals who are especially susceptible to a deterioration due to the global epidemic, both at workplace as well as outside the workplace, there has been a significant drop in the quality and standard of psychological health. The organization should alternate a succession of shifts with days off scheduled for holidays and minimize the severity of participation rotations. Engagement of all healthcare employees in workplace decisions is advocated. Moreover, a support network for medical professionals should be established, and it should emphasize the need for reimbursements for childcare and other expenditures. The discrepancy between anticipated healthcare resource requirements and actual staffing needs may be vividly illustrated through one research.

One particular organization established a three-pronged strategy to manage the psychological health of its workforce, including the development of an intervention division to provide generic content on the web, the establishment of a psychological assistance helpline, and collective stress-reduction activities. The involved healthcare staff remained reluctant to participate, however. The established initiative was modified to include complete health

requirements, rest areas, recreational activities, and upskilling on the treatment of Covid-19 patients as a consequence of direct involvement among employees.

Retaining or returning to employment can be a crucial element of the healing process for individuals who have endured poor mental health, as it fosters social inclusion, self-confidence, and self-esteem (Perkins, et al., 2009). Individuals who suffer from mental health issues are more succumbed to secure employment if their workplaces are healthier.

Governments often incur additional costs if this is not accomplished. This statement is demonstrated by the Irish budget for 2022, which allocates a total of €1.149 billion to mental wellbeing. This is an incremental €47 million for the following year, of which €13 million will ensure continued levels of service standard (Department of Health, 2021).

When employers disregard the importance of mental health and their employees, this can have repercussions such as absenteeism, resignation, or even worse, such as, in Australia, a court recognized that a transport company made a mentally ill employee's position redundant as a component off a legitimate restructuring process, but discovered it took unauthorized punitive action when it unfavourably modified her position due to her poor mental health circumstance (iHR Australia, 2015).

## **2.3 Employee Engagement**

### **2.3.1 Introduction to Employee Engagement**

Employee engagement, according to Kahn (Kahn, 1990), is defined as, “the empowering of organisation members selves to their work-related activities; in interaction, individuals engage and exhibit themselves physically, intellectually, and psychologically throughout the role performances.” The cognitive dimension of employee engagement pertains to an individual's perception of the organisation, its leadership, and workplace circumstances. The emotional aspect emphasizes on the attitudes in which employees have toward the organisation and its leaders as well as how they feel about each of those three components. The physical dimension of employee engagement refers to physical exertion made by individuals to accomplish the tasks. (Kahn, 1990) argues that remaining engaged implies being both physiologically and mentally engaged while assuming and executing out a position within an organisation.

Employee engagement refers to a “motivational condition” (Meyer & Gagne, 2008), distinguished by devoting an individual’s all to an activity or a particular project (Kahn, 1990). Employee engagement, according to (Rafferty, et al., 2005), is also “distinct from the two notions that occurred before it- commitment and organisational commitment, because it abundantly illustrates that it is a mutually beneficial approach for both the employee and the employer.”

Employees are one component that cannot be reproduced or replicated by opponents as well as, if maintained and committed effectively, are recognized as perhaps the most precious asset. (Baumruk, 2004) reiterated this concept, noting that “employee participation is perceived to be the most efficient metric for evaluating an organisations dynamism.” Additionally, a further widely accepted definition of engagement is proposed by (Buckingham & Coffman, 1999) of the well-known Gallup organisation, who asserted that “the right person in the right position with the right supervisors foster employee engagement”. Furthermore, they also maintained that a completely motivated individual is one who can affirmatively respond to all twelve of the survey items about the workplace, establish by the Gallup organisation.

### **2.3.2 Importance of Employee Engagement for the Employer**

Employers must be aware that providing training and development to all of their staff members, and especially to their highly competent members not only enhance their capabilities and contribution to the organization but will also function as a strong retention incentive. Of course, the potential that staff members will depart an organisation, taking their new abilities with them, will always remain. Nevertheless, staff members of businesses that do not participate in employee advancement will lack incentive to remain in the organisation.

If companies seek to retain their viability in the existing economy, businesses must be familiar with a variety that exists in their workplace, the labour market in general, and the clientele. As the global workplace continues to evolve and very, the management of these companies are confronted with such a multitude of new prospects and constraints. Identifying the distinctions between the way work was done previously and how it will presumably evolve in a more diversified workplace is just one of the many unforeseen challenges that can occur (Norman & Johnson, 2022).



### **2.3.3 Importance of Employee Engagement for the Employee**

Employees who are already in greater physical and psychological health function better than those who are not (Robertson & Cooper, 2010). This should be established as a commodity by the organization to enhance general effectiveness. Furthermore, in order to promote an individual's productivity and effectiveness the link between workplace engagement and overall wellbeing should constitute the centerpiece of organisational objectives and strategies formed. For the employer, enabling managerial success and positively reinforcing the significance of these activities can further enhance the psychological connection between the employee and company. A positive, social workplace benefits the employee as well as the employer who benefits from motivated, engaged staff.

According to (Padashetty & Jalaja, 2018), the research demonstrates that incentive programmes, strategies, and regulations have always had an impact on employee engagement. Organisations that incentivize involvement through incentive schemes are extremely involved. (Bartłomiejczuk, 2015) examines the impact of recognition programmes on employee engagement. As stated by Dr. (Trent Kaufman, 2013), individuals who receive significant levels of recognition are much more inclined to develop innovations and enhance workforce productivity. The acknowledgement has a greater impact on their involvement, efficiency, and ingenuity.

### **2.3.4 Sociocultural Approach of Employee Engagement**

Employees are increasingly conscious of the need to optimize their overall employability in the current workplace setting, where the idea of stable employment from womb to tomb is typically a bygone era. Individuals frequently accept jobs since they anticipate the expertise will appear good on their resumes, therefore motivates individuals to give the role their maximum performance. Furthermore, if employees do not believe that they are further developing themselves in their role, as they expect to develop continuously, as a result, they are more inclined to look elsewhere.

Google was among the first corporations to emphasize the importance of identifying the needs of its own employees. It empowers its employees to work on their own personalized schedules, which promotes innovation and performance. They have granted their employees

unlimited autonomy to work in any manner they choose. Employees increasingly prefer to be employed by a company that enables them to adore what they are doing. Google provides numerous benefits to its employees to indicate that they are not only engaging in their overall wellbeing but also in their prospects. These benefits include, complimentary chef-prepared organic produce, table tennis and computer games station, dry cleaning, and in-house napping pods, to highlight a few.

An organization can continually monitor employee satisfaction in a plethora of ways. Southwest Airlines, is that of an instance of successful employee satisfaction, encourages employees to participate to the creation of a brand-new uniform rather than contracting an independent body to establish one (Southwest, 2014). A further illustration is a New York start-up firm with a vibrant company culture that is perfectly portrayed through its active Instagram profile. This startup has proactively empowered its employees to undertake risks and fail securely by presenting a “Sip ‘n Skimms” or “Failure of the Week” on a frequent basis, encouraging employees to take risks (theSkimm, 2016).

Certain aspects of the work culture are long past overdue for modification as we embark on a new phase of the workforce. The five-day work week and the typical 8 hour nine-to-five shift are obsolete and have been proven ineffectual and unnecessary during the pandemic. The epidemic highlighted that adaptability will be crucial in the new workplace. To hire talent after the pandemic, numerous organisations established increased minimum wage and significant benefits. Employees desire a superior, both psychological and physical work environment, which is the reason companies such as Google and Meta provide such a hybrid workplace culture.

### **2.3.5 Drivers of Employee Engagement**

An assessment executed by (Penna, 2007), established that purpose and fulfilment in the workplace has the potential to be a beneficial strategy for engaging the employee and the employer to create a greater close-knit relationship for the advantage of both. Employees consider meaning once they encounter a feeling of belonging and the liberty to be themselves, and the opportunity to participate.

Individuals desire to work in organisations where they can identify purpose in their employment. (Penna, 2007) researchers additionally created a brand-new model entitled

“Hierarchy of engagement” which closely analogous an established Maslow’s theory which demonstrates the need for a hierarchical format. At the bottom stage, this includes basic requirements including wages and other benefits. Once an individual has fulfilled these requirements, they will then further evaluate career progression prospects, the potential of development, and the inclusion of a leadership style into the equation.

According to a study conducted by (deBara, 2021), more than 2,000 employees surveyed from medium to large organisations throughout the United States stated that overall career growth with the organization where they are presently employed has either entirely halted or has delayed considerably attributable to the pandemic. As well as, given that such a substantial proportion of the workforce believes their career paths have been temporarily suspended, approximately half (47 percent) of survey participants are now either actively searching for or contemplating seeking a new position, one in which provides them with the opportunities for advancement they necessitate to pursue the next step in their careers.

(Rakhab, et al., 2021) conducted a research studying entailing 333 participants which indicated that having good health and wellbeing was the most crucial component impacting their professional performance as an Advanced Practice Nurse (90.1%). It is widely recognized that the workload of Advanced Practice Nurses is difficult, and maintaining excellent health is crucial. Another significant survey outcome was that 87.1% of respondents believed that possessing considerable experience in specialist industries was vital for their career progression and the development of the profession.

### **2.3.6 Benefits of Employee Engagement**

Employee engagement and organisational fulfilment is significantly correlated, according to particular exploratory research. According to research by (Harter, et al., 2002) , there is correlation involving employee revenue and consumer satisfaction, and a 0.17 correlation involving employee engagement and consumer contentment. Throughout the investigation of the calibre of bar and hospitality operations, (Salanova, et al., 2005) revealed that employee performance and client loyalty are impacted by the degree of employee participation in an organisation.

Any organization will reap maximum rewards as a result of implementing employee engagement instantly, which will enhance organisational performance and enhanced

profitability. Individuals frequently achieve superior standards of work when they are motivated versus when they are disengaged.

According to (Macey & Schneider, 2008), as engagement is thematically unique, it therefore necessitates a greater energy investment that could be in the approach of psychological, somatic, or spiritual, in comparison to other workplace characteristics including contentment, devotion, and participation.

Lastly, it is critical to note the significant shift in employee engagement standards in light of the recent pandemic. As a result of Covid-19, it has promoted many employees to participate in remote working from their household, without a doubt, where viable. Additional requirements are essential for working at home. At a time where employees suspect their employers are providing with ample resources and assistance, in addition to a mechanism for managing the obligations of domestic life while respecting the limitations of professional responsibilities in the communal space, working from home can prove a gratifying efficient work paradigm (Foster, et al., 2022). (Putnam, et al., 2014) revealed that organizational culture has a major impact on the effectiveness of flexible work schedules. Working from home entails much more than just a transition of a geographical place; it also modifies the individual's external conditions, along with the apparatus, equipment, and materials required for executing assignments, and finally, the nature of relationships with colleagues (Sardeshmukh, et al., 2012).

As a response, it is critical for companies to provide adequate materials and equipment, as well as appropriate training and assistance for working remotely. Employers must also follow legislation concerning working from home, for instance, the "Right to Disconnect Act," which was enacted in 2021.

## **2.4 Conclusion**

Up to this point, a systematic review and analysis of the literature explored the contribution of employee engagement within the workplace, while also assessing the covariates and indicators that can significantly affect it, with an emphasis on health and wellbeing, in addition to the strain that frontline healthcare professionals encounter on a daily basis. Rewards for both the organization and the employee were addressed, as well as mechanisms and approaches that assist in the enhancement in the two's rapport. This was specifically

emphasized in perspective of sociology, as when management enables and is on board with frontline healthcare employees for their health and well-being, they are perceived positively.

It was suggested in the literature that less empowered individuals were much more susceptible to experiencing pressure, as a natural consequence, they allow for a significant contribution to the initial challenges and problems presented above including psychological issues and obstacles, disengagement and production efficiency.

Existing literature further evaluated the current transition in the workplace paradigm and ethic directly translatable components of the workplace environment that are long overdue for transformation as we enter a brand-new phase of the workforce. The sociocultural approach, such as circumstances in which people routinely undertake occupations because they anticipate the expertise would like well on their resumes, motivates them to give the position their maximum performance.

The objective of this research is to determine whether there is a correlation between mental health and employee engagement among frontline healthcare workers. The review of the research aimed to show how employee participation can be productive and beneficial, and it will support in the assessment of both the employers and the employee's preconceptions of employee engagement in the workplace.

Finally, the vast majority of research explores overall institutional and colossal employee perception on performance management, nevertheless, this study seeks to examine and highlight employee engagement from the perspective of healthcare employees who have been on the forefront when it comes to the recent pandemic and whether or not they assume it is a meaningful and effective component of their career.

## **Chapter Three: Research Objectives**

### **3.1 Introduction to Research Objectives**

The main objective of this study is to evaluate whether there is a correlation between employee engagement, mental health, and wellbeing in regard to frontline healthcare professionals during the recent pandemic.

The hypothesis for the main objective above would entail that there is a positive correlation between one's level of employee engagement and one's mental health. The literature has discussed that, especially for frontline healthcare workers there is a need for greater employee engagement approaches and approaches to mental health for frontline healthcare workers. Employees would become more engrossed to engage and be productive in their career if all of these requirements and need were fulfilled as opposed to the contrary.

### **3.2 First Research Objective**

The first research objective is to assess if there is a variation in the overall wellbeing amongst older and younger frontline healthcare workers.

The hypothesis for the first objective above would entail that as the employee's age increases, the level of employee engagement increases. As discussed in the literature review, especially younger employees seek to fill their resumes with careers that they anticipate will look great. Once the organisation invests into employee engagement the more attractive the workplace will look for individuals who are inclined to accept positions that look great.

Does employee engagement increase or decrease as they get older? Is age related to employee engagement?

### **3.3 Second Research Objective**

The second objective of the research is to determine if there is a positive correlation between one's mental health and one's level of employee engagement. There will be an analysis of the data gathered in order to determine if there is a positive correlation and direct influence between the level of mental health and the level of employee engagement.

The hypothesis for the second objective is that there will be a positive correlation between one's mental health and one's level of employee engagement. Previous literature has established that the more employee's mental health is nurtured the greater the level of

employee engagement is. This includes trusting the employee, initiatives and allowing the employee to have an input in the organisation.

As mental health increases will employee engagement increase or decrease? As employee engagement increase will mental health increase or decrease?

### **3.4 Third Research Objective**

The third and final objective of the research is to determine if employee engagement, utilizing the ISA engagement scale, will be positively associated with the self-rating of an individual's self-rating of their overall wellbeing, utilizing the WHO-5 Scale.

The hypothesis for the third objective is that there will be a positive correlation between employee engagement and how individuals' self-rate organizational citizenship behaviour in relation to the ISA employee engagement scale. As individuals' self-rate their organizational citizenship behaviour there be a positive correlation corresponding to employee engagement level.

As individuals' self-rate their overall wellbeing will employee engagement increase or decrease? Is wellbeing associated with employee engagement?

## Chapter Four: Research Methodology

### 4.1 Introduction to Research Methodology

This section will assess the methodological approach available for the research and what is appropriate for it to employ in response to the research problem noted in Chapter One that investigates if there is a correlation between mental health and employee engagement. Similarly, this chapter discussed the diverse techniques and methodologies for obtaining relevant information on the research and assessment of employee engagement and mental health.

Accordingly, this section of the study stipulates the methodological approach, research methodology, research survey participants, information gathering, mechanisms utilized, affirmation and management of the mechanism, data representativeness and durability, study synopsis, data analysis method, and analysis of the findings data.

The paper subsequently examines the rationale for the research strategy adopted, as well as potential alternative approaches that may have been employed, while also evaluating the benefits and demerits of this research. The methodology chapter also addresses concerns of study validity and ethical implications.

### 4.2 Research Framework

(Neuman, 2014) defines methodology as the structural component that supports techniques, and this author went on to provide a comprehensive description of the two aspects:

*“Comprehending the complete research process, including its social-organisational context, ethical standards, political ramifications, and philosophical assumptions of newfound information from the present research is every that methodology entails. Procedures are the precise strategies that we utilize in a study to choose instances, monitor, and evaluate social interactions, acquire, and revise statistics, interpret information, and reflect on conclusions.”*

The “Research Onion” envisioned by (Saunders, et al., 2007) is an instrument that facilitates in the establishment of the research and the development of the research by leveraging the layers of the research onion in stages. The “Research Onion” presents a comprehensive



explanation of the essential layers or phases that must be fulfilled in order to design an efficient strategy (Saunders, et al., 2007).

The research methods begins with the identification of the main philosophy, followed by the classification of approaches, techniques, and approaches, as well as the institution of timeframes, each of which lead to the study design, the main methodologies and processes of data collection and evaluation which is portrayed in Figure 2.

In accordance with the Research Onion, the initial step is to identify your philosophical framework, which alludes to the assumptions you make about how you perceive the universe.

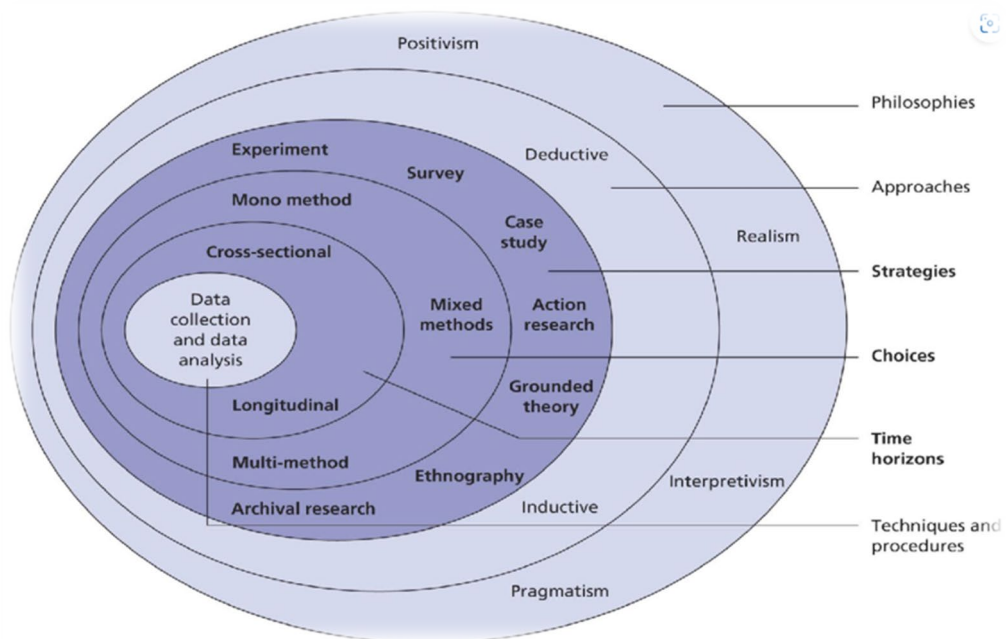


Figure 2: "Research Onion"

### **4.3 Research Philosophy**

The understanding of research philosophy is “the evolution of knowledge and the nature of knowledge” (Saunders, et al., 2009). The connotation may appear complex; however, the writer continues to demonstrate that the fundamental concept behind the term is precisely something that every researcher does when conducting research, which is the desire to expand knowledge in a specific discipline. According to (Crossan, 2003), in his book “Research Philosophy: Towards and Understanding”, there are numerous reasons why researchers need to comprehend philosophical concerns before commencing with a specific discipline.

Ontology and Epistemology are two main components of methodological research approaches. Ontology is associated with “the nature of reality” whereas Epistemology is focused with “knowledge-based assumptions” (Saunders, et al., 2016). The research of epistemology is associated with positivism and interpretivism (Cooper & Schindler, 2011). Epistemology can be categorized into two aspects: the “feelings researcher” and then “resources researcher.” As a result, the “resources researcher” is engaged with establishing a positivist paradigm and approach, meanwhile the “feeling researcher” is concerned with developing an interpretivist paradigm and approach. In the sphere of research and empirical philosophy, epistemology is hence categorized into three sections: Positivism, Realism and Interpretivism.

Positivism is a philosophical approach in research that highlights the importance of observation in the evolution of information, and so emphasizes measurement of occurrences as significant for the development of comprehension (Fox, 2008). As a positivist, you should endeavor to act impartial and disconnected from your studies and information in order to prevent inherently biasing your discoveries (Crotty, 1998).

A positivist research approach is characterized as fact-based instead of the contrast of perceptions of “observable social reality” that subject themselves to statistical data (Saunders, et al., 2007). In light of the findings, researchers eradicate their prejudices and stay impartial generating outcomes by quantitative assessments (Burke Johnson & Onwuegbuzie, 2004). This strategy conflicts with Interpretivism, which advocates that the author’s philosophical assumptions perspective would be that the distinctions between the disciplines must always be comprehended (Saunders, et al., 2009).

Post-positivists use experimental and correlational investigations to better grasp causal connection. Participants' perceptions are frequently solicited in conjunction to perception acquisition. Additionally, since information is hypothetical, propositions are not verified but instead are not discarded (Creswell, 2009). Post positivism is a criticism of the ontology and epistemology underpinnings of information frameworks. It is a combination of viewpoints that reflect a repudiation of positivism assertions to be inclined to detect a unified social structure and to assertion as the only methodology for doing so (Fox, 2008)

#### **4.4 Research Approach**

Deductive and inductive research strategies are two completely different kinds. An inductive strategy is a method in which the researcher initially gathers data and then generates a concept upon the assessment of the data.

Deduction commences with the universal and progresses from the particular to the general, objections based on previous experiences, knowledge or perceptions are best articulated inductively, whereas objections governed by legislation, regulations or other commonly recognized concepts are better summarized deductively (Rochim, 2006).

(Creswell & Plano, 2007) insists that a deductive researcher operates from the "top to the bottom," commencing towards propositions to findings to retain or reject the theory. They characterize the inductive researcher, on the contrary, as an individual who operates from the "bottom to the top," leveraging the participants perspectives to generate overarching motifs and establish a concept integrating the concepts.

In conclusion, a deductive research approach was employed as the author formulated the assumption that the existence of mental health and wellbeing in regards to frontline healthcare staff is indeed a contributing factor to determine employee engagement, so, from this statement, we established a quantitative methodology approach questionnaire to assess it

#### **4.5 Research Strategy**

In order to achieve the research aims noted at the beginning of the research, the researcher must determine how they will acquire the data, when making those decisions, the researcher

concluded that there are two categories of methodological research approaches: quantitative and qualitative.

A quantitative research approach is characterized as observational and deductive in essence. It often employs a significant population size to assess and evaluate a particular research question with regulated answers. Quantitative research approach includes utilizing surveys, questionnaire, and polls. Quantitative methodologies and tools enable researchers to accumulate a diverse and universally applicable collection of results and convey them concisely and effectively. Nevertheless, because they necessitate a deductive research approach and predefined ranges of regulated answers based on research theory, they struggle to provide insight into the participants' specific experiences because they do not enable respondents to convey their emotions.

The qualitative research approach, according to (Maxwell , 2012) , is an emotive, intellectual, and methodical procedure for obtaining facts or information about the environment represented conceptually and analyzed through themes or tendencies. In comparison, qualitative research employs participant observation as well as comprehensive interviews. The design of qualitative research is preoccupied with occurrences, processes, and individual's interactions with physical phenomena -. The above research design would be selected because it is beneficial at the initial stages of the research timeframe when the researcher is unaware of what might be evaluated or what to put emphasis upon.

For the proposed research study and investigated, quantitative utilizing a self-administered and established survey was considered to be the most suitable and efficient method for data collection. When analysing prior research on the topic of mental health and wellbeing in regards to employee engagement, the largest proportion of it included employing quantitative approaches to the research, including the NHS Staff Survey, for example (NHS, 2022) Since quantitative research is renowned for assessing thoughts and perceptions, it is appropriate for the research objectives. Due to time limitations, quantitative research complemented the researcher more so than qualitative data, which can be time consuming, such as extensive interviews.

#### **4.6 Participants and Sample**

A sample of frontline healthcare employees engaged in the quantitative research. The questionnaire was distributed to participants via communication mediums such as direct

and personal SMS, Facebook Messenger, email, and various Facebook groups including local pages where members are healthcare frontline workers. These participants were colleagues, college friends, and colleagues of the author's father who are employed in a wide range of healthcare sections, including the National Ambulance Service and Nursing.

The sample was distributed to a diverse group of individuals from various industries in order to garner a diverse range of participation. Sixty-one responses were obtained in combined capacity, which represented a satisfactory and significant representative sample for the data, that allows us to commence the establishment of the research data analysis.

#### **4.7 Research Design**

Demographics is focused in the first phase of the survey design. The author considered that it would be beneficial for the researcher to gather data from participants regarding employees age, gender, employment status and employment sector. These questions are useful in assessing the statistics which will therefore indicate opinions from employees in various employments sectors and employment status or what viewpoints may differ between the two genders.

The following section includes questions related to the Depression Anxiety and Stress Scale (DAS-21) and the WHO-5 scale, featuring participants being asked to respond their personal experience to a variety of situations such as "I couldn't seem to have any happy feelings at all." On a scale, the respondent is required to score these propositions. Likert Scales are a style of grading system scales that are frequently utilized to capture individual's attitudes and perspectives. The participant is presented with a variety of statements and asked to evaluate these on a 5- or 7-point rating scale.

Originally, the qualitative technique was anticipated to enable for more comprehensive research of employee's views and approaches to mental health, wellbeing, and employee engagement. Although this approach would accurately determine the prevalence of mental health and wellbeing as well as employee engagement, how content the participants were with this and evaluating employee engagement levels would have been problematic due to the absence of an employee satisfaction and engagement. As a result, a strictly qualitative approach was ruled out. The author also contemplated a mixed methodology approach that incorporated quantitative and qualitative methodologies such as extensive and in-depth

interviews. This method was ultimately rejected due to limitations especially in regards to time and the potential of altering the study's principal objectives as stated in Chapter 1. A self-managed questionnaire was found appropriate for the research and for gathering data and thus, a quantitative approach was implemented.

#### **4.8 Materials**

Three previously validated surveys were employed to accurately evaluate the hypothesis and research objectives in order to successfully construct the quantitative research approach utilizing a quantitative survey.

##### ***4.8.1 Depression, Anxiety and Stress Scale (DASS-21)***

The DASS-21 Depression Anxiety and Stress Scale introduced by (Lovibond & Lovibond, 1995) is used to assess the intensity of psychological disorder indicators correlated with three aspects which are assigned ratings of mild, moderate, or severe. The Depression Anxiety Stress Scale questionnaire comprises of twenty-one items and is designed to evaluate stress along the three dimensions of depressions, anxiety and stress responses and regulation. Each question is evaluated from 0 to 3, with the participant required to decide from 0- Did not apply to me at all to 3- Applied to me very much, or most of the time.

##### ***4.8.2 World Health Organization Well-Being Index (WHO-5)***

The World Health Organization Well-Being Index (WHO-5) introduced in 1998 by the WHO Regional Office in Europe, is a concise questionnaire comprised of five basic and non-invasive questions that investigate participants psychological well-being. The scale has a sufficient reliability as a screening instrument for depression in addition to a final outcome in medical studies, and it has been employed extensively in a variety of research domains. Each question is evaluated from 0 to 5. The WHO-5 scale requires the participant to decide from 0- At no time to 5- All the time from a series of scenarios in which they evaluate over the last two weeks, such as "I have felt cheerful and in good spirits."

##### ***4.8.3 Intellectual, Social, Affective Engagement Scale (ISA)***

The ISA engagement scale established and developed by (Soane, et al., 2015), is founded on the belief that engagement has three dimensions: Intellectual, Social and Affective. When these three elements are combined, they provide an aggregate degree of engagement for each participant. – developed a theory and concept of engagement that is implemented in a new

nine-item scale known as the Intellectual, Social, and Affective Engagement Scale. Each item from each dimension is presented in the form of a statement with a seven-point Likert scale response range (1- strongly disagree to 7-strongly agree).

#### **4.9 Procedure for the Research**

Participants frequently complete surveys and other quantitative methodology approaches, these quantitative surveys can be self-administered surveys, that can be dispersed in a digital format which in fact, varies from the dispersion of mail to online (Saunders, et al., 2009). Every alternative was reviewed, and the internet mediated approach was decided as the more efficient approach by distributing the survey via messaging apps including Facebook and WhatsApp, Facebook groups, Confidential text messaging, emails, and finally, publishing the survey on my personal LinkedIn in an attempt to inspire and attract healthcare professionals to participate and complete the survey.

##### **4.9.1 Distribution**

As previously stated, this approach was selected by referencing the chart established by (Saunders, et al., 2009), that evaluates the primary traits of questionnaires disseminated utilizing the mentioned three quantitative research methodologies.

For the aforementioned purposes, the intranet and the web administered survey was the most adequate match for the proposed quantitative research. It was more straightforward to acquire the most optimal access to healthcare workers by implementing an online survey strategy. There is also a significant amount of confidence that the relevant people completed the survey and did not accomplish the completion of the task on another individual's account. The technique of distribution would also not be confined to Louth, where the author of the research resides, for the purpose of obtaining data. By utilizing a computerized questionnaire, this form of acquisition also improves the obstacles regarding time because research participants information is obtained instantaneously instead of relying on the delivery of post or retrieval, thus, guaranteeing validity and reliability of data.

##### **4.9.2 Ethical Considerations**

An ethics statement was submitted as a component of the study, in order to achieve compliance with the National College of Ireland Ethical Guidelines and Procedures for Research Involving Human Participants, identifying the objective of the research, and

documenting the engagement with questionnaire participants. Since the subjects of this research are not considered vulnerable, there are no complications concerning assent. This research study was authorized by the Ethical Committee as a component of the proposal validation process in January 2022. Each questionnaire sent out was accompanied by a cover statement that outlined the objective of the questionnaire in depth. The current research questionnaire successfully did not inquire for participants personal information or indentity including, for example, their full name in order to safeguard their identities and therefore maintain their anonymity.

### **4.9.3 Data Analysis**

Following the submission and delivery of the questionnaires, the researcher entered the entire information into the software to commence the data analysis for the research. The researchers employed SPSS to evaluate quantitative data obtained from the questionnaires. It is currently one of the most extensively used computer software packages for quantitative data analysis amongst social scientists SPSS is a statistical analysis software that facilitates in the dissemination of results by generating tables and diagrams. In order to aid myself in the understanding and interpretation of the SPSS software, I referred to the SPSS Survival Manual by Julie Pallant (Pallant , 2002).

The researcher employed descriptive statistical analysis to interpret the data in order to obtain the thesis' results and conclusions. These methodologies will be quantitative and could also be graphical in character. Visual techniques are well-known for recognizing trends in information, whereas quantitative analysis techniques are well-known for delivering precise dimensions.

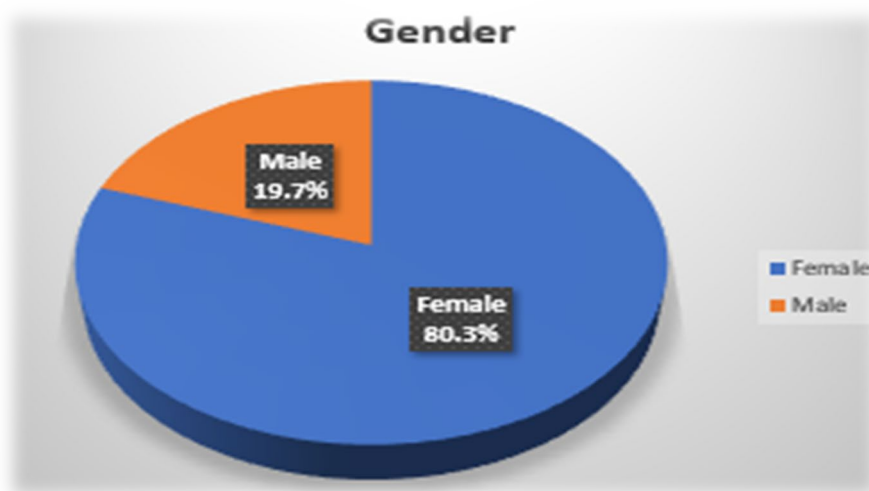
This technique is employed to make it straightforward for the reader to analyze and comprehend the findings. The analysis objective is to present a breakdown of the individuals' perspectives and impressions regarding mental health, wellbeing, and employee engagement. The analysis will also attempt to address the researcher's objectives stated in Chapter One of the research.



## Chapter Five: Research Questionnaire Findings

### 5.1 Demographic Information

In order to disperse the survey digitally, the author distributed the survey utilising popular platforms such as WhatsApp, LinkedIn, and Facebook Messenger. The proposal to engage in the questionnaire specified that participants must be employed in the Irish Healthcare System. The overall number of respondents, as portrayed in Figure 3: Gender Demographics, was sixty-one, with 80.3% or 47 being female and 19.7% or 14 being male, the majority of participants 75.4%, were in Full-Time employment, with 19.7% in Part-Time, 4.9% in other, additionally, 53.3% are married, 11.7% Cohabiting and 35% either single or in other marital



statuses.

Figure 3: Gender Demographics

The first of the three-hypothesis noted in Chapter 3 and examined in this research is whether there is a difference in the overall wellbeing amongst older and younger frontline healthcare workers. As a result, it is critical to examine the age demographics of the respondents, which are presented in the Table 1: Age Categories (Min., max., mean, standard deviation), below in addition to the mean and standard deviation.

The preponderance of survey participants, portrayed in Figure 4: Age Demographics 24 (39.3%) are between the age groups of 40 to 49, 17 (27.9%) are 50 or over, followed by 12 (19.7%) 30 to 39 and finally, 8 (13.1%) under 30 years old.

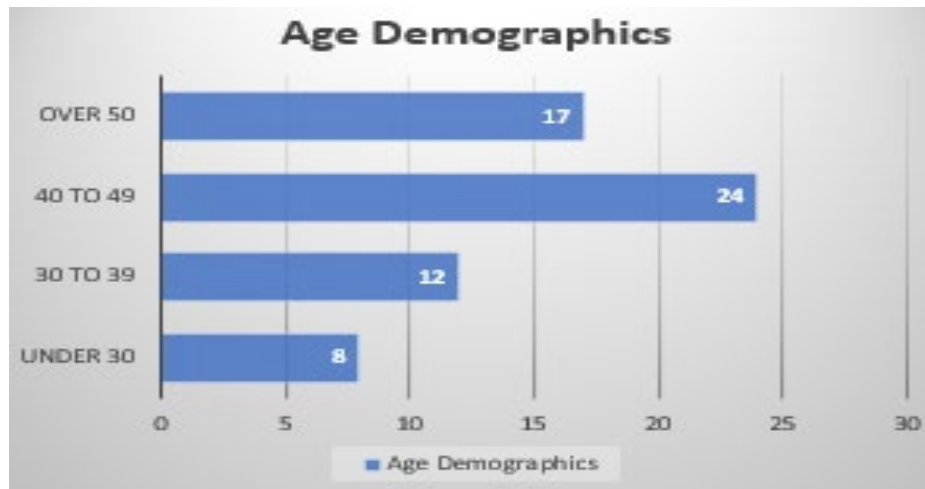


Figure 4: Age Demographics

### Descriptive Statistics

	N	Minimum	Maximum	Mean	Std. Deviation
Age	61	19	67	43.21	10.950
Valid N (listwise)	61				

Table 1: Age Categories (Min., max., mean, standard deviation)

## 5.2 Descriptive Analysis Statistics

Descriptive Analysis Statistics will discuss each of the scales validity that were employed in this research. The author employed Cronbach's Alpha to validate the reliability of the following scales: the Depression, Anxiety, and Stress Scale (DASS-21), the World Health Organisation (WHO-5), and the Intellectual, Social, and Affective Engagement Scale (ISA Engagement Scale). On the SPSS software, each one of the above scales was evaluated for reliability through using the Cronbach Alpha Reliability test.

### 5.2.1 Depression, Anxiety and Stress Scale (DASS-21)

In Table 2: Cronbach Alpha Reliability for DASS-21, exhibited below, the table illustrates the findings of the Depression, Anxiety and Stress Scale reliability interpretation. The total index was generated by 61 responses over 21 items. The Cronbach reliability is assessed to be .936. This figure implies that the scale's participants frequently answered the items of the scale. Therefore, this confirms that the scale is robust and consistent and that participants evaluated the present scale to assess a particular structure. This value is significantly greater than the

cut-off point of 0.7 for a dependable scale, suggesting an incredibly stable and internally consistent scale with all variables contributing to one another.

### Reliability Of Scales Statistics

Cronbach's Alpha	N of Items
.936	21

Table 2: Cronbach Alpha Reliability for DASS-21

In order to gain an insight into the frequency of responses to each element of the Depression, Anxiety and Stress Scale, the author opted to conduct the descriptive analysis test depicted below, in Table 3: Descriptive Analysis of DASS-21 Scale. The table exhibits each component maximum, minimum, mean, and standard deviation.

### Descriptive Statistics

	N	Minimum	Maximum	Mean	Std. Deviation
I found it hard to wind down	61	1	4	2.36	.797
I was aware of dryness of my mouth	61	1	4	1.98	.940
I couldn't seem to experience any positive feeling at all	61	1	4	1.84	.800
I experienced breathing difficulty (e.g., excessively rapid breathing, breathlessness in the absence of physical exertion)	61	1	4	1.57	.741
I found it difficult to work up the initiative to do things	61	1	4	2.15	1.014
I tended to overreact to situations	61	0	4	2.00	.913
I experienced trembling (e.g., in the hands)	61	1	3	1.13	.386

I felt that I was using a lot of nervous energy	61	1	4	1.93	.834
I was worried about situations in which I might panic and make a fool of myself	61	1	4	1.69	.941
I felt that I had nothing to look forward to	61	1	4	1.90	.995
I found myself getting agitated	61	1	4	2.26	.911
I found it difficult to relax	61	1	4	2.26	.893
I felt downhearted and blue	61	1	4	2.10	.943
I was intolerant of anything that kept me from getting on with what I was doing	61	1	4	1.95	.845
I felt I was close to panic	61	1	4	1.72	.915
I was unable to become enthusiastic about anything	61	1	4	1.87	.826
I felt I wasn't worth much as a person	61	1	4	1.66	.873
I felt that I was rather touchy	61	1	4	2.13	.885
I was aware of the action of my heart in the absence of physical exertion (e.g., sense of the heart rate increase, heart missing a beat)	61	1	4	1.70	.782
I felt scared without any good reason	61	1	4	1.57	.694
I felt that life was meaningless	61	1	5	1.49	.906
Valid N (listwise)	61				

Table 3: Descriptive Analysis of Dass-21 Scale

### 5.2.2 World Health Organisation Scale (WHO-5)

In Table 4: Cronbach Alpha Reliability for WHO-5, exhibited below, the table illustrates the findings of World Health Organisation Scale (WHO-5) reliability interpretation. The total index was generated by 61 responses over 5 items. The Cronbach reliability is assessed to be .898. This figure implies that the scale’s participants frequently answered all items of the scale. Therefore, this confirms that the scale is robust and consistent and that participants evaluated the present scale to assess a particular structure. This value is significantly greater than the cut-off point of 0.7 for a dependable scale, suggesting an incredibly stable and internally consistent scale with all variables contributing to one another.

### Reliability Of Scales Statistics

Cronbach's Alpha	N of Items
.898	5

Table 4: Cronbach Alpha Reliability for WHO-5

In order to gain an insight into the frequency of responses to each element of the World Health Organisation Scale, the author opted to conduct the descriptive analysis test depicted below. The table exhibits each component’s maximum, minimum, mean, and standard deviation.

Descriptive Statistics					
	N	Minimum	Maximum	Mean	Std. Deviation
Over the last two weeks: [My daily life has been filled with things that interest me]	61	1	6	3.84	1.227
Over the last two weeks: [I woke up feeling fresh and rested]	61	1	6	3.21	1.331
Over the last two weeks: [I have felt calm and relaxed]	61	1	7	4.69	1.246

Over the last two weeks: [I have felt active and vigorous]	61	1	6	3.80	1.209
Over the last two weeks: [I have felt cheerful and in good spirits]	61	2	6	4.31	.975
Valid N (listwise)	61				

Table 5: Descriptive Analysis of WHO-5 Scale

### 5.2.3 Intellectual, Social, and Affective Engagement Scale (ISA Engagement Scale)

In, exhibited below, the table illustrates the findings of Intellectual, Social, and Affective Scale (ISA Engagement) reliability interpretation. The total index was generated by 61 responses over 9 items. The Cronbach reliability is assessed to be .867. This figure implies that the scale’s participants frequently answered the items of the scale. Therefore, this confirms that the scale is robust and consistent and that participants evaluated the present scale to assess a particular structure. This value is significantly greater than the cut-off point of 0.7 for a dependable scale, suggesting an incredibly stable and internally consistent scale with all variables contributing to one another.

### Reliability Statistics

Cronbach's Alpha	N of Items
.867	9

Table 6: Cronbach Alpha for ISA Engagement

In order to gain an insight into the frequency of responses to each element of the Intellectual, Social and Affective Engagement Scale, the author opted to conduct the descriptive analysis test depicted below, in Table 7: Descriptive Analysis of ISA. The table exhibits each component’s maximum, minimum, mean, and standard deviation.

## Descriptive Statistics

	N	Minimu m	Maximu m	Mean	Std. Deviation
Affective Engagement [I feel energetic in my work]	61	2	8	5.48	1.689
Social Engagement [I share the same work attitudes as my colleagues]	61	2	8	5.18	1.408
Social Engagement [I share the same work values as my colleagues]	61	2	8	5.11	1.439
Social Engagement [I share the same work goals as my colleagues]	61	2	8	5.20	1.339
Intellectual Engagement [I concentrate on my work]	61	2	8	6.44	1.587
Intellectual Engagement [I focus hard on my work]	61	2	8	6.44	1.756
Intellectual Engagement [I pay a lot of attention to my work]	61	2	8	6.43	1.784
Affective Engagement [I feel positive about my work]	61	1	8	5.90	1.859
Affective Engagement [I am enthusiastic in my work]	61	2	8	5.90	1.630
Valid N (listwise)	61				

*Table 7: Descriptive Analysis of ISA*

### 5.3 Research Objectives

#### 5.3.1 Research Objective One

The Pearson Correlation Coefficient was employed to evaluate the correlation between age and mental health (as measured by the Depression, Anxiety, and Stress Scale). The first research objective is to assess if there is a variation in mental health amongst older and younger frontline healthcare workers. The hypothesis for the first objective above would entail that as the employee's age increases, the level of employee engagement increases.

The results from the Correlation Coefficient test statistic presented in Table 7: Pearson's Correlation Hypothesis 1, indicate that there is no significant relationship between age and mental health. The two variables had a substantial negative correlation,  $r = -0.5$ ,  $n = 61$ ,  $P = 0.678$ . There is no evidence to indicate that mental health declines or improves with age which is evident in Figure 5: Scatterplot Hypothesis 1.

		DAS21TOTA	
		L	Age
DAS21TOTA L	Pearson Correlation	1	-.054
	Sig. (2-tailed)		.678
	N	61	61
Age	Pearson Correlation	-.054	1
	Sig. (2-tailed)	.678	
	N	61	61

Table 8: Pearson's Correlation Hypothesis 1



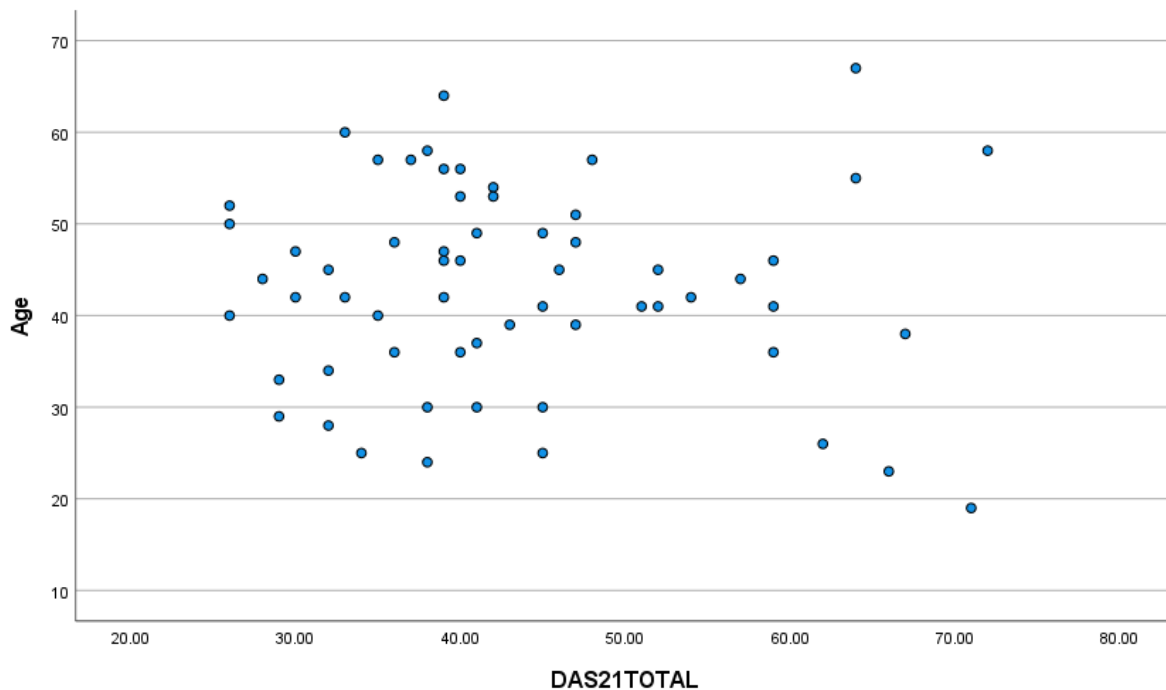


Figure 5: Scatterplot Hypothesis 1

### 5.3.2 Research Hypothesis 2

The Pearson Correlation Coefficient was employed to evaluate the correlation between Employee Engagement (as measured by the Intellectual, Social, and Affective Scale) and mental health (as measured by the Depression, Anxiety, and Stress Scale). The second objective of the research is to determine if there is a positive correlation between one’s mental health and one’s level of employee engagement. The hypothesis for the second objective is that there will be a positive correlation between one’s mental health and one’s level of employee engagement.

The results from the Correlation Coefficient test statistic presented in, indicate that there is a significant relationship between employee engagement and mental health. As the scores for employee engagement increase, as a response, the score for DASS-21 decrease. Furthermore, this entails that a high score of employee engagement results in less symptoms of mental health.

The two variables had a substantial positive correlation,  $r = -0.5$ ,  $n = 61$ ,  $P = -0.357$ . There is evidence to indicate that there is a significant and positive correlation between one’s mental health and one’s employee engagement which is evident in

## Correlations

		DAS21TO TAL	ISATOT AL
DAS21TOT AL	Pearson Correlation	1	-.357**
	Sig. (2-tailed)		.005
	N	61	61
ISATOTAL	Pearson Correlation	-.357**	1
	Sig. (2-tailed)	.005	
	N	61	61

\*\* . Correlation is significant at the 0.01 level (2-tailed).

Table 9: Pearson's Correlation Hypothesis 2

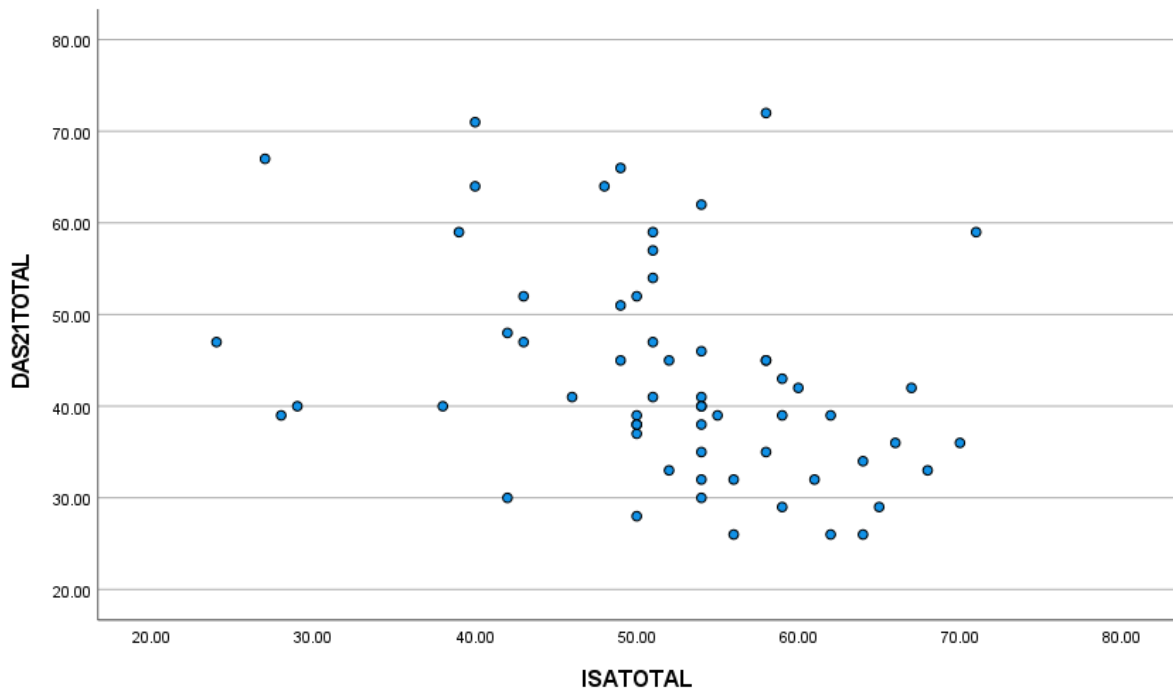


Figure 6: Scatterplot Hypothesis 2

### 5.3.3 Hypothesis 3

The Pearson Correlation Coefficient was employed to evaluate the correlation between Employee Engagement (as measured by the Intellectual, Social, and Affective Scale) and overall wellbeing (as measured by the World Health Organisation Scale). The third and final objective of the research is to determine if employee engagement, utilizing the ISA engagement scale, will be positively associated with the self-rating of an individual's self-rating of their overall wellbeing, utilizing the WHO-5 Scale. The hypothesis for the third objective is that there will be a positive correlation between employee engagement and how individuals' self-rate organizational citizenship behaviour in relation to the ISA employee engagement scale. As individuals' self-rate their organizational citizenship behaviour there be a positive correlation corresponding to employee engagement level.

The results from the Correlation Coefficient test statistic presented in Table 10: Pearson's Correlation Hypothesis 3, indicate that there is no significant relationship between employee engagement and overall wellbeing. The two variables had a substantial negative correlation,  $r = -0.5$ ,  $n = 61$ ,  $P = 0.229$ . There is no evidence to indicate that overall wellbeing declines or improves with employee engagement which is evident in Figure 7: Scatterplot Hypothesis 3.

### Correlations

		WHO5TOTAL	ISATOTAL
WHO5TOTAL	Pearson Correlation	1	.229
	Sig. (2-tailed)		.076
	N	61	61
ISATOTAL	Pearson Correlation	.229	1
	Sig. (2-tailed)	.076	
	N	61	61

Table 10: Pearson's Correlation Hypothesis 3

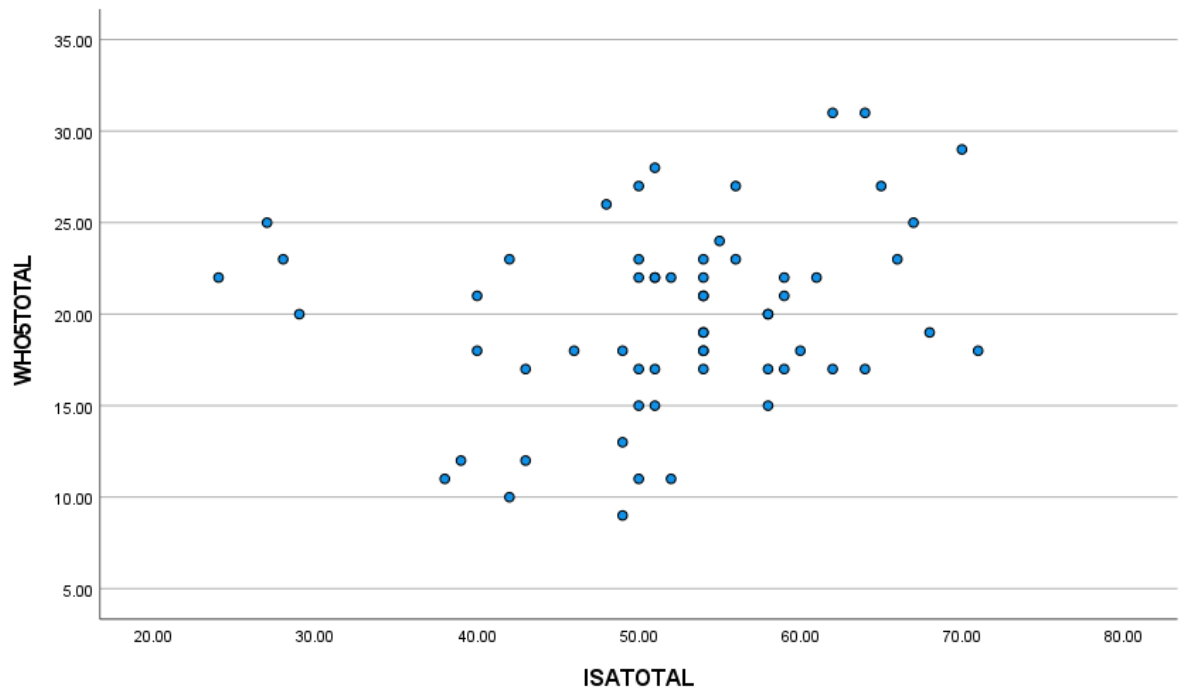


Figure 7: Scatterplot Hypothesis 3

## **Chapter Six: Discussion, Conclusion and Recommendations**

### **6.1 Research Conclusion**

The first research objective was to assess if there is a variation in mental health through the utilization of the Depression, Anxiety, and Stress Scale amongst older and younger frontline healthcare workers,

The research study successfully employed scales for mental health, such as the Depression, Anxiety, and Stress Scale. The mental health scale was continuously responded to by participants, and there was an evident high degree of indicators of frequent poor mental health throughout the population of research participants. The majority of feedback for the 21 items on the Depression, Anxiety, and Stress Scale were “Applied to me to some degree, or some of the time” or “Applied to me to a considerable degree or a good part of time”, denoting that the psychological health of the selected respondents appears quite poor, notably after the recent Covid-19 pandemic.

The literature discussed contributing factors to mental health, potential causes of stress for healthcare workers and the need for measures and policies to be introduced. Healthcare workers including nurses and paramedics is a demanding profession that necessitates great competence, continual vigilance, formidable team collaboration and the provision of round the clock care, healthcare causes a lot of job stress in healthcare staff who are currently bombarded with various physical and psychological obstacles at work. Chronic stress and mental disorders that emerge among healthcare workers must be accepted in order to ensure that healthcare systems function successful.

When employers disregard the importance of mental health and their employees, this can have repercussions such as absenteeism, resignation, or even worse. In accordance with the findings of the study, employees may perceive mental health as a critical and delicate topic, as illustrated by some of the scale test responses. Workplaces that are encouraging and respectful may now be interpreted as being on an equal level to and motivating employee engagement, which diminishes absenteeism and gradually enhances employee’s mental health, especially during such an unanticipated period. Finally, the research findings demonstrated that there was no significant relationship between the age of the participant and mental health.

The second objective of the research was to determine if there is a positive correlation between one's mental health and one's level of employee engagement. There was an analysis of the data gathered in order to determine if there was a positive correlation and direct influence between the level of mental health and the level of employee engagement.

The research review of the literature has examined the significance of employee engagement, as well as the variables and drivers that can influence it, with an emphasis on health and wellbeing, in addition to the strain that frontline healthcare professionals encounter on a daily basis. Rewards for both the organization and the employee were addressed, as well as mechanisms and approaches that assist in the enhancement in the two's rapport. It was suggested in the literature that less empowered individuals were much more susceptible to experiencing pressure, therefore contributing to the aforementioned issues such as productivity, absenteeism, and issues with their mental health. The literature further evaluated the current transition in the workplace paradigm and ethic directly translatable components of the workplace environment that are long overdue for transformation as we enter a brand-new phase of the workforce.

In accordance with the findings of the study, there is a significant relationship between employee engagement and mental health. As the scores for employee engagement increase, the scores for mental health decrease suggesting the greater employee engagement is the less symptoms of mental health present.

The third and final objective of the research is to determine if employee engagement, utilizing the ISA engagement scale, will be positively associated with the self-rating of an individual's self-rating of their overall wellbeing, utilizing the WHO-5 Scale. The hypothesis for the third objective is that there will be a positive correlation between employee engagement and how individuals' self-rate organizational citizenship behaviour in relation to the ISA employee engagement scale.

The literature review explored how employees are placing a greater emphasis on their cumulative well-being, are much more cognizant of how their career influences their well-being, and therefore can recognize signs like those listed in the 21 items on the Depression,

Anxiety and Stress Scale or on the World Health Organisation Scale. Employees are increasingly becoming focused on themselves, ensuring that they obtain care and resources during tough periods, alternatively, as a result, there is an increment in poor mental health and disengagement. In accordance with the literature, it is also crucial for the employer to establish a comfortable and welcoming atmosphere. When employers overlook the significance of mental health for their employees, this can result in absenteeism, resignation, or even worse.

## **6.2 Recommendations**

The findings of the research have discovered a variety of potential imperfections that are adversely affecting the system's effectiveness. A number of obstacles have been identified and must be addressed if the entire process is to be beneficial and equitable to all parties involved. If the organization is to be effective in accomplishing its primary objective, it must enhance the engagement accordingly. The author has made various recommendations for the Irish Healthcare System to improve the effectiveness of their employee engagement and employee mental health initiatives and systems.

### **1. Enhanced Employee Engagement and a stronger presence including a louder voice**

In order for employee engagement to be efficient and advantageous to all parties involved, there is a requirement for a significantly larger degree of employee active participation in the current system than exists at the moment. It is proven that employees are more interested when they are engaged because they are given a stronger voice. It is abundantly obvious that there is a need for intervention within the Irish Healthcare System.

Adequate PPE is an indispensable component for all healthcare workers. The framework of the Irish Healthcare System is outdated and under strain, as a direct consequence, employees are under a significant amount of pressure, and as substantiated by the variety of scales used, granting employees more insight and a stronger voice will progressively boost employee engagement as employees experience a sense of belonging. It is strongly advised that a questionnaire or feedback form be established for each sector or region that is distinctive to that station, with the alternative of anonymity, to inspire employees to

express their opinions about any issues, feedback, or initiatives that management may not have initially considered.

It is also recommended that supervisors advocate for their teams' recognition. In contrast to other emergency services or departments, paramedics, in particular, frequently receive minimal to no attention from the media or any gratitude for that matter. Management teams require to identify the importance of pushing and emphasizing their employees hard work will instantaneously aid employee engagement and demonstrate to employees that their efforts are appreciated, and their work is noticed.

The work environment is critically important in increasing employee engagement; this statement simplifies to geographics as well. Employee workstations necessitate an overdue and rigorous assessment to determine whether they are appropriate for residence, in addition to whether appropriate infrastructure such as a silent room, games room, lounge area, and other amenities are accessible. Providing the employees with a pleasurable and contemporary environment encourages them to enjoy coming to work.

## **2. Efficient Structure in the workplace for Mental Health and Employee Engagement.**

The organization should always make certain that the system devotes more time assisting employees in their advancement, including assessing their training needs, delivering mentoring, and offering more precise, valuable feedback. Contemporary and pertinent initiatives and policies must either be modified or executed with the employee's voice and perspective emphasized throughout; this may be accomplished by extensively implementing their constructive criticism on the aforementioned surveys and feedback forms, where feasible.

Mental health proposals must always be greater easily accessible to employees, which indicates making a public announcement about available programmes or attempting to make them more accessible, such as providing employees with sufficient time off to accomplish where feasible. If necessary, management should invest in mental health facilities and training programmes, as they are invaluable and provide recurring benefits for the employees.



### **3. Greater Development Opportunities for Employees**

As previously states, several components of the healthcare structure are obsolete. There is a substantial requirement for rosters to be reviewed; management should always keep up with the current working population and workforce and establish rosters to complement this. Irregular hours and long working shifts that never finish on schedule do not enable for the sufficient work-life balance that is deemed necessary, particularly in a career path such as healthcare. Management should also modify these rosters to permit employees sufficient time to self-enroll in relevant programmes and courses that will further their academic achievement, thus further increasing the incentive to both perform and progress in the organization. It is absolutely essential that management listens and understands employee feedback in order to do so.

Finally, I would recommend the Irish Healthcare System Management to contemplate and implement internal advancement rather than externally recruiting new members who have little or no experience in the position over an individual with several years of experience. Employee engagement will continuously improve as employees are provided with an equal opportunity to showcase their experience and expertise, enhancing inspiration and encouragement.

### **6.3 Limitations and Future Research**

The author used solely quantitative research techniques to conduct the current research, this was selected because it was deemed appropriate and complemented the authors objectives and goals of the study in regards to time constraints of collecting, analysing and collating data. In retrospect, if the author were to perform this investigation again, they would consider integrating quantitative and qualitative research methods to establish a mixed methods approach. This would allow the author to conduct both a questionnaire and in-depth interview and therefore compare and contrast the findings in order to achieve a more intensive and interesting outcome.

The author would also have been interested in examining the viewpoint of the management teams in the Irish Healthcare System, in order to get an insight into their achievements and effort in the topic of employee engagement and mental health. The author was unable to do so because of the time constraints mentioned above.

For additional investigation in the future, the author would find it interesting and beneficial by incorporating a mixed method approach, to further analyse the managers and employee's perspectives on employee engagement and mental health in the organization. A final suggestion would be to identify a greater volume of employees and various sectors within the healthcare system, as this would provide a more comprehensive understanding of the impact of health and well-being initiatives, that are increasingly prevalent in greater populations and various sectors.

### **CIPD: Personal Learning Reflective Statement**

Having completed my HR Master's Degree Full-Time over the duration of the last year, it has been an incredible learning experience from start to finish, with so many unique and distinctive knowledge and skills procured over the duration. By completing this thesis, it has highlighted to me a novel and interesting domain of research and granted me a newfound respect for the extensive research studies, publications and articles I have analysed and interpreted throughout my year of study, that I will ensure I will utilize in future endeavors. I made the decision to concentrate on the area of employee engagement and psychological health since it is pertinent to my present and future roles and due to my interest in it, I therefore established many benefits in completing my thesis on this topic.

Firstly, there were several compromises to be constructed throughout dissertation's finalization. Initially, the time investment associated with trying to balance full-time work and study was indeed an adaption, especially changing position in the process.

This adventure, on the contrary, has taught me a variety of various aspects, including the degree of which my own personal dedication and devotion I considered necessary to devote to my research. As a whole, the plethora of knowledge I obtained through investigation, composing each section with a clear objective, and acquiring knowledge of how to display my primary research findings has been both daunting and demanding, but at the same time extremely meaningful from an intellectual standpoint, enhancing my confidence in commencing research projects at this standard and completing tasks and assignments on

analytical software's such as SPSS, in which I am able to authoritatively and satisfactorily use in my position.

Finally, in conducting this thesis. I have gained extensive knowledge on how to efficient manage my time which is an important component in HR on a daily basis, especially ad hoc situations. My skills in Microsoft Word and Excel were tested and enhanced throughout the duration of the thesis as well as my attention to detail.

Each and every skill and component of knowledge I have encountered I will certainly remember and incorporate with every future endeavor I conduct.

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# Appendices

## Appendix 1 : Cover Letter for Survey Questionnaire

### Researcher:

Shannon Byrne

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### Invitation:

I am conducting a survey as part of a research dissertation for my Master's degree in Human Resource Management in National College of Ireland. You are invited to take part in a research study. Participation in this study is entirely voluntary and completely anonymous. Please read the information below and let me know if anything is unclear or if you require further information.

In order to decide whether or not you want to be part of this research, you should aim to understand a sufficient amount about its risks and benefits to make an informed judgement. This approach is referred to as "informed consent". This consent form gives a detailed insight into the proposed research. Once you comprehend, you will be asked to tick the consent box to proceed.

### What is the purpose of the study?

To investigate whether mental health and wellbeing are related to employee engagement, among front line healthcare staff working through the recent pandemic

### Nature and Duration:

One of the major concerns and challenges for frontline healthcare staff is mental health especially during and after the recent pandemic. There has been limited research conducted in relation to if there is a correlation between mental health and welfare when considering employee engagement. Therefore, I would like if you could be involved in his study, I will gather the information provided and analyze it. The data and information that you provide is completely anonymous and thus, impossible to trace back to the participant. I would like to invite you to be as honest as you can in order to obtain a true reflection.

**Potential Risks and Benefits:** Due to the content of the questionnaire and the topic of mental health, there is a possibility that you may become distressed or find the questions being asked sensitive to you personally.

Should this occur, you have the right to 1) terminate your participation or 2) skip any questions that you would prefer not to answer. A debriefing form will be attached at the end with the contact details of the researcher and further information from organisations in relation to mental health. There is no direct benefit or reward from completing this study, however, research such as this can have an important impact and contribution to identify and comprehend measures for supporting mental health in the workplace and an insight into if there is a correlation between mental health and welfare in relation to employee engagement especially in the recent pandemic

**Participants Rights:**

Participation is completely voluntary. All information and data will be anonymous and have no possibility of tracing back to the participant. All data will be stored and protected by a password protected file, as per National College of Ireland's policy, and destroyed after 5 years. You have the right to withdraw from the study at any time up until the submission of the answers, after that, it is not possible to retrieve your contribution.

Participant Consent by ticking the box\*

**Appendix 2: Research Questionnaire**

**Depression, Anxiety, and Stress Scale (DASS-21)**

I found it hard to wind down

- 0 Did not apply to me at all
- 1 Applied to me to some degree, or some of the time
- 2 Applied to me to a considerable degree, or a good part of time
- 3 Applied to me very much, or most of the time

I was aware of dryness of my mouth

- 0 Did not apply to me at all
- 1 Applied to me to some degree, or some of the time
- 2 Applied to me to a considerable degree, or a good part of time
- 3 Applied to me very much, or most of the time

I couldn't seem to experience any positive feeling at all

- 0 Did not apply to me at all
- 1 Applied to me to some degree, or some of the time
- 2 Applied to me to a considerable degree, or a good part of time
- 3 Applied to me very much, or most of the time

I experienced breathing difficulty (e.g. excessively rapid breathing, breathlessness in the absence of physical exertion)

- 0 Did not apply to me at all
- 1 Applied to me to some degree, or some of the time
- 2 Applied to me to a considerable degree, or a good part of time
- 3 Applied to me very much, or most of the time

I found it difficult to work up the initiative to do things

- 0 Did not apply to me at all
- 1 Applied to me to some degree, or some of the time
- 2 Applied to me to a considerable degree, or a good part of time
- 3 Applied to me very much, or most of the time

I tended to overreact to situations

- 0 Did not apply to me at all
- 1 Applied to me to some degree, or some of the time
- 2 Applied to me to a considerable degree, or a good part of time
- 3 Applied to me very much, or most of the time

I experienced trembling (e.g. in the hands)

- 0 Did not apply to me at all
- 1 Applied to me to some degree, or some of the time
- 2 Applied to me to a considerable degree, or a good part of time
- 3 Applied to me very much, or most of the time

I felt that I was using a lot of nervous energy

- 0 Did not apply to me at all
- 1 Applied to me to some degree, or some of the time
- 2 Applied to me to a considerable degree, or a good part of time
- 3 Applied to me very much, or most of the time

I was worried about situations in which I might panic and make a fool of myself

- 0 Did not apply to me at all
- 1 Applied to me to some degree, or some of the time
- 2 Applied to me to a considerable degree, or a good part of time
- 3 Applied to me very much, or most of the time

I felt that I had nothing to look forward to

- 0 Did not apply to me at all
- 1 Applied to me to some degree, or some of the time
- 2 Applied to me to a considerable degree, or a good part of time
- 3 Applied to me very much, or most of the time

I found myself getting agitated

- 0 Did not apply to me at all
- 1 Applied to me to some degree, or some of the time
- 2 Applied to me to a considerable degree, or a good part of time
- 3 Applied to me very much, or most of the time

I found it difficult to relax

- 0 Did not apply to me at all
- 1 Applied to me to some degree, or some of the time
- 2 Applied to me to a considerable degree, or a good part of time
- 3 Applied to me very much, or most of the time

I felt down-hearted and blue

- 0 Did not apply to me at all
- 1 Applied to me to some degree, or some of the time
- 2 Applied to me to a considerable degree, or a good part of time
- 3 Applied to me very much, or most of the time



I was intolerant of anything that kept me from getting on with what I was doing

- 0 Did not apply to me at all
- 1 Applied to me to some degree, or some of the time
- 2 Applied to me to a considerable degree, or a good part of time
- 3 Applied to me very much, or most of the time

I felt I was close to panic

- 0 Did not apply to me at all
- 1 Applied to me to some degree, or some of the time
- 2 Applied to me to a considerable degree, or a good part of time
- 3 Applied to me very much, or most of the time

I was unable to become enthusiastic about anything

- 0 Did not apply to me at all
- 1 Applied to me to some degree, or some of the time
- 2 Applied to me to a considerable degree, or a good part of time
- 3 Applied to me very much, or most of the time

I felt I wasn't worth much as a person

- 0 Did not apply to me at all
- 1 Applied to me to some degree, or some of the time
- 2 Applied to me to a considerable degree, or a good part of time
- 3 Applied to me very much, or most of the time

I felt that I was rather touchy

- 0 Did not apply to me at all
- 1 Applied to me to some degree, or some of the time
- 2 Applied to me to a considerable degree, or a good part of time
- 3 Applied to me very much, or most of the time

I was aware of the action of my heart in the absence of physical exertion (e.g. sense of the heart rate increase, heart missing a beat)

- 0 Did not apply to me at all
- 1 Applied to me to some degree, or some of the time
- 2 Applied to me to a considerable degree, or a good part of time
- 3 Applied to me very much, or most of the time

I felt scared without any good reason

- 0 Did not apply to me at all
- 1 Applied to me to some degree, or some of the time
- 2 Applied to me to a considerable degree, or a good part of time
- 3 Applied to me very much, or most of the time

I felt that life was meaningless

- 0 Did not apply to me at all
- 1 Applied to me to some degree, or some of the time
- 2 Applied to me to a considerable degree, or a good part of time
- 3 Applied to me very much, or most of the time

## WHO-5 Well-Being Index

Over the last two weeks:

	5 All the time	4 Most of the time	3 More than half of the time	2 Some of the time	1 At no time	0 At no time
I have felt cheerful and in good spirits						
I have felt calm and relaxed						
I have felt active and vigorous						
I woke up feeling fresh						

and rested						
My daily life has been filled with things that interest me						

### ISA Engagement Scale

<b>Intellectual Engagement</b>	1 Strongly Disagree	2 Slightly Disagree	3 Disagree	4 Neither Disagree or Agree	5 Agree	7 Strongly Agree	
I focus hard on my work							
I concentrate on my work							
I pay a lot of attention to my work							

<b>Social Engagement</b>	1 Strongly Disagree	2 Slightly Disagree	3 Disagree	4 Neither Disagree or Agree	5 Agree	6 Slightly Agree	7 Strongly Agree
I share the same work values as my colleagues							
I share the same work goals as my colleagues							
I share the same work attitudes as my colleagues							

<b>Affective Engagement</b>	1 Strongly Disagree	2 Slightly Disagree	3 Disagree	4 Neither Agree or Disagree	5 Agree	6 Slightly Agree	7 Strongly Agree
I feel positive about my work							
I feel energetic in my work							
I am enthusiastic in my work							