



Mediating Effect of Perceived Organizational Support on the Relationship between Leader-Member Exchange and the Innovation Work Behavior of Nursing Employees: A Social Exchange Perspective



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Abstract

The present study aimed at investigating relationship between Leader-Member Exchange and Innovative Work Behavior in Pakistani nursing sector. Additionally, the study examined the relationship between Leader-Member Exchange as an independent variable and dependent variable Innovative Work Behavior moreover it has examined the impact of Leader-Member Exchange and Innovative Work Behavior further this explored mediating role of Perceived Organization Support between Leader-Member Exchange and Innovative Work Behavior. The main study was conducted through systematic randomly selected sample of 400 nurses of ages between 24 and 60 belonging to public and private sector hospitals at Lahore. Survey method was used to collect data. Correlation analysis exposed the significance and strength of relationships between variables i.e., Innovative Behaviour, Perceived Organizational Support (POS) and Leader Member Exchange (LMX). More over regression analysis was performed for direct relationships. Baron & Kenny 1986 method is used for mediation analysis. The results showed that Perceived Organizational Support (POS) partially mediate between Leader Member Exchange (LMX) and Innovative Behaviour. The LMX and POS, POS and IWB and LMX and IWB have significant relation which are 0.569(0.000), 0.232(0.000) and 0.521(0.000).

Keywords: Leader member exchange; Innovative work behavior; Perceived organization support; Social exchange theory; Nursing sector

Introduction

A worldwide marvel in today's human resource assumes a key part in accomplishing organizational results. Each worker undertakings to turn out to be an earth-shattering part for the competitive change and hierarchical achievement. Subsequently desired changing needs of the workplace, clients need through everyday communication, organizations need to give independence, freedom of work, supervisor coordination and organizational support building trust-based relationship, access data and include in decision making process. Research on perceived organizational support shows that as organization stresses over the devotion of employees to them, same way employees are in like manner stressed with the commitment of organization to them. Employees ought to be quite regarded, as organization is the essential wellspring of their unmistakable advantages, for instance, health advantages and pay, and social advantages, for instance, profound respect and minding.

A sign by the organization to be compensating for extending effort gives substance of obligation which adheres the workers to the organization. Higher perceived organizational support always

develops more responsibility of any employees towards their organization Hussain [1]. Leadership behavior has straight and inimitable effect on the workplace, work results and the achievement of organizations Ahmad [2]. Past studies highlighted that workers' reaction to supervisor behavior and organization's values shows a very strong impact on their enactment Fu et al. [3]. Moreover, while Innovation Work Behavior is considered to incorporate a few measurements (problem identification, solution development, and solution support) Stashevsky et al. [4].

There is a developing group of writing about Innovation Work Behavior and its significance in the work environment. Nonetheless, there have been not very many studies that have satisfactorily analyzed the Innovation Work Behavior of nursing employees. To further extend very few studies have been conducted to analyze the organizational factors that are required to build up a situation that encourages the Innovation Work Behavior of nursing employees Knol [5]. Accordingly, this examination will layout suggestions for hospital's administration and human resource managers trying to enhance organizational viability, efficiency, and patient results by building up the Innovation Work Behavior of nursing employees.

The social organizations have a tendency to be commonly reliant and dependent upon the activities of someone else. Mutuality is not ordinarily utilized inside current literature; in any case, relationship of worker and supervisor has positively related.

Literature Review

Perceived organizational support (POS)

Researchers have argued that employees form global beliefs about how much an organization values their contributions and cares about their wellbeing Eisenberger et al. [6]. These perceptions help employees determine whether their organizations recognize increased work effort, reward improved performance and enhance innovative behavior Lam et al. [7]. Nurses play a critical role in delivering exemplary health care. For nurses to perform at their best, they need to experience high engagement, which can be achieved by providing them necessary organizational support and proper working environment Gupta et al. [8]. According to Jaiswal [9] the importance of good relations between superiors and subordinates, autonomy and freedom to employees in performing their jobs and support and guidance from superiors increasing commitment levels of employees which results in employees delivering high-quality service. Nurses' retention and motivation have become a major concern for the hospitals and policy makers Munir et al. [10].

A perceived organizational support system plays a significant role in generating a mutually comprehensive and healthy working environment, which ultimately plays a significant role for leading nursing sector. The supportive work environment which includes human resource practices also provides opportunities for participation and skills development which further enhance the motivation level of nursing staff. To enhance the affective commitment level among nursing staff, management and supervisors can implement various HRM practices related to Perceived organizational support (POS). In addition, countries with a collectivist culture such as Pakistan, employees anticipate support and care from their organization. In such a culture, supervisors can play a crucial role in strengthening the employee-organization relationship. In public sector, if nurses involve in policy making decision making process the ultimate enhancing the performance Sharma [11]. POS acts as a critical mechanism through which supervisor support increases employees' engagement in the workplace Jin [12]. Nurses should not only engage in their work thoroughly, but also willing to perform beyond their normal job descriptions Islam [13].

Trybou et al. [14] Past researchers have given more importance to the consequences of POS without discussing the process through which it influences on the employees work related outcomes. Moreover, Social Exchange Theory helps in understanding and to test the associations between other variables of current study that how POS predicts the mediator. Literature is well documented about emotional attachment, extra-role behavior and work engagement as the reciprocation of POS Shacklock et al. [15]. The SET is of the view that, to maximize the profits, both employees and employers should maintain a reciprocal relation Blau [16] and Gouldner [17].

Leader member exchange (LMX)

Nurses having a good relationship with their supervisors are seen as important, yet the mechanisms of how such relationships are beneficial, or which aspects of the relationship are important, is less clear Rodwell et al. [18]. LMX is based on the theoretical concepts and findings of role theory propounded by Liden & Maslyn [19] and focuses on the unique connection between leaders and their followers; a leader member relationship is based on employment contract, interpersonal belief, esteem, dedication and communal responsibility Srivastava & Dhar [20]. LMX explains the two-way relationship between a leader and followers, and has the following dimensions: contribution, affect, loyalty and self-determination Liden & Maslyn [19] and Graen & Uhl Bien [21].

Supervisors show more kindness and give positive evaluations of subordinate behavior when both supervisors and subordinates share a high-quality working relationship. Therefore, employees who enjoy high quality relationships with their leaders become obliged to reciprocate favorable treatment by showing their efforts on behalf of their supervisor or their organization Garg & Dhar [22]. In an era of intense competition, organizations must understand and manage the intricacies of how leadership behavior enhances or compromises the creation of a positive service climate Auh et al. [23]. Work-family and leadership scholars are encouraged to build upon these findings through more complex research designs, including multi-level research and the incorporation of the supervisor-rated LMX Litano et al. [24].

Study conducted in French Hospitals in which shows that the differences in human resource management (HRM) practices between the non-profit health care sector and business life, the majority of health care sector research appears to be based on the HRM (for human resources management) blueprint for business life staff policy and practice for nurses. As nurses' dominant work orientation is based upon the fundamental concern for patients' welfare, it is important to carefully monitor the character of their job in order to guide the degree of organizational and professional support Ruiller & Van Der Heijden [25]. Supportive leader behaviors such as in high-quality LMX are most effective when they take place in the context of HRM systems that also signal social exchange Audenaert et al. [26].

LMX considers advancement in the working interactions between leaders and direct subordinates. It comprises attributes of two-way respect, support and trust, which seek to promote accessibility to information and contribution to decision making, the construct POS has a marginally stronger relationship with affective commitment compared with LMX Robson & Robson [27]. The Social Exchange Theory Blau [16] suggests that the actions of individuals depend on 'rewarding reactions' from others Penger & Černe [28]. The focus is thus on reciprocity. Leadership can therefore be perceived as a social exchange between leaders and subordinates Hsieh & Wang [29] and Coxen et al. [30].

By doing so, these enhancements represent a meaningful attempt to facilitate employee task solution and problem solving Brunetto et al. [31]. Previous research on LMX has considered the

private sector Abu Bakar et al. [32] and Bal & Ansari [33], various public services Reid et al. [34], including that specific to nursing Brunetto et al. [35] and Shacklock [36].

Innovative Work Behavior (IWB)

Despite a plethora of literature on organizational climate for innovation and the persuasive arguments establishing its link to perceived organizational support, few studies hitherto have explored innovative work behavior of managers Shanker et al. [37]. Specifically, limited attention has been paid to explaining how organizations perceive the importance of stimulating innovative work environments Gupta et al. [8]. Nurses play a critical role in delivering exemplary health care. For nurses to perform at their best, they need to experience high engagement, which can be achieved by providing them necessary organizational support, innovative work behavior and proper working environment.

Employees' innovative work behavior (IWB), defined as the development, adoption and implementation of new ideas for products, technologies and work methods by employees Yuan & Woodman [38], is often claimed to be an important determinant of organizational success. In the public sector, innovation is viewed as the factor that contributes to the quality of public services and the problem-solving capacity De Vries et al. [39]. The challenge to deliver ever more customized, reliable and technologically advanced patient care, quicker treatment response, efficient communication and coordination to increase patient retention and patient referral, and increased quality of medical care has instigated hospital management to engender innovative work behaviors among their nursing staff. Self-evidently, the necessity for continuous innovation in hospitals is a crucial driving force for the greater benefit of the patients and the nursing community Duarte et al. [40] and Piening [41].

Studying innovative employee behaviors within public sector organizations might seem an odd thing to do given the lack of competitive pressures, the limited identification of the costs and benefits of innovative ideas and the lack of opportunities to incentivize employees financially. In recent study Bos et al. [42], role of supervisors in supporting innovative work behavior (IWB) by considering the unique challenges, the conditions and characteristics of IWB in this context of nursing sector. Although recent research from Scandinavia shows that public employees are not necessarily less innovative than employees in private organizations Bysted & Jespersen [43], in general we know little about the innovative behavior of employees in the public sector and even less how innovative behavior can be initiated, and supported Bos et al. [42].

The below-mentioned selected empirical findings are rooted in the leader-member exchange (LMX) theory Graen & Uhl Bien [21], that in a nutshell argues that subordinates with 'high-quality' relationships with their supervisor are given greater resources, more decision-making abilities and freedom in return for high loyalty and commitment. Fresh considerations and experimenting with novel ideas require additional time, resources and freedom at

work. Greater resources and support from a supervisor increase the likelihood that IWB will be successful Yuan & Woodman [38]. Supervisors tend to evaluate employees, whom they trust more positively, leading to the overall perception that new ideas coming from trusted and respected subordinates are meaningful and significant.

These employees are perceived as more powerful and influential because of their access to valuable information and resources held by their supervisor Wang et al. [44]. The importance of innovation within organizations has been demonstrated on numerous occasions, which has subsequently led to the identification of effective leadership as a potential catalyst. Most of us would acknowledge that effective leadership plays a pivotal role to engender innovativeness among nursing staff. Although research has identified some Leader member-exchange theory styles to foster a nurse's innovative work behavior Masood & Afsar [45].

Objectives of the Study

- A. To what extent, Perceived Organization Support and Leader Member Exchange impact upon Innovative Work Behavior (IWB) of nursing employees?
- B. Does POS mediate the relationship of LMX and IWB of nursing employees especially in Public and Private Sector?

Research questions for the study

- A. Does Leader-Member Exchange leads to Innovative Work behavior in Pakistani nursing sector?
- B. Does there be a positive relation between LMX and POS in Pakistani nursing sector?
- C. To what extent the relationship between Leader-member Exchange and Innovative Work Behavior is influenced by Perceived Organization Support in Pakistani nursing sector?
- D. Does POS as a mediation impact exists between LMX and IWB upon nursing employees in Public and Private sector?

Hypotheses

Hypotheses we will test are explained below:

Hypothesis 1: Leader Member Exchange is positively correlated to nursing employees' perceptions of organizational support.

Hypothesis 1a: Leader Member Exchange is positively correlated to nursing employees' perceptions of organizational support in Public Sector.

Hypothesis 1b: Leader Member Exchange is positively related to nursing employees' perceptions of organizational support in Private Sector.

Hypothesis 2: Perceived Organizational Support is positively related to the Innovation Work Behavior of nursing employees.

Hypothesis 2a: Perceived Organizational Support is positively related to the Innovation Work Behavior of nursing employees in Public Sector.

Hypothesis 2b: Perceived Organizational Support is positively related to the Innovation Work Behavior of nursing employees in Private Sector.

Hypothesis 3: Perceived Organizational Support is mediating the relationship between LMX and the Innovation Work Behavior of nursing employees.

Hypothesis 3a: Perceived Organizational Support is mediating the relationship between LMX and the Innovation Work Behavior of nursing employees in Public Sector.

Hypothesis 3b: Perceived Organizational Support is mediating the relationship between LMX and the Innovation Work Behavior of nursing employees in Private Sector.

Theoretical Framework

Figure 1 Theoretical framework shown in below image. Examining the relationship between Leader Member Exchange and Innovative Work Behavior; as well as the mediating effect of Perceived Organizational Support.

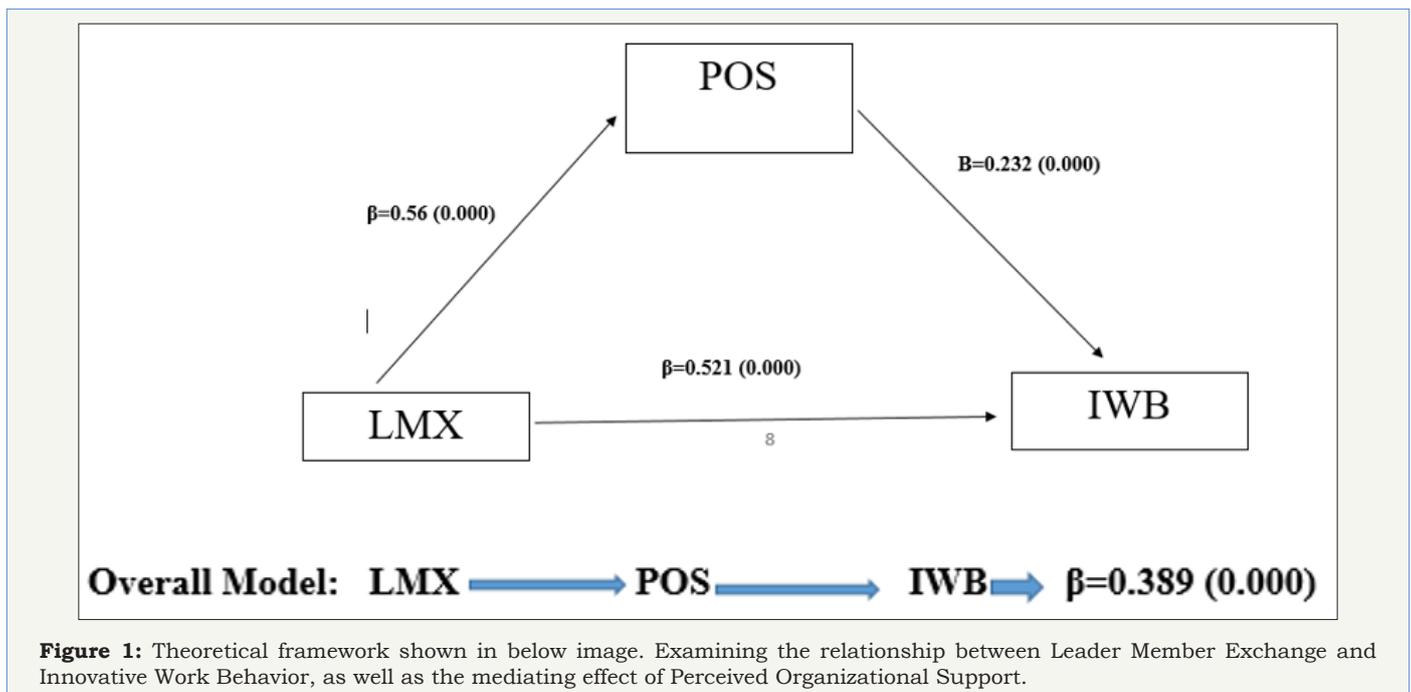


Figure 1: Theoretical framework shown in below image. Examining the relationship between Leader Member Exchange and Innovative Work Behavior, as well as the mediating effect of Perceived Organizational Support.

Research Approach and Justification of Chosen Approach

The objective of the study is to observe the association between Leader-Member Exchange (LMX) and Innovative Work behavior (IWB) also determine mediating role of Perceived Organization Support (POS) quantitative approach is used in this study. This study used cross sectional survey design by measuring LMX at work with IWB well-being of nursing staff by focusing that the respondent may feel more relaxed about replying to sensitive nature questions on personal matters, rather than in a face to face interview Rubin & Babbie [46].

Statistical Measures

After collection of the data, Statistical Program SPSS 17 will be used for inference and analysis. The reliability will be operationalized through Cronbach Alpha analysis. The procedures recommended by Baron & Kenny 1986 will be used to investigate the mediating effects of POS on LMX and Innovative Behavior. Factor analysis will be carried out to check the dimensions of all operationally defined constructs and reliability and validity (convergent and discriminant) of the scales will be checked. All identified four steps will be conducted by running multiple regression analysis. Sobel test will be applied for the validation.

Population and Data Collection Methodology

Population

The population of this research consists of chronicled nurses employing in the city Lahore. stratified random sampling technique was employed for data collection. Data was collected through questionnaires. A questionnaire is an effortless method of collecting data. They diminish deformation in data appropriate to 'interviewer biases' through the procedure of interview Zikmund 2003. Since the research intended to conclude the personal occurrences and beliefs might be sensitive in nature.

This part consists of following variables:

- Innovative Work Behavior Scott & Bruce [47]
- Leader-Member Exchange (LMX) (the quality of supervisor-subordinate relationship) Graen & Uhl-Bien [21].

Perceived Organizational Support Eisenberger et al. [48]

In the above Table 1 we have divided our respondents into different groups on their length of their service. We categorized our sample into four categories of: less than 5 years, 5-10 years, 11-15 years and 15+ years. Here in the less than 5 years group comprises 126 respondents formulating 41.9% of total sample while 5-10

years' experience holding group comprises 84 respondents formulating 27.9%, 11-15 Years' experience holding group comprises 68 respondents formulating 22.6% and at last 15+ years experienced consist 23 respondents formulating 7.6% of the sample.

Table 1: Demographic results.

Name of Particulars	Frequency	% Age	Cumulative Frequency
Gender			
Male	85	28.2	28.2
Female	216	71.8	100
Type of Organization			
Public	110	36.5	36.5
Private	191	63.5	100
Education			
Diploma	35	11.6	11.6
Graduation	231	76.7	88.4
Master	35	11.6	100
Age Group			
Up to 25 (M=66; F=119)	185	61.5	61.5
25-44 (M=15; F=55)	70	23.3	84.7
45-54 (M=0; F=36)	36	12	96.7
55+s (M=4; F=6)	10	3.3	100
Length of Service			
Less than 5 years	126	41.9	41.9
5- 10 years	84	27.9	69.8
11-15 years	68	22.6	92.4
15+ years	23	7.6	100

Descriptive Statistics:

Here Table 2 represents the descriptive statistics of the dependent, mediator and independent variables. Respondents working in Private Sector revealed mean value of the dependent variable (Innovative Work Behavior) is 2.614 with standard

deviation of 0.755. In case of the independent variable (Leader Member Exchange) its mean value is 2.798 with standard deviation value of 0.763 while the Perceived Organizational Support (POS) has the mean value of 2.958 with standard deviation of 0.717. Skewness and kurtosis result also depicted that all three variables are in normal range.

Table 2: Descriptive statistics.

	Variable	Mean	Std. Deviation	Skewness	Kurtosis
Private Sector	Innovative Work Behavior	2.614	0.755	0.286	0.610
	Leader Member Exchange (LMX)	2.798	0.763	0.290	0.090
	Perceived Organizational Support (POS)	2.958	0.717	-0.200	0.134
Public Sector	Innovative Work Behavior	2.572	0.694	-0.138	-0.977
	Leader Member Exchange (LMX)	2.702	0.830	-0.330	-0.330
	Perceived Organizational Support (POS)	2.61	0.648	-0.303	-0.271
Overall Sample	Innovative Work Behavior	2.599	0.733	0.162	0.179
	Leader Member Exchange (LMX)	2.763	0.788	0.013	-0.021
	Perceived Organizational Support (POS)	2.83	0.711	-0.155	0.019

Mean values for nurses working at Public Sector hospitals revealed the mean value of the dependent variable (Innovative Work Behavior) is 2.257 with standard deviation of 0.694. In case of the independent variable (Leader Member Exchange) its mean value is 2.702 with standard deviation value of 0.830 while the Perceived Organizational Support (POS) has the mean value of 2.61 with standard deviation of 0.648. Skewness and kurtosis result also

depicted that all three variables are in normal range. The purpose of Cronbach's alpha is to check the variables reliability in accordance with the related items included in the questionnaire, Cronbach's alpha utilized for the estimation of inner uniformity of the variables built from survey questions which discovers that how close these related survey questions are as a set to construct a variable.

Table 3 discovered the Cronbach's alpha for the variable's reliability values. The dependent variable Innovative Work Behavior has α -value as 0.829, the independent variable Leader Member Exchange (LMX) has α -value as 0.865, and the mediator Perceived Organizational Support (POS) has α -value as 0.830. In

Table 3: Reliability (Cronbach's Alpha) statistics.

Variable	Private Sector	Public Sector	Overall Sample	No. Of Items
	Cronbach Alpha	Cronbach Alpha	Cronbach Alpha	
Innovative Work Behaviour	0.84	0.808	0.829	6
Leader Member Exchange	0.842	0.901	0.865	7
Perceived Organizational Support	0.821	0.825	0.83	8

In Public sector case, dependent variable Innovative Work Behavior has α -value as 0.808, the independent variable Leader Member Exchange (LMX) has α -value as 0.901, and the mediator Perceived Organizational Support (POS) has α -value as 0.825. The results of Cronbach's alpha support the phenomenon that the included items in the questionnaire are consistent and stable in this case.

Convergent Validity

It tends to examine that the constructs of the study that should be related are actually related or not. Of all the three dimensions of validity, the most widely used is Convergent validity; which is examined through Principal component analysis also known as Factor analysis with varix rotation method. All the 21 items of

Table 4: KMO & Bartlett's test of each variable.

Kaiser-Meyer-Olkin Measure of Sampling Adequacy		Innovative Behavior	LMX	POS
Bartlett's Test of Sphericity	Chi-Square (χ^2) Sig.	0.829	0.852	0.805
		631.441 0.000	890.362 0.000	904.321 0.000

The results in Table 5 showed that LMX has a significant positive relationship with Innovative Work Behavior in all overall sample, private and public sector cases. In Overall sample case, value of adjusted R^2 of 0.312 showed that LMX explains 31.2% of variance in the Innovative behavior, with ($F=136.837$, $p<.01$). The Beta (β) value of 0.521 ($p<.01$) shows the extent to which Leader Member Exchange affects Innovative Behavior of nursing staff. In Public Sector case, value of adjusted R^2 of 0.450 showed that LMX explains 45.0% of variance in the Innovative work behavior, with

Table 5: Results of Leader Member Exchange (LMX) predicting Innovative work behavior.

	Constant	Coeff. (β)	SE	T-value	P
Overall Sample		1.1591	0.128	9.0548	0
	Leader Member Exchange	0.5211	0.0445	11.6977	0
		$F=136.8368$	$P\text{-value} = .0000$	$R^2=0.3140$	$\text{Adjusted } R^2=0.312$
Public Sector	Constant	1.048	0.168	6.242	0
	Leader Member Exchange	0.675	0.059	9.502	0
		$F=90.279$	$P\text{-value} = .0000$	$R^2=0.455$	$\text{Adjusted } R^2=0.450$
Private Sector	Constant	1.237	0.168	6.819	0
	Leader Member Exchange	0.497	0.059	7.871	0
		$F=61.953$	$P\text{-value} = .0000$	$R^2=0.247$	$\text{Adjusted } R^2=0.243$

the Private Sector, dependent variable Innovative Work Behavior has α -value as 0.840, the independent variable Leader Member Exchange (LMX) has α -value as 0.842, and the mediator Perceived Organizational Support (POS) has α -value as 0.821.

the instrument were loaded into the factor analysis, and after the analysis no item was dropped as all the items were above the cut-off value of 0.50 for the factor loading used. Further we applied these KMO and Bartlett's test which also signifies the results and assumptions.

Leader-Member Exchange (LMX) and innovative work behavior

At first, we tested direct positive relationship between Leader Member Exchange and Innovative Work Behavior. Table 4 revealed the linear regression results regarding the relationship between the LMX and Innovative Work Behavior in overall sample, Private and public sector cases.

($F=90.279$, $p<.01$). The Beta (β) value of 0.675 ($p<.01$) shows the extent to which Leader Member Exchange affects Innovative Work Behavior of nursing staff in public sector. In Private sector case, value of adjusted R^2 of 0.243 showed that LMX explains 24.3% of variance in the Innovative work behavior, with ($F=61.953$, $p<.01$). The Beta (β) value of 0.497 ($p<.01$) shows the extent to which Leader Member Exchange affects Innovative Work Behavior of nursing staff.

Leader-member exchange and perceived organizational support

At first, we tested direct positive relationship between Leader Member Exchange and Perceived Organizational Support. Table 6 revealed the linear regression results regarding the relationship between the LMX and POS in overall sample, Private and public sector cases. The results in Table 6 showed that LMX has a significant positive relationship with Perceived Organizational Support in all overall sample, private and public sector cases. In Overall sample case, value of adjusted R^2 of 0.395 showed that LMX explains 39.5% of variance in the Perceived Organizational Support, with ($F=196.795$, $p<.01$). The Beta (β) value of 0.569 ($p<.01$) shows

the extent to which Leader Member Exchange affects Perceived Organizational Support of nursing staff. In Public Sector case, value of adjusted R^2 of 0.493 showed that LMX explains 49.3% of variance in the Perceived Organizational Support, with ($F=106.904$, $p<.01$). The Beta (β) value of 0.705 ($p<.01$) shows the extent to which Leader Member Exchange affects Perceived Organizational Support of nursing staff in public sector. In Private sector case, value of adjusted R^2 of 0.356 showed that LMX explains 35.6% of variance in the Perceived Organizational Support, with ($F=106.904$, $p<.01$). The Beta (β) value of 0.599 ($p<.01$) shows the extent to which Leader Member Exchange affects Perceived Organizational Support of nursing staff in private sector.

Table 6: Results of leader member exchange and perceived organizational support.

	Constant	Coeff. (β)	SE	T-value	P
Overall Sample		1.2593	0.1165	10.81	0
	Leader Member Exchange	0.5687	0.0405	14.0284	0
		$F=196.7955$	$P\text{-value}=.0000$	$R^2=0.3969$	$\text{Adjusted } R^2=0.395$
Public Sector	Constant	1.123	0.15	7.463	0
	Leader Member Exchange	0.705	0.053	10.339	0
		$F=106.904$	$P\text{-value}=.0000$	$R^2=0.497$	$\text{Adjusted } R^2=0.493$
Private Sector	Constant	1.381	0.159	8.705	0
	Leader Member Exchange	0.599	0.055	10.296	0
		$F=106.905$	$P\text{-value}=.0000$	$R^2=0.359$	$\text{Adjusted } R^2=0.356$

Perceived organizational support and innovative work behavior

At first, we tested direct positive relationship between Perceived Organizational Support and Innovative Work Behavior. Table 7 revealed the linear regression results regarding the relationship between the POS and Innovative Work Behavior in overall sample, Private and Public sector cases.

The results in Table 7 showed that Perceived Organizational Support has a significant positive relationship with Innovative Work Behavior in all overall sample, private and public sector cases. In Overall sample case, value of adjusted R^2 of 0.236 showed that LMX explains 23.6% of variance in the Perceived Organizational

Support, with ($F=93.905$, $p<.01$). The Beta (β) value of 0.489 ($p<.01$) shows the extent to which Perceived Organizational Support Affects Innovative Work Behavior of nursing staff. In Public Sector case, value of adjusted R^2 of 0.382 showed that Perceived Organizational Support explains 38.2% of variance in the Innovative Behavior, with ($F=68.323$, $p<.01$). The Beta (β) value of 0.622 ($p<.01$) shows the extent to which Perceived Organizational Support Affects Innovative Behavior of nursing staff in public sector. In Private sector case, value of adjusted R^2 of 0.186 showed that Perceived Organizational Support explains 18.6% of variance in the Innovative Behavior, with ($F=44.514$, $p<.01$). The Beta (β) value of 0.437 ($p<.01$) shows the extent to which Perceived Organizational Support Affects Innovative Behavior of nursing staff in private sector.

Table 7: Results of perceived organizational support and innovative behavior.

	Constant	Coeff. (β)	SE	T-value	P
Overall Sample		1.173	0.152	7.733	0
	Perceived Organizational Support	0.489	0.052	9.69	0
		$F=93.905$	$P\text{-value}=.0000$	$R^2=0.239$	$\text{Adjusted } R^2=0.236$
Public Sector	Constant	0.831	0.15	3.831	0
	Perceived Organizational Support	0.622	0.053	8.266	0
		$F=68.323$	$P\text{-value}=.0000$	$R^2=0.387$	$\text{Adjusted } R^2=0.382$
Private Sector	Constant	1.253	0.21	5.968	0
	Perceived Organizational Support	0.437	0.069	6.672	0
		$F=44.514$	$P\text{-value}=.0000$	$R^2=0.191$	$\text{Adjusted } R^2=0.186$

The results presented above in the Table 5, show that all paths were fully significant with $p\text{-value} < 0.05$. This showed that Perceived Organizational Support (POS) partially mediated

the relationship between Leader Member Exchange (LMX) and Innovative Behavior. These above results showed that in Public Sector hospitals POS has stronger partially mediating effect (on the

basis of their coefficient values) between the relationship LMX and Innovative work behavior with compare to Private Sector hospitals.

In order to further validate the findings of mediation test, Sobel's test Sobel et al. [49] has been utilized. The Table 6 shown below, presents the test statistic (Z) which is well over 1.96 and p-value is also significant, which means that the results presented above were significant and Perceived Organizational Support (POS) mediated the relationship between Leader-Member exchange and Innovative Work Behavior.

Conclusion

This research has added a valuable contributed towards the literature of Social Exchange Theory. Moreover, nursing worker's effectiveness and capability are two modules are created for learning and convincing the better environment which can be created through Social Exchange Theory. In case that human resource managers and hospital supervisors can enhance nursing employees' behavior, competence, and effectiveness the comprehensive framework is made adding to the change of patient results and safety. Also, the study contributes knowledge to current writing giving confirmation that Innovative Work Behavior and current practices has reassure the perfect levels of support required by a relationship and also fill the gap between other supportive elements of IWB, POS and LMX.

Through this study, it has suggestions for medical organizations and heads, giving an understanding for the administration and it has to develop a strong relation and support Innovative Work Behavior in hospitals. The encroachment of Innovative work Behavior is especially perilous for hospital management administration and managers, since it adds to enhancing worker conduct to expand hierarchical productivity and sustainability. Further supervisors and head nurses that effectively adjust worker behavior to organizational goal make a vigorous human resource function, that is, HR that precisely add to the fulfillment of organizational goal. Specifically, this study gives understanding into the significance of worker view of organizational backing and the employee-employer relationship. Besides, our outcomes suggested that workers see organizational support to be low; the suggestion for administration is to build up a strong methodology to enhance this observation in real scenario. Such a system ought to include, amongst different things, proper compensates which leads in a positive way and support for workers when they show Innovative Work Behavior.

With the support of significant literature and research work for future areas has highlighted for further exploration. Further instance that study has acknowledged to inside writing that work environment connections and the sharing of learning are variables that support and cultivate Innovative Work Behavior. In any case, there is an absence of empirical study looking at the effect of work environment connections which directly showed the Innovative Work Behavior of nurtures, in given paradigm further study has highlights the necessity under the banner of social exchange theory. This study showed a few glimpses of nurses and their supervisors' relationship; thusly, more data is required from different departments of nurses, supervisors and head of nurses from all categories of hospitals either they are from public sector or

from private sector to have the capacity to sum up and generalize from such discoveries in bigger scale. Therefore, this ought to provide more information regarding the relationship of nurses and the organizations.

As we earlier mentioned, this study has a cross-section of the relationship between innovative work behavior, leader member exchange and perceived organizational support and that cross study sectional study characterizes limitations to research. On the grounds that such information is not fitting for concluding generalizable causal implications. Thusly, advance exploration giving a longitudinal method ought to give further understanding into the Innovative Work Behavior of nursing workers. Through this study which showed that leader member exchange is positively influenced perceived organizational support, however in private sector perceived organizational support was still observed to be low. In this way, encourage research looking at different precursors of POS may give a superior general understanding of the components that straight forwardly and in an oblique way impact of Innovative work Behavior in public and private sector. At the end, results showed that in Public Sector hospitals POS has stronger partially mediating effect (on the basis of their coefficient values) between the relationship LMX and Innovative work behavior with compare to Private Sector hospitals.

Recommendations and Implications

The study has its own set of theoretical and practical implications that signify its value to the literature. A few of them have been discussed here in detail: Perceived Organization Support has been explored vastly in terms of group morality but very few studies exist on the role of POS in nursing sector of Pakistan. Ellemers et al. [50] suggested, organizational support enhances organizational self-importance and affects employee job attitudes. The current study was designed to explore the wider relationship between innovative work behavior and leader member exchange in context of nursing sector of Pakistan. Role of POS has significantly related to LMX and IWB because when organization support their employee and show positive concern related to their issues then employee working more positively and innovatively doing their jobs. At the end, results showed that in Public Sector hospitals POS has stronger partially mediating effect (on the basis of their coefficient values) between the relationship LMX and Innovative work behavior with compare to Private Sector hospitals.

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Nursing Sector in Pakistan has not been explored widely in research studies in terms of organization aspects but still a few studies exist on the medical and health care. The current study has tried to cover the recognized gaps by studying the role of POS, LMX and IWB in context of nursing sector in Pakistan, and how these

organizational values instill pride in their employees making them more committed towards their organization.

To overcome the shortcomings of self-report questionnaire and in line with the concept of triangulation, other measuring methods, e.g., interviewing, behavioral observation, or projective techniques may be adopted in future researches Denzin [51] and Patton [52] explained that Triangulation of sources in nursing employees - examining the reliability of different data sources from within the same method.

For example:

- A. In time, check the reliability of source at different point

- B. In public vs. private sector

- C. Relating people/employee with different viewpoints

In terms of practical recommendations this study suggest by providing empirical evidence to promote nursing innovative work behavior. Nurse administration should also consider the gradual transfers of Leader member exchange by considering both rights and responsibilities. This is because gradual adoption by taking into the account of rights and responsibilities in the organizational attainment process leads to higher productivity. Furthermore, public and private sector can be explored widely in the context of current variables with different attributes (Table 8).

Table 8: Mediation results.

			B	SE	T-value	P
Overall Sample	Path-A	LMX→POS	0.569	0.04	14.028	0
	Path-B	POS→IWB	0.232	0.062	3.73	0
	Path-C	LMX→IWB	0.521	0.044	11.697	0
	Path-C\	LMX→POS→IWB	0.389	0.056	6.928	0
Public Sector	Path-A	LMX→POS	0.705	0.053	10.339	0
	Path-B	POS→IWB	0.298	0.103	3.05	0.003
	Path-C	LMX→IWB	0.675	0.059	9.502	0
	Path-C\	LMX→POS→IWB	0.452	0.081	4.614	0
Private Sector	Path-A	LMX→POS	0.599	0.055	10.296	0
	Path-B	POS→IWB	0.216	0.082	2.769	0.006
	Path-C	LMX→IWB	0.497	0.059	7.87	0
	Path-C\	LMX→POS→IWB	0.358	0.077	4.57	0

Limitations

A survey research design and due to cross sectional study to examine the relationship of two different aspects of POS with outcome variables. This design not allow to examine the cause and effect of relationships future studies may adopt an experimental design to replicate findings of this study. Particularly with regard to mediating effect of POS in between LMX and IWB will be interesting to investigate (Table 9). Another restriction emerges because of the limited scope of the model. The procedure of cross validation ought to diminish the likelihood that an analyst will exploit testing blunder to accomplish a sensible decency of-fit Anderson [53] and Gerbing [54] Through proper organizational prospective, nursing profession must be investigated in varied department such as intensive care units, dialysis centers or cardiology departments. More over sample of our study is only from Lahore which makes generalizability another limitation associated with our study. Self-

report questionnaire of this study has another feature. Self-report technique assumes that respondents are coherent, conscious of their own feelings and behavioral approach. An advantage of self-report measure is its reliability and validity can be objectively established (Table 10). However, self-report measures do have a number of inadequacies, e.g., the confounding effect of response set, social desirability, and inadequate memory. Furthermore, certain motives may lack of conscious representations; and self-report measures may fail to deal with the issues of self-deceptive process.

Table 9: Sobel test results.

	Test Statistic (Z)	Std. Error	P-value
Overall Sample	3.5966	0.079	0
Public Sector	2.9075	0.059	0.0036
Private Sector	2.686	0.049	0.0072

Table 10: Results of hypotheses tested.

Sr. No	Hypothesis	Results
H1	LMX will be positively related to nursing employees' Innovative Behavior.	Accepted
H1a	LMX will be positively related to nursing employees' Innovative Behavior in Public Sector.	Accepted
H1b	LMX will be positively related to nursing employees' Innovative Behavior in Private Sector.	Accepted
H2	POS will be positively related to the Innovation Work Behavior of nursing employees.	Accepted

H2a	POS will be positively related to the Innovation Work Behavior of nursing employees in Public Sector.	Accepted
H2b	POS will be positively related to the Innovation Work Behavior of nursing employees in Private sector.	Accepted
H3	LMX will be positively related to nursing employees' perceptions of organizational support.	Accepted
H3a	LMX will be positively related to nursing employees' perceptions of organizational support in Public sector.	Accepted
H3b	LMX will be positively related to nursing employees' perceptions of organizational support in Private sector.	Accepted
H4	POS mediates the relationship between LMX and the Innovation Work Behavior of nursing employees.	Partially Mediated
H4a	POS mediates the relationship between LMX and the Innovation Work Behavior of nursing employees.	Partially Mediated
H4b	POS mediates the relationship between LMX and the Innovation Work Behavior of nursing employees.	Partially Mediated

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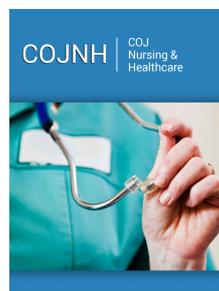
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