ABSTRACT

Drawing on a cross-work unit sample of 102 supervisor-subordinate dyads from medical service organization, we examined how to develop to new type and role with organizational implicit knowledge changed to explicit knowledge. In this study, we measured constructs with different sources (e.g., employee rated their perceived organizational support, power distance, equity sensitivity, and organizational citizenship behavior, while supervisors rated their employees' task performance) in order to reduce the possibility of same source bias. To enhance the clarity of the causal relationship among variables of this present study, questionnaires were distributed at three time points. The moderating effects of power distance and equity sensitivity on generally well established relationships between perceived organizational support and work outcomes (in-role task performance and organizational citizenship behavior) was examined. Results showed that both power distance and equity sensitivity altered relationships of perceived organizational support to work outcomes, in that the relationship of perceived organizational support to task performance was stronger for individuals scoring high on power distance, while the relationship of perceived organizational support to organizational citizenship behavior was stronger for individuals scoring high on equity sensitivity (entitled). From a practical standpoint, managers in medical service organization or health care industry that hope to increase employee in-role task performance and organizational citizenship behavior could take actions to enhance employee's perceived organizational support.

Keywords: perceived organizational support, job performance, organizational citizenship behavior, power distance, equity sensitivity
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