Impact of Total Quality Management Practices on an Organization Performance

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Abstract

Purpose:

Although impact of TQM practices have been founded to improve the organization performance, the management literature has overlooked on the effort of individual level or in form of group outcomes, the purpose of this paper to explore the impact of TQM practices on organization performance in banking sectors. Practices has an impact on three dimensions of employee (physically, psychologically, social) weather well being should be consider as a mediator of the TQM practices and organization performance relationship**.**

Design/ Methodology/ Approach:

The paper use qualitative data collected from in depth case study via documents analysis and Sami structured interviews with quality expert's practices about how to enhance the level of performance.

Finding:

Thepaper shows that impact of TQM practices can lead to both positive and negative motivation outcomes. Furthermore they create trade-off between the three dimensions of well-beings. While they increase employee well being on one dimension they are dramatic to another.

Research limitation/Implications:

Due to the scope of the research the paper bounded itself to analyzing three TQM practices. Different trade off may exist for other practices.

Practical Implications:

Many organization introducing TQM practices assuming that they will improve performance. However, the existence of well being trade-off need to be acknowledges and managed.

Originality/ Value:

This paper show that for a comprehensive understanding of the effects of TQM practices further studies need to contemplate the different dimension of well being separately, as trade-off may occur between them. It further suggests that well being may be an unexplored mediator of the TQM practice and organization performances relationship.

Key words: TQM practices, organization performance, motivation

Introduction:

 Impact of total quality management (TQM) practices (also called high involvement, high commitment or high performance work practices)have been a discussion topic(Boselie et al.,2005) within academy and industry for decade. Interest lies in the fact they appear impact positively on performance (Huselied, 1995; Combs et al 2006) which is encouraging firm to implement them.some studies assume this effect on performance stems from their positive impact on workforce satisfaction(Marchington and Grugulis, 2000,)and some authors suggest these practices may adversely affect employee by growing work (Ramsay, et al 2000) agreement not still not been reached.

This paper set out to make twofold contribution on this debate. Firstly, we identifying some of the limitationsof extent study that that explain the ambiguous result on the relationship of TQM practices and organization practices, namely organization rather than employee-centered research (Godard and Delaney, 2000) disregard to TQ implementation and context (khilji and wong, 2006; Thompson, 2007) and multidimensionality of concept of the well being (Van D e Voored, et al, 2011).

Second, we tackle this gap by thronging implementation of three TQM practices in the division of major international consultancy firm. Analyzing TQM practices implementation and employee perception and experience in context allow us to contribute existing empirical and theoretical understanding. By adopting a case study methodology, we take a more holistic approach to the study of the TQM practices and performance relationship and offer suggestion to overcome some of the existing ambiguities. We purpose TQ implementation lead to both positive and negative well being outcomes. It generates complex trade-off between the different
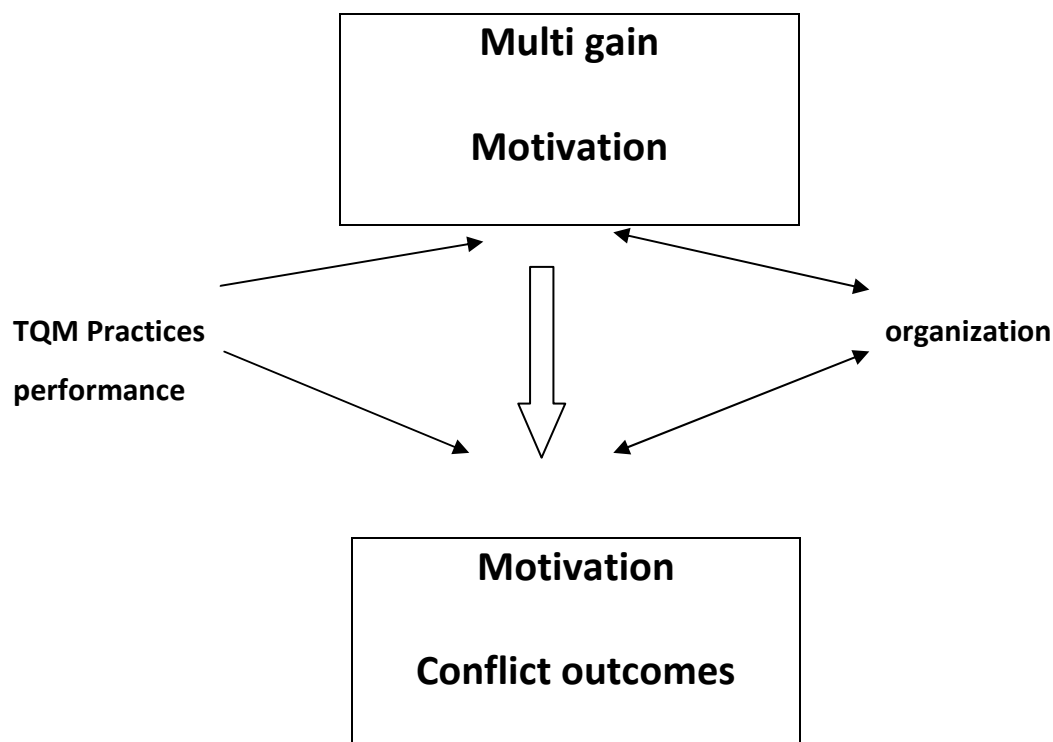
dimensions of well beings, indicating that each of these should be specified separately when looking at the TQM well being performance links.In the first section, we review literature and provide definition of TQM practices. We then describe our methodology moving on to the findings, there discussion and some recommendations for future research. The paper ends with its limitations and some practical implications.

Literature review:

 For the 25 years, impacts of TQM practices have been steadily introduced on the assumption they are positive to organization performance (Boselie et al., 2005). Some define TQM practice and HRM innovation(2006), any intentional introduction and change in TQM policy, program, system and practices design for employee motivation and increase their level of performance change the behavior and interactions of employees. Their positive link to performance has been evidence (Delery and Doty, 1996; combs et al, 2006) but impact on employee outcome is still debated.According to Ramsay et al. (2000; p 503) researching reporting a link between TQM practices and organization performance agree, that the association reflect a causal which flow from practice through people to performance".

 However there is much uncertainty about the price and nature of this link. Two contrasting perspective exist. (Van De Voored et al 2011) one school of thought defends the 'mutual –gains" alternate; employer and employee equally benefit from the introduction of TQM practices their introduction of TQM practices their assumption being that these practices boost employee well being.In turn employee perform better create a win-win relation with organization (Appelbaum et al, 2006, Delery,and,Doty,1996).However this research criticized for being simplistic and somewhat uncritical (Fleetwood, 2007).

 The competing approach, known as the conflicting outcomes "perspective, claim that thepractice increase organization Performance at the expense of employee motivation by increase work intensity (Gallie,2005Green,2001,Canibano,2012) and stress (Tarafdar et al 2007,Ramsy 2000,) Overall,further research seems nessary to impacts of the implementation of TQM practises on employee performance.Three characteristics of extant studies can explain this situation.First,most TQ literature ''uses organization as the unit of analysis,and largely ignores the differences in individual employee' work attitude and performance''(Green et al,2006,p.560).The general belief exists that the positive relationship between TQM and performance operates through employee.Research tends to adopt this reasoning but neglects to test it or question employees,making assumption about what is happening at individual level and then focusing analyses and result on the organizational level by relying on managerial perception of employee outcomes (Bartel,2004).To better explore the impact of TQM on employee performance a practices is required, using individual as the unit of ananlysis.Second, most studies gather their data from TQ managers assuming their superior knowledge regarding TQM practice (Purcell,1999).How ever research shows that managers report on intended practice (those designed by HR professionals) rather than on implemented practise which may be different (Khilji and wang,2006).This discrepancy potentially contribute to the ambiguity of findings linking TQM and performance,but very few articles explore the implementation of TQ practises preferring to focus on their strategic conception (chow ,2012).

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                    ┌──────────────────────┐
                    │     Multi gain       │
                    │                      │
                    │     Motivation       │
                    └──────────────────────┘

TQM Practices                                      organization

performance
                    ┌──────────────────────┐
                    │      Motivation      │
                    │                      │
                    │   Conflict outcomes  │
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In contract to this,there are calls fora more holistic and contextualization analysis of TQ processess (Truss,2001).Nishii and wright (2008) propose a model where by intended TQM practise and performance are connected through the mediation of actual TQM practise,perceived TQM practices and employee reaction.This acknowledges that employees may not alla perceive implemented TQM practise the same way because the implementation context and individaul employees will differ.More theory development is required to under stand the variables that intervene in this process.Overall we concur with thompson's (2007,p.1299) statement that further case study and qualitative based work focusing on employees and their work place are necessary to advance our understanding of innovations in work practise and to encourge further theoretical development in particular,there in still much to learn about TQM implementation and employees reactions to them.

Third, as noted by prefer (2010),the management literature has largely disregard the study of health and motivation as outcomes of managerial practice and little research in the TQM field has tacked this problem (Baptiste,2007).Although many articles look at certain aspects of motivation, particularly satisfaction (Boselieet al,2005) and stress (Landsbergis etal,1999),they have not holistically explored the impact of new TQMpractice on health and MOTIVATION (Van De Voorde etal,2011).

This article uses the world health organizations (1948) definition of well-being as a three dimensional concept, composed of physical, psychological, and social aspects awareness of the interrelationship between health or well being and working life is not a new phenomenon. However focus has evolved in occupational health literature, from emphasizing physical working conditions and issues like ergonomics and engineering safety towards a more holistic approach including physical, psychological, and social dimensions (Macikfrey et al,2007).Physical well-being is characterized by the absence of negative symptoms like headaches, muscular soreness, fatigue, eye sight problems, cardio vascular diseases, etc (Danna and Griffin,1999,p.361) as well as the presence of positive feelings such as energy and strength (Macik Frey et al,2007).Psychological well-being has an affective nature and refer to people self described happiness, including positive state such as enthusiasm or cheer fullness, as well as negative states like depression, distress or anxiety (Warr,1987).While physical and psychological well-being happen at the individual level, social well-being focuses on social integration (feeling part of the community) social acceptance (trusting other people) and social coherence (understanding social processes) (keyes,1998).Research show the same innovative phenomenon can lead to diverse or even contradictory observation (Liker et al,1999) influenced by human action and the individual and social understanding of work (Vast and Walsham,2005).

Arguments that TQM practices positively or negatively affect MOTIVATION are both supported by either the ''mutual-gains'' or ''conflicting out comes'' perspectives. Thispaper takes abroad exploratory approach to investigate if and how implementing TQM practices affects employee performance.

Methodology

Lindell (2012) argues that the possible negative consequences of TQM, for both employees and society as a whole, are neglected by existing research because most models disregard its implementation and use. However, TQM practices are complex and their effects are contingent on many factors, interpretations, and even emotional aspects or "moods" (Orlikowski, 2000). Such diversity is hardly apprehended by mainstream statistical studies. Quantitative analysis of large populations of firms prevents researchers from assessing complicated and multifaceted processes and mechanisms (Boxall and Steeneveld, 1999) so disentangling the effects of TQM Practices implementation on employee performance requires an explorative qualitative approach (Gratton et al., 1999). Following the example of previous research (e.g. Donnelly, 2008; Truss, 2001), in furtherance of theory building, our analysis relies on the in-depth study of a single case.

The questionnaire has 15th questions. Basic aimed of this survey to achieve the objectives of the TQM developments. 50 surveys were sent (Through questioners) to all small and medium Organization in Pakistan. And all the employees were aged between 25 to 45 years. Therefore all the questionnaires were returned having response rate of 100%. The questionnaire using 5-Scale Likert (1=Strongly Agree, 2=Agree, 3=Neutral, 4=Strongly Disagree, 5=Disagree) was design to test the impact of all the variables. The questionnaire covers all the variables about TQM, nature of work, promotional, Opportunities and training & development. The data were analyzed through SPSS.

Research setting

The company is a multinational consulting organization which has prizes for TQ, and provides an excellent example of implemented TQM practices. A senior manager highlighted this specificity saying that they "get so used to the continuously OF TQM, that it seems the normal way to work" (HR Interviewee 2). Our results focus on the company's branch in Spain, with more than 10,000 employees. Spanish subsidiaries of international firms have become strategic test beds for implementing TQM practices (Wa¨chter et al., 2006, p. 55) and have proved key to establishing new organizational practices and developing TQM in Spain (Rodriguez-Ruiz and Martinez-Lucio, 2010, p. 135). This case analysis should provide valuable empirical and conceptual understanding of the effects of TQM practices on employees, and could be useful to the investigation of such links in other organizations.

Research design

The data collection is based on qualitative methods: 50 interviews and document analysis. First, we analyzed the company's official written materials, including annual reports, internal HR communication, and innovation reports to gather information on existing policies. Then, we conducted two sets of interviews. First, we interviewed the head of TQ and three members of her team to discuss the most recently implemented TQM practices. As a result, we selected three that had been launched in the last two years (timework, communication and participation). Second, we conducted 46 semi-structured interviews with employees from different departments. These interviewees then suggested the first three participants, after which we used a snowballing approach, requesting each of them to recommend a further two colleagues. These interviews lasted 40 minutes on average and personal characteristics (gender, age, etc.) were stratified so as to have maximum diversity. Interviewees were questioned about the three selected innovative TQM practices and asked how their way of working had changed and whether their well-being was affected.

Data analysis

All the interviews were recorded transcribed and coded using N-Vivo Software. Since we wanted to explore the different dimensions of well-being, before examining the data, we developed three a priori codes (one per dimension: physical, psychological and social). Then, a total of ten inductive sub-codes emerged from the data. For physical well-being, we labeled our codes based on symptoms and experiences present in the occupational health literature (Macik-Frey et al., 2007): musculoskeletal problems, fatigue and energy.

At the psychological level, we used War's (2009, p. 58) categorization as a guideline. Four of his constructs emerged in our interviews and are used to code the data: stress, anxiety, satisfaction and enthusiasm. For social well-being, three sub-codes surfaced that we labeled social integration, social acceptance and social coherence following Keyes (1998). Each code was then subdivided to identify whether the interviewee experienced an increased or reduced symptom or feeling (for example, quotes coded under "satisfaction" were further divided into "increased satisfaction" or "reduced satisfaction").

Finding

As a result of the initial managerial interviews, three practices emerged as the most Innovative and relevant for the organisation:

(1) Timework: giving employees the opportunity to work from home;

(2) Communication, enabling physically separated employees to be constantly connected, share documents, makes virtual calls, etc. through a collaboration toolset

(3) Participation: allowing employees to share and discuss their innovative ideas through an online internal platform (each year winning ideas are selected for implementation).

Implementation and use of these practices differs across the company. Timework is still not available to all departments, hence only half the interviewees benefited from it. The communication and participation practices are accessible to all employees but not everyone uses the latter.

In this section we present evidence of the positive and negative experiences that Employees report regarding these three practices by focusing on the three well-being dimensions afore mentioned (physical, psychological and social). The complex effect of implementing TQM is highlighted because none of the practices has an outright positive or negative consequence on well-being. Instead, they seem to create trade-offs between the three dimensions.

Result

Different focus on TQM across clusters.

The results from the K-means cluster (using the cluster centers generated using Ward's Method) are graphically depicted in Figure. Each of the three clusters has distinctive features. The first cluster has a 1) Organization Performance, 2nd Motivation and 3rd TQM practices of small and This group of firms has not yet implemented all of the innovative of TQM sectors (e.g. Organization Performance, Motivation and TQM practices).

T-Test

One-Sample Test

	Test Value = 0					
	t	df	Sig. (2-tailed)	Mean Difference	95% Confidence Interval of the Difference	
					Lower	Upper
organizational strategy	16.868	49	.000	1.540	1.36	1.72
training methods	12.788	49	.000	1.840	1.55	2.13
increase the productivity	15.154	49	.000	2.220	1.93	2.51
quality improvement	15.968	49	.000	2.360	2.06	2.66
ISO standers	13.966	49	.000	2.560	2.19	2.93
customer satisfaction	17.409	49	.000	1.580	1.40	1.76

This table shows the relation of all variables of our questionnaire on the behalf of T-test in spss. This shows the relation of dependent and independent variables. T-test means the strength and direction of relationship. In the significant level of .00 Outputs 1.54 to 1.58 and show the result about all independent variables those we taken in this questionnaire. Our result is significant because interval confidence is significant lower is 1.36 to 1.40 and upper 1.72 to 1.76

Regression

<div align="center">Coefficients[a]</div>

Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	1.208	.587		2.056	.046
	training methods	.086	.124	.101	.700	.488
	organizational strategy	.166	.195	.123	.852	.399
	Management leadership	.057	.108	.077	.524	.603
	increase the productivity	-.108	.122	-.128	-.885	.381
	motivation level	.185	.130	.207	1.422	.162

a. Dependent Variable: improved the TQM

This is the 1st table show the regression. Regression first column B shows the regression is 1.208 to .185 and beta is .101 to .207 and adjusted standard error of estimate .587 to .130 and t is 2.056 to 1.422 and significant result is .162

Mean table

organizational strategy improved the TQM motivation level increase the productivity quality improvement meeting quality management philosophy ISO standers TQM decrease * training methods

training methods		organizational strategy	improved the TQM	motivation level	increase the productivity	quality improvement	meeting quality	management philosophy	ISO standers	TQM decrease
strongly agree	Mean	1.43	1.83	2.04	2.13	2.26	2.22	2.30	2.30	1.52
	N	23	23	23	23	23	23	23	23	23
	Std. Deviation	.590	.717	1.107	1.180	.864	1.126	.974	1.363	.593
Agree	Mean	1.53	1.82	1.82	2.29	2.12	2.47	2.71	2.47	1.53
	N	17	17	17	17	17	17	17	17	17
	Std. Deviation	.717	1.074	.809	.920	.993	1.179	.920	1.231	.717
Neutral	Mean	2.00	2.14	1.71	2.29	3.00	3.29	3.14	3.29	2.00
	N	7	7	7	7	7	7	7	7	7
	Std. Deviation	.577	.900	.756	.756	1.291	1.496	.900	1.113	.577
Strongly Disagree	Mean	1.00	1.00	1.00	4.00	2.00	4.00	2.00	4.00	1.00
	N	1	1	1	1	1	1	1	1	1
	Std. Deviation	.	.	.	.	.	.	.	.	.
Disagree	Mean	1.50	2.50	3.00	1.50	3.50	4.50	3.00	3.00	1.50
	N	2	2	2	2	2	2	2	2	2
	Std. Deviation	.707	.707	1.414	.707	2.121	.707	1.414	1.414	.707
Total	Mean	1.54	1.88	1.94	2.22	2.36	2.58	2.58	2.56	1.58
	N	50	50	50	50	50	50	50	50	50
	Std. Deviation	.646	.872	.978	1.036	1.045	1.279	.971	1.296	.642

Limitations

Due to the nature of this research, our results should be taken cautiously. First, many TQM practices have not been analyzed (e.g. task flexibility, compensation systems, development practices, etc.) because it was fundamental to focus on particular TQM to help interviewees clarify their ideas and allow us to draw useful conclusions for management purposes. Therefore we cannot assume that trade-offs will exist for all new implemented TQM practices. In addition, there are factors that can shape the way people make sense of the new

practices and their impacts which have not been explored. Personality and supervisory relationships, as well as organizational, structural and broader socio-economic influences, may affect employees' perceptions and reactions to implemented TQ Practices However, both were beyond the scope of this paper. Second, the analysis is exploratory and bounded by a single case, so results cannot be directly extrapolated to other organizations or generalized. However, the fact that well-being trade-offs exist in this particular context provides insight into the debate on the link between TQM and Performance and a way to further studies on this issue. It should also be remembered that the literature offers examples of significant contributions made through in-depth analysis of one specific firm, and the understanding of its processes (Donnelly, 2008; Truss, 2001).

Discussion and Recommendations for future Research

Very few investigations in TQ management literature have specifically studied the consequences of TQ practices on Organization health and performance (Pfeffer, 2010). Most authors believe the positive relationship between TQM Practices and performance operates through employees (Boselie et al., 2005), but two opposed perspectives on this mediation exist: the "mutual-gains" approach and the "conflicting outcomes" perspective (Van De Voorde et al., 2011). The initial literature review indicated that such ambiguous results on the TQM practices-well-being relationship stem from three limitations of extant studies:

(1) Organization rather than employee-centered research (Godard and Delaney, 2000): to earn external validity, studies focus on analyses at organizational level relying on managerial perceptions of employee outcomes instead of questioning employees.

(2) Disregard of TQ implementation and context (Khilji and Wang, 2006; Thompson, 2007): study of TQ processes should be contextualized and studied more holistically (Truss, 2001). Exploring the managerial perspective is not enough to understand the way employees experience them (Nishii and Wright, 2008).

(3) Multidimensionality of well-being (Van De Voorde et al., 2011): in TQ research on organizational performance, only some of the psychological aspects (like
Satisfaction or stress) have been considered, while other dimensions have mainly been ignored.
To try to overcome these limitations and provide new insights, this paper has explored and analyzed the effects that implementing TQM practices has on all three dimensions of employee well-being, in a highly innovative consultancy firm. First, our findings suggest that the "mutual gains" and "conflicting outcomes" perspectives are not completely at odds with each other.

The same practice can impact positively on one dimension of well-being and negatively on another. Desirable and detrimental effects coexist because trade-offs between the different dimensions arise. In line with Grant et al. (2007), our findings indicate that managerial practices do not have a single straightforward effect on well-being but different effects on different dimensions, creating these complex trade-offs. Even if timework has been implemented because of widespread employee demand, its positive effects on physical and psychological well-being are counterbalanced by a negative impact on social well-being. Conversely, while communication practices increase well-being from a social perspective, they have a negative impact on physical and psychological health. Participation's positive effects on psychological well-being coexist with its negative impact on social health.

This finding shows that distinguishing between the three dimensions of well-being is required for a comprehensive analysis of the TQM Practices-well-being relationship. A positive effect on psychological health (for example on satisfaction, as posited by the "mutual-gains" approach (Appelbaum et al., 2000) is compatible with negative impacts on physical and social well-being. Therefore, each dimension should be analyzed individually, especially since each practice seems to affect them differently. One cannot assume that the effects of each practice are additive and that the more practices, the stronger their impact. As noted by Horgan and Muhlau (2006), practices may compensate each other so their final effect is neutral or non-significant, creating what they call "deadly combinations". Arguably, the relationship of different practices with each well-being dimension would need to be specified separately.

This is graphically summarized by arrows one, two and three in Figure 2. This is relevant to the research into the HRM-performance relationship because it signals that the three well-being dimensions should be contemplated as different mediators in order to avoid specification errors in quantitative models (Becker and Gerhart, 1996). Therefore, although not tackled in this paper, the relationships depicted by arrows four, five and six in Figure 2 would also need to be specified and tested separately in a quantitative study. However, our findings also suggest that developing research with a contextual approach is necessary to further our knowledge. Implementing new TQM practices is a chaotic process and each employee may interpret it differently (Nishii and Wright, 2008), leading to a number of sub-stories overlooked by quantitative studies. First, our interviews highlight perceptions evolving over time. For instance, initially, the communication practice had a positive psychological impact due to increased satisfaction and information sharing, however, as time passed the majority of interviewees started considering it invasive and stressful. Second,

TQ practices are socially constructed (Thompson, 2007). Although implemented by the organization, Employees and managers enact them in different, unintended and unexpected ways. Although implementing communication was not designed to increase working time, employees have, in fact, reported working longer hours. Third, the impact of one practice may be mitigated by another.

Conclusions and practical implications

Our findings have a practical relevance because many organizations are introducing these TQM assuming that they will improve performance. However, if the positive well-being effects are counterbalanced by negative unintended outcomes on other well-being dimensions, performance may increase less than expected. Being aware of possible side-effects and managing them should optimize their benefits. The decrease in social well-being generated by timework is partly mitigated by increased communication so other forums, either virtual or face-to-face, should be used to compensate. There are also negative physical health problems that could be easily solved by providing training and support (Burke, 2009). The firm's medical service offers advice on changes at work or in the working space and training programmers will soon be launched for workers to learn how best to work from home. Seldom do the negative effects stem from the TQM practices per se, but from its management. For example, the fact that workers are encouraged to participate and propose innovative ideas is only disadvantageous to employee well-being when it creates internal competitiveness and some employees lack time to participate.

To resolve this situation, team managers responsible for distributing and supervising work should be encouraged, through marketing, training or variable pay, to allocate time for their supervisees to participate. Analogously, in principle, communication improves information sharing and boosts employee satisfaction but when workers are constantly monitoring each other it becomes harmful (Tolsby, 2000). A solution to this would be to filter messages so that employees could change their "communication status" from "available" or "readily contactable" to options like "absent", "busy", "unavailable", "available only for urgent matters", etc. In addition, employees should be trained both to contact people only when necessary to avoid overloads and to answer only when not busy. Overall, managing these issues is essential to the success of the TQM practices generally implies first coaching, teaching, and encouraging individuals to ensure that they have the necessary skills and confidence (Mikkelsen et al., 2002). Second, the implementation should be coherent with other company policies and organization beyond managing negative outcomes, it would be beneficial for organizations to overcome the pathological paradigm of health and observe employee well-being as a resource and asset (Akerlind and Schunder, 2007). Traditional concerns linked to employee health such as absenteeism, depression or decreased performance, should allow for a new focus on engagement, purpose, vigour, enthusiasm and optimism (Macik-Frey et al., 2007; 832).

Besides suggesting how to minimize the negative well-being effects of TQM practices, our results put forward a number of positive effects that should be nurtured and extended. Shifting focus from only preventing or resolving problems to promoting the positive aspects could transform ORGNIZATIONAL well-being into a source of competitive advantage and further innovation. Having the opportunity to participate in innovative processes, as one interviewee said, gave them "wings" (I10). Another pointed out that "vital and motivated employees are more innovative" (HR interviewee 3). Thus TOM practices are not only a source of ENHANCING the performance, but of innovation as well. Identifying the positive effects could lead into a virtuous practices circle.

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