

PSYCHOLOGICAL SAFETY, STRATEGIC HR PRACTICES, AND EMPLOYEE ENGAGEMENT: EVIDENCE FROM HEALTHCARE ORGANIZATIONS

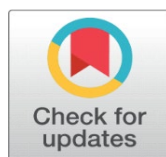
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ABSTRACT

This study proposes research on the application of psychological safety in defining the linkage between strategic human resource (HR) practices and employee engagement in healthcare organisations. The study is a cross-sectional, quantitative study grounded in organisational psychology and relies on data from a survey conducted among employees of hospitals and clinics under the Ghana Health Service and the Christian Health Association of Ghana. 213 valid responses were analysed using descriptive statistics, regression, and mediation tests. The findings show that strategic HR practices have a positive correlation with employee engagement and a significant positive impact on employees' perceptions of psychological safety. Psychological safety is established as a strong predictor of engagement and plays the role of mediating the relationship between strategic HR practices and employee engagement to some extent. These results imply that HR practices promote higher engagement levels, especially when they lead to the creation of a psychologically safe working environment where employees feel comfortable in sharing ideas, concerns, and opinions without fear of adverse effects. The work is relevant to the field of organisational psychology with specific references to psychological safety as one of the psychosocial processes that can be used to connect organisational practices and employee attitudes and engagement, especially in high-demand medical work environments.

Keywords: Psychological Safety, Strategic HR Practices, Employee Engagement, Healthcare Organizations, Work Environment

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1. INTRODUCTION

Human resource management has gradually become more of a strategic organisational process than an administrative role that defines the psychological experiences, attitudes and work behaviour of the employees. Strategic Hr practices are significant in enhancing employee motivation, engagement, and performance in the healthcare organisation, where quality of services strongly relies on human intervention and emotional labour (Beltrán-Martín et al., 2022; Lu et al., 2022). Modern HR strategies are no longer limited to skills growth but aim at the psychological

characteristics of employees with a focus on supportive working conditions, wellbeing programs, and employee engagement-based practices (Gile et al., 2022; Rabiul et al., 2021). It has also been argued that where HR practices can be seen to be equitable, growth-oriented, and inclusive, chances are high that employees would experience a sense of appreciation and psychological confirmation and participate actively in the organisational objectives.

In this regard, psychological safety has become one of the key constructs in organisational psychology, especially in high-stakes healthcare facilities. By means of a psychologically supportive environment, the stress levels decrease, and open communication as well as the feeling of security of workers in the workplace is strengthened, which is especially applicable in the Ghanaian healthcare setting (Daniels et al., 2021; Lintanga & Rathakrishnan, 2024). Psychological safety also affects the interaction of employees, expressing concerns and also reaction to the expectations of the organisation (Hunt et al., 2021). Workers get to show greater rates of involvement, devotion, and output when they believe that they are secure enough to share ideas and raise concerns without the fear of being subjected to adverse treatment (McClintock & Fainstad, 2022; Rabiul et al., 2021). Recent healthcare research further highlights that stigma and perceived judgment within clinical environments can significantly hinder open communication and help-seeking behaviours, reinforcing the importance of psychologically safe workplaces (Saleh et al., 2026).

Employee engagement is irregular in the Ghanaian health sector despite the growing awareness of the role of strategic HR practices. Numerous healthcare centres are still struggling with high turnover rates, low morale, and decreased staff involvement. It has been found that even those practices on HR can not necessarily lead to engagement unless the employees feel that the work environment is favourable and psychologically secure (Mitterer & Mitterer, 2023; Obeng et al., 2025). Resource shortages, workload issues, weak support systems, and communication barriers in healthcare facilities in Ghana could undermine the positive effects of HR strategies on employees' attitudes. Evidence from recent studies also suggests that demanding work schedules and poor work-life balance significantly affect employee health behaviours and overall engagement levels in healthcare settings (Abu-Farha et al., 2026).

Psychological safety, a critical enabler of free communication and learning, is not fostered in various institutions of public health. Although research has shown that supportive HR practices improve well-being, engagement, and performance, limited evidence exists regarding the interactions between these practices and psychological safety to enhance employee engagement in the Ghanaian health sector specifically. The current literature recognises the autonomous nature of HR practices and psychological safety, but offers scant or no empirical evidence on how the two interact or mediate in Ghana's health care. The existing gap requires an extensive study of the impact of strategic HR practices on employee engagement with psychological safety in this special setting. This study aims to investigate how strategic human resource practices can affect employee engagement and the mediating effect on psychological safety in the Ghanaian health sector.

The study has helped gain a better understanding of organisational behaviour within the healthcare setting by identifying how HR practices influence employee engagement and psychological safety. The results equip healthcare administrators with evidence-based information to formulate HR plans that foster trust, teamwork, and the free flow of information among employees. The study also provides viable suggestions towards improving employee satisfaction, lowering turnover intentions, and increasing performance outcomes in health care institutions in Ghana. The study contributes to policy development by clarifying the mechanisms through which HR practices influence engagement levels within the sector. It also contributes new empirical evidence to the small body of research on psychological safety in African healthcare settings, which is valuable to academics, policymakers, and healthcare leaders seeking solutions to workforce sustainability.

This study offers original input by combining strategic HR practice, employee engagement, and psychological safety into a single framework specific to the Ghanaian health sector. In contrast to previous studies, which have tested these constructs separately, this study focuses specifically on psychological safety as a mediator linking HR practices and engagement outcomes. The emphasis on the healthcare situation in developing countries also enhances the study's novelty, as there is little empirical evidence on the functioning of psychological safety within Ghanaian public health institutions. In addition, the research expands existing models by measuring HR practices beyond their conventional role as operational instruments to promote employee engagement, using psychosocial conditions.

2. RESEARCH QUESTIONS

- 1) How do strategic human resource practices influence employee engagement in the Ghanaian health sector?

- 2) How do strategic human resource practices influence psychological safety among healthcare employees?
- 3) Does psychological safety mediate the relationship between strategic HR practices and employee engagement?

3. LITERATURE REVIEW

3.1. DEFINITIONS

Strategic Human Resource Practices (SHRPs) are organised HR practices, i.e., recruitment and selection, training, performance management, compensation, and employee involvement, undertaken to enhance an organisation's organisational capability and long-term performance. SHRPs play vital roles in professional development, safety culture, and talent retention in the healthcare context to ensure successful service delivery, particularly in highly demanding settings (Alolayyan et al., 2021; Gile et al., 2022). The organisational commitment towards employees is reflected in such practices and creates a perception of being supported, fair, and opportunity-driven.

Employee engagement can be defined as a positive mental state characterised by employees' vibrancy, commitment, and preoccupation with their work. Inspired healthcare professionals are more energised, emotionally connected, and engaged in the process of patient care (Afram, 2021; Annan-Prah & Andoh, 2023). Efforts like autonomy or competency building and facilitating leadership can play a vital role in engagement, whereas unfavourable working environments undermine it (Adekanmbi & Ukpere, 2022).

Psychological safety is the collective feeling among employees that they are free to raise concerns, identify mistakes, ask questions, and present ideas without fear of being punished or humiliated. Psychological safety is a highly essential aspect of patient safety, open communication, and effective collaboration in healthcare (Grailey et al., 2021; Hunt et al., 2021). It helps in error reporting, learning behaviour and joint decision-making. Psychological safety is developed with the help of SHRPs that focus on communication, fairness, and leader support (Hu et al., 2022; Platania et al., 2022).

These three concepts, which are SHRPs, psychological safety, and engagement, are a fundamental basis of comprehending how HR systems can empower workforce behaviour and performance within the Ghanaian public healthcare service.

3.2. THEORETICAL FOUNDATION

This research is based on the Social Exchange Theory, which posits that employees respond positively when they feel that the organisation is interested in their well-being. SHRPs serve as organisational support indicators; once healthcare workers feel like they are given developmental opportunities, treated fairly, and supervised, they also offer positive attitudes and engagement (Adekanmbi & Ukpere, 2022; Obeng et al., 2021). SHRPs thus start mutual interactions that influence behavioural consequences.

In this paper, one more theory is based on the Conservation of Resources (COR) theory that offers a thorough concept of how people obtain, defend, and consume resource values. It suggests that people attempt to obtain and defend valuable resources, including support, skills, security, and independence. SHRPs are resource-building systems because they offer training, career, and structural assistance (Daniels et al., 2021; Molnár & Papp, 2023). When the resources available to employees are sufficient, they are likely to demonstrate increased motivation and engagement. Contemporary research further shows that structured learning systems and supportive development tools enhance individuals' ability to adapt, build competence, and actively participate in organisational processes (Othman et al., 2025).

Psychological safety is the key component of both theories. According to the Social Exchange Theory, employees feel safe, valued, and able to engage without any negative consequences, which makes them return with an increased level of engagement (Fu et al., 2022; Muah et al., 2021). The Conservation of Resources Theory shows that the emotional strain is decreased, and the employees do not experience stress related to workload, uncertainty, and the risk of interpersonal interactions (Li et al., 2023; Lintanga & Rathakrishnan, 2024). Therefore, the combination of these theories describes the development of psychological safety among SHRPs and its improvement through psychological safety, particularly in healthcare settings characterised by pressure, complexity, and limited resources.

3.3. EMPIRICAL REVIEW

Empirical studies have always indicated that strategic human resource practices (SHRPs) positively influence employee engagement. It is important to note that training and development were cited as key factors of engagement, since this process increases skills and professional confidence (Alolayyan et al., 2021; Subih et al., 2025). In Ghanaian and other African countries, lifelong learning empowers and promotes initiative in employees (Afram, 2021; Annan-Prah & Andoh, 2023). Healthcare workers have associated high-performance work practices with reduced turnover intentions and increased morale, including competency-based recruitment and favourable performance management (Obeng et al., 2021).

Another way engagement is enhanced is through organisations investing in wellbeing and mental health support. Daniels et al. (2021) and Daraojimba et al. (2024) Document that health-oriented HR programs raise the emotional and psychological ability of employees to be committed (Daniels et al., 2021; Daraojimba et al., 2024). Engagement is further enhanced by reward systems, opportunities for involvement, and open communication, which depict organisational trust and appreciation.

Psychological safety is directly achieved through SHRPs that focus on communication, involvement, and supportive leadership. Safety-based HR policies, i.e., safety training and open-door reporting policies, create an environment in which employees feel comfortable expressing concerns without intimidation (Grailey et al., 2021; Hu et al., 2022). Supportive leadership is instrumental in achieving this climate. Inclusive and participatory leadership approaches have been identified as considerably reducing perceived risks of speaking up (Fu et al., 2022; Wang et al., 2022). Additionally, studies on healthcare technology adoption indicate that leadership support and organisational readiness play a crucial role in shaping employees' confidence and willingness to engage with new systems, further reinforcing a psychologically safe environment (Alkawasbeh et al., 2025).

Furthermore, psychological safety is strengthened through job safety programs and management safety practices, which develop structures that safeguard the well-being of employees (Muah et al., 2021). As it is shown by Darko et al. (2020) Fair and transparent HR practices foster trust and safety, especially in the context of the public sector (Darko et al., 2020). Several studies indicate that psychological safety strongly predicts engagement. The employees who feel secure about voicing their opinions and presenting ideas are more motivated and emotionally engaged in their work (Darko et al., 2023; Hu et al., 2022). Psychological safety promotes teamwork, education, and creativity, which are necessary to sustain interest in healthcare teams (Tetteh et al., 2022). Psychological safety also minimises burnout and emotional exhaustion, allowing medical staff to maintain working in stressful situations (Arthur-Mensah et al., 2022; Lu et al., 2022). Within the stressful environment of the medical field, it develops a buffer that cushions employees against exhaustion and boosts resilience.

Recent research indicates that SHRP and engagement have a mediating relationship through psychological safety. The studies by Rabiul et al. (2021) and Miao et al. (2020) Conclude that HR practices can promote engagement only when they result in a positive psychosocial climate. Psychological safety converts HR activities into experiences that are meaningful and encourage employees to engage, be innovative and committed. In low-resource situations, research studies indicate that SHRPs should enhance psychosocial safety to generate engagement benefits (Keltu, 2024; Tenza et al., 2022).

Nevertheless, the literature related to healthcare in Ghana is still missing a considerable gap. Different studies have not studied psychological safety as an intervening variable between SHRPs and employee involvement in the public hospitals. According to existing studies, the problem of staff shortages, violence, and resource restrictions is among the challenges (Darko et al., 2023; Tawiah et al., 2024). The contextual problems outlined above demonstrate the necessity of comprehending how the psychological safety and involvement rates in the health sector in Ghana could be reinforced by SHRPs.

3.4. CONCEPTUAL FRAMEWORK

The conceptual framework depicts how strategic human resource practices (SHRPs) are connected to employee engagement, and psychological safety is an intermediary variable. The following aspects of SHRPs apply in the establishment of organisational culture and affect engagement: recruitment and selection, training and development,

performance management, compensation and rewards, and employee involvement (Adekanmbi & Ukpere, 2022; Alolayyan et al., 2021). Cognitive engagement is boosted through recruitment and selection processes that match the values of employees with the organisational objectives and create a feeling of belonging (Ansoglenang, 2020). The emotional engagement is facilitated through training and development programs, which proves that the growth of employees is appreciated (Afram, 2021; Annan-Prah & Andoh, 2023). Positive feedback and proper performance management help in clarifying expectations and highlighting success, and enhance both cognitive and emotional involvement. Behavioural engagement is facilitated with compensation and reward systems that can encourage employees to show discretionary effort when their contributions are recognised in a fair way. The further engagement of employees in the decision-making process promotes all three dimensions of engagement by making them own work processes.

Psychological safety mediates these associations as it offers a safe space in which employees are able to share ideas and not fear any of the adverse effects. It helps in open communication and emotional investment, as well as fosters innovation, which makes SHRPs more effective in facilitating overall employee engagement.

Figure 1

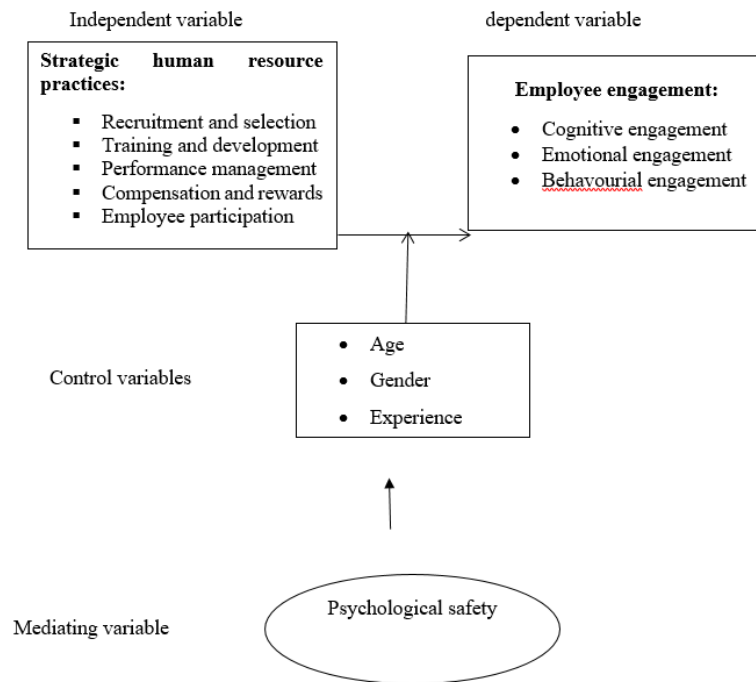


Figure 1 Conceptual Model
 Sourced Author's Construct, 2025

4. METHODOLOGY

The methodological approach adopted in this study aims to explore the effect of strategic human resource practices on employee engagement and to evaluate the mediating effect of psychological safety in the Ghanaian health sector.

4.1. RESEARCH DESIGN

Research design refers to evidence-based procedures, protocols, and guidelines that provide the instruments and framework for conducting research. It is a general plan adopted to bring together the various elements of the study in a rational and well-expressed way, enabling an effective solution of the study's research problem. It also entails designing data collection, measurement and analysis.

In this study, a quantitative research method was used. Quantitative research is the study and measurement of variables to produce valid and conclusive outcomes. The difference between this research method and the survey method is that the former emphasises the intentional measurement and the mathematical, numerical, or statistical

analysis of the gathered data using computational procedures. A quantitative survey aims to gather statistical information using a predetermined sample size and to generalise the study's results to a population to describe a variable within a given phenomenon.

4.2. STUDY POPULATION

The study population is the total number of elements that comprise the target area the researcher plans to study. It is the universe in an investigation, and it comprises everything within a given threshold over a given time span. It is not necessarily possible to conduct empirical research on the entire population of interest; therefore, a suitable sampling technique and sample size are selected to undertake the study.

The population of a study is the full set of individuals about whom the researcher needs to collect information. It is a collective of individuals with unique attributes. In this research, the population includes all members of the staff of the Ghana Health Service (GHS) and the Christian Health of Ghana (CHAG), from management staff to supervisors, secretaries/receptionists, factory workers, etc.

4.3. SAMPLE SIZE AND SAMPLING TECHNIQUE

A sample is a representative of the universal population under study by the researcher, but it does not cover the actual representation of the whole population. A sample of 213 was adopted because the whole staff in the GHS and CHAG cannot be employed as respondents in this study. Sample size refers to the number of people in a research study who are included in the study to give information to be analysed. The issue of sample size is significant in the research as it may influence the external validity of the results. The typical method would be to rely on a set of guidelines, rules of thumb, or a Cochran calculation. In this study, a convenience sampling method was applicable as an effective method to achieve sufficient results as the population is extensive, and it is not convenient to reach every one of the respondents.

Convenience sampling is used to select the participants according to their availability and willingness to be involved. The convenience sampling method is also commonly employed in surveys on the Internet, in which online participants can be easily reached through email or social media, among other online platforms. A questionnaire that would gather primary data was employed. One of the most preferred instruments of research is a questionnaire, which enables the researcher to gather information from the participants on a broad scope of issues.

4.4. DATA COLLECTION METHOD

The quantitative research method was used to collect the data, which is the main source of data collection in this thesis. This is a process that entails gathering primary data for research. This study employed the questionnaire method due to its extreme practicality since it can be distributed to particular respondents, who are required to provide the required information. Besides, the questionnaire is quick and easier to receive information about a big number of respondents, with regards to the sample size of 213. The survey, which consisted of 17 questions, was designed on September 13, 2025, on Google Forms (an online survey developed by Google), and the survey was delivered, in turn, to the respondents by e-mail and WhatsApp on the same day.

Nonetheless, the kind of questionnaire to be utilised in the empirical research for this study is the closed questionnaire. Closed-ended questionnaires are those questionnaires that have questions that can be responded to through mere rating (strongly agree, agree, disagree and strongly disagree). Adoption of a closed questionnaire is due to the fact that the respondents can only give limited answers within the scope of the survey.

Moreover, the closed-ended questionnaire enables one to compare respondents' answers easily with different respondents, and hence it is easy to analyse and compute the data obtained. In this research, the questionnaire includes 15 research questions that are closed-ended.

4.5. RELIABILITY AND VALIDITY OF THE STUDY

One of the most commonly used instruments is the questionnaire when designing a quantitative research study. The questionnaire was developed in such a way that it is able to gather pertinent information that can effectively capture the real situation of the variables within the chosen sample. Nevertheless, to become certified as an effective questionnaire,

a questionnaire needs to have two qualities, including reliability and validity. Reliability and validity create and promote the efforts of transparency within research and restrict the possibilities of bias and subjectivity of the researcher.

The reliability and validity play a crucial role in the research methodology process to demonstrate the quality and authenticity of research tools used by the researcher as an independent researcher. Reliability refers to the extent to which questionnaires, tests and measurement processes produce the same results when administered at a later date, irrespective of the date and time of conducting the research. It is, however, regarded as the consistency and stability of the results over a given time. Validity refers to how well the data gathered by the researcher is a true reflection of the trend under investigation. Nevertheless, it is the consistency of the findings gathered by the use of the questionnaire and the reality in the real world that matters. In the case where the reliability and validity of the research are not established, the representation of the outcome of measurement errors in the measured theoretical relationships is challenging.

During this research, the questionnaire that was utilised was initially checked and approved by the supervisor of this thesis to identify the proficiency of the questions and to indicate the actual intention of the survey. Reliability and validity of the questionnaire were improved by initially notifying the management of The Salvation Army Hospitals of the intended use of the online survey link. The process was also supported by the study instructor, who is also an employee of the hospital, since he sensitised the staff and encouraged them to take part in the survey. The implication of this move was to provide the time to the individual on each of the surveys to sufficiently meet the research requirement.

5. RESULTS

In this section, the findings of the analysis of data obtained among the employees in healthcare organisations in the Ghana Health Service (GHS) and the Christian Health Association of Ghana (CHAG) are described. There are the results of the demographic, descriptive statistics, regression analysis, and mediation. Appropriate tables are incorporated to minimise redundancy, and all the statistical results are consistent. Ways that include analysis are demographic, descriptive statistics, regression outcomes, and mediation effects. Tables are combined to minimise repetition, and all the statistical findings are the same.

5.1. DEMOGRAPHIC CHARACTERISTICS

Table 1

Variable	Category	Frequency	Percent
Gender	Female	127	59.6
Gender	Male	86	40.4
Age	18–25	28	13.1
Age	26–35	87	40.8
Age	36–45	61	28.6
Age	46–55	27	12.7
Age	56+	10	4.7
Education	Bachelor's Degree	108	50.7
Education	Diploma	53	24.9
Education	Master's Degree	28	13.1
Education	Certificate in Nursing	20	9.4
Job Role	Clinical Staff	138	64.8
Job Role	Administrative Staff	44	20.7
Job Role	Managerial Staff	20	9.4
Experience	1–5 years	76	35.7
Experience	6–10 years	50	23.5
Experience	11–15 years	43	20.2
Experience	16+ years	28	13.1

The demographic information gives an understanding of the workforce segment. Most of the respondents were women (59.6%) in Table 1, which shows the gender reality of Ghana's health sector, where a large number of clinical

and nursing positions are held by women. The age distribution indicates that the highest was in the age group of 26-35 years (40.8%), then 36-45 years (28.6%), and only 4.7% were above the age of 56 years. The employees were also very educated, with 50.7% having a bachelor's degree, 24.9% with a diploma, and 13.1% with a master's degree. The clinical staff was the most predominant job role, making up 64.8%, and the administrative staff made up 20.7%. The duration of work experience varied between less than one year and over sixteen years, with the majority of the respondents (35.7) having a working experience of 1-5 years.

5.2. DESCRIPTIVE STATISTICS

Mean and variance of the constructs of the study were computed using descriptive statistics. The mean of the Strategic Human Resource Practices (SHRPs) was 3.5592 (SD = .97335) in Table 2, which means that the overall perception of the respondents about the HR systems was moderate. Psychological safety scored lower at 3.2998 (SD = 1.08215), which means that employees were not always completely assured to voice their concerns or disagreement. The mean of employee engagement was highest at 3.8811 (SD = 1.09921), indicating that the respondents were mostly engaged in the roles.

Table 2

Table 2 Descriptive Statistics				
Variable	Minimum	Maximum	Mean	Std. Deviation
Strategic HR Practices	1.00	5.00	3.5592	.97335
Psychological Safety	1.00	5.00	3.2998	1.08215
Employee Engagement	1.00	5.00	3.8811	1.09921

5.3. REGRESSION RESULTS

The combined regression table was developed to amalgamate model summaries and ANOVA findings. The initial model explored the impact of SHRPs on employee engagement and attained an R of .662, which explained 43.9 per cent of the variance ($R^2 = .439$) in Table 3. It was a significant model ($F = 165.011$, $p = .000$). The second model discussed SHRPs as an indicator of psychological safety. This model obtained a stronger relationship ($R = .746$) with explanatory ($R^2 = .556$) and significant ($F = 264.050$, $p = .000$) relationship. The third model estimated psychological safety to be a predictor of engagement and gave us a high R (.790), which demonstrated a high relationship and explained 62.4% ($R^2 = .624$) of the variance ($F = 349.591$, $p = .000$).

Table 3

Table 3 Model Summary and ANOVA (Merged Regression Results)						
Outcome	R	R ²	Adj. R ²	Std. Error	F	Sig.
SHRPs → Engagement	.662	.439	.436	.82537	165.011	.000
SHRPs → Psychological Safety	.746	.556	.554	.72291	264.050	.000
Psychological Safety → Engagement	.790	.624	.622	.67597	349.591	.000

Regression coefficients indicate that SHRPs produced a positive but significant influence on both engagement ($B = .748$, $p = .000$) and psychological safety ($B = .829$, $p = .000$). Engagement was also strongly affected by psychological safety ($B = .802$, $p = .000$). These results support the assertion that both the SHRPs and the psychological safety are important predictors of employee engagement.

5.4. MEDIATION ANALYSIS

In order to determine the role psychological safety plays in mediating between SHRPs and employee engagement, a hierarchical regression was analysed. Model 1 contained SHRPs as the sole predictor and accounted for 43.9% of engagement. In Model 2, the addition of psychological safety significantly raised the explained variance to 63.6% indicating that psychological safety significantly enhanced the model.

SHRPs in Model 1 exhibited a coefficient of .748 ($p = .000$), which proved that the direct effect is strong. Model 2, with the addition of psychological safety, had an SHRPs coefficient of only .187 ($p = .009$), and the added psychological safety was still significant ($B = .676$, $p = .000$). This decrease suggests the partial mediation, i.e. SHRPs affect the engagement both directly and indirectly via psychological safety.

Table 4

Table 4 Merged Coefficients for Mediation				
Outcome	Predictor	B	Beta	Sig.
Engagement	SHRPs	.748	.662	.000
Psychological Safety	SHRPs	.829	.746	.000
Engagement	Psychological Safety	.802	.790	.000
Engagement (Model 2)	SHRPs	.187	.166	.009
Engagement (Model 2)	Psychological Safety	.676	.666	.000

The findings indicate that SHRPs are good predictors of psychological safety and employee engagement. Engagement is also greatly increased by psychological safety. The effect of SHRPs on engagement is still significant when both variables are added to Model 2, thus, there is partial mediation. Altogether, psychological safety is an important mediating variable between SHRPs-engagement relationship.

6. DISCUSSION

This study has discussed how strategic human resource practices (SHRPs) can affect employee engagement in the Ghanaian health sector, and also how the mediating variable of psychological safety. The result showed that there were strong and significant correlations between SHRPs, psychological safety, and employee engagement, which validates that both HR systems and psychosocial working conditions are important factors to influence the behaviour and performance of employees in healthcare settings. The findings contribute to an accumulating body of research on the significance of organisational practices in the development of employees, their safety, and well-being.

The initial critical result of the study indicated that SHRPs had a great impact on employee engagement. This is in line with other studies that have shown that training, performance management, fair compensation, and developmental opportunities increase the motivation of employees and their readiness to devote efforts to their jobs (Adekanmbi & Ukpere, 2022; Alolayyan et al., 2021). SHRPs are of particular significance within the context of the Ghanaian health sector because of the pressures of workload, the lack of resources, and the emotional challenges that healthcare workers face. Research in a related setting has shown that employees react to HR practices as fair, strategic, and supportive, showing subsequent commitment and satisfaction levels (Afram, 2021; Annan-Prah & Andoh, 2023). The findings are also consistent with the Social Exchange Theory, which argues that employees respond to perceived organisational support with positive behaviours such as engagement. The findings are also consistent with the argument that HR systems are indicative of organisational investment in employees, which makes them feel valued and increases their motivation to play meaningful roles in organisational objectives.

The second important finding revealed that there was a great and positive correlation between SHRPs and psychological safety. This implies that the HR structures do not just affect the skills but also the emotional climate within which the employees are working. The HR practices which are supportive, like transparent communication, involvement of the employees, and fair performance systems, help in developing trust and decreasing interpersonal fear. The previous studies verify that the occurrence of psychological safety is evidenced by the presence of leadership that promotes open communication, mistakes are discussed as learning opportunities, and employees can speak up. (Grailey et al., 2021; Hu et al., 2022). In the context of healthcare, where effective communication is critical to patient safety, psychological safety can be considered a particularly useful asset. Similar findings at Ghanaian hospitals also show that the supportive supervision, enhanced safety measures, and equitable HR systems help employees feel confident and less prone to anxiety due to risks encountered in the workplace (Darko et al., 2020; Muah et al., 2021). These instances imply the concepts of the Conservation of Resources Theory, in which psychological safety is one of the resources that were defined to ensure that employees are not exposed to stress and to achieve positive performance results.

The researchers also established that psychological safety was strong and influential on the engagement of the employees. The employees are in a better position to concentrate on their work and become emotionally attached to their jobs when they are not afraid to voice their opinions, raise issues, and take interpersonal risks. Psychological safety can provide employees with more in-depth involvement since they are not afraid of adverse effects (Bahadurzada et al., 2024; Özdemir & Şahin, 2024). Research has also continuously indicated that psychological safety helps people work together, be innovative, and make long-lasting efforts, all of which are directly linked to engagement (Jones et al., 2021; McClintock & Fainstad, 2022). In health institutions where teamwork and communication among the staff are fundamental, psychological safety has the effect of promoting the members of the staff to converse, seek clarification and support each other, which contributes to increased interaction. Studies in resource-restricted health settings indicate that psychological safety also decreases burnout and emotional exhaustion, so that employees can still be resilient and committed to their work regardless of the unfavourable circumstances (Arthur-Mensah et al., 2022). Therefore, the value of psychological safety in the research can be discussed as a sign of its role as a supporting factor in the proper work of healthcare settings.

The mediation analysis showed that psychological safety plays a partial mediating role between SHRPs and employee engagement. This implies that SHRPs do not enhance engagement directly by using such direct methods as better training or compensation, but also indirectly by conditioning the psychological climate of the workplace. This conclusion follows the existing literature that underlines that HR practices can be more effective when employees feel that the working environment is conducive, equitable, and safe (Beltrán-Martín et al., 2022; Platania et al., 2022). The biased mediation that was evident in this study conforms to the fact that HR structures lay the groundwork for the psychological safety that consequently creates the environment that enables employees to operate in totality. The same raw materials in other sectors point out that psychological safety could amplify the effects of HR practices on engagement, as it promotes employee voice behaviour, innovativeness, and involvement (Miao et al., 2020; Rabiul et al., 2021). The findings contribute to this body of literature by providing empirical findings on the role of psychological safety in the context of the health sector in Ghana, where the importance of this subject has not been explored thoroughly.

The research is also significant in terms of theoretical contribution. It supports Social Exchange Theory in the sense that SHRPs initiate good employee results, including engagement, when employees feel that the organisation is supportive and trustworthy. This exchange is enhanced by psychological safety, whereby it lessens the fear and allows employees to pay back organisational support with greater confidence. The results add to the Conservation of Resources viewpoint by emphasising the importance of psychological safety as a resource that facilitates engagement, particularly under the pressure of a stressful healthcare setting (Li et al., 2023). The study expands the current body of literature, which has concentrated on the topic of psychological safety in the African healthcare system, and presents new information that can be used by policymakers, managers and researchers.

The healthcare implications on the healthcare administrators are practical. The results highlight that the management needs to focus on SHRPs that lead to transparency, development, involvement, and treatment. Coherent application of HR practices enhances the level of psychological safety and engagement, and such results increase performance and patient outcomes. Managers ought to establish interventions that are based on communication, leadership initiatives and engagement approaches that enhance trust and transparency. The previous literature states that supportive work environments enhance not only engagement but also retention and the quality of services (Aman-Ullah et al., 2022; Daraojimba et al., 2024; Prabakar, 2023). Ghanaian healthcare organisations, therefore, need to consider the role of psychological safety in organisational policies, training opportunities, and leadership evaluations as a way of maintaining engagement and enhancing workforce resilience.

Inasmuch as the study has offered worthwhile information, there are a number of limitations that should be considered. Cross-sectional design is limited in making some causal inferences, and future studies need to reflect longitudinal methodologies in order to study psychological safety and engagement across time. As well, convenience sampling can undermine the external validity of the results. A study that compares the private and the public healthcare facilities or other mediators, like the style of leadership or organisational culture, would be more insightful.

In general, the results demonstrate that SHRPs and psychological safety are crucial factors that define employee engagement in the Ghanaian health sector. Enhancing the HR operations and nurturing a psychologically safe workplace helps to have more engaged, resilient, and dedicated medical professionals.

7. CONCLUSIONS AND POLICY RECOMMENDATIONS

7.1. CONCLUSIONS

The present research demonstrates the connection between strategic human resource practices, employee engagement, and psychological safety. Broadly speaking, this research attempted to assess a correlation between strategic human resources and employee engagement. Both the Ghana Health Service and the Christian Health Association of Ghana chose some of the selected hospitals and clinics. The contribution of the study is three-fold; the first one is that strategic human resource practices are positively associated with employee engagement in the health sector in Ghana. Summing up, the results provide strong reasons as to why strategic human resource practices are essential spheres, where hospitals and clinics need to improve their culture of employee engagement and productivity.

The connection between strategic human resources and psychological safety is positive. The conclusion is thus made that strategic human resource practices have a positive influence on psychological safety. The outcome also allows new opportunities for further research into the mechanisms and contextual factors.

The relationship between strategic human resource practices and employee engagement has a positive mediating role played by psychological safety. The research also concludes that even though strategic HR practices are essential in enhancing employee engagement, psychological safety could be even more instrumental in this situation. This also suggests that the employees are mostly engaged in the workplace when they are safe to share their ideas and issues without the fear of being negatively affected.

7.2. POLICY RECOMMENDATIONS

In light of the research findings and its conclusions, it offers the following policy recommendations which would facilitate effective recruitment and selection process, training and development process, performance management process, and employee participation, as well as attractive compensation and rewards, which would enhance the cognitive engagement, emotional engagement and behavioural engagement of the employees in Ghana and lead to quality and satisfactory healthcare provision. It is suggested that the management in the hospitals and the clinics in the health sector should. Strategic human resources implementation is a major requirement in hospitals and clinics in Ghana to enhance the engagement of employees since the practices instil a culture of psychological safety that promotes open communication.

Strategic human resource practices that enhance psychological safety and, hence, employee engagement and job satisfaction should be prioritised by the management to enhance productivity outcomes in the healthcare segment of the Ghanaian economy. The fact that strategic HR practices are positively linked with employee engagement in Ghanaian healthcare facilities shows that policies that promote a systematic approach to transforming work cultures into psychological safety are essential. The research also indicates that since there is a mediating factor between strategic HR practices and engagement of employees, which is represented by psychological safety, hospitals in Ghana ought to establish elaborate training programs so as to foster a culture of trust and support. The management of the healthcare sector of Ghana needs to embrace strategic human resource practices that involve psychological safety, since the practice would lead to improved rates of employee engagement and improved performance of the hospitals and clinics.

REPORTING STANDARDS STATEMENT

These authors affirm that this research was carried out and reported following acceptable guidelines of the scientific research. The information in this manuscript clearly represents the research conducted and enough methodological information available to repeat the research. The results are presented in an unbiased manner, without fabrication, falsification, and unsuitable manipulation of data.

ORIGINALITY AND PLAGIARISM STATEMENT

The authors state that the paper is an original work and has never been published anywhere in full or in part. The sources applied in preparing this study are properly cited and referenced. All ideas, data, and texts which were obtained based on other works have been properly recognized according to academic standards.

MULTIPLE OR CONCURRENT SUBMISSION STATEMENT

The authors verify that the paper is not on file with other journals that are presently under consideration of publication. The research that is reported in this paper has not been published in another outlet.

AUTHORSHIP CONTRIBUTION STATEMENT

The contributions made by all the listed authors in terms of their contribution to the conception and design of the study, data collection, data analysis and interpretation of the findings are significant. All the authors have read and accepted the final copy of the manuscript and believe in submitting the manuscript to the journal.

DATA INTEGRITY AND ERROR DISCLOSURE STATEMENT

The authors testify to the fact that the manuscripts include no fictitious data, false statements, and purposeful omissions. In the event that any major error or inaccuracy has subsequently been discovered subsequently after publication, the authors attempt to then make timely notification to the journal and work out completely to either publish a proper correction or retraction should it be necessary.

CONFLICT OF INTERESTS

None.

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The authors affirm that all the sources used in the preparation of this manuscript including those printed and electronic ones are duly acknowledged. It has not reproduced any of the copyrighted tables, figures, and other materials of third parties without authorization. The authors also verify that this piece of work does not violate the copyright of third parties.

REFERENCES

- Abu-Farha, R. K., Alzoubi, K. H., Al Safadi, A. a., Alsous, M. M., Nawasreh, A., El-zubi, M. K., & Al-Ashwal, F. Y. (2026). Exploring Physicians' Willingness to Integrate Artificial Intelligence in Clinical Practice: Ethical and Practical Insights From a Jordanian Cross-Sectional Survey. *Health Science Reports*, 9(3), e71994.
- Adekanmbi, F., & Ukpere, W. (2022). Sustaining organizational performance and employee wellbeing in the 4IR: the impact of leadership 4.0, PSYCAP, and high-performance HR practices. *EUREKA: Social and Humanities*. <https://doi.org/10.21303/2504-5571.2022.002403>
- Afram, K. O.-A. O. (2021). Effect of Human Resource Development (HRD) Initiatives on Organizational Performance. A Case Study of the National Health Insurance Authority, Ghana. *Journal of Resources Development and Management*. <https://doi.org/10.7176/jrdm/81-04>
- Alkasasbeh, A. M., Jarrah, S. S., Alhusamiah, B. K., & Tarawneh, F. S. (2025). Factors influencing the utilization and adoption of electronic health records among nurses in Jordanian hospitals. *Jordan Journal of Nursing Research*, 4(1), 68-80.
- Alolayyan, M. N., Alyahya, M. S., & Omari, D. A. (2021). Strategic human resource management practices and human capital development: The role of employee commitment. *Problems and Perspectives in Management*, 19, 157-169. [https://doi.org/10.21511/ppm.19\(2\).2021.13](https://doi.org/10.21511/ppm.19(2).2021.13)
- Aman-Ullah, A., Ibrahim, H., Aziz, A., & Mehmood, W. (2022). Impact of workplace safety on employee retention using sequential mediation: evidence from the health-care sector. *RAUSP Management Journal*. <https://doi.org/10.1108/rausp-02-2021-0043>
- Annan-Prah, E., & Andoh, R. (2023). Effects of customised capacity building on employee engagement, empowerment, and learning in Ghanaian local government institutions. *Public Administration and Policy*. <https://doi.org/10.1108/pap-06-2022-0068>

- Ansoglenang, G. (2020). Exploring Recruitment and Selection Practices of Ghanaian Organisations. *European Journal of Business and Management*, 12, 12-20. <https://doi.org/10.7176/ejbm/12-12-02>
- Arthur-Mensah, R., Paintsil, G. P., Delali, A. A., & Kyei, A. (2022). Mental Health Outcomes and Mental Hygiene in the COVID-19 Era: A Cross-Sectional Study Among Healthcare Workers from a Regional Hospital in Ghana. *Psychology Research and Behavior Management*, 15, 21-30. <https://doi.org/10.2147/prbm.s337740>
- Bahadurzada, H., Edmondson, A., & Kerrissey, M. (2024). Psychological Safety as an Enduring Resource Amid Constraints. *International Journal of Public Health*, 69. <https://doi.org/10.3389/ijph.2024.1607332>
- Beltrán-Martín, I., Guinot-Reinders, J., & Rodríguez-Sánchez, A. (2022). Employee psychological conditions as mediators of the relationship between human resource management and employee work engagement. *The International Journal of Human Resource Management*, 34, 2331-2365. <https://doi.org/10.1080/09585192.2022.2078990>
- Daniels, K., Watson, D., Nayani, R., Tregaskis, O., Hogg, M., Etuknwa, A., & Semkina, A. (2021). Implementing practices focused on workplace health and psychological wellbeing: A systematic review. *Social science & medicine*, 277, 113888. <https://doi.org/10.1016/j.socscimed.2021.113888>
- Daraojimba, A. I., Jason, A., Kess, M., Tubokirifuruar, S., Bello, B. G., & Omotoye, G. B. (2024). Strategic human resource management in the 21st century: A review of trends and innovations. *World Journal of Advanced Research and Reviews*. <https://doi.org/10.30574/wjarr.2024.21.1.0105>
- Darko, J. O., Bediako, V. A., & Tawiah, H. O. (2023). Impacts of Emotional Labour on Employee Retention in The Health Sector. *Organization and Human Capital Development*. <https://doi.org/10.31098/orcadev.v2i2.1817>
- Darko, R., Oppong, N., & Mensah, A. O. (2020). Health and Safety Practices and Work Attendance in a Ghanaian Health Service. *Journal of Business and Enterprise Development*. <https://doi.org/10.47963/jobed.2020.03>
- Fu, Q., Cherian, J., Ahmad, N., Scholz, M., Samad, S., & Comite, U. (2022). An Inclusive Leadership Framework to Foster Employee Creativity in the Healthcare Sector: The Role of Psychological Safety and Polychronicity. *International Journal of Environmental Research and Public Health*, 19. <https://doi.org/10.3390/ijerph19084519>
- Gile, P., Van De Klundert, J., & Buljac-Samardžić, M. (2022). Strategic human resource management and performance in public hospitals in Ethiopia. *Frontiers in Public Health*, 10. <https://doi.org/10.3389/fpubh.2022.915317>
- Grailey, K., Murray, E., Reader, T., & Brett, S. (2021). The presence and potential impact of psychological safety in the healthcare setting: an evidence synthesis. *BMC Health Services Research*, 21. <https://doi.org/10.1186/s12913-021-06740-6>
- Hu, Q., Dollard, M., & Taris, T. (2022). Organizational context matters: Psychosocial safety climate as a precursor to team and individual motivational functioning. *Safety Science*. <https://doi.org/10.1016/j.ssci.2021.105524>
- Hunt, D., Bailey, J., Lennox, B., Crofts, M., & Vincent, C. (2021). Enhancing psychological safety in mental health services. *International Journal of Mental Health Systems*, 15. <https://doi.org/10.1186/s13033-021-00439-1>
- Jones, A., Blake, J., Adams, M., Kelly, D., Mannion, R., & Maben, J. (2021). Interventions promoting employee "speaking-up" within healthcare workplaces: A systematic narrative review of the international literature. *Health policy*. <https://doi.org/10.1016/j.healthpol.2020.12.016>
- Keltu, T. T. (2024). The effect of human resource development practice on employee performance with the mediating role of job satisfaction among Mizan Tepi University's academic staff in Southwestern Ethiopia. *Heliyon*, 10. <https://doi.org/10.1016/j.heliyon.2024.e29821>
- Li, M., Fu, N., Chadwick, C., & Harney, B. (2023). Untangling human resource management and employee wellbeing relationships: Differentiating job resource HR practices from challenge demand HR practices. *Human Resource Management Journal*. <https://doi.org/10.1111/1748-8583.12527>
- Lintanga, A. J. B. J., & Rathakrishnan, B. (2024). The impact of psychosocial safety climate on public sector job satisfaction: the moderating role of organizational climate. *BMC Psychology*, 12. <https://doi.org/10.1186/s40359-023-01513-8>
- Lu, Y., Zhang, M., Yang, M., & Wang, Y. (2022). Sustainable human resource management practices, employee resilience, and employee outcomes: Toward common good values. *Human Resource Management*. <https://doi.org/10.1002/hrm.22153>
- McClintock, A., & Fainstad, T. (2022). Growth, Engagement, and Belonging in the Clinical Learning Environment: the Role of Psychological Safety and the Work Ahead. *Journal of General Internal Medicine*, 37, 2291-2296. <https://doi.org/10.1007/s11606-022-07493-6>

- Miao, R., Lu, L., Cao, Y., & Du, Q. (2020). The High-Performance Work System, Employee Voice, and Innovative Behavior: The Moderating Role of Psychological Safety. *International Journal of Environmental Research and Public Health*, 17. <https://doi.org/10.3390/ijerph17041150>
- Mitterer, D., & Mitterer, H. (2023). The Mediating Effect of Trust on Psychological Safety and Job Satisfaction. *Journal of Behavioral and Applied Management*. <https://doi.org/10.21818/001c.73642>
- Molnár, C., & Papp, I. C. (2023). Review of Human Resource Management Practices Supporting the Development of Employee Wellbeing. *Új Munkaügyi Szemle*. <https://doi.org/10.58269/umsz.2023.3.2>
- Muah, P., Adu, I. N., Kyei-Frimpong, M., & Boakye, A. (2021). Explaining How Management Safety Practices and Safety Programs Influence Job Safety and Employee Commitment. *SEISENSE Business Review*. <https://doi.org/10.33215/sbr.v1i3.709>
- Obeng, A. F., Zhu, Y., Quansah, P. E., Ntarmah, A., & Cobbinah, E. (2021). High-Performance Work Practices and Turnover Intention: Investigating the Mediating Role of Employee Morale and the Moderating Role of Psychological Capital. *SAGE Open*, 11. <https://doi.org/10.1177/2158244020988557>
- Obeng, H., Arhinful, R., Tessema, D. H., & Nuhu, J. A. (2025). The mediating role of organisational stress in the relationship between gender diversity and employee performance in Ghanaian public hospitals. *Future Business Journal*. <https://doi.org/10.1186/s43093-025-00463-4>
- Othman, E. H., Alost, M. R., Nofal, B., Masadeh, A., Darawad, M. W., Sabra, M. A. A., & Alshareef, A. (2025). Shift work and health behaviors: Cross-sectional analysis of sleep quality, physical activity, and dietary patterns. *Acta Biomedica*, 96(2).
- Özdemir, Ş., & Şahin, N. (2024). THE MEDIATING ROLE OF PERCEIVED PSYCHOLOGICAL SAFETY IN THE EFFECT OF HEALTH-ORIENTED LEADERSHIP ON ORGANIZATIONAL COMMITMENT: A HOSPITAL SAMPLE. *Kafkas Üniversitesi İktisadi ve İdari Bilimler Fakültesi Dergisi*. <https://doi.org/10.36543/kauibfd.2024.017>
- Platania, S., Morando, M., Caruso, A., & Scuderi, V. (2022). The Effect of Psychosocial Safety Climate on Engagement and Psychological Distress: A Multilevel Study on the Healthcare Sector. *Safety*. <https://doi.org/10.3390/safety8030062>
- Prabakar, S. (2023). The Role of Human Resource Management in Talent Acquisition and Retention in the Healthcare Sector. *Journal of Informatics Education and Research*. <https://doi.org/10.52783/jier.v3i2.279>
- Rabiul, M. K., Mohamed, A., Patwary, A. K., Yean, T. F., & Osman, S. Z. (2021). Linking human resources practices to employee engagement in the hospitality industry: the mediating influences of psychological safety, availability and meaningfulness. *European Journal of Management and Business Economics*. <https://doi.org/10.1108/ejmbe-12-2020-0347>
- Saleh, N., Rizik, M., Zawiah, M., & Abu-Farha, R. K. (2026). Community pharmacists' perceptions of mental health care: A qualitative study on stigma and barriers. *Journal of Health Psychology*, 31(1), 41-51.
- Subih, M., Rababa, M., Aryan, F. S., Alnaeem, M., AlRahahleh, M. H., Al Niarat, T. F., Saleh, Z. T., Alsulami, G. S., Almagharbeh, W. T., & Elshatarat, R. A. (2025). Factors influencing nurses' knowledge and competence in warfarin-drug and nutrient interactions and patient counseling practices. *BMC Medical Education*, 25(1), 540.
- Tawiah, P., Appiah-Brempong, E., Okyere, P., Adu-Fosu, G., & Ashinyo, M. (2024). Prevalence, risk factors and psychological consequences of workplace violence among health workers in the Greater Accra region, Ghana: a cross-sectional study. *BMC Public Health*, 24. <https://doi.org/10.1186/s12889-024-17962-8>
- Tenza, I., Attafuah, P., Abor, P., Nketiah-Amponsah, E., & Abuosi, A. (2022). Hospital managers' views on the state of patient safety culture across three regions in Ghana. *BMC Health Services Research*, 22. <https://doi.org/10.1186/s12913-022-08701-z>
- Tetteh, I., Jones, A., Kelly, D., & Courtier, N. (2022). Speaking-up for patient safety: A scoping narrative review of international literature and lessons for radiography in Ghana and other resource-constrained settings. *Radiography*, 28 4, 919-925. <https://doi.org/10.1016/j.radi.2022.06.018>
- Wang, W., Kang, S.-W., & Choi, S. (2022). Servant Leadership and Creativity: A Study of the Sequential Mediating Roles of Psychological Safety and Employee Well-Being. *Frontiers in Psychology*, 12. <https://doi.org/10.3389/fpsyg.2021.807070>