

Job Satisfaction Experienced by Nurses Working in Private Hospitals



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Job Satisfaction is multi-factorial and the strongest predictor of the retention intention of nurses, affecting the functioning of the organization. A quantitative descriptive survey was used to find out the Job satisfaction of female staff nurses working in private hospitals in Kottayam. A sample of 300 female nurses was selected by simple random technique. The socio-demographic tool and Job Satisfaction Scale for Clinical Nurses (JSS-CN) were used for data collection. Most (81%) of the subjects had good job satisfaction. The mean job satisfaction was 139.2 (mean percentage 84.3%) while the standard deviation was 13. Domain wise Job satisfaction experienced by the staff nurses were; 'Accomplishment of accountability as a Nurse' (Mean percentage 87.6 ± 9.8), 'Stability and worth of job' (Mean percentage 85.7 ± 12.1), 'Recognition from the organization and professional achievement' (Mean percentage 84.9 ± 9), 'Personal Maturation with Nursing Profession' (Mean percentage 84.5 ± 9.2) 'Professional Competency' (Mean percentage 82.9 ± 10.2) and 'Interpersonal Interaction with Respect and Recognition' (Mean percentage 82.1 ± 8.6). There was a significant association between job satisfaction and 'area of work' and 'rating of the hospital'. There is scope for interventions to enhance job satisfaction and concomitant monitoring can be useful in determining various strategies for improvement. By enhancing job satisfaction, hospital administrators can improve not only the mental, psychological and social well-being of nurses, but also the financial health of an organization.

Keywords: Nurse, Job Satisfaction, Attrition, Retention of Nurses, Private Hospital

1. Introduction

The definition of job satisfaction (JS) is "A pleasant or positive spirit resulting from the evaluation of labor or professional experience" [1, 2, 3, 4]. Job satisfaction could be a measure of workers' contentedness with their job, whether or not they just like the job or individual aspects or facets of jobs. JS could be a multidimensional response to figures and also the work environment.

As per the definition, JS depends on many factors and influences the behaviour of the workers, which successively affects the functioning of the organization. Job satisfaction may be measured in cognitive (evaluative), affective (or emotional), and

behavioural components [5]. JS is the strongest predictor of retention and retention intention of nurses. A correct understanding of the sources of job satisfaction provide useful information about the extrinsic and intrinsic aspects of the task and their importance can help policymakers come up with various strategies to satisfy the growing demand for nurses' services [6]. Researchers have also noted that job satisfaction measures vary within the extent to which they measure feelings about the task (affective job satisfaction) or cognitions about the duty (cognitive job satisfaction) [7, 8].

Job satisfaction is an important dimension of organizational behavior, aimed at both physical and emotional well-being of organizational and human resource management perspective. Job satisfaction is affected by employee's desire to use their skills and abilities which will directly increase the productivity and profitability of organizations [9, 10]. Multiple factors can influence job satisfaction of a person. These factors are in the form of the salary, other financial benefits, transparency of promotion within the organization, the working environment, social relationships and group dynamics [11, 12, 13].

In the health-care system, nursing personnel are the leading human resource that constitute the most significant workforce and plays a vital role. Healthcare involves human aspects much more than other components such as modern medical technology and advanced infrastructure. Therefore, nursing care is an essential aspect of healthcare [14]. However, many changes have occurred in the health-care system which has affected the organizations environment for the nurses and the patient care. Emphasis on cost containment due to advancement in technology in healthcare has resulted in changes in the structure, organization, and delivery of health-care services. This implies that now nurses working in the hospital have most stressful work environment because they are caring for the patients who are more critically ill and requiring intensive care which demands meticulous efforts from nurses. All of these elements have the potential to create tremendous stress and ultimately form negative attitudes which may cause dissatisfaction with the posts. Job satisfaction is an important part of nurses' lives that can significantly affect patient safety, performance, and productivity and quality of care to the patient and commitment to the job as well as organization [15].

Various studies showed a positive correlation between nursing satisfaction, patient satisfaction and the treatment outcomes. Dissatisfied nurses distance themselves from their patients and avoid nursing job responsibilities, resulting in compromised quality of care and nurses' inefficiency [16-21]. Concerns about nurses' job satisfaction are growing around the world due to their key role in providing quality care to patients. Increasing job satisfaction of nurses can improve patients' perception of quality of care and ensure appropriate employment of nurses. Job satisfaction predictors can help develop effective strategies to address bottlenecks in nursing employment and improve the quality of patient care [22].

2. Literature Review

Jaiswal P, (2015) [23] studied job satisfaction among 200 healthcare employees working in a government hospital by using a modified job satisfaction scale. The mean job satisfaction index was: nurses (0.68), doctors (0.66), support staff (0.63) and technicians (0.62). Key factors for job satisfaction identified are:

communication, salary, working conditions, organization supervision system, co-workers, workload, benefits, career aspects and rewards. A positive association was reported between job satisfaction score and factor scores of communications (0.133), benefits (0.110), working condition (0.027) and associates (0.032) and a negative relation with organizational supervision system (0.118), workload (0.093), rewards (0.035), salary (0.034) and career prospects (0.017) respectively. In an environment where resources are limited and also the disease burden is high, cheerful human resources is an asset in terms of high productivity, efficiency, and quality of care.

Singh, T., Kaur, M., Verma, M., & Kumar, R. (2019) [24] measures job satisfaction among 462 different categories of healthcare providers working in the Punjab government health services and to determine the factors that affect job satisfaction the most. Multi-stage random sampling was used, and participants were interviewed telephonically. The study instrument comprised the socio-demographic data and Job Satisfaction Scale (JSS). Majority (75.3%) were dissatisfied by their working conditions, followed by fringe benefits facet (34%), promotion facet (25.4%), and contingent rewards facet (23.7%). Most of them are satisfied concerning relations with their coworkers (97%), nature of their work (93.3%), supervision (91.2%) and communication facet (80.6). The results show that job satisfaction affects future career goals, social relationships, and personal health. An extremely demanding workplace can make workers susceptible to feelings of uncertainty and low self-esteem.

Purohit, B., Lal, S., Banopadhyay, T. (2021) [25] the study aims to assess job satisfaction and motivation among doctors and nurses employed within the public sector in India. Data were collected from a total of 307 healthcare providers (152 doctors and 157 nurses). The average scores for most of the dimensions of job satisfaction were low for both doctors and nurses with the lowest scores reported for the dimensions of 'professional support' and 'personal satisfaction' while the highest score reported for 'satisfaction with pay'. Significant difference in mean scores were found for seven dimensions of job satisfaction except for 'prospects' at different levels of place of work, 'standard of care' at different levels of length of service and 'training' for different levels of types of appointments. The mean scores of motivation were found to be significantly different for different levels of place of work. The regression analysis on various predictors of job satisfaction suggests that personal satisfaction and satisfaction in prospect were highly significant while other variables such as gender and place of posting were marginally significant. Understanding of job satisfaction can provide useful insights to both extrinsic as well as intrinsic aspects of job satisfaction, which arguably is the most critical area of healthcare system research that could potentially feed into streamlined and improved health workforce management policies aimed at addressing the shortage and retention of the health workforce.

Das Sasmita, Dr. Baby Prasanna. (2014) [26] showed how organisational role stress among nurses could affect their job satisfaction. A descriptive survey study design recruited 50 registered staff nurses by simple random sampling technique from private hospitals of Bhubaneswar. Modified organizational role stress scale and job satisfaction scale were used. The study revealed that 72% of Nurses were satisfied with their job. The rank order of factors of organizational role stress was personal inadequacy, role strength, role isolation and role extension conflict within

the first four ranks. The association between the setting of work and role extension conflict and also the correlation between organizational role stress and the level of job satisfaction was considered to be statistically significant. The high-stress level resulting from employee intra-organizational and extra-organizational interactions could be a significant issue in reducing satisfaction and motivation levels. Keeping in mind for retaining excellent nurses and stimulating them to try to their best to serve hospitals and tackle future challenges in today's environment. The study findings help to avoid the vicious circle of high turnover within the organization.

Iyer, R. D. (2017) [27], considered the moderating effect of gender on the relationship between role stress and job satisfaction in nurses of municipal and private hospitals in Mumbai. Hospitals were selected at random and all nurses from the selected hospitals responded to a survey instrument. The sample consisted of 450 nurses and the response rate was 94.7%. Path analysis showed significant relationships between role ambiguity and intrinsic satisfaction, and role conflict and extrinsic satisfaction. Gender moderated the relationship between role ambiguity and intrinsic satisfaction but did not moderate the relationship between role conflict and extrinsic satisfaction.

Bhattacharya, S. (2020) [28] conducted a study to understand the job satisfaction among nurses at a tertiary care hospital. A cross-sectional survey was conducted using the Minnesota Satisfaction Questionnaire short form. Nearly half of the participants were in the age group of 21-30 years. It was found that mostly all of the nursing professionals were either moderately satisfied or highly satisfied with their profession. Chi-square test was performed to find the relationship between the job satisfaction and age group factor, which indicated that there was a significant association between the variables ($P < 0.01$). Age, area of posting, and the educational qualification had a significant influence on satisfaction level of nurses. It was also observed that length of service did not have any significant influence on the satisfaction level among the nursing staffs.

Rashmi, K. and Kataria, A. (2021) [29] investigated the mediating effect of work-life balance (WLB) in the relationship between job resources (job autonomy, supervisor support and co-worker support) and job satisfaction experienced by nurses. Structured questionnaire survey has been used to get the responses from 452 nursing professionals in India. The relationship between all three job resources and WLB was found to be positive, and also WLB was positively associated with nursing professionals' job satisfaction.

Poulose, S. and Sudarsan, N. (2017) [30], investigated the influence of work-related factors, namely work overload and work support on work-life balance (WLB) dimensions and its significant impact on job satisfaction among 182 nurses employed in various hospitals located in southern India through a structured questionnaire. Job satisfaction showed a significant negative relationship with work overload and a positive relationship with work support. Work to Personal Life Gains (WPLG) and Personal Life To Work Gains (PLWG) mediated the relationships between work support and job satisfaction. However, WPLG mediated the relationships between work overload and job satisfaction. This study brought out the mediating role of WLB in the relationship between organizational-related factors and job satisfaction among nurses in South India.

Goh, Y.-S. & Lopez, V. (2016) [31] assessed the extent of job satisfaction of migrant nurses working in an exceedingly multicultural society and the connection between them to look at their job satisfaction, their work environment, their intention to quit, and therefore the predictors of their intention to quit. A cross-sectional and correlation design was administrated employing a stratified random sample of 495 migrant nurses working in a hospital in Singapore. The results showed that the migrant nurses were satisfied with their work; with an indirect correlation between job satisfaction and work environment. Predictors of migrant nurses' intentions to depart included the presence of supportive nursing managers and a supportive nursing practice environment.

Kirkcaldy, B. D., & Martin, T. (2000) [32] assessed job satisfaction among 276 nurses in a Northern Ireland hospital. There were no gender effects on job satisfaction or the health outcome. Older nurses reported more stress and younger nurses reported better mental health. Grade of nurse was not related to job stress and job satisfaction. Job satisfaction was different at various wards/work location; maternity nurses (and critical care nurses) showed the highest job satisfaction and surgical (and medical) nurses the lowest. Thus, Type A appears to be a significant determinant of health outcome, lower job stress, and better job satisfaction.

Martine Price (2002) [33] conducted a study to measure the job satisfaction of registered nurses working in adult acute medical and surgical specialties using the Mueller McCloskey (1990) Satisfaction Scale. Data were collected from 141 nurses working NHS UK. The study reported job satisfaction around peer socialization and dissatisfaction with childcare facilities.

Al Otabi, M., Shah, M., Chowdhury, R., & Al-Enezi, N. (2004) [34], studied Job satisfaction among 500 nurses working in Kuwait was analysed using McClosky Mueller Satisfaction Scale (MMSS) using a stratified random sample. Age, nationality and the department worked in had a positive significant relationship with job satisfaction. However, a higher level of educational qualification and previous work experience in other countries showed an inverse relationship with job satisfaction. Study recommends that expatriate staff should be provided with an understanding of cultural differences and how to cope with them.

TarjaKvist, et.al (2012) [35], conducted a study on job satisfaction among Finnish Nurses with Kuopio University Hospital Job Satisfaction Scale (KUHJSS). The staff reported relatively high job satisfaction. The greatest satisfaction was derived from motivating factors associated with the work and the least from the job's demands. Respondents who considered their working units to provide an excellent quality of care reported the highest job satisfaction.

Dimitrios Papoutsis, Georgios Labiris, and Dimitris Niakas (2014) [36], examined the job satisfaction levels of registered midwives in Greece and to determine the main predictors of their job satisfaction. A validated 36-item questionnaire was given to 145 midwives. Job satisfaction was similar between midwives who worked in the public and private sector and only 45.5% of midwives reported being satisfied with their job. The strongest effect on 'high' job satisfaction was noted with the factor of recognition. Main determinants of job satisfaction in the public sector was work itself and supervision, while interpersonal relations affected job satisfaction in the private sector. This study has shown that there are certain factors that may be used to improve the job satisfaction of midwives working in a hospital environment.

Gadirezadeh Z, Adib-Hajbaghery M, Matin Abadi MJ.(2017)[37],conducted a cross-sectional study investigating job satisfaction among 260 nurses working in Iran. There was no significant difference in job satisfaction score between married and unmarried nurses. However, the mean job satisfaction score was significantly higher in female nurses than in males. The mean job satisfaction score was significantly different in nurses with different educational qualification and different job positions.

Oliveira et al, (2019) [38] assessed job satisfaction among 61 nurses working in community mental health services of Brazil, using convenience sampling, a cross-sectional study. The factor that had the greatest negative influence on work overload among nurses was feeling physically tired (2.99 ± 0.92), while the factor that had the greatest positive influence on job satisfaction was good working relationships (4.06 ± 0.65).

Elizabeth A Curtis, (2008) [39] carried out research aimed to determine the effect of biographical variables on job satisfaction among nurses in Republic of Ireland. The study used a dominant-less dominant mixed-method design and quantitative data were collected by a postal questionnaire survey. The sample was selected using stratified random sampling. The findings demonstrated no significant differences in job satisfaction for female and male nurses, and between job satisfaction and tenure. The findings confirm that nurses under the age of 35 were less satisfied than those over the age of 35; nurses with degrees were less satisfied than those without; and nurses in senior positions are more satisfied than their junior counterparts. The finding provides an insight into the relationship between these variables among nurses. It is possible that biographical variables are distal influences on job satisfaction, but further research is needed to better understand the relationship between these two sets of variables.

Hong Lu, Alison E. While, K. Louise Barriball, (2005) [40] analyse job satisfaction among nurses and conclude that more research is required to understand the relative importance of the many identified factors to job satisfaction. It is argued that the absence of a robust causal model incorporating organizational, professional and personal variables is undermining the development of interventions to improve nurse retention. The links between job satisfaction and the retention of nurses are well established in the literature [33].

Understanding job satisfaction can provide useful insights into the extrinsic and intrinsic aspects of job satisfaction, arguably the most critical area of health systems research that could potentially contribute to optimized health workforce management policies and improvements aimed at addressing deficiencies and retention of nursing staff.

3. Methodology

The purpose of this study was to assess the job satisfaction of female staff nurses. A quantitative descriptive survey design was chosen. A sample size of 300 female nurses working in selected private hospitals within the Kottayam district were selected by random sampling technique in December 2021. The socio-demographic tool and Job Satisfaction Scale for Clinical Nurses (JSS-CN) [41] were used for data collection. The information collected from 300 subjects was analysed using descriptive and inferential statistics with the assistance of the SPSS (16th) version.

4. Results and Discussion

The majority (61%) of the subjects belonged to the age group of 31 to 40 years. The data showed that the majority of the subjects (89%) were married, 56% were from nuclear family unit and most had 1-2 children. Among the subjects 55% of spouses had private jobs while 2% were unemployed and 9% worked abroad.

Most of the subjects (78%) were diploma nurses. The work location distribution among nurses was medical 30%, ICUs23.3%, surgical 17%, OT 12.7%, and emergency department 8%. Nearly half of the subjects (47.6%) had more than 5 years of nursing experience in presently working hospital, 82% of subjects underwent Continuing Nursing Education program and 73% participated in stress management programs at some stages of their professional life.

Of the 300 subjects, 80.3% reported as they are receiving support from immediate supervisor and Hospital management, while 53% reported that their job interfered with family life, and 44% were moderately satisfied in meeting their family needs. Analysis of the workload showed that 81% of the subjects have medium workload. The mean workload was 51 (the mean percentage was 60.8%) while the standard deviation was 5.9.

Table1 Percentage distribution of overall Job satisfaction experienced by the staff nurses (n=300)

Overall job satisfaction	f	%
Dissatisfied 64 - 95	1	0.3
Less satisfied 96 - 127	39	13.1
Moderately Satisfied 128 - 160	241	80.9
Well Satisfied >160	19	5.7

Table 1 showed that most (80.9%) of the subjects were moderately satisfied.

Table 2 Overall Job satisfaction experienced by the staff nurses (n=300)

Mean ± SD	139.2 ± 13
Median (IQR)	137 (132 - 148)
Mean Percentage	84.3 ± 7.9
Minimum	83.0
Maximum	165.0

The mean job satisfaction was 139.2 (the mean percentage was 84.3%) while the standard deviation was 13; supporting the findings of Rashmi, K. and Kataria, A. (2021) [18].Another study conducted by Jaiswal, P.et al. 2015 [23] on job satisfaction of hospital staff working in a public teaching hospital in India showed that the mean job satisfaction index was higher for nurses (0.68).In contrast, a cross-sectional study from public health facilities in Punjab showed that 75.3% of the respondents were dissatisfied (Singh, T. et al. al. 2019) [24] and Purohit, B., Lal, S. and Banopadhyay, T. (2021) [25] reported that the mean scores of job satisfaction of nurses were low.

Table 3 Dimension of Job Satisfaction Score Experienced by the Staff Nurses (n=300)

	Mean ± SD	Median (IQR)	Mean Percentage	Min.	Max.
Recognition from the organization and professional achievement	38.2 ±4.1	37 (36 - 41)	84.9 ± 9	13.0	45.0
Personal maturation with nursing profession	25.3 ± 2.8	25 (24 - 27)	84.5 ± 9.2	14.0	30.0
Interpersonal interaction with respect and recognition	32.8 ± 3.5	32 (31 - 35)	82.1 ± 8.6	16.0	40.0
Accomplishment of accountability as a nurse	17.5 ± 2	18 (16 - 19)	87.6 ± 9.8	9.0	20.0
Show of professional competency	12.4 ± 1.5	12 (12 - 13)	82.9 ± 10.2	6.0	15.0
Stability and worth of job	12.9 ± 1.8	13 (12 - 14.75)	85.7 ± 12.1	4.0	15.0

Table 3 shows the domain wise dimension of Job satisfaction experienced by the staff nurses were; ‘Accomplishment of accountability as a Nurse’ (Mean percentage 87.6 ±9.8), ‘Stability and worth of job’ (Mean percentage 85.7 ±12.1), ‘Recognition from the organization and professional achievement’ (Mean percentage 84.9 ± 9), ‘Personal Maturation with Nursing Profession’ (Mean percentage 84.5 ±9.2), ‘Professional Competency’ (Mean percentage 82.9 ±10.2) and ‘Interpersonal Interaction with Respect and Recognition’ (Mean percentage 82.1 ±8.6).

Various studies [23, 35, 36] has reported the factor of recognition from the organization and professional achievement on job satisfaction and highlighted as the main predictors of their job satisfaction. The greatest satisfaction was derived from motivating factors associated with the work. Respondents who considered their working units to provide an excellent quality of care reported the highest job satisfaction.

Table 4 Association of Overall Job Satisfaction with Selected Socio Demographic Variables of Staff Nurses (n=300)

Socio demographic variables		Mean	SD	N	F	p
Age	<=30	137.9	12.5	58	0.83	0.439
	31 - 40	139.9	12.7	182		
	>40	138.0	14.3	58		
Area of work in Hospital	Ward	137.0	11.7	141	3.95*	0.020
	ICU/OT	140.9	13.3	107		
	Others	141.6	14.8	50		
Years of experience in this Hospital	<=5	138.6	13.3	155	0.87	0.420
	5 - 10	140.5	12.2	102		
	>10	138.0	13.8	41		
Total years of work experience	<=10	139.3	13.8	152	0.21	0.814
	10 - 15	139.5	10.7	95		
	>15	138.1	14.4	51		
Employment status of your spouse	Business/Self employed	137.8	14.8	68	0.86	0.425
	Private job	139.0	11.9	147		

	Others	140.5	13.2	83		
My profession interferes with my family responsibilities	Yes, it interferes	138.3	14.4	55	0.3	0.740
	Moderately Interferes	139.0	13.4	159		
	Not at all	140.0	11.1	84		
Rating of working Hospital	Excellent	143.1	12.5	56	3.23*	0.041
	Very Good	138.4	12.0	166		
	Good	137.9	14.9	76		

*: - Significant at 0.05 level

Table 4 depicts that there is significant association between job satisfaction and selected variables such as: area of work and rating of the working hospital.

Respondents who considered their working hospital to provide an excellent quality of care reported the highest job satisfaction which agrees with the findings of TarjaKvist, et.al (2012) [35]. Bhattacharya, S. (2020) [28] reported that job satisfaction among nurses is an indicator of excellent working environment and management of the institution. The greatest satisfaction was derived from motivating factors associated with the work. Various studies have [32, 34, 42], found out that there is difference in job satisfaction among nurses working various location of the hospital and nurses working in wards were more satisfied compared to the nurses who were working in critical areas, supporting the findings of this study.

There was no direct relation between age and job satisfaction among nurses contradicting the findings of Saini and Singh, (1994) [42]. In contrast, Elizabeth A Curtis, (2008) [39] study findings confirm that nurses under the age of 35 were less satisfied than those over the age of 35; and nurses in senior positions are more satisfied than their junior counterparts. The finding provides an insight into the relationship between these variables among nurses. It is possible that biographical variables are distal influences on job satisfaction, but further research is needed to better understand the relationship between these variables.

Bhattacharya, S. (2020) [28] found out that mostly all of the nursing professionals were either moderately satisfied or highly satisfied with their profession. Age and area of posting had a significant influence on satisfaction level of nurses. Al Otabi, M (2004) [34] reported that there is a positive significant relationship between department of work and job satisfaction. These findings substantiate the results of the present study.

In the current study, there is no association between job satisfaction and the ability to meet family responsibilities which is in contrast with the study findings of Poulose, S. and Sudarsan, N. (2017) [30] where job satisfaction showed a significant relationship with work to personal life strains and personal life to work strains.

Extremely demanding jobs of nurses make them vulnerable to insecurity and low self-esteem. Job satisfaction has an influence on patient care, career goals, relationship and health. Job responsibilities should have a series of changes to avoid monotony and loss of interest. It's recommended to update policies related to healthcare professionals and their working conditions.

5. Conclusion

Studying and improving nurses' job satisfaction has in itself a humanitarian value and legitimate purpose. Numerous studies posit and emphasize variation from one

hospital to another. Job satisfaction is multivariate in nature – recognition, professional advancement, pay standards, service standards, workload, nurses' competency, skill mix, socio-demographic factors and so on. Hence, each hospital should conduct their own job satisfaction survey to identify the pitfalls.

The nurse can use the research results to negotiate changes in working conditions and can incorporate into nursing administration management decisions to create and maintain a positive work environment promoting job satisfaction. By improving job satisfaction, hospital administrators can improve not only the mental, psychological, and social well-being of nurses but also the financial health of an organization. There is scope for interventions to enhance job satisfaction and concomitant continuous monitoring can be useful in determining various strategies for improvement.

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