An analysis of the relationship between burnout, socio-demographic and workplace factors and job satisfaction among emergency department health professionals

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A B S T R A C T

Introduction: Burnout among emergency medical practitioners and personnel negatively affects career satisfaction and job performance and can lead to mental health issues, including anxiety, depression, and suicide.

Purpose: This study investigated the relationship between the perceptions of burnout and job satisfaction of those working in two different hospital’s emergency departments assessing the effect of burnout dimensions and additional factors (age, position, marital status, annual income, employment type, gender, patient encounters, and household economic well-being) on job satisfaction. This study addresses a gap in the literature of the relationships between a) burnout and job satisfaction of emergency department’s health care personnel (physicians, nurses, technicians) and b) the factors that are associated with emergency department employees’ job satisfaction.

Method: A cross-sectional survey of two hundred and fifty participants was interviewed, using validated instruments (the Maslach Burnout Scale and the Minnesota Satisfaction Questionnaire). Participants include 38 physicians, 89 nurses, and 84 medical technicians, and 39 information technicians. The Maslach Burnout Inventory Scale, which assesses emotional exhaustion (EE), depersonalization (DP) and personal accomplishment (PA), and the Minnesota Satisfaction Questionnaire (MSQ), which assesses intrinsic satisfaction (IS), extrinsic satisfaction (ES) and overall satisfaction (OS), were used for data collection.

Results: Study findings indicate that significant relationship exists between burnout and job satisfaction; annual income and household economic well-being had a positive association with job satisfaction, whereas gender, age, education, marital status had no significant effect on any form of satisfaction. Moreover, this study reveals that emotional exhaustion (EE) is a significant predictor of all three dimensions of job satisfaction while depersonalization (DP) had no significant showing.

Conclusion: Results of this study suggest that it is not yet clear which factors are salient contributors in demonstrating the relationship between burnout and job satisfaction. This study may draw attention to a better understanding of this relationship will help enable health care administrators to design and implement tools to help increase job satisfaction and decrease burnout as a combined goal rather than treat each issue separately.

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1. Introduction

Evidence-based practice (EBP) in Turkey is still under development in emergency health services. There needs to be a holistic approach to help nurses in emergency medicine understand both the value and contribution of EBP to their profession. A major challenge in positioning EBP in the center of nursing profession in Turkish health system is the lack of clinical guidelines in emergency health services that are based on both external and internal evidence identified through research utilization. Both healthcare organizations, emergency health settings as well as policymakers need to collaborate in developing clinical guidelines for nursing professionals to engage in EBP on a daily basis. This study investigates the organizational dynamics of job satisfaction and job satisfaction among emergency health personnel. We argue that higher levels of job satisfaction and lower levels of burnout may be instrumental in affecting evidence based implications among nurses and emergency health professionals which would transform both the organizational

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culture and work environment in which EBP is at the center of nursing practice. Job Satisfaction is another employee-related variable that can ultimately support or prevent proper integration and implementation of EBP as this measure is typically considered as a strong evidence of employees’ overall perception of their organization (Chang, 2014; Paquet, Courcy, Lavoie-Tremblay, Gagnon, & Mailliet, 2013; Wallin, Ewald, Wikblad, Scott-Findlay, & Arnetz, 2006).

Management literature suggest that human resource outcomes play a significant role on organization outcomes (Koys, 2001) and that job satisfaction dictates employee performance, which is directly associated with organization’s performance (Dugguh & Ayaga, 2014; Koys, 2001; Pfeffer, 1991). Job satisfaction, due to its multifaceted nature, draws from a number of theories in order to explain its role in organizational setting or its relationship with other constructs. As a result multiple factors effect job satisfaction, environmental, individual and psychological (Dugguh & Ayaga, 2014) which can have varying levels of role in measuring the job satisfaction score. For example, when psychological factor is part of the research model, some researchers argue that burnout impacts job satisfaction while others argue the opposite. In this study we treat burnout as an antecedent of job satisfaction based on the results of study showing a strong support for burnout as an antecedent of job satisfaction (Wolpin, Burke, & Greenglass, 1991). Literature also indicates that employee job satisfaction and burnout are noticeably affected by many factors including the workplace physical environment (Dewa, Jacobs, Thanh, & Loong, 2014), workplace peers, and type of work in which one is involved (Reis, Xanthopoulou, & Tsoukas, 2015).

An in depth review of literature presented in this study shows disparate relationship readings between employee job satisfaction and burnout, which most probably is stemming from studies conducted under different settings. Furthermore, these studies demonstrate that not all the findings have been consistent or collaborating, and that there is no definitive concurrence among researchers on a particular set of salient factors contributing to posited relationships, this is undoubtedly true when the setting is health care. Health care delivery profession is inherently demanding and stressful, and as such, burnout among medical practitioners, especially among those practicing emergency medicine is on the rise, which is evident by high rates of physician addiction, depression, dissatisfaction, stress (Gokcen et al., 2013). Burnout among healthcare professionals, particularly among physicians, has become an key issue not only in terms of their individual well-being and health, but also in terms of quality of health services they provide (Shanafelt et al., 2012). In other words, potential effects of high burnout and dissatisfaction on the job, could have a negative impact on health outcomes, such as increased medical errors, longer patient recovery times, diminishing health services quality, and lower patient satisfaction (Newman, 2012). Specifically, hospital emergency department (ED) employees feel intense burnout, and demonstrates personnel job satisfaction level that is often low (Doan-Wiggins, Zun, Cooper, Meyers, & Chen, 1995). Likewise, in a different study it was demonstrated that relationship between burnout and job satisfaction was statistically significant, and that the level of job satisfaction had affected the quality of patient care. Thus, researchers concluded that i) maintaining high level of job satisfaction, and ii) avoiding burnout are both considered important for providing high quality patient care (Rosales, Labrague, & Rosales, 2013). Even though extensive literature on studies investigating burnout and job satisfaction among the medical employees exists, there is a dearth of literature that expand these studies among the ED staff in it’s entirety, where the assessment of participant responses are documented under same circumstances, for more robust understanding of the relationships. Considering the importance and critical nature of the ED employees’ reliance on each other to provide care for and maintain the patient throughput (Mchugh & Dyke, 2011) in an efficient and effective manner.

Emergency health and medical services provides an essential medical safety-net in many parts of the world. The emergency services units often tend to be the busiest and most stressful units hospitals, as such the ED employees at all levels would potentially suffer burnout syndrome more so than those working in other units in the hospital. Understanding factors contributing to this syndrome and their manifestation on job satisfaction is a critical issue. These relationships and their implications, especially from a global perspective, where culture, socioeconomic makeup of the study subjects, varied health care delivery systems and environment in different nations, etc. bears considerable differences, are not yet well understood (Schaufeli, Leiter, & Maslach, 2009). Furthermore, the need for continued research on this issue is more so amplified by the increasing number of patients treated in ED, which is compounding the challenges for delivering effective patient care, for example, in USA visits to ED has risen 44% from 1991 through 2010 (Brown, Decker, & Selck, 2015).

Burnout and job satisfaction have been widely studied throughout health professionals in hospital settings. However, little research has been done to determine burnout and job satisfaction in emergency medical rooms and emergency health services units (Ellenbecker, 2004). Gaps in the organization and management literature have shown that further research is needed to explore and explain the effects of job stress, job satisfaction, personal variables, and organizational factors on burnout and the effects of burnout on job satisfaction (Hasselhorn, Tackenberg, & Muller, 2003).

Job satisfaction research has focused on a wide variety of job types and settings, such as business firms, volunteer organizations, hospitals, education, manufacturing, government agencies, professions, the military, and so forth. There are various definitions of job satisfaction, Pool defines job satisfaction as an attitude that individuals maintain about their jobs. He proposes that this attitude is caused by the individuals’ perceptions of their jobs (Pool, 1997). According to Locke and Henne job satisfaction is an emotional response to a value judgment by an individual worker, and if the individual perceives that her/his job values are fulfilled, s/he will be satisfied (Locke & Henne, 1985). Kalleberg’s work on theory of job satisfaction (Kalleberg, 1977) presents us a clear understanding of the distinction between satisfaction and the specific dimensions of work roles that an individual draws their satisfaction from. He emphasizes that even though job satisfaction is a unitary concept it can have a multidimensional representation which should not be overlooked.

Variables that have been shown to positively affect job satisfaction include job type and authority level, tenure, salary (Chet, Ryan, Schneider, & Parra, 1998), employee empowerment and required skills to complete work related tasks (Kirkman & Rosen, 1997). Furthermore, connection between burnout and job satisfaction as the independent variable while accounting for confounding factors including age, gender, annual income, household economic well-being, workplace shift assignment and patient load of the ED professionals was established in independent studies (Hayes, Bonner, & Pryor, 2010). Job satisfaction among the ED workers is keen interest of this study since it is an important determinant of the performance of health professionals. Job satisfaction has been linked to health worker motivation, stress, burnout, absenteeism, intention to leave, and turnover. We are very interested in understanding the factors that impact ED employees’ satisfaction as one of its adverse outcome is its effect on employee turnover, which is not a desirable situation in the times of ED overcrowding (Meeusen, Van Dam, Brown-Mahoney, Van Zundert, & Knape, 2011). Relationship between structural determinants of turnover with job satisfaction and organizational commitment are not succinctly clear and that different structural determinants may have differential effects on job satisfaction and organizational commitment (Gaertner, 1999). Importance of understanding the key antecedents of job satisfaction while assessing the role of job satisfaction on organizational commitment is crucial process for managers, such command would assist the administrators and managers to reduce the risk of turnover by taking proper measures to increase employee job satisfaction (Lambert, Hogan, & Barton, 2001).

The most commonly agreed explanation of burnout condition covers three components and was developed by Maslach and Jackson. This definition implies that burnout is due to emotional exhaustion (EE), depersonalization (DP), and a decreased feeling of personal accomplishment.
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