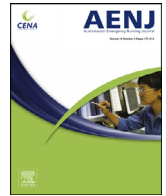




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Research paper

Job satisfaction among emergency department staff

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ABSTRACT

Objective: To compare job satisfaction among nurses, physicians and administrative staff in an emergency department (ED). To analyse the relationship of job satisfaction with demographic and professional characteristics of these personnel.

Methods: We performed a descriptive, cross-sectional study in an ED in Barcelona (Spain). Job satisfaction was evaluated by means of the Font-Roja questionnaire. Multivariate analysis determined relationship between the overall job satisfaction and the variables collected.

Results: Fifty-two nurses, 22 physicians and 30 administrative staff were included. Administrative staff were significantly more satisfied than physicians and nurses: 3.42 ± 0.32 vs. 2.87 ± 0.42 and 3.06 ± 0.36 , respectively. Multivariate analysis showed the following variables to be associated with job satisfaction: rotation among the different ED acuity levels (OR: 2.34; 95%CI: 0.93–5.89) and being an administrative staff (OR: 0.27; 95%CI: 0.09–0.80). Nurses and physicians reported greater stress and work pressure than administrative staff and described a worse physical working environment. Interpersonal relationships obtained the highest score among the three groups of professionals.

Conclusions: Job satisfaction of nurses and physicians in an ED is lower than that of administrative staff with the former perceiving greater stress and work pressure. Conversely, interpersonal relationships are identified as strength. Being nurse or physician and not rotating among the different ED acuity levels increase dissatisfaction.

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What is known

- Job satisfaction is a key element that is closely related to the quality of the healthcare service provided. Regardless of specialty and position, nurses seem to be less satisfied than physicians, but no comparisons between these two professions has been analysed so far.

What this paper adds?

- This study provides evidence of the level of job satisfaction among emergency department staff. The level of job satisfaction is not especially high, being lower among physicians and nurses who perceive greater healthcare pressure, workload and burnout than administrative staff. Job rotation among the different acuity levels in the ED seems to play a protective effect against job

dissatisfaction. These findings should be the first step to both promote studies about the causes of these differences and establish interventions for its correction.

Introduction

In 1976 job satisfaction was defined as “a pleasurable or positive emotional state resulting from the appraisal of one’s job or job experiences” (p. 1304) [1]. From a management perspective, job satisfaction is believed to be a key factor that influences performance of individuals and organisations, and is closely related to the quality of the services provided [2]. Thus, it is not surprising that managers, supervisors, human resource specialists, employees, and citizens in general are concerned with improving job satisfaction [3].

Medical practice in the emergency department (ED) involves the management of diagnostic and therapeutic uncertainties within a generally stressful and sometimes even hostile setting. In addition, the frequent overcrowding that occurs in hospital EDs, and the scarcity of resources lead to notable physical and mental distress of the healthcare workers, and may produce professional burnout and

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work dissatisfaction [4]. However, no previous studies have been performed comparing the level of job satisfaction among different healthcare providers, such as physicians, nurses and administrative staff, in an ED in Spain.

Many tools have been used to measure job satisfaction [5]. In Spain, one of the most commonly used is the Font-Roja questionnaire. The Font-Roja job satisfaction questionnaire [6] has been validated [7] and applied in different healthcare work settings in Spain [8–11]. The extended version [12] contains 10 dimensions related to job satisfaction and allows the multidimensional approach recommended by Locke [1].

The objectives of the present study were to compare the level of job satisfaction among physicians, nurses and administrative staff in an ED, and analyse the possible relationship between demographic and professional characteristics of these ED personnel and satisfaction reported.

Patients and methods

Study design

The design was a descriptive, cross-sectional cohort study about the level of job satisfaction of the ED healthcare professionals that consented to answer the Font-Roja questionnaire from March to May 2015.

Ethical approval

The study was approved by the Ethic Committee of the Hospital Clinic of Barcelona (Spain) (Reg. HCB/2015/0512).

Study setting

The study was undertaken in the ED of the Hospital Clínic of Barcelona (Spain), a high technology, 700-bed university hospital with a reference population of 550,000 inhabitants. It sees more than 90,000 general emergencies annually, excluding the specialties of obstetrics and gynaecology, paediatrics and ophthalmology which are seen at another site. The ED has four main areas in where patients are sent and seen in accordance with our 5-level of acuity triage system [13]: Resuscitation area (level 1 patients), emergent area (level 2 patients), urgent area (level 3 patients), and less urgent or “minors” area (level 4 and 5 patients). Resuscitation area works on a demand basis, so it shares staff with emergent area. Apart from this exception, each area works independently and has its own staff every shift, including physicians, nurses, nursing assistants, hospital porters, administrative staff, and cleaning personnel. Because of their employment contract, some nurses and nursing assistants are always assigned to the same ED area, while others are rostered to the different clinical areas. All medical and administrative staff are rostered to the different clinical areas. Finally, regarding shift schedule, some staff has a fixed schedule, while others work rotating shifts among morning, afternoon and night on a weekly basis.

Sample population

The study population included a group of 131 ED workers (68 nurses, 23 physicians, 40 administrative workers) voluntarily interested in quality issues and process improvement. The remaining staff was excluded as their motivation to answer the questionnaire was very low.

Three emails were sent to the personnel at different times in March and April 2015. These emails explained the interest of the study, guaranteeing the confidentiality of the responses and attaching a link to a web site (<http://www.e-encuesta.com>) in which the

Table 1
Dimensions explored in the Font Roja Questionnaire.

| Dimension | Definition |
|---|--|
| Job satisfaction | Grade of satisfaction conditioned by the work position. |
| Work-related stress | Grade of stress induced by the profession of the worker, and reflected by fatigue and the grade of responsibility perceived. |
| Professional competence | Grade of coincidence between professional training and work position. |
| Job pressure | Grade of overburden due to the work position. |
| Professional promotion | Grade of ability to achieve professional promotion |
| Interpersonal relationship with their superiors | Grade of consciousness about what is expected of the worker by their superiors. |
| Interpersonal relationship with co-workers | Grade of satisfaction produced by relationships with co-workers. |
| Extrinsic characteristics of status | Grade of work recognition in terms of salary, confidence and independence. |
| Job monotony | Grade of routine of the relationships with co-workers, and grade of lack of variety in the work performed. |
| Physical work setting | Grade of satisfaction with the physical and ergonomic characteristics of the work place. |

demographic and professional data and the responses to the Font-Roja questionnaire could be made.

Font-Roja questionnaire

The original Font-Roja questionnaire, a version derived from a tool used in the Tecumseh Community Health Study [14] in 1988, was made up of 24 questions grouped into nine different dimensions related to job satisfaction [6]. It was subsequently validated in 1994 [7]. In 2006, the questionnaire was revised, and two new questions were added and grouped into a new dimension [12]. This extended questionnaire is able to explain 61.81% of the variance of job satisfaction, and has an internal consistency of 0.791. The dimensions are enumerated and defined in Table 1. The 26 questions are assessed by Likert scale from highly disagree (1) to highly agree (5). The score obtained in each dimension is equivalent to the addition of the scores of the questions it is composed of, divided by the number of questions. The overall job satisfaction is obtained from the addition of the scores of the 26 responses divided by 26. The result theoretically ranges from 1 to 5 points, and 3 is the cut-off point. Thus, staff scoring equal or greater than 3 are considered “satisfied”, while those scoring less than 3 are considered “no satisfied”.

Statistical analyses

The following variables of each participant were collected: age, gender, current marital status (single, married/stable partner, separated/divorced, widow/widower), children, distance in kilometres from home to the hospital, means of transportation used (public, own vehicle, on foot), years working in the ED, profession (physician, nurse, administrative staff), type of employment contract (indefinite, part time, occasional), usual shift (mornings, afternoons, night, rotating), usual acuity level allocation (level 1–2, level 3, level 4–5, rotating). Demographic and professional quantitative variables are expressed as mean and standard deviation, while categorical variables as absolute values and percentages. To compare the three study groups the Student's *t* test or the non parametric Mann–Whitney test were used. Chi square was used for categorical data. If the number of values calculated was less than five, the Fisher exact test was used. To compare the three study groups in the Font-Roja questionnaire the one-way ANOVA test was used.

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