

Nurses' Job Satisfaction and Motivation: Patients' and Nurses' Perceptions

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How to cite this paper: Dor, A. and Halperin, O. (2022) Nurses' Job Satisfaction and Motivation: Patients' and Nurses' Perceptions. *Journal of Biosciences and Medicines*, 10, 121-131.

<https://doi.org/10.4236/jbm.2022.106011>

Received: March 11, 2022

Accepted: June 17, 2022

Published: June 20, 2022

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Abstract

Background: High quality care is the main concern of healthcare administrators and it was found to be related to nurses' job satisfaction and motivation. **Purpose:** The study aimed to compare patients' and nurses' perceptions of nurses' job satisfaction and motivation. **Method:** In this cross-sectional study the participants were 315 released patients and 329 nurses from eight hospitals in northern Israel. The participants completed three questionnaires: demographics, nursing job satisfaction, and nursing job motivation. **Results:** Nurses perceived both job satisfaction and motivation higher than the patients. Duration of hospitalization and being accompanied by family, were positively correlated to patients' perceptions of these variables. **Conclusion/Implications for Practice:** To optimize care quality, it is important to assess both patients' and nurses' perceptions of nurses' job satisfaction and motivation. Such an assessment may shed light on the nursing experience and on the way that it is reflected in the patients' experience. A system-wide process is needed to set a national standard for service quality while emphasizing strategies that promote recognition of nurses' work, for example, compliments and acknowledgment. This could enhance nurses' sense of work engagement, which, in turn, may increase the patients' perception of nurses' job satisfaction and motivation.

Keywords

Job Satisfaction, Work Motivation, Nurses, Patients, Hospitalization

1. Introduction

Delivering-high quality care to the satisfaction of both customers (patients) and providers (employees) is the main concern of healthcare administrators [1], and

the quality of care is affected by nurses' job satisfaction and motivation [2] [3] [4]. In the current study, perceptions of nurses' job satisfaction and motivation is examined from two perspectives, the patients' and the nurses'.

Job satisfaction is the degree of fulfilment one gets from one's job and is an important predictor of employee performance [5]. Locke [6] defined job satisfaction as "a pleasurable or positive emotional state resulting from the appraisal of one's job or job experiences" (p. 1304). In the nursing profession, job satisfaction was found to be the most consistent predictor of patient satisfaction, positively correlated with quality of care [2] and to patients' perceptions of that quality of care [7].

Utriainen and Kyngas [8] listed three factors that influence a nurse's degree of job satisfaction – interpersonal relationships, patient care, and organizing of job site. The first, interpersonal relationships, refers to relationships with coworkers, feelings of togetherness, positive interactions and good communication, team work, ethical work environment, and peer support. Patient care is of utmost importance to nurses, opportunity for high-quality patient care, and good interpersonal connections with patients. Finally, different ways of organizing work namely, supportive leadership, manageable and suitable workload, system of nursing practice, salary and benefits, variety of work, autonomy, professionalism, and opportunities for professional development.

Al Sabei *et al.* [9] relate to the importance of increase nurse job satisfaction by empowering them to take more active roles in hospital affairs. A good work environment has a direct positive impact on nurses' motivation to provide high-quality patient care, and work motivation is a major element of work performance [10] [11]. For healthcare organizations, nurses' motivation is essential as the demands on their work increase [12].

Moody and Pestut [13] defined *motivation* as "values-based, psycho-biologically stimulus-driven inner urge that activates and guides human behavior in response to self, other, and environment, supporting intrinsic satisfaction and leading to the intentional fulfilment of basic human drives, perceived needs, and desired goals" (p. 17). Baljoon and colleagues [14] found that nurses' work motivation is affected by personal and organizational factors—age, gender, years of experience, autonomy, educational level, and administrative roles. Additionally, nurses' sense of empowerment, level of work engagement, salary and benefits, level of supervision, chances for promotion, contingent rewards, supportive relationships (coworkers), communication style, and nature of work were identified as further factors that affect their work motivation levels [14]. High job motivation and high level of work satisfaction among nurses were positively correlated with nurses who perform better, are more prepared to take care of patients, and are able to collaborate with coworkers, thereby providing better overall healthcare service [15]. Likewise, motivation was found to enhance a nurse's contentment, initiative at work and work satisfaction [16] [17]. Studies have shown a direct association between staff satisfaction and patient satisfaction in healthcare organizations [18] [19].

Considering the high relevancy of nurses' job satisfaction and motivation to quality of care, this study was designed to assess and compare patients' perception with nurses' perception of nurses' job satisfaction and motivation. Having learned about the perception, a further aim was to determine whether sociodemographic attributes contributed to the patients' perception of nurses' job satisfaction and motivation.

2. Method

2.1. Participants

The study population, 644 participants, was recruited from eight hospitals in northern Israel in 2018. Of the participants, 315 (48.9%) were patients, and 329 (51.1%) nurses who worked in one of these hospitals. For practical and ethical reasons, patients were not interviewed during hospitalization. The research population referred to as "patients" are people who had been released from the eight hospitals in the twelve months preceding the beginning of the research. Patients who had been released from one of these eight hospitals more than twelve months preceding the beginning of the research, were excluded from this study.

Patients' demographics: Among the patients, there were 183 (58.09%) women. Patients' age (men and women) range was 18-85 ($M = 42.2$, $SD = 16.29$). Most patients were married ($n = 214$, 67.9%), with children ($n = 233$, 74%). In addition, 57.4% ($n = 181$) had a professional or academic education, and 159 (50.5%) described their economic status as good or very good.

Most patients ($n = 241$, 76.5%) were hospitalized up to 7 days, and were visited daily by family members during their hospitalization ($n = 273$, 86.7%). In general, 70.5% ($n = 222$) reported having a full, active life, and 52.1% ($n = 164$) worked full time (Patients' demographics are listed in **Table 1**).

Nurses' demographics of the nurses, 193 (58.7%) were women. Age range for all nurses (men and women) was 21 - 65 years ($M = 36.23$, $SD = 10.29$). Most nurses were married ($n = 213$, 64.7%) and with children ($n = 207$, 62.9%). In addition, 321 (97.6%) had a professional or academic degree and 197 (59.9%) described their economic status as good or very good. The average work experience was 10.59 years ($SD = 9.91$), 237 (72.03%) held full-time positions, and 234 (71.1%) were shift-supervisor. Nurses' demographics Hospitalization period and Employment Variables are listed in **Table 1**.

2.2. Measures

Participants (patients and nurses) completed three questionnaires: demographics, nurses' job satisfaction, and nurses' job motivation.

Demographics: All participants were asked about gender, age, marital status, children, country of birth, education, and economic status. In addition, patients were asked to specify the duration of their hospitalization and whether they were visited by family members during that time. Nurses were asked to list their professional experience (in years) and whether they worked on a full-time or part-time basis.

Table 1. Nurses' demographics, hospitalization period and employment variables.

Variables	Patients (N= 315)	Nurses (N= 329)
Gender		
Male	132 (41.9%)	136(41.3%)
Female	183 (58.1%)	193 (58.7%)
Marital status		
Married	214 (67.9%)	213 (64.7%)
Not Married	101 (32.1%)	116 (35.3%)
Children		
Yes	233 (74%)	207 (62.9%)
No	82 (26%)	122 (37.1%)
Country of birth		
Israel	266 (84.4%)	277 (83.9%)
Other	49 (15/6%)	52 (16.1%)
Education		
High school	133 (42.6%)	8 (2.4%)
Higher education.	181 (57.4%)	321 (97.6%)
Economic status		
Very good	46 (14.6%)	51 (16.5%)
Good	113 (35.9%)	146 (47.4%)
Less than good	156 (49.5%)	111 (36.1%)
Hospitalization period		
Up to 7 days	241 (76.5%)	-
7 - 14 days	47 (14.9%)	-
Over 2 weeks	26 (8.2%)	-
Employment		
Full time (100%)	164 (69.5%)	237 (72.03%)
Part time or do not work	151 (30.5%)	92 (27.5%)
Active in daily life		
Yes	222 (70.4%)	-
No	89 (29.6%)	-

Nursing Job Satisfaction was measured by six items from the Nursing Workplace Satisfaction Questionnaire (NWSQ [20]). The original questionnaire includes 18 items related to three domains: 1) The inner or intrinsic feelings of the respondent about working as a nurse; 2) The feelings and opinions of the respondent

about the outer or extrinsic day-to-day work environment in terms of its supportiveness and effectiveness; 3) The relationships between the respondent and people working on the ward or unit. In the current research we used only the first domain, intrinsic feelings (six items) to assess the nurses' job satisfaction. Each item was presented in two versions: for nurses—"I'm satisfied with my work since it is very meaningful to me"; for patients—"I believe that nurses are satisfied with their work since their work is very meaningful to them". Participants (nurses and patients) answered through a 5-point Likert-type scale (1—*strongly disagree*, 5—*strongly agree*). For data processing, an average was calculated, with high scores indicating high nursing satisfaction. Internal reliability was $\alpha = 0.90$.

Job Motivation was assessed using the Motivation Questionnaire by Boneh [21]. This questionnaire was developed in Hebrew and is aimed at measuring nursing job motivation. It has nine items with answers on a 5-point Likert-type scale (1—*very little*, 5—*very much*). For example, nurses were asked: "How hard are you willing to work in order to provide good service?", and patients were asked: "How hard is the nurse willing to work in order to provide good service to patients?" High scores indicate high motivation. The reliability of the original measure was $\alpha = 0.79$, and in this study $\alpha = 0.95$.

2.3. Procedure

The Institutional Review Board and Ethics Committee at the first author's workplace approved the study (The ethical approval number protocol is EMEK YVC 2019-12). Participants (patients and nurses) were informed that their participation is voluntary, that their questionnaire responses would be kept confidential, and that data obtained from the survey would be analyzed in an anonymous format. The patients' questionnaires were distributed to former patients who had been hospitalized in hospitals in north Israel. No questionnaires were filled in by patients during hospitalization. These former patients were located by a snowball method, through researcher assistants (students from the MSW track who were supervised and guided by the first author). Specifically, each research assistant reached out to former patients that he or she knew, and via this former patient they were directed to additional former patients until enough participants had been recruited for the study. No hospital's inner documentations were used to recruit participants for the study; as such, no medical data of any kind were available to the researchers. All former patient participants received the questionnaires in Hebrew either personally or by email. Participants were not asked to disclose the name of the hospital from which they were released, as this information was not relevant for the study.

Recruiting nurses was also done by the snowball method and through social media. Those who responded to the appeal and expressed their willingness to participate in the study received the questionnaire through email. All participants (patients and nurses) were informed that they could get a summary of the study results, if they were interested. It took each participant about 25 minutes

to complete the three questionnaires.

Data collection ended in October 2021. When the questionnaires were returned, 19 questionnaires (10 from patients, 9 from nurses) were found to be incomplete and were excluded from the entire sample

2.4. Data Analysis

Data were analyzed with SPSS ver. 26. A series of *t* tests and Cohen's *d* were calculated for the study variables by group (patients/nurses), and series of *t* tests were conducted for analyzing differences between patients and nurses' perceptions of nurses' job satisfaction and motivation. Additionally, Pearson and Spearman correlations were calculated between sociodemographic and hospitalization variables with patients' and nurses' perceptions of nurses' job satisfaction and motivation.

3. Results

The first research aim focused on perceptions of nurses' job satisfaction and motivation from the patient's perspective and the nurses' perspective. Findings indicated that nurses perceived their job satisfaction and motivation as higher than was perceived by patients ($t(322) = 3.83, p < 0.001, d = 0.300$; $t(322) = 5.70, p < 0.001, d = 0.452$, respectively).

The second research aim focused on patients' perceptions and aimed to explore the associations between patient sociodemographic variables (age, gender, marital status, number of children, education level, and economic status) and patient hospitalization variables (length of hospitalization and degree to which they were accompanied by family) with patient perceptions of nurses' job satisfaction and motivation. Findings indicated that patient's sociodemographic variables were not related to their perceptions of nurses' job satisfaction and work motivation. Nevertheless, significant weak positive associations were found between length of hospitalization and perception of nurses' job satisfaction and motivation ($r = 0.11, p = 0.048$; $r = 0.11, p = 0.042$, respectively) and between family member presence and perception of nurses' job satisfaction and motivation ($r = 0.13, p = 0.020$; $r = 0.13, p = 0.018$, respectively). In other words, patients whose length of hospitalization was longer and who were accompanied by family member had a higher perception of perceived nurses' job satisfaction and motivation.

4. Discussion

The current study focused on two groups, patients and nurses, in relation to hospital nurses' job satisfaction and motivation. Our main finding indicated that nurse perceived their job satisfaction and motivation as higher than patients perceived them. This difference could be explained by the role of physical and social characteristics of the hospital environments (both the place and the people). Previous studies [22] [23] [24] [25] have shown that patients' satisfaction and

improved affective state are positively correlated not only to better healthcare physical environments, but also to more positive perceptions of health care providers. Patients are aware of the difficulties in the Israeli health system, and that until addresses, will make nurses' work more demanding and complicated [26]. As such, patients might perceive that the nurses are less motivated to work at the hospitals and that their job satisfaction is lower.

Another possible explanation might stem from the concept of meaning in work. According to Lambrou and colleagues [27], nurses who find meaning in work may be more likely to be proactive and confident in nursing and establish professional nursing identities. In addition, having meaning in their work enhances job satisfaction, which in turn strengthens nurses' intrinsic motivation [28]. As such, nurses' job satisfaction and motivation were higher than perceived by the patients. Furthermore, according to Ham [29], a positive patient experience, based on partnership and mutual respect, generates gratitude and appreciation for the nurse's work. Thus, this might affect nurse's satisfaction and can contribute to the creation of a positive patient experience. According to Converso and colleagues [30] a positive experience that is accompanied by gratitude, reduces burnout and reinforces the sense of job meaning and mission. This explanation warrants further investigation to better understand the gaps between patients and nurses regarding nurses' job satisfaction and motivation.

No associations were found between patients' sociodemographic variables and patients' perception of nurses' job satisfaction and work motivation. However, significant positive associations were found between patient hospitalization variables, namely, length of hospitalization and extent of being accompanied by family, and their perception of nurses' job satisfaction and work motivation. This association could be explained by the hospitalization experience. Specifically, hospitalized patients often live in a state of constant worry regarding their condition, and they are forced to put their trust in medical professionals, most of whom are complete strangers to the [31] [32] [33]. They must also cope with hospital restrictions on family visits, and adjust to an often-unprecedented lack of privacy. All these hardships relate to a sense of a loss of control of one's life and an overall decreased sense of autonomy [34]. Two issues that require further investigation should be addressed, the possible effect of length of hospitalization on patients' perception of nurses' job satisfaction and motivation, and the possible effect of family visits on this perception. Patients who remain beyond the acute stage of their treatment, and have time to view nurses' work, can perhaps better appreciate the physical and emotional investment it involves. Discussing nurses' work with family members, especially if the visitors are willing to ease the nurse's burden while they are they, may also cast perceptions of job satisfaction and motivation in a different light.

Implications for practice

The difference in perception between nurses and patients should lead health-care administrators to become conscious of factors influencing nurses' job satisfaction and motivation to assure patients' quality of care. Special attention should

be devoted to strategies that promote recognition, such as compliments and acknowledgments of nurses' work. In this manner, nurses' sense of work engagement might be enhanced and thereby their job satisfaction and motivation [35] will be reflected better in their patients' perception. Moreover, patient care has become more emphasized in recent year [36] [37], therefore there is necessary to establish a system-wide process that includes setting of a national standard for service quality and a way to implement it.

Limitations

This study has several limitations: First, this cross-sectional research was conducted with a relatively convenient, unrepresentative sample in eight hospitals within a single region in Israel, at several medical hospitals in a limited area—northern Israel. As nurses' job satisfaction and motivation can differ according to each country's health system policy and allocation of resources, generalizability of the results needs to be considered with caution. Second, all patients were asked to assess nurses' job satisfaction and motivation up to a year prior to the study conduction. It might be problematic when both satisfaction and motivation are externally observed while we ask someone else to judge another's satisfaction or motivation.

Also, it may be that the time passed until the data collection blurred the feelings and responses received in this study. The reason for this gap period was ethical—we did not want to contact the hospitalized person during difficult recovery times, but the findings may have been different if these questions had been asked as soon as the hospitalization was completed. Third, for ethical reasons, no paired samples were tested, the nurse group was not associated with the patient group. Given that the nurse and patient populations were not matched, patients were taken care of by nurses from another unit or facility. It is possible that the picture would have been different had we examined the nurses who had treated the patients.

5. Conclusion

Nurses perceive their job satisfaction and motivation as higher than patients' perception, probably due to their awareness of the effort they put into their job in challenging conditions. Additionally, patients' perceptions of nurses' job satisfaction and motivation were associated with the length of hospitalization and the degree to which they were accompanied by family. These factors enable patients overtime to better observe the nurses' work, and as such was reflected by their higher perceptions of nurses' job satisfaction and work motivation. Additional studies are needed to further understand the roots of the differences in the perception of nurses' job satisfaction and motivation between the nurses themselves and the patients.

Conflicts of Interest

The authors declare no conflicts of interest regarding the publication of this paper.

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