

WORK SATISFACTION OF NEWLY HIRED NURSING WORKERS IN A PUBLIC HOSPITAL

SATISFAÇÃO PROFISSIONAL DOS TRABALHADORES DE ENFERMAGEM RECÉM-ADMITIDOS EM HOSPITAL PÚBLICO

SATISFACCIÓN PROFESIONAL DEL PERSONAL DE ENFERMERÍA RECIÉN ADMITIDO EN UN HOSPITAL PÚBLICO

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ABSTRACT

This was a descriptive and exploratory study, with a quantitative approach, performed from May to June of 2011 that aimed to verify the work satisfaction of nursing workers newly hired in a public hospital. A total of 133 professionals were submitted to the Index of Work Satisfaction questionnaire. Most were females, married, and 36.6 years old in average. The results highlight that according to nurses, autonomy is the most important factor for work satisfaction, whereas, for nurse technicians, it is the remuneration factor. Both categories agreed that professional status is the least important factor for work satisfaction. Nurses considered remuneration as a satisfying factor, whereas nurse technicians considered job requirements. Interaction was pointed as a criterion with the least perceived satisfaction by both categories. We conclude that freedom in decision-making, development of actions, and financial reward was important for work satisfaction. However, lack of professional social recognition and difficulties in interpersonal relationships lead to dissatisfaction.

Keywords: Job Satisfaction; Nursing; Personnel, Hospital; Hospital Restructuring.

RESUMO

Estudo descritivo exploratório, de abordagem quantitativa, realizado de maio a junho de 2011, objetivou avaliar a satisfação profissional de trabalhadores de enfermagem recém-admitidos em um hospital público. Participaram 133 profissionais que responderam ao questionário Índice de Satisfação no Trabalho. A maioria dos trabalhadores era do sexo feminino, casada e com 36,6 anos em média. No que se refere à satisfação atribuída, os componentes de maior pontuação foram a autonomia para enfermeiros e a remuneração para técnicos. O status profissional foi pontuado por ambos como componente de menor importância. Quanto à satisfação percebida os enfermeiros pontuaram a remuneração como mais importante e os técnicos os requisitos do trabalho. A interação apresentou menor satisfação percebida pelos participantes. Concluiu-se que tomada de decisão e a recompensa financeira são importantes fatores de satisfação, enquanto o baixo reconhecimento da profissão e a deficiência no relacionamento interpessoal acarretam menor satisfação no trabalho de recém admitidos.

Palavras-chave: Satisfação no Emprego; Enfermagem; Recursos Humanos em Hospital; Reestruturação Hospitalar.

RESUMEN

Estudio exploratorio descriptivo cuantitativo realizado con el fin de verificar la satisfacción laboral del personal de enfermería, recién admitido en un hospital público. Participaron 133 profesionales que contestaron la encuesta Satisfacción en el trabajo. La mayoría de los participantes era de mujeres, casados y con promedio de 36,6 años. Los enfermeros le atribuyeron mucha importancia a la autonomía y los técnicos de enfermería a la remuneración. Ambas categorías le dieron menos importancia al componente status profesional. La mayor satisfacción para las enfermeras fue la autonomía y para los técnicos de enfermería la remuneración. Ambos consideraron menos importante el status profesional. Como factor de satisfacción los enfermeros indican la remuneración y los técnicos de enfermería los requisitos de trabajo. Interacción presentó menor satisfacción percibida por las dos categorías. Se concluye que la libertad en la toma de decisiones, las actividades y la compensación económica son importantes para que los profesionales se sienten satisfechos, pero la falta de reconocimiento social de la profesión y la deficiencia en las relaciones interpersonales los lleva a la insatisfacción laboral.

Palabras clave: Satisfacción en el trabajo; Enfermería; Personal de Hospital; Reestructuración Hospitalaria

INTRODUCTION

Work plays a central role in the individuals' social life because besides being a regular source of financial income it represents an opportunity for personal growth, social identity, and self-esteem, factors directly related to individual satisfaction. On the other hand, when the work causes stress, it can be a source of dissatisfaction and negatively affect the workers' health conditions.¹

Satisfaction means having good conditions in the work environment, involving an adequate infrastructure and availability of material resources for the development of tasks, and role played in the institution to enable a harmonic environment.² Problems in any of these factors could cause psychic distress with direct consequences in the physical and mental health of workers.³

The complexity of work process developed in Nursing was highlighted as a dissatisfaction source, since dealing with the suffering of others is a very difficult task. On the other hand, the possibility of reducing the anguish in others can bring achievement and satisfaction.⁴

In order to promote worker's satisfaction, the work environment, companies' economy, and nursing care services have had significance changes since 1990. These changes contributed to human being valorization as a worker, quality of life, and work safety. Health-work association significantly contribute to increasing productivity, work satisfaction, and reduce morbidity and mortality rates, even during work.⁵

Studies have shown that professional satisfaction contributes to better participation of workers at workplace since satisfied people at work will have attitudes that are more positive for them and the team. In this sense, work satisfaction becomes a tool searching for quality, becoming a dynamic process influencing the work organization and workers' social life.^{7,8}

The most important variables of organizational behavior is the worker's satisfaction with professional activities because the results of studies suggest that the individual's mental contents as components of work satisfaction such as beliefs, values, morals, and the possibility of development through their productive activities.^{9,10}

Understanding all these different factors influencing work satisfaction at workplace is a fundamental management strategy to keep quality in companies' activities.

To approach professional satisfaction of nursing teams in a human, structural, and material scenario of resource investments in a public institution enables a wider look into the work reality to establish variables that can influence the workers' satisfaction and motivation, and therefore, promote/ensure care quality.

This study was developed from one of the authors' experience as a nursing supervisor in a hospital with medium complexity where she participated in hiring a large number of em-

ployees. During this experience, satisfaction and dissatisfaction factors were observed among workers.

Thus, the question for this study is: How is the workers' satisfaction within a newly hired nursing team? In order to answer to this question, this study aims to evaluate the professional satisfaction of newly hired nursing workers in a public hospital.

METHODS

This was a descriptive study with quantitative analysis, held from May to June of 2011, in the city of Londrina-PR, in a public hospital of medium complexity assisting patients of the Unified Health System (SUS).

The sample population was all newly hired nursing workers in that institution in a total of 133 nursing workers, 39 nurses and 94 nursing technicians, working under statutory public contract. The inclusion criteria were: workers hired through the state public process 196/2006 and 115/2009 announcement, working for at least for six months in the institution and volunteer participation. A study showed that six months acting in the institution is the minimum time needed for the worker to adapt to the a new unit avoiding false answers about work satisfaction due to the adaptation period.

Data collection started after all participants agreed to formally participate in the study through reading and signing the independent and informed term of consent (IITC) to ensure ethic precepts and data confidentiality.

Data collection was performed while working time through a closed envelop given to the participants, preserving information confidentiality and ensuring anonymity to the study subjects. The average time for answering the questions was about one hour. The envelop contained the Index Work Satisfaction (IWS) questionnaire, created by Stamps¹⁰ and translated and validated in Brazil by Lino¹¹ to evaluate nurses' satisfaction in intensive care units; however, this questionnaire has been also applied to nursing workers at different activities.^{2,4,6,8}

The first part of the IWS questionnaire contains questions about workers' characteristics and the second part is divided into part A and B. Part A investigates the satisfaction and shows satisfaction components such as: autonomy – independence, initiative, and freedom in daily work activities; interaction – social and professional formal and informal contact opportunities during work; professional status – important or significance of their work; work requirement – regular task and activities performed at work; organizational standard – administrative standard and procedures proposed by the hospital and nursing services administration; salaries – additional payments and benefits received for their work.¹⁰ To obtain the importance given to the work satisfaction components, the researched worker will

choose one pair among 15 pairs of combinations characterizing the Paired Comparisons Technic (Table 1).

Table 1 - Technique of Paired Comparisons of the Components of the Job Satisfaction Index

() Professional Status	ou	() Organizational Norms
() Remuneration	ou	() Job Requirements
() Organizational Norms	ou	() Interaction
() Job Requirements	ou	() Organizational Norms
() Status Professional	ou	() Job Requirements
() Remuneration	ou	() Autonomy
() Professional Status	ou	() Interaction
() Professional Status	ou	() Autonomy
() Interaction	ou	() Job Requirements
() Interaction	ou	() Remuneration
() Autonomy	ou	() Job Requirements
() Organizational Norms	ou	() Autonomy
() Remuneration	ou	() Status Profissional
() Interaction	ou	() Autonomy
() Organizational Norms	ou	() Remuneration

Source: Stamps, 1997.¹²

Part B consists in a Likert type scale with 44 answers scored from one to seven in analysis process; one meaning complete disagreement and seven meaning complete agreement, allowing participants to establish a satisfaction level according to each component, resulting in the perceived satisfaction.

To obtain the weighting of IWS components, a frequency matrix was created to relate how many times the components were chosen with other components in the Paired Comparisons Technic. Then, the frequencies were converted into a proportion matrix with the division of the number of times that the component was chosen by the total size of the researched group among nurses and nursing technicians. The proportion matrix was converted into Z-matrix for the conversion of proportions in standard-deviation using the correction factor of 3.1.^{11,12} The importance level given by the professionals to each IWS component was identified within a possible numerical variation between 0.9 and 5.3.¹¹

The part B analysis of the IWS questionnaire created matrixes of the frequency distribution after grouping the questions by components. At this moment, the scores of questions with negative statements were inverted. In each matrix, the average score of components was calculated, resulting in the perceived satisfaction by professionals in each IWS component. With all the scores in each component, the total scale score was obtained through dividing the total score of components by the number of questions in each component.

Data were registered in *Microsoft Office Excel*® 2003 program and transferred to *SPSS versão 15*® for descriptive statistical analysis.

The continuous quantitative variables such as age and work time in the studied hospital were obtained by the average. The quantitative variables such as gender, marital status, education, performed activities, and, etc. were calculated by as relative (%) and absolute (n) frequencies. The treatment of data from the IWS questionnaire was performed according to the recommendations of Stamps,¹⁰ Lino,¹¹ and Matsuda¹².

In compliance to the established standards by the 196 Resolution from October 1996 by the National Health Council,¹³ this study was approved by the Committee Ethics in Research involving human beings from the State University of Londrina, with a protocol in the National Ethics in Research System (SIS-NEP) with the Certificate of Ethic Appreciation (CAAE) number 0272.0.268-10.

RESULTS AND DISCUSSION

The study participants are mostly females, married and between 21 and 58 years old, with an average age of 36.6 years as shown in Table 2.

In accordance with the literature, the nursing professionals in this study were at young ages.^{4,11} However, these workers with an average age of 37 years are considered mature and in the process of functional aging.

Thus, the contracting process in the studied institution, the hired workers were already in the functional aging process. In the public hiring system, age is used as a scoring criterion for candidates, different from private institutions hiring that preferentially hires younger people.¹⁴

The gender and marital status results were consistent with other national studies^{4,11} showing Nursing as a particularly female occupation since the XIX century, mostly composed by married women combining household activities, children and husband care with their professional attributions. These characteristics of female work are conflicting with their insertion in the labor market.

In Brazil, the salary of female workers often represents the only family income. However, even with historic and social changes in the last years, there are still companies where females remuneration is lower than that of males. This situation does not happen in this study because the salary in the institution is the same for both genders, according to the professional category.

Regarding the importance given to the IWS components, Table 3 shows nurses choosing the autonomy as the most important component for work satisfaction, whereas nursing technicians chose remuneration.

Table 2 - Sociodemographic data of Nurses and Nursing technicians from a Public Hospital. Londrina – PR, 2012

Data	Nurses (n = 39)		Nursing Technicians (n=94)	
	n	%	n	%
Sex				
Female	25	64,1	73	77,7
Male	14	35,9	21	22,3
Age				
21 – 30 years old	17	43,6	31	33,0
31 – 40 years old	16	41,0	29	30,8
> 40 years old	6	15,4	34	36,2
Children				
Yes	17	43,6	68	72,3
No	22	56,4	26	27,7
Marital Status				
Single	16	21,0	24	25,5
Married	22	56,4	55	58,5
Divorced	1	2,6	14	14,9
Widower	–	–	1	1,1
Remuneration				
1-3 Minimum Wages	–	–	94	100,0
4-10 Minimum Wages	39	100,0	–	–
11-20 Minimum Wages	–	–	–	–

Source: author.

Choosing autonomy as the first most important component reflects the practice of nurses because limitation in decision-making and teamwork is still present in their work process. A study about suffering at work¹⁷ claims that in the development of their tasks, although nurses interact with other health professionals, they have their autonomy restricted and do not develop their work with freedom, generating disincentive and dissatisfaction at work.

The result about autonomy mentioned by the studied nurses confirms other Brazilian studies^{11,12,18} informing that professionals relate satisfaction to freedom in the work process,

according to the level of independence and free will in the decision-making process.

For the nursing technicians, remuneration was the first choice for their work satisfaction, corroborating results from another study, which reports remuneration as the motivational aspect of work and states that the wage factor is directly related to searching for public services that provide professional and economic stability. In this perspective, the worker hired into public services associates economic stability to the benefits of the salary, which contributes to work satisfaction and establishes a relationship between power and status in the organization.¹⁹

The professional status component was scored by both categories as the least importance component of work satisfaction. This finding agreed other studies that reinforce that nursing workers do not consider the professional status component as the responsible factor for their satisfaction.^{6,18,19,20} This result shows that the occupation cultural devaluation needs to be investigated because the recognition of the professional activity enables transforming the suffering at work into pleasure and fulfillment.²¹

Regarding the IWS components satisfaction perceived, the nurses conceptualized the remuneration as the most important component and nursing technicians chose job requirements, as shown in the Table 4.

The remuneration was indicated as the main component of satisfaction perceived by nurses, which diverged from most studies using the IWS showing autonomy as the most stimulator factor for satisfaction.^{6,11,12} Considering the institution's context, with attractive careers and salary plans, these nurses apply for public services because of the salary attraction, which cooperate to improved career plans, including wage valorization.²²

The nursing technicians indicated that the most strengthening component of work satisfaction was job requirement. This result shows that, because it is an institution with recent hiring, these workers are performing their job activities with the appropriate number of professionals. Thus, each professional performs their tasks with a reasonable workload, possibly with defined functions, avoiding accumulation of tasks and assisting clients on all of their needs.

Table 3 - Job Satisfaction Component and Order of Importance assigned by Nurses and Nursing technicians. Londrina – PR, 2012

Job Satisfaction Component	Nurses (n=39)		Nursing Technicians (n=94)	
	Weighting coefficient	Order of importance	Weighting coefficient	Order of importance
Autonomy	3,64	1º	3,39	3º
Remuneration	3,31	2º	3,47	1º
Interaction	3,25	3º	3,40	2º
Organizational Norms	2,95	4º	2,70	5º
Job requirements	2,90	5º	3,02	4º
Status Professional	2,76	6º	2,61	6º

Source: author.

Table 4 - Job Satisfaction Component and Order of Importance perceived by Nurses and Nursing technicians. Londrina – PR, 2012

Job satisfaction component	Nurses (n=39)		Nursing technicians (n=94)	
	Medium score	Order satisfaction	Medium score	Order satisfaction
Remuneration	4,58	1°	4,65	2°
Job requirements	4,54	2°	4,68	1°
Professional Status	4,38	3°	4,59	3°
Organizational Norms	4,35	4°	4,11	4°
Autonomy	3,88	5°	4,06	5°
Interaction	3,77	6°	3,98	6°

Source: author.

Similar studies claim that job requirements such as function and time in the activity can positively influence professional satisfaction.^{4,11}

Table 5 shows that both categories are less satisfied with the interaction component and that fact is, usually, connected to the negative perception, especially of the relationship between doctors and health care workers. The dissatisfaction average perceived on the component concerning the respect from doctors for the abilities and skills in the nursing staff was 6.3 for nurses and 6.2 for nursing technicians, values that indicate high level of dissatisfaction for being close to seven.

Studies highlight that frequent disagreements between doctors and nursing workers result in conflicting relationships in which each one seeks to defend the power given by their occupation, resulting in wear on the team's relationship.²³ Power relations can influence the behavior and characterize the scenario where people work, enabling or hindering interpersonal relationships.

In this study, the insertion of new professionals seeking for space to perform their activities where medical professionals were already integrated into their groups was observed as causing conflicting relations resulting from the introduction of new experiences and work routines.

Table 5 - Components and Job Satisfaction Index from Nurses and Nursing technicians. Londrina – PR, 2012

Components	Perceived satisfaction coefficient	
	Nurses	Nursing technicians
Remuneration	15,16	16,14
Professional Status	12,10	11,99
Autonomy	14,14	13,95
Organizational Norms	12,83	10,95
Job requirements	13,17	14,98
Interaction	12,27	13,55
SUM	79,67	81,56
IST	13,28	13,59

Source: author.

The interaction as a component of dissatisfaction for nurses and nursing technicians may be different from other studies that addressed specialized sectors and work shifts that require improved skills and teamwork because interaction favors activity performance and optimizes labor well-being.^{7,8}

The score adjusted by the work satisfaction component in the IWS was between 12 and 37 points.¹¹

According to Table 4, the total score of IWS had a value of 13.28 for nurses and 13.59 for nursing technicians.

Both categories showed IWS superior to other those reported in other studies.^{4,11,12,18} As discussed, the remuneration had a positive influence in the IWS in this study, while the professional status and organizational standards had low satisfaction for nurses and nursing technicians, respectively.

It should be noted that the accumulation of activities, low remuneration, and lack of perspective in the career collaborate to low satisfaction within the professional status component. However, the working conditions experienced by the newly hired workers in the investigated institution differ from those in other studies^{11,12} where the labor demand is balanced, remuneration is appropriate and satisfactory, and public services contracts allow evolution through the job and career plan.

On the other hand, the low satisfaction of nurses with professional visibility may be related to the fact that, although there are favorable working conditions, the recognition of their performance does not occur in such a way as to motivate them in their daily activities.

It is the responsibility of nursing professionals to seek strategies to overcome the low recognition by the society. Therefore, they must use their scientific and technical competences, and even efforts for strengthening the category, in order to ensure quality of care provided to patients.^{4,11,18,20}

The organizational standards component was identified as the least work satisfaction by nursing technicians. This information converges with results from other studies.^{5,11} This result can be related to the time in which these professionals work in their activities in the institution – a little more than 10

months, considering that the nursing technician category may require certain standards and better routines.

The results reinforce the importance of knowing the work satisfaction in workers to adapt management strategies in the working environment. As discussed in a study²⁴ performed with nursing teachers, building a working environment in which there is quality of life and work satisfaction requires changes to adequate the expectations of workers. As seen in this study, the work satisfaction involves a set of complex factors that must be constantly managed in institutions.

CONCLUSIONS

The present study allowed analyzing the work satisfaction of nurses and nursing technicians hired in public services, in a single moment, exercising their functions in a hospital of medium complexity.

The nurses chose autonomy as the most important component for work satisfaction; nursing technicians chose remuneration. In both categories, professional status was the least important component for satisfaction.

Nurses cited remuneration, and nursing technicians cited job requirements as components for work satisfaction. Interaction was elected the component that leads to the lowest satisfaction by nurses and nursing technicians.

It was noted that the general IWS scores from both categories, were above those presented in the Brazilian literature, however, the index of satisfaction with work in nurses and nursing technicians is near the limit of dissatisfaction.

The results of this study provide subsidies for managers and employees to develop actions for improved professional satisfaction in nursing staffs that could positively influence the quality of care provided.

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