

"Work environment and its relationship with job satisfaction among nurses in Riyadh region, Saudi Arabia"

A Thesis Submitted in Partial Fulfillment of the Requirements for Master of Science in Nursing (Management and Leadership)

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ABSTRACT

Purpose: Numerous organizations and businesses underate the importance of employee job satisfaction, without realizing that it is the root of many issues in the workplace. Employees require a distraction-free working environment, conducive to realizing their potential, in order to attain their organizations' goals. Previous studies have shown that multiple aspects work environment factor—such as remuneration, employee autonomy, working hours, and the communication and relationship between the employees and the employers—have a lasting effect on job satisfaction. Despite various studies on the working environment and the barriers therein, there are limited studies focusing on how nursing professionals' job satisfaction is affected by their working environment, especially in the locale of Riyadh, Saudi Arabia.

Aim: A cross-sectional investigation was conducted to determine the connection between working environment and nursing professionals' satisfaction.

Material and Methods: This study utilized a random sampling approach to select 500 nursing professionals from five selected hospitals in the Riyadh region. In data collection, a self-reported questionnaire was conducted using the "Minnesota Satisfaction Questionnaire and Practice Environment Scale of the Nursing Work Index".

Results: The findings showed that nursing professionals' perceptions of their working environments and satisfaction in the Riyadh region were both moderate $(6.22 \pm 1.49 \text{ and } 7.52 \pm 1.88, \text{ respectively})$. There was a significant moderate positive correlation between working environment and job satisfaction $(r = 0.55, p \le 0.05)$. Nursing supervisors and those who did not face problems had higher perceptions of their working environments, while respondents who did not want to disclose their gender, diploma holders, those assigned to Aldwami Hospital, nurses, and those who did not face problems had higher perceived job satisfaction. Furthermore, there was a significant positive low relationship between job satisfaction and experience $(r = 0.11, p \le 0.05 = 0.02)$; thus, staff with more experience were more likely to have higher job satisfaction.

Conclusion: Nursing professionals enjoy greater job satisfaction when they feel that their working environment allows them to work optimally. Policymakers at health care institutions in the Riyadh region should take action to increase the working environment and, therefore, nursing professionals' job satisfaction.





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CHAPTER 1

Introduction

1.1 Background of the Study

Numerous organizations and businesses underate the importance of employee job satisfaction, without realizing that it is the root of many issues in the workplace. Employees are the main drivers of organizations and businesses achieving their set targets, goals, visions, and objectives. Employees require a distraction-free environment work conducive to realizing their potential, in order to realize their organizations' goals (Raziq & Maulabakhsh, 2015). Job satisfaction refers to how fulfilled, comfortable, and satisfied a person is with the job they perform and whether they feel their professional role fulfills their essential work values; does their job meet their expectations and fulfil their needs (Ali, 2016). The environment that individuals work involves all the characteristics of work: the tasks and activities, the work's inherent value, and the context (the physical environment where the work is performed) as well as the social working conditions (Skalli, Theodossiou, & Vasileiou, 2008). Multiple aspects of the environment-work—such as remuneration, employee autonomy, working hours, and the communication and relationship between the employees and the employers—have a lasting effect on job satisfaction. Previous research has shown that a positive environment-work is positively linked to job satisfaction.

In the competitive contemporary world, the most challenging issue for most businesses is retaining its employees. This issue is even prevalent in vital health care organizations. The environment-work in health care facilities is complex and involves various staff, including the nurses and their managers. Health care is predominantly delivered by nurses; managers are tasked with ensuring that the environment-work is healthy and well maintained so that it supports and motivates the nurses. As is the case for all employees, nurses' job satisfaction increases when their environment-work promotes the development of social relationships and when they are encouraged to actively participating the process of decision-making. Therefore, managers have opted to modify the traditional hierarchical organizational structure in favor of a more networked health care organization. Their style of leadership has also changed from the former transactional style to the preferable transformational style, which nurses rate highly (Alshahrani & Baig, 2016).

Health care is a crucial sector in Saudi Arabia, and the kingdom has numerous hospitals in almost all of its districts. Saudi Arabian health care organizations have put a lot of effort into managing the environment-work given its impact on nursing professionals' job satisfaction. This study evaluated the effect of working environment on the job satisfaction of nurses working in Riyadh, Saudi Arabia.

1.2 Goals and Objectives of the Research

This investigation aimed to determine the connection between working environment and nurses' job satisfaction in the Riyadh region, Saudi Arabia.

Specifically, this study sought to:

- determine the nurses' perceptions of their working environment
- identify the extent of the nurses' job satisfaction
- determine if there is a significant relationship between working environment and nurses' job satisfaction.

1.3 Research Questions

The study specifically sought the answers to the following questions:

- What is the perception of the nurses working in Riyadh region towards their working environment?
- What is the perception level of nurses towards their work satisfaction?
- How does work environment relate with work satisfaction of the nurses?





1.4 Study's Significance

A conducive working environment for nurses ensures that their values, needs, expectations, and sense of belonging are met. This type of environment is very important because it ensures that nurses realize their goals regarding both their health as well as the health of their patients (Al-Aameri, 2000). Health is a very significant issue given that in most cases it is the difference between life and death. This significance is also noted by The Institute of Oncology, which states that nursing leaders' and managers' working environments are important determiners of the quality of nursing care (Karadag et al., 2004). This current study is significant as shown by the fact that in 2007, the International Community of Nurses chose "Positive Implementation—Working Environment" as their theme, while the previous year, the theme was "Safe Environment, Safe Employment." The working environment affects nurse leaders' and managers' job satisfaction regarding issues, such as access to workplace empowerment initiatives, hospital resources, nurses' involvement in decision-making with nurse leaders and managers, and the ease of accessing nurse leaders and managers. The study is also significant in detailing how to keep and retain professional and adept nurses, who are key to the provision of safe and efficient medical care. The framing of health policies by nurse leaders and managers relies on information from this study, and they should be equipped with this information so that they can provide a supportive working environment that facilitates high job satisfaction.

1.5 Definition of Terms

Working environment - this refers to the workplace where nursing professionals render their services. It is a setting where several different types of health care professionals, such as nurses, nurse managers, physicians, and pharmacists, work together to deliver patient care.

Job satisfaction - in this study, this refers to the nursing staff's feeling of fulfillment and motivation to do their job. This occurs when they can work comfortably without encountering any problems.

Nurses - these are health care professionals who have direct and long-term contact with patients. They perform duties, such as caring for patients, recording and keeping track of patients' medicines, assisting the physicians, and checking patients' vital signs.

Hospital affairs - in this study, this refers to the activities done within the hospital with the involvement of health care professionals.

Collegial relations - in this study, this refers to the relationships established between nurses and nurse managers. This is often described as health care professionals who work harmoniously together.

CHAPTER 2

LITERATURE REVIEW AND FRAMEWORK

2.1 Related Literature and Studies

Numerous studies have been undertaken around the world examining the environment-work effect on job satisfaction. This is after the realization that there is a positive link between a conducive working environment and the satisfaction people have in their jobs. Buhai, Cottini, and Nielsey (2008) (as cited in Raziq & Maulabakhsh, 2015) argued that an organization can easily cause an incremental increase in its total productivity by improving the internal climate (physical dimensions) of its working environment. This study from Denmark attests to the positive effect that a conducive environment has on a firm's productivity.

Agbozo et al., (2017) analyzed the effect of working environment on job satisfaction. They reported that the working environment is important for keeping workers motivated for their tasks, and they subdivided the working environment into three forms: the physical, the psychological, and the social working environments. They stated that the physical working environment is the tangible or physical parts of where people work, and it affects the interactions between workers. Examples of the physical environment are the lighting, noise levels, floor plan, and color scheme. They stated that the psychological working environment includes the moods, emotions, affective disorders, and behaviors that affect stress, cooperation, conflict, and depression, which all impact job satisfaction. They defined the





social working environment as the communication styles and levels of interactions between coworkers, employees, and employers.

Ramli (2019) affirmed that the working environment is everything that surrounds a working individual; it, therefore, has an effect on how this working individual performs their duties, tasks, and responsibilities. He further added that the working environment has a lasting affecting on an individual's performance (for example, a dissatisfied employee might make more errors) and determines how long the employee stays at the organization. These findings concurred with Leblebici's (2012), who stated that improving working conditions reduces the number of complaints and cases of absenteeism. He found that people who performed their duties in uncomfortable working conditions made more errors, were more frequently absent, and had a below-standard level of turnover. This shows that the workers were not satisfied and demonstrates a distinct causal link between working environment and job satisfaction.

A case study of the Greek public sector showed the effect of working environment on job satisfaction. This research analyzed Greek workers' satisfaction with their working environment during 2018, a year of financial crisis. The data, gathered via the Minnesota Satisfaction Questionnaire, found that external work conditions affected job satisfaction more than exogenous conditions (Karamanis, Nikolaos, & Paraskevi, 2019). Similarly, Kaiser (2014) conducted a comprehensive study of German civil servants' job satisfaction. The sample used by Lutz Faiser was 47.7% of an average city's civil servants, which is roughly 417 employees. Kaiser found that external factors, like minimal autonomy at work, the lack of an evaluation interview, and challenges in transferring qualifications, negatively impacted job satisfaction. Endogenous factors, like contact with members of the public, were found to positively impact job satisfaction. This supports the notion that working conditions affect job satisfaction.

Another study by Jung, Moon, and Hahm (2007) examined salary, work content, job security, communication and human relations, working environment, and personal development as the six causes of job satisfaction among Koreans. The study found that South Korean civil servants were moderately satisfied with their working environment, communication, and work content but less satisfied with their personal development and salary. Sell and Cleal (2011) brought a new angle to the issue of job satisfaction by integrating working environment variables with economic variables to conduct their study examining how employees react to dangerous working environments with significant financial benefits and, conversely, to non-hazardous environments with low pay. The study was quite conclusive: it found that various working and psychosocial environment variables had non connection on job satisfaction. The investigation also noted that increments of accrued benefits did not positively affect dissatisfied employees' levels of job satisfaction.

Bakotic and Babic (2013) analyzed the effect of working conditions on the complex concept of job satisfaction by carrying out empirical research at a shipbuilding company in Croatia. They concluded that working conditions are an important factor for workers toiling in challenging working conditions. These workers did not experience high levels of job satisfaction due to their strenuous working environment. Their managers needed to improve the overall working environment in order to raise the workers' job satisfaction to that of workers operating in normal working environments.

Chandrasekar (2011) attested that the working environment can both positively and negatively impact employees' productivity, job satisfaction, engagement, and morale. He believed that employees who perform their set duties not safe and not healthy working environments are likely to acquire occupational health conditions, significantly affecting their results and productivity. Chandrasekar noted that the relationship between working environment and job satisfaction is integral because a working environment where employees enjoy job satisfaction is more productive and profitable.

A research in assessing the connection between job satisfaction, motivation, and the working environment among private school teachers in Lahore, Pakistan also supports the assertion that working environment positively affects job satisfaction (Saeed & Nasir, 2016). The study used standardized questionnaires completed by 300 private school teachers and found that the working environment motivated the teachers and that motivation subsequently translated to job satisfaction.

An earlier piece of research by Al-Ahmadi (2002) found moderate levels of job satisfaction among employees at Ministry of Health hospitals in Riyadh, Saudi Arabia. In this study, 360 nurses responded to a modified version of





the "Minnesota Job Satisfaction Questionnaire". The study found that perceptions of the working environment were an important determinant of job satisfaction.

In the study by Alshahrani and Baig (2016) reporting to eight nurse leaders responded to the "Multifactor Leadership Questionnaire and Job Satisfaction Survey". The variables were the transactional style of leadership and the transformational style of leadership. The study found that staff nurses' job satisfaction increased when nurse leaders employed the transformational style of leadership. Therefore, it is very important that nurse leaders learn this leadership style. However, the study is limited in that not all aspects of the working environment are defined by the style of leadership, such as the nature of the work, fringe benefits, and pay.

In one research study, Abualrub and Alghamdi (2012) took transformational and transactional style of leadership as the variables affecting the job satisfaction of 308 Saudi nurses to determine the leadership impact styles on nurses' job satisfaction and their intention to leave. The study found that transformational leadership is important, and the authors asserted that more work is required in training and creating effective leaders.

Alharbi, Dahinten, and MacPhee (2020) explored the connection of nurses' working environment, and their intention to leave. The sample numbered 497 registered nurses employed in a major hospital in Riyadh, Saudi Arabia. The study revealed that the participation of nurses in hospital involved all three nurse outcomes, but adequacy of resources and staffing associated with job satisfaction and burnout but not the intention of leaving. The only limitation of the study was that the three outcomes could not account for the nursing initiative for better quality health care.

Alkassabi et al. (2018) examined satisfaction towards work among physiotherapists working Saudi Arabia. The participants were 69 licensed physical therapists actively practicing in the kingdom. The variables were job satisfaction and perceptions of style of leadership, and the study concluded that style of leadership was essential to the physiotherapists' job satisfaction. The study's limitation was that it compared different subspecialties of physiotherapy.

A 2015 study by Abdelhafiz, Alloubani, and Almatari (2015) took as its sample of hospitals Ministry of Health hospitals in different locations in Jordan. The variables were transformational leadership, and passive-avoidant leadership, and transactional leadership. The study revealed that the nursing staff in the private hospitals had a job satisfaction level; the scoring for transformational leadership and job work satisfaction (r = 0.374**) showed that they had a positive relationship, indicating that transformational leadership increased the nurses' job satisfaction. However, the study considered style of leadership as the only way nurse managers interacted with nurses.

The above literature demonstrates that a conducive environment-working condition not only for health care professionals but for other workers as well, improves productivity and satisfaction at work. The literature shows that improving physical working conditions helps reduce the volume of complaints and staff absenteeism. Therefore, it is important to explore this matter further to better understand how nursing administrators can provide optimal work environments for nursing professionals.

2.2. Gap in the Literature

The earlier studies which established that work environment is an important determinant of work satisfaction offer insight into how Ministry of Health hospitals in Riyadh are managed. Although there are recent studies that were conducted regarding the work environment in Saudi Arabia, most of it focused on its relationship to emotional exhaustion, job satisfaction, and intent to leave among nurses. There are limited studies that only focused on the two variables such as the relationship of working environment and the work satisfaction among nursing professionals. Therefore, this current investigation fills a gap in several literatures by further examining how the working environment impacts nurses in Riyadh, Saudi Arabia.

2.3 Conceptual Framework

Figure 1 illustrates the study's conceptual framework. The first box on the left of the schema contains the respondents' profile, which will be correlated with their job satisfaction and perceptions of their working environment. Furthermore, the arrow from the bigger box points to the findings and implications that lead to the study's ultimate aim—producing empowered workplaces, supporting positive outcomes.





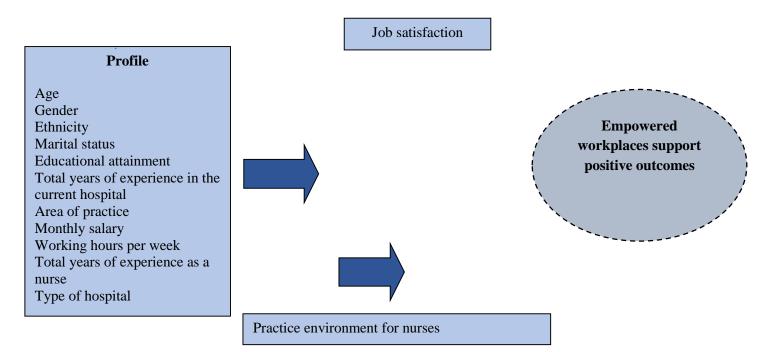


Figure 1 The Conceptual Framework of the Study

2.4 Theoretical Framework of the study

The investigation is first section in the two-factor theory developed by Frederick Herzberg (1959). The theory asserts that in a workplace, some factors create job satisfaction, while other factors can cause dissatisfaction. According to Herzberg, an individual does not only look to fulfil their lower-level needs; they also seek to fulfil grander psychological needs, such as high achievement, responsibility, recognition, and advancement. This is similar to "Maslow's hierarchy of needs": the only difference is that Herzberg added the two-factor model. The two-factor model of motivation means there is a set of characteristics that causes satisfaction and another set of characteristics that leads to dissatisfaction at work. This theory is one of the bases of perspective for the current study since the working environment can affect nurses either positively or negatively.

The second theoretical basis for the current study is "Maslow's hierarchy of needs", proposed in 1943. It is founded on the assumption that an individual has a hierarchy of needs, ranging from the basic/lower level to higher needs, and the individual is motivated to achieve the second level in the hierarchy to meet their unsatisfied needs. This is one of the bases for the current study because nurse managers must give the nursing staff adequate remuneration to accommodate their basic needs in life. The nursing administration is also expected to assure the nursing staff's safety in the workplace. Social relations between the management and staff meet the nurses' social needs, and harmonious relationships and teamwork should be encouraged to achieve common goals. Rewards, appreciation, and lastly, opportunities for the nursing staff to grow are also nursing staff needs that require fulfilment to induce job satisfaction.



CHAPTER 3

RESEARCH METHODS

3.1 Research Design

The current study adopted a cross-sectional research design because it serves multiple purposes and is the most relevant design for this validation study of whether working environment affects job satisfaction. The cross-sectional study was carried out in Riyadh, Saudi Arabia.

3.2 Study Sample

3.2.1 Sampling Design

The study utilized the convenience sampling method to select the respondents. The investigation purpose was to study the effect of working environment on the job satisfaction of nursing leaders and managers from Majmaah General Hospital, Shaqra General Hospital, Afif General Hospital, Zulfi General Hospital, and Al Dawadmi General Hospital (all in Saudi Arabia). The research data were gathered from the population under investigation using questionnaires.

3.2.2 Sample Size

The researcher selected 500 nurses from the five chosen hospitals in Riyadh, Saudi Arabia. This figure was obtained by determining the total population of the five selected hospitals. By using a sample size calculator available online, the researcher determined the required sample size for this study, and the information were collected from this sample population. The selected respondents represented all the nurses currently working in Riyadh, Saudi Arabia.

3.2.3 Inclusion Criteria

The sole criterion for inclusion in this study and the basis for selecting respondents was that they were nurses registered with the Saudi Health Commission.

3.2.4 Exclusion Criteria

There was no particular exclusion criteria, other than working outside the Riyadh region.

3.3. Research Instruments

The first part of the questionnaire asked about the respondents' sociodemographic characteristics and was used to gather information about the sample population. It asked the participants about their gender, education, position, age, years of experience, and area of practice, enabling the researcher to describe the demographic profile of the sample population.

The "Minnesota Satisfaction Questionnaire" was the data collection instrument. The short form consists of 20 items, and each item pertains to a reinforcer in the working environment. The items were rated as five (*very satisfied*), four (*dissatisfied*), three (*neither*), two (*satisfied*), and one (*very satisfied*).

The "Practice Environment Scale of the Nursing Work Index" is a common instrument used to assess the nursing practice environment. This tool, according to Lake (2002), was developed from Kramer and Hafner's Nursing Work Index (1989). "The tool consists of five subscales, namely, 1) nurse participation in hospital affairs; 2) nursing foundations for quality of care; 3) nurse manager, ability, leadership and support of nurses; 4) staffing and resource adequacy; and 5) collegial nurse—physician relations". This tool allowed the researcher to determine the effect of the practice environment on the outcomes for the nurses and their patients.





3.4 Data Collection

The researcher initially sent letters to seek prior permission from the chief nurses at the hospitals where the data were collected. Informed written consent to participate and have their information published was obtained from the volunteers. The respondents were explained individually about the study purpose and how the data would be treated. After the necessary introductions, the data were then collected via a SurveyMonkey online link that gathered the respondents' views and analyzed them into reliable data.

3.5 Data Analysis

The researcher collected all the data from the questionnaires given to the respondents. The data received were recorded and coded into tables using Microsoft Excel. The numerical information was then analyzed in comparison with former studies and research. The data were presented using percentages and frequency distribution for the respondents' demographic characteristics. Descriptive statistics, such as the mean, were used to describe the nurses' perceptions of their working environment and job satisfaction. Pearson's product moment of correlations was also used to test for a significant relationship between working environment and job satisfaction.

Normality Test

As shown in Table below, the "one-sample Kolmogorov–Smirnov test" was conducted to test the normality of the data distribution. Neither variables were normally distributed ($p \le 0.05$). As a result, nonparametric tests (the Mann–Whitney U test, the Kruskal–Wallis test, and Spearman's rank correlation) were considered.

Table 0 One-Sample Kolmogorov-Smirnov Test (N=500)

	Work environment	Job satisfaction			
Kolmogorov-Smirnov Z	3.877***	3.967***			
Asymp. Sig. (2-tailed)	0.000	0.000			
* p \le 0.05, ** p \le 0.01, *** p \le 0.001					

3.6 Ethical Considerations

The research paid special attention to ethical considerations by ensuring that the information acquired from the hospitals in Riyadh, Saudi Arabia remains confidential, anonymous, and inaccessible to outside people. To ascertain that the study followed the university's ethical standards for conducting research, the researcher also submitted an application to the University Institutional Review Board. Moreover, the researcher emphasized consent to ensure that the respondents voluntarily participated in the study.





CHAPTER 4 RESULTS

4.1 Demographic Profile

As shown in Table 1, a total of 500 health care employees participated in the study, 67% of whom were male, 25.8% were female, while 5.2% did not want to disclose their gender. Regarding the sample's education, 68.4% held a bachelor's degree, 26.4% a diploma, and 5.2% a postgraduate qualification. The sample was drawn from five hospitals, with the largest proportion (32.8%) working at Aldwadmi Hospital. Most of the respondents (85.6%) were nurses. In total, 55.6% of the respondents reported problems managing their family life due to workload. The average age of the respondents was 36.71 years (\pm 6.05), while the average years of nursing experience was 11.71 (\pm 6.30).

Table 1 Demographic and work-related characteristics (N=500)

Factor		N(%) M±SD
	Male	335(67%)
Gender	Female	129(25.8%)
	Do not want to disclose	36(7.2%)
	Diploma	132(26.4%)
Education	Bachelor	342(68.4%)
	Postgraduate	26(5.2%)
	Afif hospital	67(13.4%)
	Shaqraa hospital	80(16%)
Area of practice	Aldwadmi hospital	164(32.8%)
	Almajmaah hospital	117(23.4%)
	Alzilfi hosptial	72(14.4%)
	Head nurse	28(5.6%)
Position	Nursing supervisor	44(8.8%)
	Nurse	428(85.6%)
facing problem in managing	No	222(44.4%)
family life due to work load	Yes	278(55.6%)
Age		36.71±6.05
Experience		11.71±6.30

4.2 Descriptive Analysis of the Working Environment Scale

As shown in Table 2, the scale features 31 items measured using a 10-point Likert scale. The mean score of the scale achieved a moderate level of $6.22 \,(\pm 1.49)$. Item 31, "use of nursing diagnoses," achieved the highest mean score with a moderate level of $6.40 \,(\pm 1.76)$, while Item 9, "enough registered nurses (nurses with bachelor's degrees) to provide quality patient care," had the lowest mean score with a moderate level of $6.07 \,(\pm 1.87)$. In conclusion, the Working Environment Sale showed the nurses in the Riyadh region had moderate perceptions of their working environments.





Table 2 Work environment (N=500)

Statement	M±SD
91. "Adequate support services allow me to spend to spend time with my patients (support services such as nurses' aides unit assistants patients escort transport of test samples to the lab,etc)"	6.22±1.84
2. "Physicians and nurses have good working relationships"	6.21±1.84
3. "A supervisory staff that is supportive of the nurses(supervisory staff such as: shift nurse in charge, nurse manager, nurse administrators and supervisors)."	6.27±1.85
4. "Active staff development or continuing education programs for nurses"	6.16±1.83
5. "Career development/clinical ladder opportunity."	6.13±1.84
6. "Opportunity for staff nurses to participate in policy decisions (policies such as overtime policies, patient to nurse ratio, and safety protocols,etc)."	6.13±1.86
7. "Supervisors use mistakes as learning opportunities, not criticism."	6.19±1.82
8. "Enough time and opportunity to discuss patient care problems with other nurses."	6.13±1.83
9. "Enough registered nurses (nurses with bachelordegree) to provide quality patient care."	6.07±1.87
10. "A nurse manager who is a good manager and leader"	6.23±1.76
11. "A chief nursing officer who is highly visible and accessible to staff."	6.32±1.82
12. "Enough staff to get the work done."	6.16±1.85
13. "Praise and recognition for a job well done"	6.21±1.83
14. "High standards of nursing care are expected by the administration"	6.26±1.75
15. "A chief nursing officer equal in power and authority to other top level hospital executives"	6.18±1.77
16. "A lot of teamwork between nurses and physicians"	6.29±1.77
17. "There are opportunities for advancement"	6.19±1.77
18. "A clear philosophy of nursing that pervades the patient care environment (Philosophy of nursing means: a mission, vision, and a guide of principles for the delivery of nursing services)"	6.17±1.80
19. "Working with nurses who are clinically competent"	6.31±1.74
20. "A nurse manager who backs up the nursing staff indecision making, even if the conflict is with a physician(nurse manager)"	6.23±1.78
21. "Administration that listens and responds to employee concern"	6.16±1.81
22. "An active quality assurance program"	6.23±1.79
23. "Staff nurses are involved in the internal governance of the hospital (e.g., practice and policy committees)"	6.21±1.77
24. "Collaboration (joint practice) between nurses and physicians."	6.29±1.79
25. "There is a preceptor program for newly hired registered nurses"	6.20±1.78
26. "Nursing care is based on a nursing, rather than a medical, model"	6.28±1.74
27. "Staff nurses have the opportunity to serve on hospital and nursing committees" "	6.29±1.78
28. "Nursing administrators consult with staff on daily problems and procedures"	6.22±1.74
29. "Written, up-to-date nursing care plans for all patients"	6.31±1.78
30. "Patient care assignments that foster continuity of care,i.e., the same nurse cares for the patient from one day to the next"	6.28±1.78
31. "Use of nursing diagnoses	6.40±1.76
Average	6.22±1.49





4.3 Descriptive Analysis of the Job Satisfaction Scale

As shown in Table 3, the scale features 31 items measured using a 10-point Likert scale. The mean score of the scale achieved a moderate level of $7.52 (\pm 1.88)$. Item 14, "the chance of promotion," achieved the highest mean score with a moderate level of $7.83 (\pm 2.25)$, while Item 3, "the chance to do different things from time to time," had the lowest mean score with a moderate level of $7.40 (\pm 1.98)$. In sum, the Job Satisfaction Scale showed a moderate level of job satisfaction among nurses in the Riyadh region.

Table 3 Job satisfaction (N=500)

Statement	M±SD		
1. "Being able to keep busy all the time"	7.49±2.02		
2. "The chance to work alone on the job"	7.45±1.95		
3. "The chance to do different things from time to time"	7.40±1.98		
4. "The chance to be "somebody" in the community"	7.49±2.15		
5. "The way my boss handles his/her workers"	7.49±2.10		
6. "The competence of my supervisor in making decisions"	7.50±2.05		
7. "Being able to do things that don't go against my conscience"	7.53±2.15		
8. "The way my job provides for steady employment"	7.51±2.06		
9. "The chance to do things for other people"	7.57±2.07		
10. "The chance to tell people what to do"	7.59±2.13		
11. "The chance to do something that makes use of my abilities"	7.66±2.14		
12. "The way company policies are put into practice"	7.53±2.13		
13. "My pay and the amount of work I do"	7.49±2.05		
14. "The chance of the promotion"	7.83±2.25		
15. "The freedom to use my own judgment"	7.42±2.06		
16. "The chance to try my own methods of doing the job"	7.46±2.16		
17. "The working conditions"	7.45±2.16		
18. "The way my co-workers get along with each other"	7.54±2.07		
19. "The praise I get for doing a good job"	7.40±2.10		
20. "The feeling of accomplishment I get from the job"	7.56±2.06		
Average			





4.4 Relationship Between Working Environment and Job Satisfaction

As shown in Table 4, the relationship between working environment and job satisfaction was conducted using Spearman's rank correlation. There was a significant moderate positive correlation (r = 0.55, $p \le 0.05$). See Figure 2.

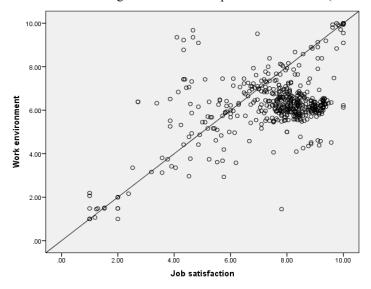


Figure 2 The relationship between Work environment and job satisfaction

4.5 Distribution of Working Environment and Job Satisfaction in Terms of Demographic and Work-Related Characteristics

As shown in Table 5, a Mann–Whitney U test, the Kruskal–Wallis test, and Spearman's rank correlation were considered to present the distribution of working environment and job satisfaction in terms of demographic and work-related characteristics.

1. Working environment

The Kruskal–Wallis test revealed significant differences in perceptions of working environment in terms of position $(X^2 = 12.15, p \le 0.01 = 0.002)$, with nursing supervisors recording the highest median score (MD = 347.47).

A Mann–Whitney U test revealed significant differences in perceptions of working environment in terms of facing problems (U = 27284, $p \le 0.05 = 0.03$), in favor of those who did not face problems (MD = 266.60).

2. **Job satisfaction**

The Kruskal–Wallis test revealed significant differences in job satisfaction in terms of gender ($X^2 = 18.70$, $p \le 0.001$). Those who did not want to disclose their gender recorded the highest median score (MD = 390.54).

The Kruskal–Wallis test revealed significant differences in job satisfaction in terms of education ($X^2 = 37.001$, $p \le 0.001$). Diploma holders recorded the highest median score (MD = 279.91).

The Kruskal–Wallis test revealed significant differences in job satisfaction in terms of area of practice ($X^2 = 30.38$, $p \le 0.001$). Those employed at Aldwadmi Hospital recorded the highest median score (MD = 288.74).

The Kruskal–Wallis test revealed significant differences in job satisfaction in terms of position ($X^2 = 26.74$, $p \le 0.001$), with nurses recording the highest median score (MD = 263.60).

A Mann–Whitney U test revealed significant differences in job satisfaction in terms of facing problems (U = 25017.50, $p \le 0.001$). Those who did not face problems had the highest median score (MD = 276.81).

Spearman's rank correlation indicated a significantly positive low relationship between job satisfaction and experience (r = 0.11, $p \le 0.05=0.02$); thus, staff with more experience had higher levels of job satisfaction.





Table 4 The distribution of Work environment and job satisfaction in term of demographic and work-related characteristics (N=500).

Factor		Work environment		job satisfaction		
		MD	Statistic/p value	MD	Statistic/p value	
	Male	255.52		242.71	X²=37.001***/≤0.001	
Gender	Female	252.61	$X^2=5.51/0.06$	231.66		
	Do not want to disclose	196.25	25			
Education	Diploma	253.49		279.91	X²=18.70***/≤0.001	
	Bachelor	245.73	$X^2=3.25/0.20$	246.92		
	Postgraduate	298.06		148.29		
	Afif hospital	260.06		261.23	X²=30.38***/≤0.001	
	Shaqraa hospital	236.13		264.50		
Are of practice	Aldwadmi hospital	269.43	$X^2=6.17/0.19$	288.74		
	Almajmaah hospital	230.63		199.01		
	Alzilfi hosptial	246.74		221.51	1	
	Head nurse	342.89		140.30		
Position	Nursing supervisor	247.41	$X^2=12.15**/0.002$	193.17	$X^2 = 26.74***/\leq 0.001$	
	Nurse	244.77		263.60	1	
Facing problem in	No	266.60		276.81		
managing family life due to work load	Yes	237.64	<i>U</i> =27284*/0.03	229.49	<i>U</i> =25017.50***/≤0.001	
	Age		r=0.08/0.07		r=0.02/0.64	
Experience			r=0.06/0.16		r=0.11*/0.02	

* p \le 0.05, **p \le 0.01, ***p \le 0.001

Keys:

U= A Mann Whitney U test

 X^2 = Kruskal Wallis

r= Spearman correlation





Chapter 5

DISCUSSION AND CONCLUSION

5.1 Summary of Findings

The sample had moderate perceptions of their working environments at the selected hospitals in the Riyadh region. Overall, the nurses' level of job satisfaction was also moderate. There was a significant moderate positive correlation between working environment and job satisfaction. Nursing supervisors and those who did not face problems had higher perceptions of their working environments.

Respondents who did not want to disclose their gender, diploma holders, those assigned to Aldwadmi Hospital, nurses, and repsondents who did not face problems had higher levels of job satisfaction. There was a significant positive low relationship between job satisfaction and experience; thus, more experienced staff had greater job satisfaction.

5.2 Discussion

The study explored the working environment and job satisfaction of health care professionals working in selected hospitals in the Riyadh region. The participants were predominantly male nurses (67% of the sample population), while the rest were female, and some did not want to disclose their gender. The majority of the participants were nurses and had bachelor's degrees as their highest level of education. More than half the sample reported that they faced problems managing their family life due to workload. The respondents' average age was 36.71 years (\pm 6.05), meaning that the participants were most likely in their mid-thirties, while the average years of experience was 11.71 (\pm 6.30), meaning that most of the participants had more than 10 years' nursing experience.

The findings revealed that the repsondents rated the working environment at the selected hospitals in the Riyadh region as moderate (6.22 ± 1.49) . This result is reasonable because the health care professionals in this study reported that they have adequate support services that permitted them to spend more time with their patients. Furthermore, the health care professionals reported moderate working relationships with their colleagues. Good relationships with colleagues suggest that the health care professionals' working environments were positive and harmonious. Moreover, the participants reported that the nurse managers were good, listened to staff concerns, and recognized the staff's efforts. This result implies that it is important to create a positive and supportive environment in order to increase the quality of care, and maintaining good colleague relationships can contribute to a healthy working environment (Persson et al., 2018).

Conversely, the item regarding having enough registered nurses received the lowest mean score, possibly because the selected hospitals were experiencing a moderate shortage of nursing staff at the time. This is probably why the working environment at the hospitals was only rated moderate—because it is neutralized by the challenges of practice in Saudi Arabia. In fact, staff shortages is one of the challenges encountered in nursing practice (Alsufyani et al., 2020). This shortage could be one of the reasons why the health care professionals' perceptions of their working environment is not higher. This result from the current study is congruent with previous studies conducted in Saudi Arabia, which showed that nurses perceived their hospital working environments as moderate (AlMoosa et al., 2020; Almuhsen, 2019; Alsufyani et al., 2021). This calls for attention from the health care institutions in Saudi Arabia to improve the working environment.

The current study also found that the nurses had a moderate level of job satisfaction (7.52 ± 1.88) . The respondents reported that they were given the chance for promotion. Nurses probably felt moderately satisfied in their work because they have the chance to professionally develop. In fact, previous studies have shown that there is a relationship between continuous professional development and nurses' job satisfaction (Hariyati & Safril, 2017). This indicates that the more nurses professionally advance, the greater their satisfaction. Furthermore, the respondents reported that they were given the chance to make use of their abilities, tell people what to do, and work autonomously. It seems that the respondents were given leeway to perform their roles at their own pace and according to their own strategy. Maybe because their nurse managers use transformational type of leadership which was proved to yield positive and satisfied results from the nursing staff which strengthens the result of the study (Alzahrani & Hasan, 2019). This finding corroborates the results of studies previously conducted in Saudi Arabia, which reported that nurses feel moderate satisfaction at work (Abualrub & Alghamdi, 2012; Alshahrani & Baig, 2016). However, other previous studies have shown higher and lower levels of satisfaction, such as the studies by Aljohani (2019) and Halawani et al. (2021). The difference in the results is probably attributed to the difference in the sample populations





used and the selected settings. Every nursing professional has a different perception because their experiences are subjective in nature, which probably caused the discrepancies in the results. Thus, it is important to conduct studies using a wide sample population to determine general views on health care professionals' job satisfaction.

Another major finding indicated a moderate and affirmative correlation between working environment and job satisfaction (r = 0.55, $p \le 0.05$). Working environment plays a vital role in achieving and maintaining health care professionals' job satisfaction. The current study's result indicates that the type of working environment influences job satisfaction, which means that health care administrators should consider this aspect of their health care institution. This finding is supported by other studies, which found a relationship between working environment and staff job satisfaction (Lin et al., 2020; Raziq & Maulabakhsh, 2015; Taheri et al., 2020). With the current challenges facing health care professionals, it is imperative to create a good working environment because it increases the staff's loyalty, efficiency, productivity, and level of commitment (Raziq & Maulabakhsh, 2015). In fact, studies have proved that employees operating in uncomfortable working environments are more likely to commit errors, more prone to absenteeism, and more likely to plan to leave their job (Leblebici, 2012). To avoid future risks and repercussions brought about by dissatisfied nursing professionals, it is best to establish a friendlier and more conducive work environment because the working environment has been shown to directly impact nurses' job satisfaction.

The results also revealed that nursing supervisors and those health care professionals who did not face problems had higher perceptions of their working environments. The managers, head nurses, and nurses are not in agreement when it comes to their perceptions of their working environment. One study has shown that managers rated the working environment higher than the staff (Gormley, 2011). Furthermore, it is logical that those who did not encounter any problems at work had higher perceptions of their working environment because it indicates that their current working conditions are healthy.

In addition, those who did not want to disclose their gender, diploma holders, those assigned to Aldwami Hospital, nurses, and those who did not face problems had higher levels of job satisfaction. Among the health care professionals included in this study, nurses had greater job satisfaction. However, previous studies have shown that nurse managers and those with higher educational attainment have greater job satisfaction than those with lower educational qualifications. The finding of this current study could be because the majority of the participants were assigned to nursing positions, which could have affected the results (Lorber & Savic, 2012; Rajabpour et al., 2019).

Lastly, the findings revealed a significant positive low relationship between job satisfaction and experience $(r = 0.11, p \le 0.05 = 0.02)$; thus, more experienced health care staff had greater job satisfaction. This is probably because nursing professionals with 11 years' or more experience (as based on this study's sample's average years of experience) have had time to become accustomed to the work. Most likely, the nursing staff already know how to handle situations and processes at work, which could lead to higher job satisfaction.

5.3 Limitations of the Study

The primary limitation of this study is that it focused on nurses working in Riyadh, Saudi Arabia. In addition, the use of the convenience sampling method to select the study's sample could mean that the results are not applicable to the entire population of nurses in the Kingdom of Saudi Arabia. Furthermore, the study focused on nursing professionals, so the results may not be generalizable to other health care professionals. The cross-sectional nature of the study may also limit the generalizability of the results and the conclusions drawn. Moreover, the survey questionnaires may have exposed the participants to recall bias since they were asked to recall their past experiences regarding their jobs; respondents may recall inaccurately, potentially influencing the results.

5.4 Conclusion

The findings of the study indicate that nurses enjoy more job satisfaction when they feel that their working environment allows them to work optimally. These likely results in the professionals being more motivated, leading to higher quality care. Maintaining work environment within health care institutions in order to produce increase satisfaction level of the nurses is essential as they are proved to be correlated with one another. Therefore, policymakers in health care institutions in the Riyadh region needs to take action in order to improve the working environment and, consequently, nurses' levels of job satisfaction.





5.5 Recommendations

In order to maintain a positive work environment and satisfied health care professionals, the following recommendations are formulated for consideration:

- 1. Reevaluate the number of nursing staff needed to check whether there is a shortage of working staff. Staff shortages could be one of the reasons why a healthy working environment is eluded. Administrators must consider checking this element.
- 2. Employ strategies and programs that could help establish friendlier and more conducive working environments in order to produce more satisfied health care professionals, especially nursing professionals who hold managerial positions.
- 3. Create and encourage good relationships with colleagues because these are an important contributing factor to a healthy working environment.
- 4. Future studies on this topic should sample a wide population to determine health care professionals' general satisfaction levels and perceptions of their working environments.





References

- Abdelhafiz, I. M., Alloubani, A. M., & Almatari, M. (2015). Impact of leadership styles adopted by head nurses on job satisfaction: a comparative study between governmental and private hospitals in Jordan. *Journal of Nursing Management*, 24(3), 384-392.
- Abualrub, R. F., & Alghamdi, M. G. (2012). The impact of leadership styles on nurses' satisfaction and intention to stay among Saudi nurses. *Journal of Nursing Management 20*, 668-678.
- Agbozo, G. K., Owusu, I. S., Hoedoafia, M. A., & Atakorah, Y. B. (2017). The Effect of Work Environment on Job Satisfaction: Evidence from the Banking Sector in Ghana. *Journal of Human Resource Management* 5(1), 12-18.
- Al-Aameri, A. S. (2000). Job satisfaction and organizational commitment for nurses. *Saudi Medical Journal*, 21(6), 531-535.
- Al-Ahmadi, H. A. (2002). Job satisfaction of nurses in Ministry of Health Hospitals in Riyadh, Saudi Arabia. *Saudi Medical Journal* 23(6), 645-650.
- Alharbi, A. A., Dahinten, V. S., & MacPhee, M. (2020). The relationships between nurses' work environments and emotional exhaustion, job satisfaction, and intent to leave among nurses in Saudi Arabia. *Journal of Advanced Nursing* 76(11), 3026-3038.
- Ali, W. (2016). Understanding the Concept of Job Satisfaction, Measurements, Theories and its Significance in the Recent Organizational Environment: A Theoretical Framework. *Archives of Business Research 4(1)*.
- Aljohani, K.A. (2019). Nurses' job satisfaction: A multi-center study. Saudi J Health Sci. 2019; 8:167-81. Retrieved from https://www.saudijhealthsci.org/text.asp?2019/8/3/167/272446
- Alkassabi, O. Y., Al-Sobayel, H., Al-Eisa, E. S., Buragadda, S., Alghadir, A. H., & Iqbal, A. (2018). Job satisfaction among physiotherapists in Saudi Arabia: does the leadership style matter? *BMC Health Services Research* 18(1), 422.
- AlMoosa, M., Hassanein, S.E., Alnems, A., Abdrbo, A.A., Minguez, O., & Ghadheeb, F.A. (2020). Perception of nurses work environment in tertiary care hospital in Saudi Arabia. *American Journal of Nursing Science* 9(1):23-29. Doi: 10.11648/j.ajns.20200901.14
- Almuhsen, F., Alkorashy, H., Baddar, F., & Qasim, A. (2017). Work environment characteristics as perceived by nurses in Saudi Arabia. *International Journal of Advanced Nursing Studies*. 6(1): 45-55. Doi: 10.14419/ijans.v6i1.7453
- Alshahrani, F. M., & Baig, L. A. (2016). Effect of Leadership Styles on Job Satisfaction Among Critical Care Nurses in Aseer, Saudi Arabia. *Journal of the College of physicians and Surgeons Pakistan*, 26(5), 366-370.
- Alsufyani, A.M., Almalki, K.E., Alsufyani, Y.M., Aljuaid, S.M., Almutairi, A.M., Alsufyani, B.O., Alsharahni, A.S., Baker, O.G., & Aboshaiqah, A. (2021). Impact of work environment perceptions and communication satisfaction on the intention to quit: an empirical analysis of nurses in Saudi Arabia. *PeerJ* 9:e10949. Doi: 10.7717/peerj.10949
- Alzahrani, S., & Hasan, A.A. (2019). Transformational leadership style on nursing job satisfaction amongst nurses in hospital settings: findings from systematic review. *Global Journal of Health Science;* Vol. 11, No. 6; 2019.
- Bakotic, D., & Babic, T. (2013). Relationship between working conditions and job satisfaction: The case of Croatian shipbuilding company. *International journal of business and social science*, 4(2).
- Chandrasekar, K. (2011). Workplace Environment and Its Impact On Organizational Performance In Public Sector Organizations. *International Journal of Enterprise Computing and Business Systems* 1(1), 1-19.
- Gormley, D.K. (2011). Are we on the same page? Staff perceptions of work environment, quality of care and anticipated nurse turnover. *J Nurs Manag.* 2011 Jan; 19(1):33-40. Doi: 10.1111/j.1365-2834.2010.011163.x.
- Halawani, L.A., Halawani, M.A. & Beyari, G.M. (2021). Job satisfaction among Saudi healthcare workers and its impact on the quality of health services. J Family Med Prim Care. 2021. May; 10(5): 1873-1881. Doi: 10.4103/jfmpc.jfmpc_2236_20
- Hariyati, R.T.S., & Safril, S. (2017). The relationship between nurses' job satisfaction and continuing professional development. *Enferm Clin*. 2017; 27(Suppl. Part 1): 144-148
- Jung, K., Moon, M. J., & Hahm, S. D. (2007). Do Age, Gender, and Sector Affect Job Satisfaction? Results From the Korean Labor and Income Panel Data. *Review of Public Personnel Administration* 27(2), 125-146.
- Kaiser, L. (2014). Job Satisfaction and Public Service Motivation.
- Karadag, A., Unlu, H., Yavuzaslan, F., Gundogdu, F., Kav, S., Terzioglu, F., & Taskin, L. (2004). Profile of nurses working in oncology departments in Turkey. *Turkish Journal of Cancer, 34(1)*, 24-34.
- Karamanis, K., Nikolaos, A., & Paraskevi, P. (2019). IMPACT OF WORKING ENVIRONMENT ON JOB





- SATISFACTION: EVIDENCE FROM GREEK PUBLIC SECTOR. Theoretical and Empirical Researches in Urban Management; Bucharest 14 (3), 5-21.
- Lake, E.T. (2002). Development of the practice environment scale of the nursing work Index. *Research in Nursing & Health*. 2002;25(3)176-188
- Leblebici, D. (2012). Impact of workplace quality on employee's productivity: Case study of a bank in Turkey.
- Lin, C-F., Lai, F-C., Huang, W-R., Huang, C-I., Hsieh, C-J. (2020). Satisfaction with the quality nursing work environment among psychiatric nurses working in acute care general hospitals. *Journal of Nursing Research*. April 2020. Volume 28-Issue 2 –pe76. Doi: 10.1097/jnr.0000000000000350
- Lorber, M., & Savic, B.S. (2012). Job satisfaction of nurses and identifying factors of job satisfaction in Slovenian hospitals. *Croat Med J.* 2012 Jun; 53(3): 263-270
- Persson, S.S., Lindstrom, P.N., Pettersson, P., Andersson, I., & Blomqvist, K. (2018). Relationships between healthcare employees and managers as a resource for well-being at work. *Society, Health & Vulnerability*. 9:1 doi: 10.1080/20021518.2018.1547035
- Rajabpour, S., Rayyani, M., & Mangolian Shahrbabaki, P. (2019). The relationship between Iranian patients' perception of holistic care and satisfaction with nursing care. *BMC Nurs.* 18, 48 (2019). Doi: 10.1186/s12912-019-0374-7
- Ramli, A. H. (2019). WORK ENVIRONMENT, JOB SATISFACTION AND EMPLOYEE PERFORMANCE IN HEALTH SERVICES. *Business and Entrepreneurial Review (BER)* 19(1):29.
- Raziq, A., & Maulabakhsh, R. (2015). Impact of working environment on job satisfaction. *Procedia Economics and Finance*, 23(2015), 717-725.
- Saeed, H. M., & Nasir, N. (2016). Work Environment on Job Satisfaction with mediating effect of Motivation among School Teachers in Lahore, Pakistan. *Journal of Management Engineering and Information Technology* 3(6).
- Sell, L., & Cleal, B. (2011). Job Satisfaction, Work Environment, and Rewards: Motivational Theory Revisited. *Labour 25(1)*, 1-23.
- Skalli, A., Theodossiou, I., & Vasileiou, E. (2008). Jobs as Lancaster goods: Facets of job satisfaction and overall job satisfaction. *The Journal of Socio-Economics* 37(5), 1906-1920.
- Taheri, R.H., Miah, S., & Kamaruzzaman, Md. (2020). Impact of working environment on job satisfaction. *European Journal of Business & Management Research*. Vol. 5, No. 6, December 2020. Doi: 10.24018/ejbmr.2020.5.6.643





Nurses' job satisfaction الاسئلة التالية عن شعورك تجاة وظيفتك الحالية فضلاً وضح درجة رضاك ، وضع علامة صح في المربع الذي يعكس رأيك.

	1	ى رايك.	الدي يعتسر	سح في المربع	الاسنلة التالية عن شعورك تجاة وظيفتك الحالية فضلاً وضح درجة رضاك ، وضع علامة ص ا اشعر به في وظيفتي الحالية تجاه	•
راض تماماً	<u>.</u>	لا أستطير التحديد	غيرراة	غير راض <i>ي</i> تماماٍ	اً ما اشعر به في وظيفتي الحالية تجاه	
<u>"</u> 3		શ	, <i>2</i> ,	<i>'</i> .		
					قدرتي على الانشغال بالعمل طوال الوقت	1
					1.Being able to keep busy all the time	
					فرصتي في ان اعمل بمفردي اثناء فترات العمل	2
					The chance to work alone on the job	_
					فرصتي في ان اعمل اشياء مختلفة من حين الى اخر	3
					The chance to do different things from time to time.	
					فرصتي في ان اكون شخصاً له اعتباره في المجتمع	4
					The chance to be "somebody" in the community.	
					الطّريقة التي يتعامل فيها مّديري مع موظفيه	5
					The way my boss handles his/her workers.	
					كفاءة رئيسي المباسر في اتخاذ القرارات	6
					The competence of my supervisor in making decisions	
					قدرتي على ان اعمل اشياء لاتتنافي مع ضميري	7
					Being able to do things that don't go against my conscience.	
					الطريقة التي توفر بها وظيفتي العمل المستقر	8
					The way my job provides for steady employment.	
					فرصتي في أن اعمل اشياء للاخرين	9
					The chance to do things for other people.	
					فرصتي في ان اخبر الناس ماذا يفعلون	10
					The chance to tell people what to do	
					فرصتي في ان استخدم قدراتي لعمل شيء مفيد	11
					The chance to do something that makes use of my abilities.	
					الطريقة التي تطبق بها الجامعة اللوائح	12
					The way company policies are put into practice.	
					راتبي وما اقوم به من عمل	13
					My pay and the amount of work I do.	
					فرص الترقية في هذه الوظيفة	14
			-		The chances for advancement on this job.	1
					الحرية في استخدام حكمي الخاص	15
					The freedom to use my own judgment فرصتى في تجرية طرقي الخاصة لتأدية العمل	1.0
					and the second s	16
					The chance to try my own methods of doing the job. بينة العمل	17
					·	17
			-		The working conditions المعنى العمل المعض في العمل المعنى الم	18
					The way my co-workers get along with each other	10
			 		The way my co-workers get along with each other الثناء الذي احصل عليه عند القيام بعمل جيد	19
					The praise I get for doing a good job.	17
					. The praise I get for doing a good job. الشعور بالانجاز اثناء العمل	20
					The feeling of accomplishment I get from the job.	20
	1	1		1	The recting of accomplishment I get from the job.	<u> </u>

For each item, please indicate the extent to which you agree that the item is PRESENT IN YOUR CURRENT JOB.





Indicate your degree of agreement by selecting the appropriate answer. الرجاء بيان رأيك فيما إذا كانت العناصر التالية متوفرة في بيئة عملك الحالية. الإجابات تتراوح بين يوافق بشدة (ان هذا العنصر متوفر) إلى معارض بشدة (أى هذا العنصر غير متوفر مطلقا في بيئة عملك الحالية. الإجابات تتراوح بين يوافق بشدة (ان هذا العنصر متوفر) إلى معارض بشدة (أى هذا العنصر غير متوفر مطلقا في بيئة عملك

- 1. Adequate support services allow me to spend to spend time with my patients (support services such as nurses' aides unit assistants patients escort transport of test samples to the lab,....etc) يوجد خدمات دعم كافية تسمح للمرضاي (خدمات الدعم مثل استقبال، عمال لنقل المرضى و لنقل عينات المختبر، الخ (المساعدات، موظفى لقضاء الوقت مع مرضاي (خدمات الدعم مثل استقبال، عمال لنقل المرضى و لنقل عينات المختبر،
- 2. Physicians and nurses have good working relationships العلاقات المهنية بين الأطباء والممرضين/ الممرضات جيدة
- 3. A supervisory staff that is supportive of the nurses(supervisory staff such as: shift nurse in charge, nurse manager, nurse administrators and supervisors). يوجد كادر إشرافي يدعم/ يساعد الممرضات- الكادر الاشرافي مثل: رئيسة الشفت، رئيسة الممرضات، إداريات و) (رؤساء التمريض
- 4. Active staff development or continuing education programs for nurses هناك برامج نشطة للتعليم المستمر و لتطوير الأداء للممرضات
- 5. Career development/clinical ladder opportunity. هناك فرص للتطور المهني و التدرج بالسلم الوظيفي
- 6. Opportunity for staff nurses to participate in policy decisions (policies such as overtime policies, patient to nurse ratio, and safety protocols,..etc). هناك فرصة للممرضات/. الممرضين للمشاركة في قر ار ات وضع السياسات (السياسات مثل قوانين عند المرضى) بالنسبة للممرضات، قوانين الأمان ساعات العمل الاضافي, قوانين عند المرضى) بالنسبة للممرضات، قوانين الأمان
- 7. Supervisors use mistakes as learning opportunities, not criticism. المشرفين/ المشرفات يستخدمون الاخطاء كفرصة للتعلم وليس لتوجيه الانتقاد
- 8. Enough time and opportunity to discuss patient care problems with other nurses. بوجد وقت كافي و فرصة لمناقشة مشاكل المعناية بالمرضى مع باقى الممرضين والممرضات
- 9. Enough registered nurses (nurses with bachelordegree) to provide quality patient care. يوجد عدد كافي من الممرضات (حملة البكالوريوس) لتقديم رعاية عالية الجودة للمرضي
- رئيس /رئيسة الممرضات هي قيادية وإدارية جيدة 10. A nurse manager who is a good manager and leader
- 11. A chief nursing officer who is highly visible and accessible to staff. رئيسة قسم التمريض متواجدة بكثرة و سهل الوصول لها من قبل الكادر التمريضي
- 12. Enough staff to get the work done. يوجد كادر كافي لإنجاز العمل المطلوب
- 13. Praise and recognition for a job well done يوجد ثناء و تقدير للأداء المتميز
- ita. High standards of nursing care are expected by the administration. تتوقع الإدارة تقديم مستوى عال من الرعاية التمريضية
- 15. A chief nursing officer equal in power and authority to other top level hospital executives. رئيسة قسم التمريض لها ينقوذ (قوة) و سلطة مساوية لما لبقية الادارات التنفيذية الموجودة بإدارة المستشفى
- 16. A lot of teamwork between nurses and physicians. هناك الكثير من العمل الجماعي بين طاقم التمريض و الأطباء
- توجد فرص للتطور والترقي . There are opportunities for advancement
- 18. A clear philosophy of nursing that pervades the patient care environment (Philosophy of nursing means: a mission, vision, and a guide of principles for the delivery of nursing services). هناك فلسفة واضحة للتمريضية و مجموعة تنظم الخدمات التمريضية التمريضية و مجموعة تنظم الخدمات التمريضية
- توجد فرصة للعمل مع ممرضين/ ممرضات ذوي كفاءات عملية. 19. Working with nurses who are clinically competent
- 20. A nurse manager who backs up the nursing staff indecision making, even if the conflict is with a physician(nurse manager) مديرة / مديرة التمريض يدعم/ يحمي قرارات موظفيه حتى و لو كانت مخالفة للأراء الأطباء



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- 21. Administration that listens and responds to employee concerns. الادارة تستمع وتستجيب لاهتمامات المشاكل الموظفين
- 22. An active quality assurance program يوجد برنامج نشط لضمان الجودة
- 23. Staff nurses are involved in the internal governance of the hospital (e.g., practice and policy committees). كادر التمريض يشارك بالإدار الداخلية للمستشفى (مثل: لجان الممارسة المهنية ولجان وضع السياسات الإدارية الإكلينيكية الخاصة بالرعاية الصحية التمريض يشارك بالإدار الداخلية للمستشفى (مثل: لجان الممارسة المهنية ولجان وضع السياسات الإدارية الإكلينيكية الخاصة بالرعاية الامنة الامنة
- 24. Collaboration (joint practice) between nurses and physicians. هناك تعاون بين فريق التمريض والأطباء
- 25. There is a preceptor program for newly hired registered nurses. يوجد للإشراف على الممرضات حديثي التعبين برنامج تدريبي
- الرعاية التمريضية مبنية على نموذج تمريضي وليس طبي . Nursing care is based on a nursing, rather than a medical, model
- 27. Staff nurses have the opportunity to serve on hospital and nursing committees الممرضين/ الممرضات لديهن الفرصة للمشاركة في لجان المستشفى ولجان التمريض
- 28. Nursing administrators consult with staff on daily problems and procedures. التمريض يستشيرون الممرضات و الممرضين بشان الإجراءات ومسؤولو المشاكل اليومية
- 29. Written, up-to-date nursing care plans for all patients. خطة الرعاية التمريضية لجميع المرضى
- 30. Patient care assignments that foster continuity of care, i.e., the same nurse cares for the patient from one day to the next. مهام رعاية المرضى توزع على الممرضات بحيث تعزز استمرارية الرعاية (مثل: الممرض نفسه يقنم الرعاية لنفس المريض من يوم (لأخر
- 31. Use of nursing diagnoses نستخدم التشخيص التمريضي





ملخص الرسالة

تقلل العديد من المنظمات والشركات من أهمية الرضا الوظيفي للموظفين ، دون إدراك أنها أصل العديد من القضايا في مكان العمل. يحتاج الموظفون إلى بيئة عمل خالية من المشتتات ، تساعدهم على ادراك إمكاناتهم ، من أجل تحقيق أهداف مؤسساتهم. أظهرت الدراسات السابقة أن عوامل بيئة العمل متعددة الجوانب – مثل المكافأة واستقلالية الموظف وساعات العمل والتواصل والعلاقة بين الموظفين أصحاب العمل – لها تأثير دائم على الرضا الوظيفي. على الرغم من الدراسات المختلفة حول بيئة العمل والحواجز الموجودة فيها ، إلا أن هناك دراسات محدودة تركز على كيفية تأثر الرضا الوظيفي للممرضين ببيئة عملهم ، خاصة في منطقة الرياض بالمملكة العربية السعودية.

حيث تم إجراء تحقيق مقطعي لتحديد العلاقة بين بيئة العمل ورضا المتخصصين في التمريض. و استخدمت هذه الدراسة أسلوب أخذ العينات العشوائية لاختيار 500 ممرض من خمسة مستشفيات مختارة في منطقة الرياض. وفي اثناء جمع البيانات ، تم إجراء استبيان باستخدام "استبيان رضا مينيسوتا ومقياس بيئة الممارسة لمؤشر عمل التمريض". و التي أظهرت أن تصورات التمريض لبيئات عملهم ورضاهم في منطقة الرياض كانت معتدلة ($6.22 \pm 6.22 \pm 7.52 \pm 1.88 \pm 1.88$ على التوالي). وكان هناك ارتباط إيجابي معتدل بين بيئة العمل والرضا الوظيفي (7.00 ± 0.05) . و بالنسبة لمشرفو التمريض وأولئك الذين لم يواجهوا مشاكل لديهم تصورات أعلى لبيئات عملهم ، في حين أن المبحوثين الذين لم يرغبوا في الإفصاح عن جنسهم ، وحاملي الدبلومات ، والمعينين في مستشفى الدوامي ، والممرضات ، وأولئك الذين لم يواجهوا مشاكل لديهم وظائف متصورة أعلى إشباع. علاوة على ذلك ، كانت هناك علاقة إيجابية منخفضة بين الرضا الوظيفي والخبرة ($7.00 \pm 0.00 \pm 0.00$

ووفقا للنتائج يتمتع التمريض برضا وظيفي أكبر عندما يشعرون أن بيئة عملهم تسمح لهم بالعمل على النحو الأمثل. كما يجب على صانعي السياسات في مؤسسات الرعاية الصحية في منطقة الرياض اتخاذ إجراءات تحسين بيئة العمل ، وبالتالي يتحسن الرضا الوظيفي للتمريض.

