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ORIGINAL ARTICLE

NURSES PROFESSIONAL SATISFACTION OF A PUBLIC HOSPITAL SATISFAÇÃO PROFISSIONAL DE ENFERMEIROS DE UM HOSPITAL PÚBLICO SATISFACCIÓN PROFESIONAL DE ENFERMEROS DE UN HOSPITAL PÚBLICO

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ABSTRACT

Objective: to analyze the Professional Satisfaction Index of nurses. **Method:** descriptive, exploratory study with a quantitative approach, performed with 47 nurses in a public hospital in Goiânia (GO), Brazil. A questionnaire was used to collect data, and then it proceeded with a descriptive analysis from the presentation in tables. **Results:** most nurses were women, with specialization, less than 5 years of work in the institution, more than one and effective job. The component considered most important to job satisfaction of nurses was the compensation and the least autonomy. **Conclusion:** the adoption of an instrument used in this study can be extended to the whole multidisciplinary team, is an alternative to the monitoring of this indicator in public health institutions, and can contribute to decision-making by hospital managers, seeking to improve the quality of care. **Descriptors:** Job Satisfaction; Nurses; Human Resource Management in Health.

RESUMO

Objetivo: analisar o Índice de Satisfação Profissional dos enfermeiros. **Método:** estudo descritivo, exploratório, com abordagem quantitativa, realizado com 47 enfermeiros em um hospital público de Goiânia (GO), Brasil. Um questionário foi aplicado para a coleta de dados; em seguida, procedeu-se com a análise descritiva a partir da apresentação em tabelas. **Resultados:** a maioria dos enfermeiros era de mulheres, com especialização, menos de 5 anos de trabalho na instituição, mais de um vínculo empregatício e efetivo. O componente considerado mais importante para a satisfação profissional dos enfermeiros foi a remuneração e o menos importante a autonomia. **Conclusão:** a adoção de um instrumento, a partir do que foi utilizado neste estudo, podendo se estender para toda a equipe multiprofissional, é uma alternativa para o acompanhamento desse indicador nas instituições de saúde pública, podendo contribuir para a tomada de decisão pelos gestores hospitalares em busca de melhoria da qualidade da assistência. **Descritores:** Satisfação no Trabalho; Enfermeiros; Administração de Recursos Humanos em Saúde.

RESUMEN

Objetivo: analizar el Índice de Satisfacción Profesional de los enfermeros. **Método:** estudio descriptivo, exploratorio, con enfoque cuantitativo, realizado con 47 enfermeros en un hospital público de Goiânia (GO), Brasil. Un cuestionario fue aplicado para la recolección de datos, en seguida, procediéndose con el análisis descriptivo a partir de la presentación en cuadros. **Resultados:** la mayoría de los enfermeros era de mujeres, con especialización, menos de 5 años de trabajo en la institución, más de un vínculo de empleo y efectivo. El componente considerado más importante para la satisfacción profesional de los enfermeros fue la remuneración, y el menos importante fue la autonomía. **Conclusión:** la adopción de un instrumento, a partir de lo que fue utilizado en este estudio, pudiendo extenderse a todo el equipo multiprofesional, es una alternativa para el acompañamiento de ese indicador en las instituciones de salud pública, pudiendo contribuir para la tomada de decisión por los gestores hospitalarios, en busca de mejoría de la calidad de la asistencia. **Descriptores:** Satisfacción en el Trabajo; Enfermeros; Administración de Recursos Humanos en Salud.

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INTRODUCTION

Professional satisfaction is an important indicator that has been valued in the evaluation of the services for improving the quality of interpersonal relationships and increased compliance in the use of the service.¹ It is based on the level of satisfaction of individuals on the current situation in their work.

The quality of health care should be considered as a dynamic, broad and comprehensive identification of intervening factors of the nursing teamwork process.

Indicators related to care and nursing services are instruments of human resources management in health and nursing, and allow the analysis of process conditions and product/service comparisons with established standards and check deviations, and the search for improvement.² Studies on satisfaction evolved much in the last 20 years and there is a range of concepts with different approaches to job satisfaction. Satisfaction is difficult to measure due to the complexity of issues and by being an attitude variable.³

Job satisfaction is the result of multiple aspects related to the work. Investigating the satisfaction of nursing staff allows diagnosis of problems to developing solutions and thus improving the quality of care.⁴

In the context of quality of care, engaging the professional satisfaction aspects is essential, as well as providing strategies that lead people to work with enthusiasm, creativity and motivation. The lack of participation, empowerment, and involvement of professionals prevents the consolidation of quality processes since it depends on efforts and individual and collective performance.

The work of nurses in a hospital involves job satisfaction that can be modified by aspects related to autonomy, interaction, professional status, organizational norms, remuneration and job requirements. This evidences should not be disregarded.⁵⁻⁶ However, it is believed that there are elements that interfere with job satisfaction, the possibility of greater interaction with the nursing staff, performing other professional activity, as well as the availability of time for personal life, among other factors.

Considering the importance of the issue and the amount still reduced of this type of study, there is the proposal to examine the professional satisfaction of nurses working in a public hospital. The results will allow the knowledge of the local Professional Satisfaction and may contribute to the

understanding of triggers of satisfaction of the nursing team and consequently to the development of strategies in the management of human resources, aimed at improving the professional satisfaction in their environment work. Therefore, improving the quality of service. Thus, this study aims to analyze the Professional Satisfaction Index of nurses.

METHOD

Descriptive, exploratory study with a cross-sectional design in a specialized hospital in the public schools of the Brazilian Midwest about Professional Satisfaction Index of nurses in a hospital with the sub-components: autonomy, interaction, professional status, work requirements, organizational standards and Compensation.

The population consisted of 47 nurses working in the hospital, representing 77% of the total. There were only nurses who worked for at least six months in the hospital included. The project followed the recommendations of the National Health Council Resolution 466/12 and was approved by the Ethics Committee of the hospital research with Protocol number. 21/12.⁷

Data collection was conducted from November 2012 to February 2013 at a previously scheduled time with the nurses. It was guided by a Professional Satisfaction Index questionnaire (ISP), translated, adapted and validated to Portuguese.⁵

The self-administered and self-explanatory instrument enabled to identify job satisfaction perceived by the subjects and the real level of job satisfaction. The first part consists of the socio-demographic investigating issues related to gender, marital status, a number of children, training time, training, professional practice time, practice time at the unit, performance other professional activity, weekly working hours and type of link.

The second stage is the questionnaire itself containing two parts. Part A, containing a list that combines the six components of job satisfaction: autonomy, interaction, professional status, work requirements, Organizational Standards and Compensation totaling 15 pairs, in which nurses choose, each pair, one considered more important to their job satisfaction. Part B consists of a scale of attitudes, Likert-type, with seven levels of agreement ranging from "disagree completely" (score 7) and "fully agreed" (score 1). There are 44 items, of which 22 are positive and 22 negative statements sentenced. They relate the extent of the current work situation with the measure of expectations for the job.

Data were entered into a database Statistical Package for Social Sciences (SPSS) version 20.0.

For the scores of Part A, an absolute frequency matrix was created and converted into a ratio matrix, resulting in a weighting component. The correction factor applied to eliminate the negative Z-score was +2.5. The final product is the importance given to each component.

In the analysis of Part B, the results were organized by components of satisfaction. Responses were reclassified to disagree, neutral, and agree to organize the frequency distribution matrices. The data were presented in tables with absolute frequency (N) and percentage (%) and analyzed using descriptive statistics. Total the score was calculated from the components and the average score, which identifies job satisfaction perceived by nurses in each of the six components.

For the adjusted component score, that is, the actual level of job satisfaction was

multiplied the weighting (Part A) by Score Average (Part B). Cronbach's alpha was used to assess the internal consistency of Part B (Attitude Scale).

RESULTS

Of the 61 nurses, 47 (77%) participated in the study, 43 (91.5%) were female and 4 (8.5%) male; 16 (34.1%) were single and 27 (57.4%) were married; 38 (80.9%) had a specialization; time training and professional performance from 1 to 5 years for 17 (36.2%) nurses from 5 to 10 years for 11 nurses (23.4%), 10 to 15 years for 11 (23.4%) nurses and 16 or more for 8 nurses (17%). The service time in the hospital is 1 to 5 years for 23 nurses (48,9%), 5 to 10 years for 15 (32%), 10 to 15 years for 5 (10.6%) and 16 or more years for 4 (8.5%) nurses; 33 (70.2%) had other employment relationship.

Table 1 shows the weighting of the ISP components from the responses obtained by nurses.

Table 1. The weighting of the ISP components of nurses from a public hospital in Goiania -GO, 2013.

Component	Weighting
Remuneration	2,7818
Organizational standards	2,6679
Job requirements	2,6564
Professional status	2,6002
Interaction	2,3498
Autonomy	1,9440

The component considered most important to job satisfaction for nurses was the Remuneration, and the least was Autonomy.

Table 2 presents the judgment of nurses obtained the ISP attitudes scales, sub-

component compensation, job status and organizational standards.

Table 2. Distribution of frequency responses, absolute and relative, obtained from the ISP Attitude Scale, sub-component compensation, job status and organizational standards by nurses of a public hospital in Goiania-GO, 2013.

Remuneration	Agree	Neutral	Disagree
1. My current salary is satisfactory.	38.2%	6.4%	55.4%
8. I have the impression that much of the nursing staff of this hospital is dissatisfied with the salary.	72.4%	12.8%	14.8%
14. Considering what is expected of nursing service personnel, the salary received in this hospital is reasonable.	42.5%	14.9%	42.6%
21. In this hospital, the current rate of wage increase in the nursing staff is not satisfactory	82.9%	10.6%	6.5%
32. From what I hear about the other hospitals nursing staff, our compensation in this hospital is fair.	53.1%	10.6%	36.3%
44. In this hospital, a salary adjustment for the nursing staff is necessary.	89.4%	6.4%	4.2%
Professional status			
2. Nursing is not widely recognized as an important profession.	80.8%	2.1%	17.1%
9. Most people recognize the importance of nursing care to inpatients.	70.2%	2.1%	27.7
11. In my mind, I have no doubt: what I do in my work is really important.	100%	-	-
27. What I do in my job does not add anything significant.	2.1%	2.1%	95.8%
34. I feel proud when I talk to others about what I do in my work.	93.6%	-	6.4%
38. If I had to decide all over again, I would still study nursing.	72.3%	2.1%	25.6%
41. My work, in particular, really does not require much skill or expertise.	-	2.1%	97.9%
Organizational standards			
5. In my hospital, the nursing team has enough control over the programming of their work shift.	55.3%	10.6%	34.1%
12. There is a wide gap between the administration of this hospital and daily nursing service problems	63.9%	10.6%	25.5%
18. In this hospital, there are not enough opportunities for nursing staff promotion	78.7%	12.8%	8.5%
25. There is a great opportunity for nursing staff to participate in the process of administrative decision-making	19.2%	6.4%	74.4%
33. In this hospital, administrative decisions interfere much in patient care.	42.6%	10.6%	46.8%
40. I have all the power you want in planning rules and procedures of this hospital and my unit	23.5%	10.6%	65.9%
42. The nursing managers refer the team to daily problems and procedures	70.2%	4.3%	25.5%

Regarding the compensation, 55.4% of nurses are not satisfied with the wages, and 72.4% agreed that much of the nursing staff of this service are dissatisfied. For 82.9% of the nurses, the wage increase rate is not satisfactory, and 89.4 consider that a wage adjustment in the institution is necessary. However, 53.1% consider that compensation is fair when compared to other hospitals.

All items related to professional status showed a high percentage of responses in one of the poles, agreement or disagreement, as 70.2% say that there is recognition of people about the importance of nursing care provided to hospitalized patients.

Regarding the Organizational Rules component, nurses demonstrated relative contradiction about the planning of nursing care. Therefore, 55.3% agreed that the

nursing staff has control over the scheduling of their work shift, but 65.9% disagreed they have autonomy in the planning of hospital rules and procedures. Differences were also found in the responses of nurses in the administration of the service, 63.9% agreed that there is a big gap between the administration of this hospital and the daily problems of nursing service and 46.8% disagreed that administrative decisions interfere in patient care.

Table 3 presents the judgment of nurses obtained the ISP attitudes scales, subcomponent of autonomy, interaction with medical staff, interaction with nursing staff and work requirements.

Table 3. Distribution of frequency responses, absolute and relative, obtained from the ISP Attitude Scale, subcomponent autonomy, with medical staff interaction, interaction with nursing staff and job requirements, by nurses in a public hospital of Goiânia-GO, 2013.

	Agree	Neutral	Disagree
Autonomy			
7. I feel I am supervised more directly ('close') than necessary.	29.8%	10.6%	59.6%
13. I feel I have enough participation in care planning for each of my patients.	70.2%	2.1%	27.7%
17. I have many responsibilities and little authority	44.8%	6.4%	48.8%
20. In my service, my boss makes all decisions. I have little direct control over my job.	27.6%	4.3%	68.1%
26. A great deal of independence is allowed, and required by me.	19.1%	29.8%	51.1%
30. Sometimes I feel frustrated because all my activities seem to be preprogrammed for me	27.6%	17%	55.4%
31. In my work, sometimes I have to do things that go against my best professional judgment.	27.6%	12.8%	59.6%
43. In my work, I have freedom to make important decisions, I consider appropriate, and I count on my boss to support me.	61.6%	14.9%	23.5%
Interaction with medical team			
6. In my unit, doctors cooperate with the nursing staff.	70.3%	10.6%	19.1%
19. In my unit, there is a lot of teamwork between nurses and medical staff.	57.4%	12.8%	29.8%
35. I would like the doctors here to show more respect for the skills and knowledge of the nursing team.	74.5%	8.5%	17%
37. The doctors of this hospital usually understand and appreciate what the nursing staff does.	51.1%	10.6%	38.3%
39. Doctors at the hospital underestimate the nursing staff.	44.7%	10.6%	44.7%
Interaction with the nursing staff			
3. In my service, the nursing staff supports and help each other "when we are very busy."	80.8%	4.3%	14.9%
10. In my unit, it is difficult for the new nurses to feel at ease.	46.9%	10.6%	42.5%
16. In my work, there is much teamwork and cooperation between the various levels of nursing staff.	78.8%	2.1%	19.1%
23. In my service, the nursing staff is not as friendly and outgoing as I would like.	31.9%	4.3%	63.8%
28. In my unit there are many "different positions": Nurses are rarely related with those less experienced or with different types of educational background.	4.2%	6.4%	89.4%
Job requirements.			
4. In this hospital, the nursing staff has a lot of administrative and bureaucratic work.	87.2%	2.1%	10.7%
15. I think I could do a better job if he had not so much to do, all the time.	76.6%	2.1%	21.3%
22. I am satisfied with the types of activities that I do in my work.	80.9%	2.1%	17%
24. I have enough time and opportunity to discuss the problems of patient care with other members of the nursing staff.	36.1%	2.1%	61.8%
29. I have enough time for direct patient care.	44.7%	6.4%	48.9%
36. I could provide a much better service if I had more time with each patient.	85.2%	4.3%	10.5%

Nurses shown to have autonomy at work since, 59.6% do not feel supervised more than necessary; 70.2% agree they have enough interest in each type of service; 68.1% disagree that they have little control over their work; 59.6% disagree that also have to do things that go against their best professional judgment, and 61.6% agree that they are free to make important decisions, with the support of management. The only negative result is 51.1% of nurses disagree that independence is permitted to professional practice, if not required by him.

Nurses realize that there are interaction and the hospital's medical staff. However, 74.5% would like the doctors showed more

respect for the skills and knowledge of the nursing staff and there was a fair division among nurses who agree and those who disagree with the doctors of this hospital underestimate the nursing staff.

Regarding the interaction between the nursing team, there was teamwork and cooperation between the hospital nursing staff and these help with increasing service demand. The big disagreement items 23 and 28 also reinforce the good interaction between the nursing staff.

As for the aspect of labor requirement, nurses point out that the administrative and paperwork takes time professional routine that could be occupied in meeting the needs

of patients. Items 4 and 15 with 87.2% and 76.6% respectively concern the high burden of administrative and bureaucratic work, among other activities, and item 36 had 85.2% of nurses agree that could pay much better service if more time had with each patient. On the organization of time for work, 61.8% of nurses reported that the time and opportunity to discuss the problems of patient care with other team members are insufficient.

DISCUSSION

The profile of nurses reveals that feminization is still a feature of nursing. Studies in Brazilian hospitals have shown that the work is carried out almost exclusively by women, due to the historical retrospective of the profession.^{8,9} Regarding marital status, some studies showed similar results and concluded that this finding may be attributed to the longevity of the professional nursing at the hospital, together with the factor remuneration, as married couples can rely on the income of the spouse, which does not occur with singles, since most of them are responsible for their maintenance.¹⁰⁻²

Regarding vocational training, there is currently a larger demand for nurses' specialized courses to complement their training in insertion attempt in the competitive health labor market.¹³ The profile of the study participants are young, with little training time, and few graduate courses, which may be related to more women to enter these courses later due to family and domestic commitments.¹⁴

The service time is consensus that the satisfaction of the nurse is decreasing over the years, especially when the weather experience does not interfere in the hierarchy and the institution plans.¹⁶

The component considered most important to job satisfaction for nurses in this study was the Remuneration and the Autonomy was the less important.

One study showed that autonomy was considered the highest real level component of job satisfaction for nurses working at night, and the remuneration was ranked fifth, which means that for this study, it exerted less influence on job satisfaction of nurses.¹⁶

Another study found that nurses were satisfied as the perceived wages and that remuneration was not considered determinant of professional dissatisfaction within an institution.³ Faced with the precariousness in the nursing profession, due to a large number of professionals in the labor market, nurses are required to exercise excessive working

hours. This factor causes them to stay longer in workplaces exposed to stress causing factors, leading to the appearance of symptoms suggestive, such as irritability, fatigue, inattention.¹⁷

The feeling of professional dissatisfaction was evident as the Professional Status component, as most agreed that nursing is not widely recognized. One study showed that 79.41% of nurses agreed that nursing is not recognized as an important profession, and 55.88% disagreed that most people recognize the importance of nursing care.¹⁸ Another study showed that nurses recognize their professional autonomy when they have the possibility of taking in health care decisions as well as in their work process using essential devices such as competence, responsibility, respect and recognition in the interdisciplinary team, but it is still necessary to prove that their role is essential and deserves to be respected like other professions in the health area.¹⁹

Regarding Organizational Standards component, nurses highlighted that nursing managers usually consult staff about the daily problems and procedures. The manager of a team, in addition to its technical and intellectual qualities, must have flexibility in the attitudes and decisions, full of vision worker and the environment that surrounds it, and lead the team in the best possible way, with a leading position that matches the institution's expectations.⁶ The worker's ability to think the job brings expectations, which, despite the difficulties faced in everyday work, want to have job satisfaction performing.¹⁶

Nurses have demonstrated autonomy at work. They do not feel unnecessarily supervised, have control over their work and participate in the activities performed the program, being evidence of professional autonomy. The lack of autonomy and limitation in the nurses scope of action emerges as negative factors of labor and organization of hospital care, does not favor the claim more autonomy for nurses, because of the unequal distribution of power.¹⁵

Nurses realize that there are interaction and the hospital's medical staff. However, they would like the doctors showed more respect for the skills and knowledge of the nursing team. There was a fair division among nurses who agreed, and those who disagreed with the doctors of this hospital underestimate the nursing staff. It was also found in a study that the sense of the work devaluation can trigger the nurse a

progressive suffering have repercussions on their health and disease process.¹⁷

There is an assumption that there is a recognition of a supposed technical superiority or simply a distinct relevance, which favors some categories over others. This technique hierarchy is seen as obstacle to the nurse.²⁰

The current image of nursing is directly related to its historical trajectory, submission, and silence. The media disseminates an erroneous image of being a nurse, serving the profession with a fragile and delicate character associated with subservience. The medical hegemony, and the appreciation of medicine at the expense of Nursing weaken their image and visibility and compromises the establishment of links with the patient. Possibly the medical hegemony is related to the biomedical model of health care and common sense. By valuing the curative actions, minimizes the value of Nursing work, which focuses on health promotion.²¹

Regarding the interaction with the nursing staff, it has been shown to exist teamwork and cooperation between the hospital nursing staff and they help each other with increasing service demand. Several studies have found that nurses and nursing assistants are more satisfied in the context of interaction with the nursing staff.^{5,17,22} In addition, the stimulation of communication should permeate the work of professionals to preserve good relationships among members and promote the commitment of the health team. It implies cooperation, task division and shared planning.⁹

In the aspect requirements of Labor, nurses reported that the time and opportunity to discuss the problems of patient care with other team members are insufficient. Discuss and share with the nursing staff, issues that arise at work can add quality to interpersonal relationships and can contribute to the assistance.¹⁶

CONCLUSION

According to the literature, studies of satisfaction of professionals, nurses in hospitals are rare. It is considered necessary a look directed at health managers for this aspect to be considered an indicator of results on the labor process, and one of the main pillars to ensure quality care and increased productivity for professional involvement when satisfied with the management model.

Managers and heads nurses sectors need to be involved in the institutional education process and pay attention to aspects of better

real satisfaction scores, professional status and interaction that must be positively reinforced the institution to keep them, happy nurses.

The systematic use of professional satisfaction measurement instruments, and intervention for improving it, should be a process applied to the entire multidisciplinary team, since the health work is done in collective actions and knowledge, and the quality of care It will occur as a result of a good performance by members of the health team of the different professional categories.

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