MJN Job Satisfaction and Burnout among Registered Nurses in a Private Hospital

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ABSTRACT

Background: The nursing profession is not only physically demanding which deal with the function and human health, but also involve the use of mental energy and contribute to mental exhaustion when one is continuously exposed to stressful events and circumstances. This inevitably leads to burnout and with job dissatisfaction. **Objectives:** This study aims to identify the levels of job satisfaction and burnout issue among registered nurses and to determine the relationships between demographic variable, job satisfaction and burnout among registered nurse in a private hospital in Kajang, Malaysia. **Methods:** A cross-sectional descriptive with convenient sampling method was used on 167 respondents. The questionnaire consists of Section A: sociodemographic data 6 items, Section B: 22 items on the level of burnout and Section C: 20 items on the level of job satisfaction. **Results:** The result showed that the level of job satisfaction and burnout among nurses are at high level with mean value are 4.06 and 4.07 respectively. **Conclusion:** There is moderate to high level of job dissatisfaction and burnout reported by the registered nurses. The findings of this study will provide significant findings to the nursing administrative in addressing the expectation and needs of their registered nurses.

Keywords: Job Satisfaction; Burnout; Nurse

INTRODUCTION

Burnout syndrome is part of occupational health problem that can include both emotional and physical burnout (Maslach & Jsckosn, 1981; Tosun & Ulusoy, 2017; Halcomb, Smyth & McInnes, 2018). Study by Cetinkaya *et al.*, (2017) claimed that the prevalence can be varied. Nursing is one of the human service professions and is specifically vital in the medical and mental health care delivery. Many scholars highlighted that nursing profession is by nature highly vulnerable to burnout syndromes (Khamisah *et al.*, 2015; Polat & Terzi, 2018; Tavakoli *et al.*, 2018). Main risk factors for the burnout were reported such as heavy workload and non-compliance among persons (Alameddine *et al.*, 2017; Centikaya *et al.*, 2017; Raju *et al.*, 2021). Therefore, it is a common problem among health care professionals, especially those at the frontline of care such as nursing staff (Doulougeri, Georganta & Montgomery, 2016).

Meanwhile, job satisfaction is the extent to which a person like the job and have a positive or negative attitude toward their jobs (Doulougeri, Georganta & Montgomery, 2016; Polat & Terzi, 2018). Job abandonment and frequent job change can be seen as an indication of job burnout (Kabir *et al.*, 2016; Ismail & Yee, 2020). In health care setting, improvement of quality of care and patient outcomes have been positively linked to the higher levels of job satisfaction among nurses (Doulougeri, Georganta & Montgomery, 2016; Centikaya *et al.*, 2017; Tavakoli *et al.*, 2018), thus it is crucial to maintain good level of job satisfaction among the nurses. Few studies reported that negative job burnout is linked with job satisfaction, where higher job burnout are experienced by the nurses, the lower the job satisfaction they had toward their job (Khamisa *et al.*, 2015; Polat & Terzi, 2018; Tavakoli *et al.*, 2018).

Burnout directly affects the health outcomes as characterized by exhaustion, fatigue, somatization and social withdrawal (Khamisa *et al.*, 2015; Larasati & Aryanto, 2019) leading to nurses being dissatisfied with coping their job routines and negatively influence patient care. Thus, considering the grave impact on

health care service particularly involving patient care and outcomes as well as staff attrition. It is imperative to explore a better understanding of the existing relationships between job satisfaction and burnouts to nurses.

A stressful profession, such as nursing, that deals with the numerous human demands of health and disease (Panhwar *et al.*, 2019; Mahoney *et al.*, 2020). Consequently, the stressful nature can ultimately lead to work dissatisfaction, burn-out (Kabir *et al.*, 2016) and its effect on their quality of life (Aytekin, Yilmaz & Kuguogly, 2014). Nurses have been found among health care professionals to be most prone to burnout (Kapucu *et al.*, 2009; Doulougeri, Georganta & Montgomery, 2016; Vidotti *et al.*, 2018). Job satisfaction and burn-out are important issues as they affect turnover rates, retention of staff and ultimately the quality of patient care (Kapucu *et al.*, 2009; Khamisa *et al.*, 2015; Mahoney *et al.*, 2020).

Relationship between job satisfaction and burnout advocated comprehensive plan to reduce burnout among the nurses (Khamisa *et al.*, 2015; Panhwar *et al.*, 2019) in order to increase job satisfaction and the quality of healthcare services. Nurses experiencing burnout issue may be harmful as an exhausted person has a tendency to develop health issues and psychological damage (Kapucu *et al.*, 2009; Polat & Terzi, 2018; Larasati & Aryanto, 2019). Nurses who experienced dissatisfaction in the workplace may have disrupted physical, mental and social well-being (Kabir *et al.*, 2016; Tavakoli *et al.,* 2018; Mahoney *et al.,* 2020).

In the current setting, a private hospital was selected. It was found that the increased in the susceptibility to job dissatisfaction and burnout among nurses are often associated to several job-related issues such as the work overload, unclear job descriptions, staff issues, shift overtime, poor salary package, unfair shift work allocation and lack of opportunities for promotion. Therefore, this study is essential to identify the job satisfaction and burnout among state registered nurses in the selected private hospital in Kajang, Malaysia.

METHODOLOGY

Study design, setting and sample: A cross sectional descriptive study design was used to determine the level of job satisfaction and burnout among registered nurses in the selected private hospital, Kajang, Malaysia, and if there are significant differences between the demographic variables and job satisfaction or burnout. The selected private hospital has 132 beds and 294 registered nurses. The data was collected from the registered nurses from various departments including critical areas and general wards. Sample size was determined by using Raosoft calculator software based on 5% margins error, 95% confidence level and 50% response distribution. The estimated sample size required was 167 after taking into consideration 10% attrition rate. The inclusion criteria for our study were the registered nurses who have been working in the selected private hospital for more than six months and willing to participate in the study. Conversely, the exclusion criteria applied for those in the managerial positions (female nurse managers, often referred to as Sister and male nurse managers who are referred to as Sir).

Ethical consideration: Ethical approval from the IMU Joint-Committee on Research and Ethic, International Medical University was obtained to conduct the study. Permission for the data collection was obtained from the selected hospital management. Participants' written consent were obtained prior to the study. ADD: This project has been approved at the 199th IMU Joint-Committee on Research and Ethics on 18th June 2020 (BN I/2020(PR-25).

Instrument: A self- administered questionnaires using 5 points Likert scale was used in this study. The questionnaire was adapted from Maslach & Jackson (1981). It consisted of three sections. Section A: sociodemographic data which include gender, age, education qualification in nursing, working experience as a nurse, job position at designated department and marital status. Section B: to measure the extent of burnout experience by the nurses. There was a total of 22 items in the instrument divided into three dimensions, namely emotional exhaustion (9 items), depersonalization (5 items) and personal accomplishment (8 items). Respondents' feedback to each of the item were measured using a 5 points Likert-scale (1-strongly disagree to 5-strongly agree). Section C integrated the instrument to measure the level of job satisfaction among the nurses with 20 items. The respondents were required to express the extent of their satisfaction in their job using a 5 points Likert-scale (1-strongly dissatisfied to 5-strongly satisfied).

Validity and reliability testing: A panel of experts, comprising the Group Chief Nursing Officer (GCNO)

and Chief Nursing Officer (CNO), reviewed the questionnaire and confirmed its content validity. The panel of experts unanimously acknowledged and agreed to the fact that the instrument was appropriate and applicable for the study. Thus, there was no modification required to the questionnaire. Cronbach's alpha coefficients was used to identify the reliability of the questionnaire. The Cronbach's alpha values for variables job satisfaction and burn out in the study are greater than 0.6 (>0.6), 0.919 and 0.890 respectively. This indicated that the items of questionnaire used in this study are reliable for their corresponding variables. If the value was close to 1, indicating that the items have a good criterion to be measured.

Pilot Study: After screening, 30 nurses who met the inclusion criteria and worked in the private hospital were selected to respond to the pilot study questionnaire. They were excluded from the main study. The approval and consent were obtained from Chief Executive Officer (CEO) and Chief Nursing Officer (CNO) of the private hospital prior to answering the questionnaire.

RESULTS

Demographic data: The questionnaire was coded and entered using IBM SPSS statistics version 26. In order to provide the insight on the background of the respondents, demographic data of the respondents were revealed in the Table 1. From the demographic profile results, this study categorized profile of the respondents into six demographic items namely gender, age, education level, working experience, job position and marital status. The sample consist of 13 male nurses (7.8%) and 154 female nurses (92.2%) with most of the age ranged from 21 to 30 years. There are 98 nurses (58.7%) aged between 21 to 30 years, followed by age from 31 to 40 years with 42 respondents (25.1%), 21 respondents (12.6%) age from 41 to 50 years and only 6 respondents (3.6%) from age category of 51 to 60 years.

Most of the respondents had a diploma (n = 146, 87.4%), followed by bachelor's degree holder which represent 20 respondents (12.0%) and only 1 respondent (0.6%) having master certificate. In terms of working experience, there are 77 respondents (46.1%) having experience of their job for 5 to 10 years, while 67 respondents (40.1%) have less than 5 years of working experience and only 23 respondents (13.8%) about 11 to 15 years of working experience. For the job position among registered nurses, there are 106 respondents (63.5%) working as a nurse, 53 respondents (31.7%)

worked as a nurse instructor and only eight respondents (4.8%) were nurse specialist. Based on marital status, there are 71 of respondents (42.5%) still single, 92 of respondents (55.1%) are married and only four of

Characteristic	Frequency (N)	Percentage (%)
Gender		
Male	13	7.8
Female	154	92.2
Age		
21-30 years	98	58.7
31-40 years	42	25.1
41-50 years	21	12.6
51-60 years	6	3.6
Education Level		
Diploma	146	87.4
Bachelor's degree	20	12.0
Master	1	0.6
Working Experience		
< 5 years	67	40.1
5-10 years	77	46.1
11-15 years	23	13.8
Position		
Nurses	106	63.5
Nurse Specialist	53	31.7
Nurse Instructor	8	4.8
Marital Status		
Single	71	42.5
Married	92	55.1
Divorced	4	2.4

Level of Variables: The aims of the analysis are understanding the job satisfaction level and burnout level among registered nurses. This part of analysis is used to achieve the objective one of this study. To get a summary of the data, analysis is conducted to describe the general situation of job satisfaction and burnout among registered nurses from their perspective. The mean and standard deviation (SD) are explained briefly for each item of the job satisfaction and burnout among registered nurses. The mean and standard deviation (SD) are determined to examine the sample characteristics in this study. Othman & Ishak (2011) recommended the mean categorised into four sections as tabulated in Table 2.

Table 2: Test of Reliability (n = 167)

Scale	Interpretation
1.00 – 2.00	Low
2.01 – 3.00	Medium Low
3.01 – 4.00	Medium High
4.01 – 5.00	High

Level of Job Satisfaction: The mean and standard deviation (SD) were used to describe the job satisfaction level among registered nurses. Table 3 reveals the 14 items in job satisfaction variable are at high level with mean range from 4.00 to 4.50 and standard deviation ranged from 0.569 to 1.041. While 6 items are at medium high level with mean range from 3.69 to 3.97 and standard deviation range from 0.817 to 1.604. Overall, the job satisfaction level among registered nurses is at high level since mean is 4.06 and standard deviation is 0.911.

Table 3: Level of Job Satisfaction among Registered Nurses (n = 167)

Level of Job Satisfaction among Registered Nurses	Mean (M)	Standard Deviation (SD)
Being able to keep busy all the times	4.50	0.569
The chance to work alone with the jobs	3.81	1.197
The chance to do different thing from time to time	3.43	1.604
The chances to be "somebody" in the community	3.40	1.362
The way my boss handles his/her workers	4.31	0.797
The competence of my supervisor in making decisions	4.35	0.736
Being able to do things that don't go against my conscience	3.72	1.421
The way my job provides for steady employment	4.31	0.709
The chance to do things for other people	4.22	0.662
The chance to tell people what to do	3.69	1.212
The chance to do something that makes use of my abilities	4.35	0.612
The way company policies are put into practice	4.29	0.688
My pay and the amount of work I do	4.17	0.655
The chances for advancement on this job	3.97	0.817
The freedom to use my own judgment	4.21	0.710
The chance to try my own methods of doing the job	4.08	0.829
The working conditions	4.08	0.784
The way my co-workers get along with each other	4.00	0.988
The praise I get for doing a good job	4.18	0.824
The feeling of accomplishment I get from the job	4.08	1.041
Total	**4.06**	**0.911**

Note:Scores ranged from 1 (strongly disagree) to 5 (strongly

Level Burnout: Table 4 displays 11 items in burnout variable are at high level with mean from 4.00 to 4.50 and standard deviation from 0.569 to 0.864. While 13 items are at medium high level with mean from 3.62 to 3.99 and standard deviation from 0.744 to 1.105. Overall, the burnout level among registered nurses is at high level since mean is 4.07 and standard deviation is 0.801.

Table 4: Level of Burnout among Registered Nurses (n= 167)

Level of Burnout among Registered Nurses	Mean (M)	Standard Deviation (SD)
I feel emotionally drained from my work	3.62	0.923
I feel used up at the end of the workday	3.80	0.941
I feel fatigued when I get up in the morning and have to face another day on the job	3.75	0.930
Working with people all day is really a strain for me	3.96	0.787
I feel burned out from my work	3.91	0.805
I feel frustrated by my job	3.87	0.991
I feel I'm working too hard on my job	3.99	0.788
Working with people directly puts too much stress on me	4.02	0.744
I feel like I'm at the end of my rope	3.99	0.791
The chance to tell people what to do	3.98	0.788
I feel I treat some recipients as if they were impersonal objects	3.99	0.836
I've become more callous toward people since I took this job	3.93	0.815
I worry that this job is hardening me emotionally	4.00	0.864
I don't really care what happens to some patients.	3.89	0.934
I feel patients blame me for some of their problems	4.05	0.838
I can easily understand how my patients feel about things	4.26	0.678
I can deal very effectively with the problems of my patients	4.22	0.748
I feel I'm positively influencing other people's lives through my work	4.45	0.708
I feel very energetic	3.73	1.015
The feeling of accomplishment I get from the job	4.48	0.798
I can easily create a relaxed atmosphere with my recipients	4.41	0.678
I feel exhilarated after working closely with my patients	4.53	0.599
I have accomplished many worthwhile things in this job	4.43	0.645
In my work, I deal with emotional problems very calmly	4.50	0.569
Total	**4.07**	**0.801**

Note:Scores ranged from 1 (strongly disagree) to 5 (strongly agree)

Relationship of Job Satisfaction Based on Demographic Respondents: There are six demographic items that included gender, age, education level, working experience, job position and marital

status. We used independent *t*-test and one-way ANOVA test for this purpose.

Table 5: The Relationship of Job Satisfaction and Gender (n = 167)

Gender	N	Mean (M)	Standard Deviation (SD)	T	P-value
Male	13	4.18	0.641	0.774	0.440
Female	154	4.05	0.598		

Result from Table 5 revealed the relationship between job satisfaction and gender among registered nurses. The p-value is greater than significant level ($p = 0.440 > \alpha = 0.05$). When the *p*-value >0.05 is consider as not significant. Therefore, there is no relationship between job satisfaction and gender among registered nurses at the chosen private hospital in Kajang.

Table 6: The Relationship of Job Satisfaction and Age, Educational Level, Working Experience, Job Position and Marital Status (n = 167)

Model	Sum Squares	Df	Mean Square	F	P-value
Age					
Between Groups	3.695	3	1.232	3.578	0.015
Within Groups	56.109	163	0.344		
Total	*59.805*	*166*			
Educational Level					
Between Groups	1.258	2	0.629	1.762	0.175
Within Groups	58.547	164	0.357		
Total	*59.805*	*166*			
Working Experience					
Between Groups	0.737	2	0.369	1.023	0.362
Within Groups	59.067	164	0.360		
Total	*59.805*	*166*			
Job Position					
Between Groups	0.287	2	0.143	0.395	0.674
Within Groups	59.518	164	0.363		
Total	*59.805*	*166*			
Marital Status					
Between Groups	1.249	2	0.624	1.749	0.177
Within Groups	58.556	164	0.357		
Total	*59.805*	*166*			

Results from Table 6 reveals the relationship between job satisfaction and age, educational level, working experience, job position and marital status among registered nurses. The *p*-value < 0.05 is consider as significant. For age factor, the p-value is less than significant level ($p = 0.015 < \alpha = 0.05$). Therefore, there is a relationship between job satisfaction and age among registered nurses. For education level, working experience, job position factors, and marital status, the p-values are greater than significant level with educational level ($p = 0.175 > \alpha = 0.05$), working experience ($p = 0.362 > \alpha = 0.05$), job position factors (p = 0.674 > α = 0.05), and marital status ($p = 0.177 > \alpha = $

0.05). Therefore, there is no relationship between job satisfaction and education level, working experience, job position factors, and marital status among registered nurses at the private hospital in Kajang.

Relationship of Burnout Based on Demographic Respondents: Result from Table 7 showed the relationship between burnout and gender among registered nurses. The p-value is greater than significant level ($p = 0.170 > \alpha = 0.05$). When the *p*-value > 0.05 is consider as not significant. Therefore, there is no relationship between burnout and gender among registered nurses at the selected private hospital in Kajang.

Table 7: The Relationship of Burnout and Gender (n = 167)

Gender	N	Mean (M)	Standard Deviation (SD)	t	P-value
Male	13	4.09	0.345	0.170	0.865
Female	154	4.07	0.438		

Results from Table 8 reported the relationship between job satisfaction and age, educational level, working experience, job position and marital status among registered nurses. The *p*-value < 0.05 is consider as significant. For working experience factor, the p-value is less than significant level ($p = 0.046 < \alpha = 0.05$). Therefore, there is a relationship between burnout and working experience among registered nurses. For age, education level, job position factors, and marital status, the p-values are greater than significant level with age ($p = 0.724 > \alpha = 0.05$), education level ($p = 0.215 > \alpha = 0.05$), job position ($p = 0.887 > \alpha = 0.05$), and marital status ($p = 0.484 > \alpha = 0.05$). Therefore, there is no relationship between burnout and age, education level, job position factors, and marital status among registered nurses at the private hospital in Kajang.

Table 8: The Relationship of Burnout and Age, Educational Level, Working Experience, Job Position and Marital Status (n = 167)

Model	Sum Squares	Df	Mean Square	F	P-value
Age					
Between Groups	0.248	3	0.083	0.441	0.724
Within Groups	30.562	163	0.187		
Total	*30.810*	*166*			
Educational Level					
Between Groups	0.572	2	0.286	1.552	0.215
Within Groups	30.237	164	0.184		
Total	*30.810*	*166*			
Working Experience					
Between Groups	1.134	2	0.567	3.134	0.046
Within Groups	29.676	164	0.181		
Total	*30.810*	*166*			
Job Position					
Between Groups	0.045	2	0.022	0.120	0.887
Within Groups	30.765	164	0.188		
Total	*30.810*	*166*			
Marital Status					
Between Groups	0.272	2	0.136	0.729	0.484
Within Groups	30.538	164	0.186		
Total	*30.810*	*166*			

DISCUSSION

Sociodemographic Data: In our study, the registered nurses involved in this study were 13 male nurses and 154 female nurses with most of them were between 21 to 30 years of age. The total of 167 registered nurses at the selected private hospital involved in the study. Most of the respondents were diploma holder and having 5 to 10 years of working experience as a registered nurse. From the major findings, it showed that the level of job satisfaction and burnout among nurses were at high level of perception with mean value are 4.06 and 4.07 respectively. Our findings also revealed that only job satisfaction has the relationship to age, and burnout has the relationship to working experience.

Level of Job Satisfaction and Level of Burnout: Based on our findings, it revealed that registered nurses at the selected private hospital in Kajang have a high level of job satisfaction (mean = 4.06 and SD = 0.911). In contrary, the level of burnout among registered nurses are also at high level (mean = 4.07 and SD = 0.801).

Relationship of Job Satisfaction and Burnout Among Registered Nurses According to Demographic Items: The finding revealed that only the job satisfaction has statistically significant relationship with age. The finding showed that the different in age will affected in

the job satisfaction among registered nurses at the private hospital in Kajang. While the other demographic items such as gender, education level, working experience, job position and marital status are not related or affected on the job satisfaction among the registered nurses. In addition, the findings also reported that the burnout has statistically significant relationship on working experience. Our findings proved that the different in working experience will affect the burnout level among registered nurses at the selected private hospital. Burnout among the registered nurses at the private hospital in Kajang is not affected by the other demographic factors such as gender, age, education level, job position and marital status. It has been found that job satisfaction and burnout are important factors (Khamisa *et al.*, 2015; Polat & Terzi, 2018; Panhwar *et al.*, 2019) to retain the staff. Therefore, in the context of nursing service, managers and leaders of any hospital should be more committed to improving employee satisfaction (Khamisa *et al*., 2015; Panhwar *et al*., 2019).

According to Owen *et al.*, (2018), management of the private hospital can ensure the job satisfaction of employees by providing the nursing staff with an opportunity to participate in the policy development process. The internal governance can be developed based on the needs and concerns of staff with the help of this process.

Study has suggested that workplace burnout has a negative correlation with job satisfaction. As mentioned by Vidotti *et al*., (2018), the satisfaction of employees can be increased by reducing the burnout within the workplace. In order to prevent burnout, the managers need to be vigilant about risk factors. Burnout within the workplace is created by risk factors such as dysfunction of workplace dynamics, work-life misbalance, extreme pressure and lack of social support (Owen *et al*., 2018). It is the sheer responsibility of the managers to ensure that these risk factors are not affecting the nursing staff. In order to do that, managers can conduct a monthly or quarterly survey to understand the issues and concerns of nursing staff.

Implications for Nursing Practice and Research

Our findings provided a clear implication for nursing practices and research. As articulated by Tosun & Ulusoy (2017), nurses are essential for educating emerging students who are interested in this field. It helps to detect, refer, intervene and create strategies for the people who are focused on creating cognitive impairment. It is essential for the nurses to suggest to the patients and their family members to lead a better life. As stated by Mahoney *et al.* (2020), nurse managers are considered as the key to create and harness a positive workplace environment. Development of a positive workplace environment is essential for meeting the needs of the staff and retains an organization (Kabir *et al.*, 2016; Larasati & Aryanto, 2019). Therefore, it is important for the nurse managers of the private hospital to look into the needs and expectations of the nurses. The study has illustrated that there is a significant relationship between the demographic variables such as pay scale, work environment and others. Hence, it is the responsibility of the managers and leaders of the selected private hospitals to meet the needs and expectations of nurses.

CONCLUSION

As a conclusion, it can be derived that the top management must address to the needs and expectations of their nurses and focus on aspects for improving the burnout level and further enhance the job satisfaction. It is essential for retaining the nursing staff and enhancing their performance. Based on the performance of the nurses, the quality of service delivery in the hospitals can be improved.

Limitation

The study only covers job satisfaction and burnout among registered nurses at the selected private hospital. Thus, the finding of this study cannot be generalised to other hospital.

Conflict of Interest

The authors declare that they have not known competing financial or personal conflict of interest.

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