



## **Nurses' Job satisfaction and Burnout: Is there a connection?**

**Rheajane A. Rosales\*, Leodoro J. Labrague, Gilbey L. Rosales**

*College of Nursing, Samar State University, Philippines*

*\*Corresponding author E-mail: hea\_rn@yahoo.com*

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### **Abstract**

Burnout associated with stress has been documented in healthcare professionals including nurses and is considered as one of the potential hazards occurring among individuals who do “people work”. This study aimed to determine the level of job satisfaction and burnout among nurses in three government hospitals of Samar, Philippines. Descriptive-correlational method of research was utilized to all (48) regular nurses in three Government Hospitals of Western Samar, Philippines. Job Satisfaction Survey (JSS) by Pul E. Spector, and Maslach Burnout Inventory (MBI) by Cristina Maslach were administered to the respondents. Findings indicated that respondents experienced a moderate level of burnout and claimed to be slightly unsatisfied with their job. The highest scored subscale on the JSS was the Nature of the Work (m = 3.97) while the lowest scored subscale was the Fringe Benefit (m = 2.40). Findings revealed that the highest ranked subscale on the MBI was the Emotional Exhaustion (m = 3.28). On the other hand, Depersonalization subscale was the lowest scored subscale with a mean of 2.74. Analyses also showed that there is a significant relationship between the respondent's level of burnout and their level of Job satisfaction. The result showed a statistically significant relationship between the nurse-respondents level of burnout and their level of job satisfaction which may affect on the quality of care given to their patients. Thus, proper measures must be made to prevent and manage nurses' burnout. Furthermore, it proposed a job enrichment program to increase the level of job satisfaction and prevent burnout.

*Keywords: Burnout, Job satisfaction, Nurses*

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## **1 Introduction**

Nurses perhaps are the bestfriend of patients. Though they get paid for the job, the care and concern they exhibit for the patient is unparalleled and most of the time goes beyond any financial remuneration. There are instances where nurses experience high stress level that leads to negative work environments that rob nurses of their spirit and passion about their job [24]. Consequently, unsatisfied workers might lead to burnout, where burnout associated with stress has been documented in healthcare professionals including nurses and is considered as one of the potential hazards occurring among individuals who do “people work” [8].

Studies have provided evidence that satisfied workers tend to be more productive, creative, committed and will eventually contribute to higher quality patient care and patient satisfaction[17], tend to care more about work quality and are more generally productive [7]. However, there are times when nurses find themselves in “Burnout” situations manifested by emotional exhaustion, detachment, and lack of drive and enthusiasm to work and achieve [21]. Among healthcare professionals, nurses have been found to be most prone to burnout [23]. Moreover, studies have shown that burnout among nurses has a negative effect on the quality of patient care [22, 27,] and patient satisfaction[32]. Burnout and low Job satisfaction indeed contributes into the nurses' inefficiency and affects their dedication to the job quality of care given.

Several studies have verified various components of burnout and job satisfaction among developed countries of the world [29, 19, 1]. However, not much has been done in underdeveloped countries like Philippines. There is a dearth of information on this subject matter, hence this study is needed and would be greatly beneficial to both patients and nurses mainly because focus of the nursing practice has always been the enhancement of the general well being of patients.

## 2 Research Objective

This study aimed to determine the level of job satisfaction and burnout among nurses in three government hospitals of Samar, Philippines. Furthermore, it proposed a job enrichment program to increase the level of job satisfaction thus preventing burnout.

## 3 Methodology

### 3.1 Design

The investigators utilized the descriptive-correlational method of research. Descriptive design because this investigation described the level of job satisfaction and burnout among nurses. Furthermore, correlational analysis was employed to determine relationship between and among selected variables.

### 3.2 Participants

A non-probability purposive sampling was utilized in this investigation. Forty eight (48) permanent nurses from three identified Philippine government hospital in Samar, Philippines were recruited to participate in the investigation. Inclusion criterions were set for study participation among nurses as follows: (1) nurses with permanent status, (2) nurses with at least three years of hospital experience, (3) nurses who consented to participate in the study, and (4) are presently working in the three identified hospitals. In data gathering, respondents were approached personally and professionally at the time convenient to them. After a given time, the questionnaires were recollected.

### 3.3 Ethical consideration

The study protocol was approved by the Ethics Committee of Samar State University prior to the conduct of the investigation. Furthermore, precautionary measures were taken into consideration to safeguard the study respondents' legal rights. Prior to the interview, consent forms were obtained from the respondents. Confidentiality and anonymity of the respondents were maintained by only a code number on the questionnaire.

### 3.4 Instrumentation

To determine the nurses' level of job satisfaction, the investigator used a 6-point Likert type scale Job Satisfaction Survey (JSS) by Paul E. Spector. It is comprised of 36 items, which were presented either positively or negatively. These 36 items comprised the 9 subscales. Each of these facets is assessed with 4 items, and a total score is computed from all 36. Negatively worded items were reversely scored. JSS is a 6-point agree-disagree response choice, wherein the agreement with positively worded items and disagreement with negatively worded items represent satisfaction, whereas disagreement with positively worded items, and agreement with negatively worded items represents dissatisfaction [28].

To measure the level of burnout among nurses, a questionnaire adopted the 5-point Likert type scale Maslach Burnout Inventory (MBI) by Cristina Maslach. MBI has 3 subscales namely Emotional Exhaustion, Depersonalization, and Lack of Personal Accomplishment, with a total of 22 items. The nine items in the Emotional Exhaustion subscale assess feelings of being emotionally overextended and exhausted by one's work. The five items in the Depersonalization subscale measure an unfeeling and impersonal response toward recipients of one's service, care, treatment, or instruction. For both the Emotional Exhaustion and Depersonalization subscales, higher Mean scores correspond to higher degrees of experienced burnout. The eight items in the Personal Accomplishment subscale assess feelings of competence and successful achievement in one's work with people. Higher scores on the Emotional Exhaustion and Depersonalization scales indicate more burnout, while higher scores on the perceived personal accomplishment scale indicate less burnout. MBI using a sample of health care workers obtained reliability coefficients as follows: Cronbach's alpha of 0.86 and split-alpha of 0.57 [9].

**Data Analysis:** Data were computed and analyzed using Statistical Package for Social Sciences (SPSS version 11.0). Descriptive and inferential statistics were utilized to analyze the data. Descriptive statistics included frequency, percentage, mean and standard deviation to describe the demographic characteristics, JSS, and MBI items. Pearson r coefficient correlation and Fisher' T-test were utilized to determine correlation of variables and significance of the correlation respectively.

## 4 Main results

**Table 1. Nurse-respondent Demographic Characteristics**

Table 1 provides information on the nurses' demographic characteristics. Most of the nurse respondents' were female (96%) and married (73%). The study participants ranged in age from 45- 49 year old which comprised 25% of the total respondents'. Meanwhile, out of 48 nurse respondents, 25 (52%) of them have the position of staff nurse.

Table 1: Demographic Characteristic of Nurse- respondents

Characteristics		n(48)	Percentage
Age	60-64	1	2.08
	55-59	11	22.91
	50-54	5	10.41
	45-49	12	25
	40-44	4	8.33
	35-39	8	16.66
	30-34	2	4.16
	25-29	5	10.41
Gender	Female	46	95.83
	Male	2	4.16
Civil Status	Single	6	12.50
	Married	35	72.90
	Widow/er	7	14.58
Position	Chief nurse	2	4.17
	Nurse supervisor	10	20.83
	Head/Senior nurse	11	22.92
	Staff nurse	25	52.08

**Table 2. Job Satisfaction of Nurse-Respondents**

Table 2 presents the nurse-respondents level of job satisfaction. Among the 9 subscales, nurse-respondents claimed to be dissatisfied to fringe benefits, promotion, pay, contingent rewards, operating conditions, and communication. Fringe benefits got the lowest weighted mean (Wm=2.40) which gives an interpretation of moderately unsatisfied nurses. It is worth noting that none of the respondents were satisfied in this subscale, while majority (n=36;75%) of them were dissatisfied in this facet of job satisfaction. Meanwhile, Nature of work got the highest mean (Wm=3.97) among the 9 subscales of job satisfaction which gives an interpretation of slightly satisfied among the sample nurses. Among the 48 respondents (n=28) 58.33 % of them claimed to be satisfied in this subscale, followed by Supervision (Wm=3.72) and Coworkers (3.71) which fall under the slightly satisfied level of job satisfaction. As seen in the table, 60.41% (n=29) of the nurse-respondents claimed to have job ambivalence with a grand mean of 3.30.

Table 2: Job Satisfaction of Nurse-Respondents

INDICATOR	Mean
<b>Pay</b>	<b>Mean</b>
Feels being paid a fair amount for the work I do.	2.9
Raises are too few and far between.	2.9
Feels unappreciated by the organization when I think about what they pay me.	3.3
Feels satisfied with my chances for salary increase.	3.2
<b>Promotion</b>	<b>Mean</b>
There is really too little chance for promotion on my job.	2.7
Those who do well on the job stand a fair chance of being promoted.	3
People get ahead as fast here as they do in other places.	2.8
I am satisfied with my chances for promotion.	2.8
<b>Supervision</b>	<b>Mean</b>
My supervisor is quite competent in doing his/her job.	3.52
My supervisor is unfair to me.	4.35
My supervisor shows too little interest in the feelings of subordinates	3.54
I like my supervisor.	3.48

<b>Fringe Benefits</b>	<b>Mean</b>
I am not satisfied with the benefits I receive.	2.52
The benefits we receive are as good as most other organizations offer.	2.73
The benefit package we have is equitable.	2.54
There are benefits we do not have which we should have.	2.40
<b>Contingent Rewards</b>	<b>Mean</b>
When I do a good job, I receive the recognition for it that I should receive.	3.1
I do not feel that the work I do is appreciated.	3.27
There are few rewards for those who work here.	3.69
I don't feel my efforts are rewarded the way they should be.	3.19
<b>Operating Conditions</b>	<b>Mean</b>
Many of our rules and procedures make doing a good job difficult.	3.4
My efforts to do a good job are seldom blocked by red tape.	3.56
I have too much to do at work.	2.96
I have too much paper work.	3.35
<b>Relationship with Co-workers</b>	<b>Mean</b>
I like the people I work with.	3.94
I find I have to work harder at my job because of the incompetence of people I work with.	3.38
I enjoy my coworkers.	4.06
There is too much bickering and fighting at work.	3.44
<b>Nature of Work</b>	<b>Mean</b>
I sometimes feel my job is meaningless.	3.85
I like doing the things I do at work.	4.13
I feel a sense of pride in doing my job.	3.81
My job is enjoyable.	4.08
<b>Communication</b>	<b>Mean</b>
Communication seems good within this organization.	3.23
The goals of this organization are not clear to me.	3.58
I often feel that I do not know what is going on with the organization.	3.58
Work assignments are not fully explained.	3.13
<b>GRAND MEAN</b>	<b>3.30</b>

### Summary of Nurse- respondents Level of Job Satisfaction

<b>Indicator</b>	<b>Weighted Mean</b>	<b>Dissatisfaction</b>	<b>Ambivalent</b>	<b>Satisfaction</b>
Pay	3.077	25(52%)	22(45.83%)	1(2.08%)
Promotion	2.82	29(60.41%)	11(22.91%)	8(16.66)
Supervision	3.72	17(35.41%)	10(20.83%)	21(43.75%)
Fringe Benefits	2.40	36(75%)	12(25%)	0
Contingent Rewards	3.31	28(58.33%)	13(27.08%)	7(14.58%)
Operating Conditions	3.32	18(37.5%)	20(41.66%)	10(20.83%)
Coworkers	3.71	14(29.16%)	13(27.08%)	23(47.91%)
Nature of work	3.97	13(27.08%)	7(14.58%)	28(58.33%)
Communication	3.38	14(29.16%)	21(43.75%)	22(45.83%)
<b>Overall Job satisfaction</b>	<b>3.30</b>	<b>6(12.5%)</b>	<b>29(60.41)</b>	<b>13(27.08%)</b>

**Table 3. Level of burnout of the Nurse- Respondents**

Table 3 presents the nurse-respondents level of burnout. As seen in the table, Emotional Exhaustion posted the highest weighted mean (Wm=3.28) followed by Lack of personal accomplishment (Wm=2.99), and depersonalization (Wm=2.74). In terms of emotional exhaustion, majority (54.10%) claimed to have high burnout and 15% falls under moderate burnout. Meanwhile, It is worth noting that all respondents claimed to have low personal accomplishment or high burnout in this matter. In summary, the nurse-respondents total mean is 3.00, which is interpreted under moderate level of burnout.

Table 3: Level of burnout of the Nurse- Respondents

<b>INDICATOR</b>	
<b>Emotional Exhaustion</b>	<b>Mean</b>
I feel emotionally drained by my work.	3.71
I feel used up at the end of the day.	4.02
I feel fatigued when I have to get up in the morning to face another day on the job.	3.44
Working with people all day is really a strain for me.	2.9
I feel burned out from my work.	3.21
I feel frustrated by my job.	2.73
I feel I'm working too hard in my job.	3.33
I feel like I'm at the end of my rope.	3.13
Working with people directly puts too much stress on me.	3.08
<b>Depersonalization</b>	<b>Mean</b>
I feel I treat some patients as impersonal "object".	2.25
I have become more callous towards people since I took this job.	2.67
I feel some patient's blame me for some of their problems.	2.40
In my work, people bother me with personal problem that I don't want to be bothered with.	2.92
I try to keep away from the personal problems of my patient's	3.44
<b>Personal Accomplishment</b>	<b>Mean</b>
I can easily understand how my patients feel about things.	3.48
I deal very effectively with problems of my patients.	3.13
I feel I'm positive influence on other people's lives through my work.	3.06
I worry that this job is hardening me emotionally.	2.79
I feel exhilarated after working with my patients.	2.56
I can easily create a relaxed atmosphere with my patients.	2.98
I don't really care what happens to some patients.	2.23
I have accomplished many worthwhile things in this job.	3.65
<b>GRAND MEAN</b>	<b>2.99</b>

#### Summary of Nurse- respondents Level of Burnout

<b>Indicators</b>	<b>Weighted Mean</b>	<b>Low Burnout</b>	<b>Moderate Burnout</b>	<b>High Burnout</b>
Emotional Exhaustion	3.28	7(14.58%)	15(31.25%)	26(54.10%)
Depersonalization	2.74	0	8(16.66%)	40(83.33%)
Personal Accomplishment	2.99	0	0	48(100%)
<b>Total Mean</b>	<b>3.00</b>			

**Table 4. Relationship Between the Level of Job Satisfaction of Nurse- Respondents and their Level of Burnout**

Table 4 depicts the relationship between the Level of Job Satisfaction of Nurse- Respondents and their Level of Burnout. As to the relationship between the level of job satisfaction and emotional exhaustion, it reveals an r-value of -0.632 and t-value of 5.534 at 46 degrees of freedom. The t-value was bigger compared to the critical t-value of 2.00 sat at 0.05 levels of significance, which means that the level of job satisfaction was significantly related to emotional exhaustion. As to the level of job satisfaction in relation to depersonalization, the computed r-value and t-value were -0.599 and 5.073 respectively, where the t-value was higher than the critical t-value of 2.00 set at df=46 and 0.05 level of significance, which means that the level of job satisfaction was significantly related to depersonalization.

As to the level of job satisfaction in relation to personal accomplishment, the r-value was 0.303 and the t-value was 2.153. The calculated t-value was higher than the critical value, which means that the level of job satisfaction was significantly related to personal accomplishment.

Table 4: Relationship Between the Level of Job Satisfaction of Nurse- Respondents and their Level of Burnout

Variates	$r_{xy}$	Fisher's t	$t_{tab}; \alpha=0.05; df=46$	Evaluation
Emotional Exhaustion	-0.632	5.534	2.00	S/Reject Ho
Depersonalization	-0.598	5.073	2.00	S/Reject Ho
Personal Accomplishment	0.306	2.153	2.00	S/Reject Ho

Legend: NS – Not significant S – Significant

## 5 Discussions

This study determined the nurses' level of job satisfaction and burnout as manifested by emotional exhaustion, depersonalization, and personal accomplishments. Furthermore, this study also analyzed any significant relationship between job satisfaction and burnout. Moreover, a job enrichment program was proposed to enhance the nurses' job's core dimensions and increasing their sense of fulfillment.

Findings of the study revealed that nurses' were slightly unsatisfied to their work. Among the nine subscales of job satisfaction identified by Paul E. Spector, Fringe Benefits got the lowest weighted mean which indicates that nurses' were moderately unsatisfied in one of the important part of compensation and this is also considered as one of the precursor to job stress as mentioned by Albaugh [3]. Moreover, According to Artz [4] Fringe benefits are significant determinants of job satisfaction. Higher levels of worker job satisfaction, potentially resulting from fringe benefit provisions, have been linked to important productivity measures such as lower quit rates and absenteeism. Therefore, if nurses will be satisfied in terms of fringe benefits, job satisfaction is possible. Hence, high quality patient care will be rendered and nurses burnout will be prevented.

Conversely, Nature of work which refers to the roles, tasks, or responsibilities of an employee posted the highest rank among the nine subscales of job satisfaction which connotes that nurses' were slightly satisfied in their type of work done. Nature of work generally emerges as the most important job facet [15,16] and one of the most investigated job satisfaction dimension [28]. Indeed, it is very important that the respondents still believed in the significance of their profession and if not very happy, at least they still like doing the things they do at work because the care and concern nurses' exhibit for the patient is unparalleled and most of the time goes beyond any financial remuneration.

Furthermore, Majority of the nurse-respondents expressed mixed feelings of job satisfaction and dissatisfaction, which Bauman [6] referred as *ambivalence*: when the subject debates amid contradictory impulses and emotions toward the same object. We tend to think that ambivalence is a small thing but in the realm of life it is huge, to the point that some expressed they felt they had lost the reason for being nurses, by not providing direct care to patients. Some studies show that caring for the patient is what brings the most satisfaction [18,11]. Therefore, being ambivalent is not enough to ensure that patient will receive quality care from the respondents. Instead, high level of job satisfaction must be guaranteed to all health care providers.

This study also identified the nurses' level of burnout as manifested by emotional exhaustion, depersonalization, and personal accomplishment. The findings from present study supports previous research suggesting that nurses are susceptible to burnout. Data revealed that sample of nurses reported moderate level of Emotional exhaustion, moderate level of depersonalization, and low level of personal accomplishment. This findings are consistent with previous nursing studies in Greece, Germany, Poland and the United States [20,5,26, 30]. Among these three manifestations of burnout as identified by Cristina Maslach, emotional exhaustion got the highest weighted mean which implies that nurses experienced moderate burnout. This finding is congruent with the results of previous researches [14, 2,12]. This may be attributed by the fact that nurses' are members of health care professionals who do "people work" [8] or professionals in direct relation with people who are exposed to chronic stress, in which they stay for a generally long period of time. Furthermore, Freudenberger explained that the process of physical and mental deterioration is more likely to occur in professionals working in areas such as health care [13]. In this regard, nurses' are in constant contact with people in problem situations and overwhelmed with heavy emotional loads [21], and a highly demanding profession devoting our whole being to the patients, which could further amplify our emotional exhaustion.

This study also examined the relationship between job satisfaction and burnout. Findings revealed that job satisfaction is significantly related to burnout as manifested by emotional exhaustion, depersonalization, and personal accomplishment. Result of the present study is in parallel to the work of Dolan [10] that relationship exists between job satisfaction and burnout, and the work of Sarmiento [10] that all burnout subscales were strongly related to job satisfaction. Result entails that the higher job satisfaction, the lesser risk of burnout situation nurses' may experience. This result substantiates the work of Roussel, Russell and Swansburg that job satisfaction may reduce the risk of

experiencing burnout. Moreover, result suggests that high level of job satisfaction decreases the nurses' level of burnout.

## 6 Conclusions

Findings of this investigation suggest that nurses must be free from burnout and must be satisfied in their job. This finding support the study of Ulmer [31], which revealed that, satisfied workers tend to be more productive, creative, and committed. Therefore, a highly satisfied and free from burnout nurses' will eventually be effective in rendering a quality nursing care since their ultimate goal is the patient satisfaction. Moreover, findings of this study will be greatly beneficial to the nurses who can take steps to avoid aggravating their burnout levels, and institute programs and strategies to promote job satisfaction, and to the patients who are the main benefactor of a quality nursing care from highly satisfied and blissful nurses'.

In view of the fact that this investigation targeted all regular nurses only from government hospitals, the researcher suggests that studies be conducted to the nurses from private hospitals and nurses' under the RN HEALS program by the Department of Health in the Philippines.

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## Conflict of Interest

The authors have no other financial, intellectual passion, political, religious, and institutional affiliations that might lead to a conflict of interest in making this paper.

## References

- [1] AbuAlrub R.F (2004). Job stress , Job performance, and social support among hospital nurses. *Journal of Nursing scholarship*. 36(1):73-78.
- [2] Adams A. Bond S.(1999). Hospital nurses job satisfaction, individual and organizational characteristics. *Journal of advanced nursing*. 29(6): 536-34
- [3] Albaugh J.A (2003). Keeping Nurses in nursing: The profession's challenge for today. *Urologic Nursing*. 23: 193-194.
- [4] Artz B. (2012)Fringe benefits and job satisfaction. *International Journal of Manuscript*, 31(6): 626-644.
- [5] Bakfer A.B. Kilmer C.H, Siegrist J. Andschaufeli W.B (2000). Effort- reward imbalance and burnout among nurses. *Journal of Advanced Nursing*, 31(4): 884-891.
- [6] Bauman Z. (2005). *Modernidad Y Ambivalencia*. Barcelona: Anthropos Editorial.
- [7] Bravendam Research Incorporated (2002). Effective management through measurement:Special report. Retrieved from the World Wide Web on September 20, 2002 from <http://www.employeesatisfactions.com/>
- [8] Cherniss C.(1980). Staff burnout in human services. Beverly Hill, California Stage publications: p 21.
- [9] Coker O.A. and Omoluabi P.F. (2009). Validation of MAslach burnout Inventory. *IFE psychologia*. 17(1).
- [10] Dolan N. (1987). The relationship between burnout and job satisfaction in nurses. *Journal of advanced nursing*. Jan; 12(1):3-12.
- [11] Dunn S. Wilson B. Estorman A. (2005) Perceptions of working as a nurse in an acute care setting. *Journal Nurse Management*. 13(1): 22-31.
- [12] Edwards D. Burnard D.(2003). A systematic review of stress and stress management interventions for mental health nurses. *Journal of advanced nursing*. 42(2):169-200.
- [13] Freudenberger H.J. (2007). Staff Burnout. *Journal of Social Issues*. P.159.
- [14] Happel B. et al.(2003) Job satisfaction and burnout: a comparative study of psychiatric nurses from forensic and mainstream mental health service. *International Journal of mental health nursing*. 12:39-47.
- [15] Judge T.A and Church A.H (2000). Job satisfaction research and practice in industrial and organizational psychology: Linking theory with practice. Oxford, United Kingdom: Blackwell, Cooper C.L and Locke E.A (eds), (pp. 168-198).
- [16] Jurgensen C.E(1978). Job performances( what makes a job good or bad?). *Journal of Applied psychology*., 63: 267-276.
- [17] Kaldenberg D.O Regrut B.A (1999). Do satisfied patients depend on satisfied employees? Or do satisfied employees depend on satisfied patients?. The satisfaction report newsletter. Vol.3 South Bend, Ind: Press, Gadney Associates Inc.
- [18] Kendall k.(2001). The relationship between job satisfaction of registered nurses and patient satisfaction with nursing care in acute care hospitals. Philadelphia: Universidad de Pensylvania (cited 2011, Jan.5).
- [19] Kingdom B. and Halovorsen F. (2004). Peri-operative nurses' perception of stress in the workplace. *AORN Journal*, 2008, [http://www.findarticles.com/p/articles/mi\\_m\(fsl/is-4\\_84/ai\\_n27015570/](http://www.findarticles.com/p/articles/mi_m(fsl/is-4_84/ai_n27015570/).
- [20] Lacovides A. Fountoulakis K. Moysidou C. and Lerodiakonou C.(1997). Burnout in nursing staff: A clinical syndrome rather than a psychological reaction? *General hospital Psychiatry*, 19(6): 419- 428.
- [21] Maslach and Johnson (1986). Utilizing the Maslach burnout inventory in cross-cultural research. *International Journal of Management*.
- [22] Mc Cue J.D. (2004). The effects of stress of physicians and their medical practice. *The New England Journal of Nursing Scholarship*. 31(1): 73-78.

- [23] Pines A. Maslach C. (1978). Characteristics of staff burnout in mental health settings. *Hospital and community psychiatry*, 29(4): 233-7.
- [24] Ropsie E.P and Salmond S.F.(2005) Job stress and General well being.
- [25] Sarmiento T.P, Laschinger H.K; Iwasiw C. (2004) Nurse educators workplace empowerment, Burnout & Job satisfaction, Testing Kanter's Theory, " *Journal of Advanced Nursing* 46(2), 134-143
- [26] Schaufelli W.B and Janczur B. (1994). Burnout among nurses: A Polish-Dutch comparison. *Journal of cross-culturally psychology*, 25(1): 95-113.
- [27] Spector P.E(1985). Measurement of human staff satisfaction; Development of the job satisfaction survey. *American Journal of Community Psychiatry*, 13(6), 693-713.
- [28] Spector P.E(1997). *Job satisfaction: Application, assessment causes, and consequences*. Thousand Oaks CA: SAGE.
- [29] Stordeur S. Phoore W. and Vandenberghe C.(2001). Leadership, organizational stress and emotional exhaustion among hospital nursing staff. *Journal of Clinical Nursing*. 35(4): 533-542.
- [30] Turnipseed D.L and Turnipseed D.H. (1997). A bicultural analysis of the cost of caring. *Nursing burnout in the United States and the Philippines career development*, 2(4):180-188.
- [31] Ulmer D. Syptak J.M and Marsland D.W (1999). *Job satisfaction: Putting Theory in practice*. American Academy of family physicians. Retrieved November 1, 2008 from <http://www.aafp.org/fpm/aairroomfm/26.htm>.
- [32] Vahey D.C. Alkon L.(2010). Nurse burnout and patient satisfaction. *PMC Journal*. 42: 1157-1166.

## **PROPOSED JOB ENRICHMENT PROGRAM ON INCREASING JOB SATISFACTION OF NURSES**

### **Rationale**

This job enrichment program was formulated based on the findings of the level of job satisfaction and burnout of nurses in three government hospitals of Western Samar.

It is believed that job enrichment program is an attempt to motivate employees by giving them the opportunity to use the range of their abilities and the to build in to jobs a higher sense of challenge and achievement. Through this, the nurses will gain a higher self-esteem which according to Locke, high self-esteem workers are also more likely to value challenging tasks and derives more pleasure from work as compared to low self-esteem workers.

### **General Objective**

Within a year, administrators, nurse managers and nurses of the three government hospitals of Western Samar will adopt this Job Enrichment Program in order to increase the level of job satisfaction and prevent burnout among their nurses, since satisfied nurses are more motivated, productive and fulfilled.

### **Program Description**

Job enrichment program is one of the key factors in good job design. With job enrichment, one expands the task set that someone performs. Nurse administrators provide more stimulating and interesting work that adds variety and challenge to an employee's daily routine. This increases the depth of the job and allows people to have more control over their work. This program will increase the number of skills that nurses use while performing work, enabling nurses perform a job from start to finish, It will provide work that has a direct impact on the organization, increase the degree of decision making, and the freedom to choose how and when work is done and finally, increasing the amount of recognition for doing a job well, and communicate the results of people's work. Job enrichment addresses these factors by enhancing the job's core dimensions and increasing people's sense of fulfillment.



PROPOSED JOB ENRICHMENT PROGRAM ON INCREASING THE LEVEL OF JOB SATISFACTION OF THE NURSE RESPONDENTS

Data Reference	Scheme of Implementation	Plan of Activities	Time frame	Locus of Responsibility
<p>Tables 2.1, 2.2, 2.4,2.5,2.6,2.8 &amp; 2.9 components of job satisfaction that the nurse respondents were “slightly unsatisfied” with.</p> <p>1. Pay. “I feel unappreciated by the organization when I think about what they pay me.”</p>	<p>-Provide a differential to staff who choose to work 16hours every weekend or and additional incentives to nurses in night shift.</p>	<p>Weekend incentive program</p>		<p>-Nurse managers -Administrators -Nurses</p>
<p>2. Fringe benefits. ‘there are benefits we do not have which we should have’</p>	<p>-Staff who achieves defined competencies or certifications will be eligible to receive commensurate salary increases and/or bonuses.</p>	<p>-Skill based pay program</p>		<p>Nurse managers -Administrators -Nurses</p>
<p>3. Promotion. “there is too little chance for promotion on my job”</p>	<p>-Encourage further education and trainings to update clinical practice and develop new skills</p>	<p>-Seminars and trainings on different areas of nursing practice</p>	<p>2 days</p>	<p>Speakers Instructors Nurses</p>
<p>4. Operating conditions “many of our rules and procedures make doing a good job difficult”</p>	<p>-Create a committee that will develop some strategies that will make the procedures simple and easy.</p>	<p>-Feed backing/group discussions on new rules, strategies, and procedures to make the job easy.</p>	<p>1 day</p>	<p>Nurse managers -Administrators -Nurses</p>
<p>5. Communication “I often feel that I do not know what is going on with the organization”</p>	<p>-orientation on the goal of the organization. -discuss new updates, goals, objectives and achievements of the organization and its members</p>	<p>Conference of nurses, nurse managers and administrators should be done once a month</p>	<p>1 day</p>	<p>Nurse managers -Administrators -Nurses</p>

<p>Tables 3.1, 3.2 and 3.3. level of burnout as manifested by emotional exhaustion, depersonalization, and personal accomplishment.</p> <p>6. “I feel emotionally drained by my work”</p>	<p>Declare a family day trip. Seek a possible chill spot to relax and unwind.</p>	<p>Family day</p>	<p>Once a month</p>	<p>Nurses</p>
<p>7. “I feel used up at the end of the day”</p>	<p>Develop a sense of awareness on the factors that cause burnout and ways to prevent such condition.</p>	<p>Seminar on awareness of factors causing burnout.</p>	<p>1 day</p>	<p>Speakers</p>
<p>8. “I try to keep away from the personal problems of my patient’s”</p> <p>9. “I worry that this job is hardening me emotionally”</p>	<p>Develop a sense of commitment and responsibility through withdrawal of the mind from external and earthly affairs in order to attend to God and Divine things.</p>	<p>Retreat/Recollection to help the nurses realize and appreciate this noble profession.</p>	<p>4 hours</p>	<p>Retreat master Nurses</p>