

**Deanship of Graduate Studies**

**Al-Quds University**



**Master's in nursing management**

**Perceived relationship between employees satisfaction and quality  
of services at BASR's Specialized Hospital.**

**Ibrahim Abdallah Ibrahim Ghawali**

**Master Thesis**

**Jerusalem- Palestine**

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**1444/2023**

## **Dedication**

I dedicate my dissertation work to my family and friends. First, to my loving parents Abdallah and Pauline for their support and help. Second, I dedicate this thesis for my lovely wife Jane who encouraged my success and supported this attempt. Third, I dedicate this thesis to my brothers Nicola and George who never left me and supported me all the time.

Finally, I also dedicate this work to Bethlehem Arab Society for Rehabilitation for their big support during the process of preparing this research.

Ibrahim Ghawali

## **Declaration**

I declare that this study is the result of my own work research, except where otherwise indicated. It has been submitted for Master degree and not for any higher degree to any other universities.

Signature: .....

Ibrahim Ghawali

Date: 9/1/2023

## Acknowledgement

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I am grateful to God for providing me the skill, capacity, and potential to further my education.

## **Abstract**

### **Background:**

Employees are one of the essential elements in an organization as increasing the Employees job satisfaction leads to higher the work productivity and improves the quality perceived services to beneficiaries. Employees job satisfaction motivates employees to be a better productive which will positively be reflected on the organization.

### **Aim:**

This Research aimed to determine the perceived relationship between job satisfactions on employee performance among employees at Bethlehem Arab Society for Rehabilitation in Bethlehem.

### **Methodology:**

A descriptive cross-sectional design consisted of 380 employees working in the Bethlehem Arab Society for Rehabilitation by filling questionnaires.

Data was collected with a questionnaire being filled out by participants, knowing that the questionnaire is consisted of 59 questions divided into three sections covering the personal and the occupational characteristics, along with employee's satisfactions characteristics, and the perceived quality characteristics.

**Findings:** During the research, 185 questionnaires have been distributed, 182 were collected back knowing that 4 of them were invalid, which means that participation rate for the questionnaires was 96.2%. Number of Male Participants (57.9%) were higher than Women Participants (42.1%). Age is also categorized to three categories (16-25) category, (26-35) category, and (36-45) category. The marital status categorized to single category (61.8%), and married category (38.2%). Living places were also involved in the questionnaire, where participants from cities were 47.2%, participants from villages were 42.8%, and participants from camp were 9%. Participants were also categorized based on their years of experience, (1-5) years with a percentage of 68.5%, (6-10) years with a percentage of 24.2%, and (11-above) years with a percentage of 7.3%. Finally, the salary variable less than 1500 (3.9%), from 1500 to 2000 (17.4%), from 2000 to 4000 (69.1%), and from 4000 to 5500 (9.6%).

Conclusion:

Employee's Satisfaction was on moderate.

Marking the factors that affect the both main variable levels (Employee Job Satisfaction and the perceived quality of services) and their effect on work productivity. We concluded that Job Satisfaction among BASR employees is moderate. Relative Salary was most important factor to take into consideration, along with fairness in rewards distribution among employees which has a direct relationship with performance.



## العلاقة المتصورة بين رضا الموظفين وجودة الخدمات في المستشفى التخصصي لجمعية بيت لحم العربية للتأهيل

إعداد: إبراهيم عبدالله الغوالي

إشراف: الدكتور حسين الجبارين

### ملخص:

الخلفية: الموظفون هم أحد أعمدة المؤسسة و زيادة الرضا الوظيفي لديهم يزيد من إنتاجية العمل و الخدمات المقدمة للمستفيدين، فالرضا الوظيفي يحفز الموظف على أن ينتج أكثر مما ينعكس طردياً مع أداء المؤسسة و ازدهارها.

الهدف:

تهدف هذه الدراسة إلى معرفة مدى الرضا الوظيفي في جمعية بيت لحم العربية للتأهيل و قد تساعد هذه الدراسة في تحسين هذا الرضا الوظيفي عن طريق وضع الخطط الاستراتيجية لزيادة الرضا الوظيفي مما يؤدي إلى زيادة الإنتاجية في العمل و تقديم خدمة أفضل

المنهجية:

تصميم مقطعي وصفي يتكون من 380 موظف يعملون في جمعية بيت لحم العربية للتأهيل و ذلك من خلال تعبئة استبيانات.

تم جمع البيانات باستخدام استبيان يتم الإجابة عليه ذاتياً من قبل المشاركين، الاستبيان مكون من 59 سؤال تقسم إلى ثلاثة أقسام تغطي الخصائص الشخصية و الوظيفية و خصائص رضا الموظفين و خصائص الجودة المدركة للخدمات.

النتائج:

خلال الدراسة تم توزيع 185 استبيان، تم استعادة 182 منها و كانت هناك 4 استبيانات غير صالحة فكان معدل المشاركة في الاستبيان 96.2% . عدد المشاركين الذكور (57.9%) كان أعلى من عدد الإناث المشاركين (42.1%)، تم تقسيم الأعمار إلى ثلاثة فئات: (16-25)، (26-35)، (36-45)، الحالة

الاجتماعية قسمت إلى قسمين: أعزب (61.8%) و متزوج (38.2%)، مكان المعيشة أيضاً تم إدخاله في الاستبيان حيث كانت نسبة الناس من المدن (47.2%) ونسبة الناس من القرى (42.8%) و كانت نسبة الناس من المخيمات (9%)، كان هناك فئات مقسمة حسب سنوات الخبرة: خبرة من سنة إلى خمس سنوات بنسبة 68.5%، من 6 سنوات إلى عشرة سنوات بنسبة 24.2%، أكثر من إحدى عشر سنة خبرة بنسبة 7.3%. وأخيراً، التقسيم حسب الراتب: أقل من 1500 بنسبة 3.9%، من 1500 الى 2000 بنسبة 17.4%، من 2000 الى 4000 بنسبة 69.1%، من 4000 الى 5500 بنسبة 9.6%

الخلاصة:

الرضا الوظيفي كان معتدلاً.

تحديد العوامل التي تؤثر على مستوى المجالين المتغيرين الرئيسيين (الرضا الوظيفي و الجودة المدركة للخدمات المقدمة) و تأثيرهم على انتاجية العمل، بالملخص فان الرضا الوظيفي في جمعية بيت لحم العربية للتأهيل كان معتدلاً، علماً بأن الراتب المقدم للموظف هو أكثر عامل يجب أخذه بعين الاعتبار، إلى جانب ذلك فان توزيع المكافآت بشكل عادل له تأثير مباشر في زيادة الأداء من قبل الموظف

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# **Chapter one:**

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## **Introduction**

### **1.1 Research background**

Job satisfaction for employees is the most vital asset for organizational development. It what makes employee productive and can affect the service quality. Job satisfaction and perceived quality are important concepts that corporations must understand to remain competitive and therefore grow. Delivery of quality service is therefore inseparable from the person delivering it (Sureshchandar, 2002). Employees who deliver the service are hence an important factor that impact and influence the quality of service provided since they are inseparable from the service delivered.

As for the job satisfaction its importance comes from employee's satisfaction and high productivity for the workers. Job satisfaction is typically characterized as the level of contentment that individuals feel with their jobs or specific elements of their jobs (Agho, Mueller, & Price, 1993; Cranny, Smith, & Stone, 1992). When employees perceive that they are working harder than their colleagues without receiving fair pay or respectful treatment, they may develop negative feelings towards the job, employer, or coworkers and become disengaged from their work (Akinbobola, 2011).

### **1.2 Service (perceived) Quality**

TQM is considered a top priority in the Arab world for healthcare due to its importance in maintaining the health and well-being of the population. Healthcare is a vital resource that plays a crucial role in ensuring the health of a country's citizens.

Quality is widely recognized as a crucial factor in achieving success in a competitive world, although it has various definitions across different contexts. Some view it as meeting or exceeding customer expectations (Ryall and Kruithof, 2001; ISO 9000, 2005), while others see it as the extent to which an object or entity (e.g., process, product, or service) satisfies a set



of specified requirements and possesses certain inherent characteristics (Leffler, 1982). TQM is a management philosophy that emphasizes customer satisfaction and continuous improvement in organizational performance. It originated in Japan in the 1980s as a way to improve quality control in the naval air systems industry (Bemowski, 1992). TQM aims to enable personnel to learn and use quality methods to reduce costs and meet the needs of patients and other customers (Ovretveit, 2000). It is often described as a comprehensive strategy for organizational and attitudinal change (Oclay, 2014).

TQM is a management approach that aims to continuously improve all aspects of healthcare organizations, such as hospitals, through the education and empowerment of all employees. It is believed that TQM can improve the quality and effectiveness of treatment services, helping them to meet the needs and expectations of patients. In today's world, quality is essential for success in any institution, particularly due to government regulations and the increasing influence of customers. Patients, as end users, are becoming customers of healthcare institutions, and their satisfaction is a measure of the quality of care.

TQM is seen as a crucial step towards improving the efficiency and effectiveness of hospital and clinic operations. It is believed to enhance the quality of products and services for customers. The adoption of quality management in hospitals, including those in Palestine, is driven in part by the need to address service problems and keep pace with the rapid changes and expanding information in the global health sector. Both private and government hospitals have embraced TQM as a way to continually improve through strategic planning. However, healthcare organizations, especially those in Palestine, face a range of challenges, including rising healthcare costs, the rapid advancement of technology, meeting patient needs, and maintaining high-quality service. These challenges necessitate the use of a system to provide high-quality care and address these challenges.

Observing the Palestinian hospitals, it becomes clear that they need a new, inclusive, and continuous approach to service that enhances the performance of medical staff and leads to mutual satisfaction between customers and the hospital. TQM is seen as one way to achieve continuity and sustainability in this regard. By adopting the principles of TQM, Palestinian hospitals can shift their understanding of service quality to better fulfill their role in providing care. TQM aims to improve competitiveness and help hospitals reach their goals.

This study investigates the relationship between job satisfaction and the perceived quality of services among employees at Bethlehem Arab Society for Rehabilitation (BASR). The goal is to assess the connection between these two factors at this particular organization

### **1.3 Bethlehem Arab Society for Rehabilitation Hospital (BASR)**

Bethlehem Arab Society for Rehabilitation is a non – governmental hospital that has 380 employees, approximately 110 of them are nurses. BASR’s capacity is 115 beds.

#### **1.3.1 Incorporation**

Bethlehem Arab Society for Rehabilitation Hospital was founded in Beit Jala in 1960 as one of Leonardo Cheshire’s homes for the care of children with disabilities, which is a non-governmental and non-profit organization recognized nationally as one of the leading national institutions in the field of providing comprehensive medical and rehabilitation services to Palestinian citizens with emphasis for persons with disabilities and marginalized and vulnerable groups across the Palestinian Territories, regardless of nationality, age, religion, or social class.

#### **1.3.2 Services**

The hospital provided medical services and treatments for the Palestinian Society. BASR consists of a lot of departments such as: Cardiac Department, Surgical Department, Rehabilitation Department, Medical Department, Emergency Department, Outpatient Department, and the Day care Department.

Moreover, BASR also has several complementary departments to marginalize its services for the society like the Occupational Therapy Department, Physiotherapy Department, Audiology Department, Radiology Department, Speech Department, Laboratory Department and Blood Bank Department.

## **1.4 Research Problem**

Health institutions, including those in Palestine, are currently facing numerous challenges and changes at both local and global levels. This includes the changing consumer behavior, with people becoming more aware of their consumption choices and placing a greater emphasis on quality when selecting products or services. These developments have created new demands and expectations for health institutions to meet.

Evaluating the quality of services provided by healthcare institutions, such as hospitals, can be challenging due to the rapid development and technological advances in the sector, as well as the difficulty in understanding and implementing TQM. This is particularly true for Bethlehem Arab Society for Rehabilitation (BASR) and other hospitals in Palestine, where there may be a lack of awareness among workers, including doctors, nurses, and other staff.

The quality of health services and the continuous improvement in the BASR is an important and decisive factor in its success and distinction. Although there is an improvement in the quality of health services in the hospital, the level of improvement is slowly moving and it is noticed during my work in BASR that there is a decrease in the level of job satisfaction in some of its employees, which may affect the quality of health services provided by the hospital.

Job Satisfaction helps employees to improve their performance in their jobs. To add, it also helps in reaching to an adequate result regarding their responsibilities.

The absence of Job Satisfaction in BASR led to decrease in the employees' performances, no passion to work and losing the will to attend their duties.

## **1.5 Research objectives**

- To examine the level of job satisfaction among employees in BASR.
- To examine the level of employee's perception of quality of hospital services in BASR.
- To examine the relationship between employee's job satisfaction and their perception of the quality of hospital services in BASR.

## **1.6 Significance of the study:**

- Addressing the concept of quality at BASR, which is one of the modern concepts that contribute to the growth and continuity of organizations.
- Assessing job satisfaction of employees at BASR, which is one of the topics that all organizations, including hospitals, pay constant attention to, especially as it is one of the factors affecting performance, including continuous improvement of the quality of hospital services.

## **1.7 Justification of the study**

This study stems from the role that the job satisfaction plays in the individual's life and the importance of linking between job satisfaction and the perceived services in BASR hospital to provide better quality service and gain better satisfaction from the workers and staff.

## **1.8 Research Questions:**

After reviewing many previous studies, and in order to find solutions to the problem of the study, the study focused on answering the following questions:

- What is the level of job satisfaction among employees in BASR?
- What is the level of employee's perception of quality of hospital services in BASR.
- Does employee's job satisfaction affect their perception of the quality of hospital services in BASR.

## **1.9 Research Hypothesis**

The following presents the hypotheses of the study:

- There is a high level of job satisfaction among BASR employees.
- There is a high level of perceived quality in the health services provided in BASR hospital.
- There is an impact of job satisfaction on the perceived level of quality of BASR health services.

## **1.10 Scope and limitation of the study**

### **1.10.1 Scope of the study**

This study was defined by a set of time, place, and human limitation as the following:

- Time: this study is implemented from December 2020 till the end of July 2021.
- Place: this study is carried out in Bethlehem Arab Society for Rehabilitation (BASR) at Bethlehem Governorate in Palestine.
- Human: Workers at Bethlehem Arab Society for Rehabilitation.

### **1.10.2 Limitation of the study**

The limitation of this thesis is all related to restricted medium-small sample size and exploratory in nature quantitative method. These limitations are discussed accordingly:

- Lack of previous study on this subject in Palestine. In order to overcome this, study relied on various previous studies related to the subject and where it was collected, compared and linked together.
- Struggle in obtaining accurate data from BASR staff. A questionnaire method was chosen to overcome this.

Moreover, this study is limited to studying the reality of BASR in adopting the concept of total quality management systems to perform or carry out its services in terms of:

- Management's support and commitment.
- To achieve the satisfaction of the beneficiaries.
- Continuous quality improvement.

## **1.11 Operational Definitions and Definitions of Terms**

- NGO, or nongovernmental organization, is a term that is frequently used in international relations and in developing countries. It typically refers to professional organizations that promote economic and social development, as opposed to more

community-based groups. NGOs are often seen as more established and professional than grassroots organizations (Anheier 2014, 61).

- Nonprofit organizations are involved in efforts to promote international development and improve the lives of disadvantaged people in poorer countries. They operate without the goal of generating profit, focusing instead on achieving their social or environmental missions. (Werker, & Ahmed, 2008)
- A hospital is a healthcare facility that provides patient care, with specialized medical staff and equipment, as well as nursing support."(Who, 2018).
- Health administration is the management, leadership, supervision, and administration of complex healthcare entities such as hospitals, long-term care facilities, healthcare systems, nursing homes, pharmacies, and health insurance providers. It involves overseeing the operation of these organizations and ensuring that they are efficient and effective in delivering healthcare services.
- Total quality management refers to the culture, organization, and attitude of a company or organization that strives to provide its customers with products and services that meet and fulfill their needs. It involves the continuous improvement of processes and systems to ensure that the highest level of quality is consistently achieved. (Mi. Halis, Twati, & Mu. Halis, 2017).
- Job satisfaction is the level of contentment an individual feels with their job or various aspects of their job. It is often measured by the extent to which an individual is satisfied with their job. (Agho, Mueller, & Price, 1993; Cranny, Smith, & Stone, 1992).

## **Chapter two**

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### **Literature Review**

This chapter defines and explores the literature about job satisfaction and the assessment of the relationship between employees' job satisfaction and their perceived quality of services.

#### **2.1 Job Satisfaction**

Job satisfaction refers to “the degree to which people like their jobs” Spector (1997). As a result of increased productivity, organizational responsibility, physical and mental health, and improved happiness at work, people are more likely to learn new skills and perform better overall. (Coomber and Barriball, 2007), Employee happiness may be seen as a machine that affects the internal environment, employee performance, and the level of service necessary to provide consumers with repair and improvement services. ) (Dorothea wahyu arina, 2015).

(Trivellas and Dargenidou's,2009) According to study findings, the quality of administration is positively correlated with employee job satisfaction, which is brought on by interpersonal interactions, career enrichment, and the workplace environment.

#### **2.2 Factors influencing Job Satisfaction**

An employee's unique characteristics, such as personality type, coping mechanisms, fairness, trust, and organizational engagement, all have an impact on how satisfied they are with their employment (Wesolowski & Mossholder, 1997). Workers across the 26 company want to feel vital participants in their job duties and want to have a say in how their work will be done, including scheduling, work sequence, result evaluation, and, to a certain extent, who will be hired to work with them. According to Yousef (1998), for instance, open communication inside the company that includes people who may not have decision-making authority but are yet seen as members of the organizational family is a direct cause of work satisfaction. The

healthcare companies that excel in this respect are those that have a mechanism in place that enables information to flow from frontline staff to top management, ensuring that the staff is aware of what is going on and feels heard (Jones & George, 1998, p. 538). Work- or company-related factors might, in some circumstances, be the most significant determinants of job satisfaction. These factors include pay, perks, the actual working environment, security concerns, chances of advancement, and coworkers. Numerous studies have looked at how work-related incentives, such as compensation, colleague, and supervisor satisfaction, affect job satisfaction (Hackman & Mottaz & Potts, 1986). Many theories argue that some combination of these many aspects of work rewards determines the overall level of job satisfaction. Two main categories of employment incentives were established by Herzberg et al. (1957): (a) internal factors, such as success, acknowledgment, and progress; and (b) external variables, such as compensation, working conditions, and job stability. The Perceived Reward Model was developed by Mottaz and Potts (1986, p. 155) as an additional framework for comprehending total job satisfaction. The five extrinsic incentives included in their model are those they feel have the greatest impact on work satisfaction: These advantages are: 1. Supervisors - how supportive and helpful workers view their supervisors to be, including qualities like competence, fairness, honesty, and friendliness. 2. Coworkers - how supportive and helpful coworkers are viewed as, including qualities like competency, helpfulness, and friendliness. 3. The general conditions, such as the surroundings and available resources, that either enhance or detract from the quality of work. 4. Salary - a set amount of regular pay for services provided. 5. Promotional opportunities - good conditions and chances for growth or progression within the company.

## **2.3 Financial rewards and working conditions**

Rewards also significantly influence how motivated employees are. A manager must, therefore, be aware of the significance of financial incentives in motivating and inspiring workers. Financial incentives are seen to be the most effective tool for managers to use to inspire staff and favorably impact their behavior in order to achieve corporate objectives.



Depending on an employee's age, different financial and non-financial benefits have different meanings. When salary surpasses a particular level, non-financial benefits have a stronger impact on job motivation. There are two different types of factors that have a significant influence on employee motivation, according to Herzberg's [Two Factor Theory]. the motivating aspects, such as gratitude, recognition, a caring attitude from the employer, and possibilities for success, as well as the hygienic factors, such as compensation, policies, and the working environment. Employee motivation and productivity may both be increased with an efficient compensation system (Fuhrmann, 2006). Financial incentives are essential for luring brilliant workers, but they have only a transient effect on their level of enthusiasm at the office.

According to Langton and Robbins (2007), some requirements must be satisfied for monetary rewards to drive an individual. Namely, the sort of reward must matter to the individual and be seen as a direct reward for performance. The person should consider the minor amount to be important, especially if it involves money. Therefore, the marginal pay rise between a high performance and an average performer or a highly skilled and low skilled should be large for financial rewards to inspire people at work.

## **2.4 Management responsibility and Developing Opportunities**

There are three dimensions of the responsible management, which are:

**Sustainability:** Management endeavors must result in a strong, favorable triple bottom line that safeguards, generates, and preserves social, environmental, and commercial value. Triple bottom line optimization must be incorporated into management practice.

**Responsibility:** Instead of having a limited emphasis on increasing shareholder value, management activities must lead to the optimization of total stakeholder value (SV). SV optimization must be embraced by management practice.

**Ethics:** Management decisions must be ethically righteous in both the process and the result. Management practices must promote moral excellence and ethical decision-making.



**Figure 1: dimensions of the responsible management**

## **2.5. Service Quality and customer satisfaction**

Quality output and quality procedures are all parts of the services quality. Customer-acceptable process quality is what makes a service good. The customer's perception of the quality of the service after it has been rendered is the output quality. When customer service meets expectations, it is safe to say that the level of service is pretty high. On the other hand, if the quality of the services is lower than expected, the service is also said to be of poor quality. So, if the service quality can be satisfied, the service is considered satisfactory. Customer satisfaction with the provided services.

Customer satisfaction is a result of how well customers perceive and value the quality of the services they receive. Customer satisfaction is the assessment that consumers make of the services they get. There are several ways to define consumer satisfaction. One customer's definition differs from that of other customers' definitions. In other words, there is no universally accepted definition of consumer satisfaction. Because the definition of customer happiness is so complicated, ongoing study on this topic is necessary. The success or failure of a firm to satisfy customer expectations is the definition of customer satisfaction that academics use most frequently.

Because it is difficult to define and quantify without agreement, service quality is a term that sparks attention and discussion in the study literature. The term "service quality" has several distinct meanings. First, a service that can satisfy a customer's demands or expectations is considered to be of high quality (Dotchin & Oakland, 1994; Lewis & Mitchell, 1990). Second, the distinction between what the customer expects from the service and how the customer

actually perceives or uses it may be used to determine service quality (Parasuraman, Zeithaml, & Berry, 1985).

A relationship between consumers and service providers must typically exist for an assessment of service quality to be undertaken during service delivery.

## **2.6 Theoretical Framework**

A significant number of studies have directly or indirectly contrasted TQM with contemporary management theories (e.g., Baker, 2003; Escrig-Tena, 2004; Sohal & Hoong, 2003; Tan, Wong, Mehta, & Khoo, 2003). According to Ehigie and McAndrew (2005), TQM is theoretically grounded in statistics, as opposed to other contemporary management theories and methodologies, which have their roots in the social sciences. TQM is a full system including ideas, practices, and useful tools, in contrast to many other management theories, as noted by Wang (2004), who found significant overlap between TQM and contemporary management theories. One may say that TQM offers a prescription for using systems theory in managerial practices (Wang, 2004). In the 1960s and 1970s, TQM offered a practical quantitative management philosophy that ultimately saved Japan's industries (Brush, 1998).

It has been discovered in the literature that workers are at the heart of organizational transformation (e.g. Ehigie & McAndrew, 2005; Palo & Padhi, 2005; Sila, 2005). Employees are the ones who initiate and promote change, which has an impact on the organization's viability and success (Ooi, Bakar, Arumugam, Vellapan, & Loke, 2007; Sila, 2005). Professionals in human resources encourage management and staff to prioritize quality management as a key business strategy (Armstrong, 2006). Dwyer (2002) came to the conclusion that any quality management project must address the people management challenges after researching three Irish firms.

The key aspects of quality management are people-related, according to Dwyer (2002), who also asserts that "people as a resource, have the ability, unlike any other resource, to give a competitive advantage" (p. 529). Examining an organization's processes for work and employment, remuneration, career advancement, employee performance management, recognition, communication, and hiring is the emphasis of TQM and MBNQA (NIST, 2007).

"Enabling and encouraging all workers to participate effectively and to the best of their abilities and, in this way, contribute to organizational sustainability" is the goal (NIST, 2007, p. 44). The concept behind TQM is that by incorporating regular people in the practice, remarkable things may be produced of them. Training, for instance, is crucial in raising awareness (Palo & Padhi, 2003), promoting teamwork (Smith, Oczkowski, Macklin, & Noble, 2003), and encouraging adherence to high-quality policy and strategy (Akdere & Schmidt, 2007; Palo & Padhi, 41 2005). Akdere (2006) underlined that effective quality management initiative execution has a favorable impact on organizational survival through staff performance and output.

## **2.6 Previous Studies:**

Job satisfaction is a crucial concept in the study of vocational psychology since it describes how an employee feels about a certain job. According to one definition, job satisfaction is the intensity and direction of one's emotional state, or affective orientation, as a result of an evaluation of one's work and work experience (Kallenberg, 1977). Berry (1997) gave a straightforward definition of job satisfaction as a person's response to their total work experience. Any definition of job satisfaction will depend on a number of factors or characteristics that somehow affect how people feel about their working settings. In essence, Hoppock (1935) defined work satisfaction as "any combination of psychological, physiological, or environmental factors that allows a person to honestly state, "I am content with my job"" in his early and widely adopted concise measure of job satisfaction (p. 47).

### **2.6.1 Factors influencing job satisfaction:**

An employee's unique characteristics, such as personality type, coping mechanisms, fairness, trust, and organizational engagement, all have an impact on how satisfied they are with their employment (Wesolowski & Mossholder, 1997). Employees at all 26 organizations want to feel like they play a significant role in their job functions and want to have a say in how their work will be done, including how it will be scheduled, how it will be carried out, how it will be evaluated, and, to some extent, who will be hired to work alongside them. According to Yousef (1998), for instance, open communication inside the company that includes people who may not have decision-making authority but are yet seen as members of the

organizational family is a direct cause of work satisfaction. The healthcare companies that excel in this respect are those that have a mechanism in place that enables information to flow from frontline staff to top management, so the staff knows what's going on and feels like they are being listened to (Jones & George, 1998, p. 538). Work- or company-related factors also have an impact on job satisfaction, and in certain situations, they may even outweigh other factors as a greater predictor of job satisfaction. These factors include pay, perks, the actual working environment, safety concerns, the possibility of advancement, and coworkers. Numerous studies have investigated the impact of work-related rewards on job satisfaction, including compensation, colleague, and supervisor satisfaction (Hackman & Oldham, 1975; Herzberg, Mausner, Peterson, & Capwell, 1957; Kallenberg, 1977; Locke, 1969; Mottaz & Potts, 1986). Many theories argue that some combination of these many aspects of work rewards determines the overall level of job satisfaction. Two main categories of employment incentives were established by Herzberg et al. (1957): (a) internal factors, such as success, acknowledgment, and progress; and (b) external variables, such as compensation, working conditions, and job stability. Potts and Mottaz (1986, p. 155) my assumption is that in order to obtain a level of work satisfaction among employees, it was important to develop a rewards system that met this objective. And that the five key components of the proposed model are as follows: Supervisors: How much they help and benefit workers, and how they stand out for qualities like efficiency, justice, reliability, and friendliness. The interaction with coworkers and the degree to which they gain from it in addition to getting the necessary moral and financial support. The amount to which the environment, both at work and in general, contributes to the improvement of service quality. Pay and the amount of compensation received. the institution's potential for advancement and its potential scope. Promotional opportunities are favourable circumstances and chances for development inside the company. It might improve the institution's development, promote staff motivation, raise the standard of services offered, and improve the attainment of the institution's goals.

Only two of these extrinsic benefits—supervision and coworkers—apply to the issue of how job happiness relates to organizational trust and commitment. However, considering that individuals who supervise or work with us might be a source of agitation and tension due to their bad conduct, experiencing the opposite behavior may easily be regarded a reward. Although supervisors and colleagues are not commonly thought of as rewards. In any event, it

would seem logical to conclude that a worker who is unable to establish a supportive and trustworthy connection with both his or her coworkers and superiors would find it challenging to have a high degree of job satisfaction. Hackman and Oldham (1975) proposed yet another five-factor model of job satisfaction related to aspects of the job itself: 1. When a task requires the application of a variety of talents and abilities, this is referred to as skill diversity. 2. The ability of the worker to perceive his or her task as a whole, comprehensive activity with a finished outcome rather than merely as a single, insignificant component is referred to as task identification. 3. The importance of a work is measured by how it affects or benefits the other members of the business or organization. 4. Being autonomous means having a sense of independence within one's line of work and having the freedom to make decisions for oneself. 5. Feedback is the degree to which a worker receives a manager's, self-, or coworkers' judgment of his or her performance (pp. 251-252). Based on the aforementioned characteristics, Hackman and Oldham (1975) developed a work satisfaction measurement that included five measures. The scores of the first three qualities (skill diversity, job identification, and task significance) may be averaged, and the result can be multiplied by the scores of the next two characteristics to establish an employee's degree of satisfaction (autonomy and feedback). The Motivation Potential Score was the outcome. They created the Job Characteristics Model through their study, which claims that these five traits can promote motivation, performance, and job happiness. The takeaway for companies is that incorporating these five traits into their company culture will boost employee satisfaction overall and foster higher organizational trust. People prefer to participate more and contribute to a more effective workplace where everyone feels more invested and dedicated when they discover greater purpose in the work they perform (Benner, 1984). However, when employees are denied the chance to fully engage in their work and the organization's objective while having a genuine desire to do so, they become less productive and more apathetic toward the company or those inside it who are preventing their engagement (Lodahl & Keyner, 1965). They may opt to quit their work and find one where they will feel pleased that they belong and are valued since they are not given the chance to feel significant and worthwhile members of the company (Belicki & Woolcott, 1996).

### **2.6.2 Benefits of job satisfaction:**

Although investing in employee satisfaction programs might be expensive, given the numerous advantages it provides for firms, it should be viewed as a worthwhile investment in the health and well-being of employees (Sirota, Mischkind, & Meltzer, 2005). First, it may be understood as producing ethical capital since, from a humanistic standpoint, encouraging job happiness in the workplace is the "right thing to do." Second, it can lower the costs associated with employee turnover, which may include missed productivity, compensation for temporary staffing, overtime pay, expenditures associated with hiring new personnel, and training expenses. Loyal workers are more likely to remain at their positions for a longer period of time, decline rival job offers, avoid actively looking for new employment, and suggest the company to others as possible consumers and employees. Job satisfaction and turnover intentions have been linked in studies by Angle and Para (1981) and Bedeian and Armenakis (1981). These actions have been demonstrated to have a beneficial impact on the balance sheet and are leading indications of staff retention. Therefore, it is reasonable to assume that hospitals will be able to avoid paying to hire, replace, and train staff for a longer period of time if they are able to keep them on staff. It seems that healthcare businesses may reap long-term advantages by consistently fostering trust and raising employee happiness by additionally concentrating on boosting their employees' organizational commitment, rather than only focusing on staff retention. When healthcare businesses can adjust to the reality of the present industry climate, where success depends on innovation, care quality, and staff commitment, they are more likely to be successful competitors. According to Keirse and Bates (1978), the actual potential of any company may be best achieved when everyone's level of productivity is perfectly aligned, dedicated to the organization's goals, and driven to attain those goals.

### **2.6.3. Relationship Quality of Service and Employee Satisfaction**

Customer happiness, according to the literature on quality management, is crucial for staff satisfaction. Employee satisfaction with service quality and customer satisfaction is reportedly quite high. Customer satisfaction is impacted because happy personnel are more productive, creative, and devoted. In order to achieve excellence and organizational performance, pleased employees will be able to serve as a strong core. Recently, a lot of literature and marketing

practice has focused on the relationship between employee happiness and service quality and customer satisfaction (Spiro & Weitz, 1990). Employee dissatisfaction or unhappiness would prevent them from giving the client exceptional service (Sclesinger & Zornitskly, 1991; Brief & Motowidlo, 1986; Brown & Lam, 2008).

The importance of employee attitudes, such as contentment, commitment, and loyalty, and how these attitudes impact the performance of the business are rarely covered in-depth in operations management literature (Boudreau, 2004; Boudreau, Hopp, McClain, & Thomas, 2003). Studies on how human resources may impact an organization's operations are uncommon.

The Psychological Contract Theory (Robinson & Morrison, 1995) and the Social Exchange Theory (Konovsky & Pugh, 1994) both argue that consumer pleasure has an impact on staff satisfaction. The reciprocity standard lies at the core of both theories. Customers who are satisfied will feel and work with those who are advantageous or fulfilling to them (Bateman & Organ, 1993). Customers who build relationships with staff will enable the employee to offer the client their whole attention, according to Beaty and Lee (1996). In other words, consumers' positive feedback will raise their level of satisfaction with the services provided by the staff.

According to the study, increasing employee happiness will boost the quality of services based on justice or similarity in the Social Exchange Theory. Despite the fact that the Social Trade Theory is contested, experts concur that social exchange entails a sequence of encounters that constitute the obligations (Cropanzano & Mitchell, 2005). According to the Social Exchange Theory, if an employer provides pleasant working circumstances that may make employees happy, they will be more likely to go above and beyond for the company as a means to return the favor (Wayne, Shore, & Linden, 1997; Flynn 2005). Therefore, the researchers hypothesized that contented personnel will be more dedicated to providing superior customer service (Loveman, 1998; Silvestro and Cross, 2000; Yoon & Suh, 2003).

Numerous studies have been conducted to determine the connection between human resources and service quality. The findings of Malhotra and Mukherjee's (2004) study indicated that



further research needs to be done on the connection between human resources and service quality. According to Xu and Goedegebuure (2011), there is a correlation between staff and consumer happiness. Hartline and Ferrell (1996), Schneider and Bowen (1997), and others have examined the same hypothesis (1985).

Numerous research have demonstrated the nature and intensity of the connection between employee and customer satisfaction (Schlesinger & Zortisky, 1991; Schlesinger & Heskett, 1991). According to Heskett, the link between employee and customer happiness might be compared to a mirror satisfaction (Singh, 2000). Employee happiness leads to business success, which will be reflected in or followed by consumer satisfaction.

In addition to being positively correlated, client satisfaction will result from staff satisfaction. A contented workforce will provide excellent service. Consequently, the worker would cause happy clients to feel happy (Schlesinger & Zornitsky, 1991). According to Bolton and Drew (1991), employee satisfaction can have a direct impact on how clients view the caliber of a given service. In other words, job happiness influences service quality, which influences customer satisfaction.

Oh and Yoon (2011) also discovered that job satisfaction has a substantial impact on service quality and came to the conclusion that job satisfaction also influences customer satisfaction. Additionally, Zeithaml and Bitner discovered a reciprocal relationship (impact) between staff and consumer happiness (Paul, 2013). A happy employee will make an effort to please the customer. Additionally, higher customer satisfaction will increase staff work satisfaction. Customers that value an employee's efforts and services will be more satisfied, according to the link between employee and customer satisfaction. This implies that it is important to get client feedback on the services. Feedback may be complimentary (expressing gratitude) or critical (leveling complaints against the employee). In other words, there are complicated dynamics between employee and consumer happiness.

A major concern for the company is customer management. This is a result of the majority of businesses attempting to gain market domination in order to outperform the competitors. In

actuality, performance-based management and customer-oriented strategy help many businesses improve their capacity to compete. For businesses, especially service firms, boosting customer happiness is vital. The connection between employee and consumer happiness has been extensively studied. However, The absence of conceptual and empirical basis for their link continues to bother the scholars. According to several additional researches, the work environment created by the customer has an impact on employee job satisfaction. According to a meta-analysis, employee happiness has little of a direct effect on corporate performance, according to Mathieu and Zajac (1990). Numerous academics have investigated the relationship between employee happiness and workplace behaviors such staff turnover, absenteeism, delays, drug use, and sabotage. The link between operational performance, such as service quality, and employee job satisfaction is less openly and properly explored experimentally. The study's premise is that there isn't a meaningful direct association between employee happiness and service quality based on a range of such exposure.

According to Priyathanalai and Moenjohn's (2012) research, there is a strong correlation between employee happiness and service quality. In their study of work satisfaction and service quality, Schlesinger and Zornitsky (1991) discovered a favorable correlation between employee views of job happiness and serving skills and opinions of service quality. While Bitner (1990) discovered that low work satisfaction might impact how well services are provided. This implies a strong link between employee performance and work happiness.

#### **2.6.4 Summary of the literature:**

Previous studies referred to the definition of job satisfaction, and the factors affecting it, as previous studies limited them to treatment, sense of importance, as well as wages and bonuses, and other factors. Employee satisfaction.

Previous studies indicated that job satisfaction has great benefits, as it increases productivity and improves performance, which is the ultimate goal of the organization. Berry (1997) defined job satisfaction in simple terms as an individual's reaction to the overall job experience. But it always under the effect of several factors that move it up or down, the different studies have pointed to some of these factors, such as, employee like to feel that they

are important and have a voice at the organization, side by side to other treatment ways from the administration.

Herzberg et al. (1957) proposed two basic classes of job rewards: (a) intrinsic factors such as achievement, recognition, and advancement; and (b) extrinsic factors such as pay, working conditions, and job security. rewards model, Supervisors, fairness, trustworthiness, and friendliness. The relationship with co-workers, the working conditions and the general environment, and the extent of their contribution to the development of the quality of services provided. Salary - and the level of compensation provided. Hackman and Oldham (1975) proposed yet another five-factor model of job satisfaction related to aspects of the job itself: 1. Skill variety 2. Task identity 3. Task significance 4. Autonomy 5. Feedback.

In general, the studies indicated that job satisfaction is a general emotional state, linked to all the conditions and rewards that the employee obtains, so that he has a certain orientation towards the work and the institution and the achievement of its goals in general.

In terms of the quality of services provided, studies have indicated that they are related to job satisfaction, but the dimensions of service quality were varied and studies were not exposed to them, which generally indicates the essence of the relationship between both variables. If we are able to reach a state of job satisfaction, many goals can be achieved, such as increasing productivity, achieving the goals of the institution, maximizing profit, and others.

## Chapter three

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### Methodology

This chapter covers the information of the study design and explains the approach of implementing this study and its procedures, along with study sample, data collection method, questionnaire design, study variables and content validity and reliability.

#### 3.1 Study Design

A quantitative descriptive cross sectional study design was used to assess the relationship of employees' job satisfaction and their perceived quality of services at BASR's Specialized Hospital

#### 3.2 Study Population and Sample

The study will consist of all employees at Bethlehem Arab Society for Rehabilitation Hospital. The population of interest was broken down as follows:

Therapists/clinicians:

doctors, nurses, physiotherapists, ... etc.

- 1) Diagnostic/ allied professionals:
- 2) Laboratories, Radiology, Optics, ... etc
- 3) Administrative staff.
- 4) Support services:
- 5) Reception, maintenance, drivers, ... etc.

#### 3.3 Sampling frame:

Inclusion:

- 1) The employees that have a minimum of one year experience.
- 2) The employees who have a full – time permanent contracts.

Exclusion:

- 1) The employees that work as volunteers in BASR.
- 2) The administration staff who are in top level management positions (Decision makers).

### **3.4 Sample Design**

182 questionnaires were distributed, and 178 of them were retrieved, and therefore the response rate is  $178/182 = 97.8\%$ .

### **3.5 Study Variables**

#### **Independent variables for the study:**

- A. Socio-demographic characteristic such as age, gender, marital status, educational level, years of work experience, salary, job title, department, and place of residence.
- B. Job satisfaction that is divided into:
  - Wages and bonuses
  - Policies and procedures
  - Training and qualification
  - Relationships with colleagues and superiors
  - Features, services, and benefits
  - Working conditions.

#### **Dependent variables for the study:**

- A. Perceived quality of services that is divided into:
  - Tangibility
  - Reliability
  - Responsiveness
  - Assurance
  - Empathy

### **3.6 Period of the Study**

This study was conducted in December 2020 through July 2021. It began with the study of previous books and research and preparing the theoretical framework. Then the questionnaire was developed, tested and amended. Also, the study population was identified within the hospital.

### **3.7 Place of the Study**

The study was conducted in Bethlehem Arab Society for Rehabilitation Hospital (BASR) in Bethlehem Governorate in Palestine

### **3.8 Data collection:**

The study used primary data which was collected through self-administered questionnaires. The questionnaire consisted of three sections, namely; Personal and employment characteristics, Employees' satisfaction characteristics, and Perceived quality of services characteristics.

### **3.9 Study Tool**

The study tool was built based on the theoretical aspect related to the subject of the study, especially the measure of service quality (SERVQUAL). Some previous questionnaires were also guided like (Jirady, 2009) and (Abu Eid, Raed, 2016), in addition to making use of the job satisfaction scale adopted at the University of Science and Technology, which is used to measure the satisfaction of its members on a regular basis, in a way that contributes to achieving the objectives of the study and testing its hypotheses. The questionnaire included three sections. The first section included personal and employment data, while the second section included the paragraphs of the independent variable of the study related to job satisfaction, and the third section contains the paragraphs of the variable of the study related to the quality of health services.

**Dimensions and number of paragraphs of the independent variable and dependent variable tools for data collection:**

**Table 1: Demographic variables**

<b>Section</b>	<b>Dimensions</b>	<b>No. of Paragraphs</b>	<b>Percentage</b>
<b>Demographic Questions</b>	<b>Demographic</b>	<b>13</b>	<b>18%</b>

**Table 2: Frequencies and percentages of job satisfaction and its components:**

<b>Section</b>	<b>Dimensions</b>	<b>No. of Paragraphs</b>	<b>Percentage</b>
<b>Job Satisfaction</b>	Wages and bonuses	<b>6</b>	<b>8.3%</b>
	Policies and procedures	<b>5</b>	<b>7%</b>
	Training and qualification	<b>4</b>	<b>5.6%</b>
	Relationships with colleagues and superiors	<b>6</b>	<b>8%</b>
	Features, services, and benefits	<b>5</b>	<b>7%</b>
	Working conditions	<b>4</b>	<b>5.6%</b>
<b>Total (Job satisfaction)</b>		<b>30</b>	<b>41.5%</b>

Table 3: Frequencies and percentages of quality of provided services and its components:

Section	Dimensions	No. of Paragraphs	Percent age
<b>Perceived Quality of Health Services.</b>	<b>Tangibility</b>	<b>9</b>	<b>12.5%</b>
	<b>Reliability</b>	<b>5</b>	<b>7%</b>
	<b>Responsive</b>	<b>5</b>	<b>7%</b>
	<b>Assurance</b>	<b>5</b>	<b>7%</b>
	<b>Empathy</b>	<b>5</b>	<b>7%</b>
<b>(quality of provided services)</b>		<b>29</b>	<b>40.5%</b>
<b>Total paragraph of the questionnaire</b>		<b>72</b>	<b>100%</b>



Likert scale is used to measure the responses of the respondents to the paragraphs of the questionnaire concerning job satisfaction & perceived quality of services.

The Likert scale consisted of five-point ranging between 1-5, where 1 represents 'strongly disagree' and 5 represents 'strongly agree'.

Part two: Job Satisfaction scale is used to assess the employees' job satisfaction that include six fields which are the components of the job satisfaction, these components are the wages and bonuses, Policies and procedures, Training and qualification, Relationships with colleagues and superiors, Features, services, and benefits, and Working conditions.

Part Three: perceived quality of services scale in BASR is used to assess the employee's perception for the quality of care provided in BASR that includes the elements of tangibility, reliability, responsive, assurance and empathy statements. This section is taken from SERVQUAL scale which is described as a multi-dimensional research instrument, designed to capture consumer expectations and perceptions of a service along the five dimensions that are believed to represent service quality as it has become the dominant measurement scale in the area of service quality.

### **3.10 Pilot study:**

A pilot study (N = 10) is conducted before starting the actual data collection as a pre-test to determine the real time needed to fill the questionnaire and identify areas of vagueness, to point out weaknesses in wording, to test reliability of its items and to test validity and suitability of the questionnaire.

Modifications made according to results. Participants in the pilot study were not included in the main study.

### **3.11 Reliability and validity of the instrument:**

The researcher has measured Cronbach alpha coefficient to estimate the reliability coefficients of the scales. The reliability was measured by conducting a pilot testing on 10 doctors & nurses.

Validity: The questionnaire was sent to 3 reviewers who are academics and professionals' experts in health services management (Dr. Mohammed Khleif, Dr. Baha` Al Eswed, Dr. Ahmad Al Batran).

### **3.12 Data collection methods and Procedure**

Data was collected by using a self-administrated questionnaire through:

The questionnaire was distributed among all employees working in shift A, as they were visited again after 2 days to collect the questionnaire.

In addition, the questionnaire also was distributed among the technicians and the office workers of the entity.

Furthermore, employees working in shift B were also visited to fill the questionnaire and also were visited again after 2 days to collect the questionnaire.

### **3.13 Response Rate**

182 questionnaires were distributed, and 178 of them were retrieved, and therefore the response rate is  $178/182 = 97.8\%$ .

### **3.14 Data Analysis**

To achieve the objectives of this study, the following statistical treatments were used:

After retrieving the questionnaires, they were entered in the Statistical Analysis Program (SPSS), and then analysed, ratios, frequencies, means, and standard deviations were calculated. To test the hypotheses related to the demographic variables, T-test was used, ONE Way Anova test to test hypotheses, and to clarify if there are any differences between the means of the various categories of the demographic variables. And as the same the regression analyses was used to test the significancy of the relation between the (job satisfaction) and (quality of the provided services), and to determine the model of the relation between them.

## Chapter four

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### Results of the study

#### 4.1 Introduction

The research was to assess the relationship of employees' job satisfaction and their perceived quality of services at BASR's Specialized Hospital. This chapter presents the analysis, findings, and discussion. The findings are presents in percentages and frequencies distributions, mean and standard deviation. The questionnaire was distributed to hospital staff including doctors, nurses, lab technicians, physical / occupational therapists, and administrative staff to assess their level of satisfaction.

#### 4.2 Demographic Information

The demographic information considers in this section included the gender, level of education, salary wage and years of experience. The completed questionnaires were checked for completeness and consistency. Of the 182 questioners distributed, 178 were returned. The returned questionnaires represented a response rate of 70% and this response rate was deemed to be adequate for the realization of the research objectives.

##### 4.2.1 characteristics of study's sample:

The characteristics of the study' sample based on the study variables are listed in table (1), it contains the variables of the study at column number one, the categories of each variable at column two, frequency of each variable category at column three while at column four the percentage of each category:

**Table 4: Frequencies and percentages for the study sample**

<b>variable</b>	<b>category</b>	<b>frequency</b>	<b>percentage</b>
Gender	Male	103	57.9
	Female	75	42.1
Educational level	Intermediate Diploma	29	16.3
	Bachelor's	135	75.8
	Specialized Higher Diploma or Master	14	7.9
Age	16-25	94	52.8
	26-35	75	42.1
	36-45	9	5.1
Marital status	Single	110	61.8
	Married	68	38.2
Living place	City	84	47.2
	Village	78	43.8
	Camp	16	9.0
Experience by years	1-5	122	68.5
	6-10	43	24.2
	11 or more	13	7.3
Salary	Less than 1500	7	3.9
	1500-2500	31	17.4
	2500-4000	123	69.1
	4000-5500	17	9.6

Table (4) show the percentages and frequencies for every category of each variable, the gender categorized to males with frequency of (103) respondents and (57.9) percent, and females with frequency of (75) respondents and (42.1) percent. The educational level categorized to Intermediate Diploma with frequency of (29) and (16.3) percent, Bachelor's with (135) frequency and (75.8), and (Specialized Higher Diploma or Master) with frequency of (14) respondents and (7.9) percent. While the age variable was categorized to three categories, which is (16 -25) category with frequency of (94) and percent of (52.8), and (26 – 35) category with frequency (75) and percent of (42.1), and (36 -45) with frequency of (9) and percent of (5.1). the marital status variable categorized to single with (110) frequency with percent of (61.8) and married with frequency of (68) and (38.2) percent. The Living place categorized to city with frequency of (84) and (47.2) percent, and village with frequency of (78) and (43.8) percent, and Camp with frequency of (16) and (9) percent. Years of experience variable categorized to (1 – 5) category with frequency of (122) and (68.5) percent, and (6 – 10) with frequency of (43) and (24.2) percent, and (11 or more) with frequency of (13) and (7.3) percent. Finally, the salary variable was categorized to (less than 1500) category with frequency of (7) and (3.9) percent, (1500 – 2000) category with a frequency of (31) and (17.4) percent, (2500 – 4000) category with (123) frequency and (69.1) percent, and (4000 – 5500) category with (17) frequency and (9.6) percent.

The characteristics of the study' sample based on the study' open questions are listed in table (5), it contains the variables of the study at column number one, the question's answers choices for each question at column two, frequency of each variable choice at column three while at column four the percentage of each category choice:

**Table 5: Frequencies and percentages for the characteristics of study sample:**

<b>variable</b>	<b>category</b>	<b>frequ ency</b>	<b>percen tage</b>
Job	Nurse	100	56.2
	(laboratory technician, Resident doctor, accounting Occupational therapy, optics, Medical Student, Receptionist, Ray technician, pharmacy)	43	24.2

	Physical or occupational therapy	35	19.7
Occupation / Study	Nurse	100	56.2
	General medicine	11	6.17
	Laboratory medicine	7	3.93
	Physical or occupational therapy	35	19.7
	Others	25	14.0
Study country	Other country	21	11.8
	Palestine	157	88.2
Department Section	surgery	27	15.2
	Rehabilitation or occupational therapy	49	27.5
	Heart ICU	20	11.2
	Emergency	13	7.3
	Esoteric	22	12.4
	Others (accounting, clinics, laboratory, covid_19, administrations, eyes, pharmacy, ray _technical)	47	26.4

Table (5) show frequencies and percentages for the answers' categories of the opened questions, it appear that the respondents had answered about the job question by (nurse) with frequency of (100) respondent, and percentage of (56.2), and by (physical or educational therapy) with frequency of (35), and percentage of (19.2), while the other respondents answered by several jobs which are (laboratory technician, Resident doctor, accounting Occupational therapy, optics, Medical Student, Receptionist, Ray technician, pharmacy) with frequency of (43), and percentage of (24.2). For occupation or Study question they answered by (nurse) with frequency of (100) and percentage of (56.2), and by (General medicine) with frequency of (11) and percentage of (6.17) and by Laboratory medicine with frequency of (7) and percentages of (3.93), and by (physical or occupational therapy) with frequency of (35) and percentages of (19.7), while the other studies were with frequencies of (25) and percentage of (14). The study country is Palestine, with frequency of (157) and percentages of (88.2), while in other countries with frequency of (21) and percentages of (11.8). the department or section is classified to surgery, with frequency of (27) and frequency of (15.2), and (Rehabilitation or occupational therapy) with frequency of (49) and percentage of (27.5), and (Heart ICU) with frequency of (20) and frequency of (11.2), and (Emergency) with

frequency of (13) and percentage of (7.3), and (esoteric) with frequency of (22) and frequency of (12.4),

### 4.3 Reliability of the study tool

In order to verify the stability of the study tool, the reliability coefficient of Cronbach's Alpha was calculated for the expressions of the field of moral challenges, and the values of the stability coefficients for the study field and their total degree were as in the following table:

**Table 6: Cronbach's alpha reliability coefficient values**

<b>The field</b>	<b>Cronbach's alpha</b>	<b>Number of paragraphs</b>	<b>Sample size</b>
<b>Job satisfaction</b>	<b>0.945</b>	<b>30</b>	<b>178</b>
<b>Quality of service provided in the hospital</b>	<b>0.961</b>	<b>29</b>	<b>178</b>
<b>Over all degree</b>	<b>0.967</b>	<b>59</b>	<b>178</b>

These values indicate that the percentage of stability of the study results is 94.5% for the field of job satisfaction, 96.1% for the field of the quality of service provided in the hospital, and 96.7% for the total degree, and these percentages are good and indicate the stability of the results of the study significantly.

reliability of the study, where the reliability coefficient Cronbach's Alpha for the field of job satisfaction was 0.945, which is a high value and indicates that the percentage of results stability in the event of re-study is 94.5%, and for the field of quality of services available in the hospital, the reliability coefficient is 0.961, which is a high value and indicates that the stability rate of 96.7% in the event of repeating the study, and perhaps these results can be relied upon and generalized.

### 4.4 Data analysis' results:

To answer on the questions of the study, the collected data were analyzed using means and percentages for each paragraph and for the grand mean.

The research was based on grading according to Likert's quintile scale (strongly agree = 5, agree = 4, agree to some extent = 3, disagree = 2, strongly disagree = 1). While in order to interpret the results, the following average keys were adopted:

1-2.33 Low                      2.34 – 3.66 intermediate                      3.67 – 5 high

#### Employees satisfaction

Career time supports the employee to provide his best quality in work productivity. In addition, career time is a very essential factor as it helps completing the job efficiently, besides that, it creates a perfect working environment between colleagues to work as a team which leads to a higher level in the institution and more beneficiaries to satisfy

**Table 7: Means and SD for the satisfaction of wages and bonus:**

No.	Statement	Mean	SD	Relative weight	Order	Degree
1	Your current salary compared to your colleagues is rewarding	2.8483	1.04396	56.97	3	Intermediate
2	Your current salary is rewarding compared to the salaries of other hospitals	2.8652	1.05970	57.30	2	Intermediate
3	Your current salary is commensurate with your family needs	2.7135	1.06931	54.27	5	Intermediate
4	The process of awarding rewards and incentives is linked to performance	3.0056	1.20965	60.11	1	Intermediate
5	The rewards you receive are commensurate with your performance	2.7809	1.12610	55.62	4	Intermediate
6	The hospital gives rewards and incentives in fair ways	2.6742	1.16711	53.48	6	Intermediate
	Mean: Wages and bonuses	2.8146	.89075	56.29	6	Intermediate



From Table (7), we note that the evaluation of the statements according to the respondents' answers ranged between intermediate, and that the highest of these statements in terms of evaluation is the statement: The process of awarding rewards and incentives is linked to performance, with a mean of 3.00 and a standard deviation of 1.21, and its order is (1) and its relative weight is .60. while the lowest of these paragraphs in terms of evaluation is: The hospital gives rewards and incentives in fair ways, with mean of 2.67, and a standard deviation of 1.17, its order is (6), its relative weight of 53.48, and its evaluation is (intermediate). The overall degree for (wages and bonuses) was 2.81, its standard deviation was 0.89, and the evaluation (Intermediate).

**Table 8: Means and standard deviations for the satisfaction of policies and procedures:**

No.	Statement	Mean	SD	Relative weight	Order	Degree
7	Hospital policies and procedures are clear and appropriate	3.2022	.95881	64.04	2	Intermediate
8	The different units in the hospital provide their services in accordance with the approved policies and procedures	3.4438	.86337	68.88	1	Intermediate
9	The hospital procedures and policies are flexible	3.1629	1.02034	63.26	3	Intermediate
10	The upgrade you get compared to your performance is quite appropriate	2.9719	1.08106	59.44	5	Intermediate
11	I have ample opportunities to participate in decision-making	3.0899	1.12637	61.80	4	Intermediate
	Mean: Policies and procedures	3.17	.17	63.4		intermediate

From Table (8), we note that the evaluation of the statements according to the respondents' answers ranged between intermediate, and that the highest of these statements in terms of evaluation is the statement: The different units in the hospital provide their services in accordance with the approved policies and procedures, with a mean of 3.44 and a standard deviation of .86, and its order is (1) and its relative weight is .68. while the lowest of these paragraphs in terms of evaluation is: The upgrade you get compared to your performance is quite appropriate, with mean of 2.97, and a standard deviation of 1.08, its order is (5), its relative weight of 59.44, and its evaluation is (intermediate). The overall degree for (Policies and procedures) was 3.17, its standard deviation was 0.17, and the evaluation (Intermediate).

**Table 9: Means and standard deviations for the satisfaction of training and qualification:**

No.	Statement	mean	SD	Relative weight	Order	Degree
12	You will be attached to training programs that help you provide the best at work	2.8876	1.05164	57.75	4	Intermediate
13	Training and rehabilitation opportunities are distributed equally in the hospital	2.9719	1.12209	59.44	1	Intermediate
14	I am encouraged to attend conferences and seminars	2.9438	1.14349	58.88	2	Intermediate
15	The hospital provides training programs that continuously meet the employee's work requirements	2.928	1.10325	62.13	3	Intermediate
	Mean: Training and qualification	2.94	.35	58.8		intermediate

From Table (9), we note that the evaluation of the statements according to the respondents' answers ranged between intermediate, and that the highest of these statements in terms of evaluation is the statement: Training and rehabilitation opportunities are distributed equally in the hospital, with a mean of 2.97 and a standard deviation of 1.12, and its order is (1) and its

relative weight is .59. while the lowest of these paragraphs in terms of evaluation is: You will be attached to training programs that help you provide the best at work, with mean of 2.88, and a standard deviation of 1.05, its order is (4), its relative weight of 57.75, and its evaluation is (intermediate). The overall degree for (**Training and qualification**) was 2.94, its standard deviation was 0.35, and the evaluation (Intermediate).

**Table 10: Means and SD for the satisfaction of relationships with colleagues and superiors**

<b>No.</b>	<b>Statement</b>	<b>mean</b>	<b>SD</b>	<b>Relative weight</b>	<b>Order</b>	<b>Degree</b>
<b>16</b>	My direct officials treat me fairly	3.4270	1.01834	68.54	6	Intermediate
<b>17</b>	My direct officials treat me with respect	3.6629	.96192	73.26	3	Intermediate
<b>18</b>	My direct supervisor is working to develop my performance and increase my practical experience	3.5337	.99234	70.67	4	Intermediate
<b>19</b>	My direct supervisor works to overcome the difficulties and problems facing my work	3.5056	.95223	70.11	5	Intermediate
<b>20</b>	My colleagues help me to complete the tasks assigned to me	3.7079	.91691	74.16	2	High
<b>21</b>	My colleagues are constantly cooperating with me	3.7191	.96244	74.38	1	High
	Mean: relationships with colleagues and superiors	3.59	1.20	71.8		intermediate

From Table (10), we note that the evaluation of the statements according to the respondents' answers were intermediate, except one paragraph with (high) evaluation, which is the highest, this statements is: My colleagues are constantly cooperating with me, with a mean of 3.71 and a

standard deviation of .96, and its order is (1) and its relative weight is .74. while the lowest of these paragraphs in terms of evaluation is: My direct officials treat me fairly, with mean of 3.42, and a standard deviation of 1.01, its order is (6), its relative weight of 68.54, and its evaluation is (intermediate). The overall degree for (**Relationships with colleagues and superiors**) was 2.94, its standard deviation was 0.35, and the evaluation (Intermediate).

**Table 11: Means and SD of the satisfaction of futures, services and benefits:**

No.	Statement	mean	SD	Relative weight	Order	Degree
22	The hospital offers appropriate advantages compared to other hospitals (transportation, loans, advances, etc.)	2.72	1.14969	54.38	5	Intermediate
23	The hospital provides its employees with a variety of services that meet their needs	2.96	1.10888	59.10	4	Intermediate
24	The hospital provides you with adequate assistance in case of emergency personal circumstances	3.01	1.06031	60.11	3	Intermediate
25	My job is comfortable and safe	3.13	1.11174	62.70	1	Intermediate
26	The hospital provides me with adequate health insurance	3.02	1.18596	60.34	2	Intermediate
	Mean: Services and benefits	2.96	.15			intermediate

From Table (11), we note that the evaluation of all statements according to the respondents' answers were intermediate, the highest of these statements is: My job is comfortable and safe, with a mean of 3.13 and a standard deviation of 1.11, and its order is (1) and its relative weight is 62.7. while the lowest of these paragraphs in terms of evaluation is: The hospital offers appropriate advantages compared to other hospitals (transportation, loans, advances, etc.), with mean

of 2.72, and a standard deviation of 1.15, its order is (5), its relative weight of 54.38, and its evaluation is (intermediate). The overall degree for (**Features**) was 2.96, its standard deviation was 0.15, and the evaluation (Intermediate).

**Table 12: Means and SD for the satisfaction of working conditions**

No.	Statement	mean	SD	Relative weight	Order	Degree
27	The hospital is working to improve the work environment	3.22	1.02636	64.38	4	Intermediate
28	The hospital has laboratories and equipment that meet the needs of work	3.6461	.95285	72.92	1	Intermediate
29	The working environment (air conditioning, office, lighting) is sufficient and comfortable	3.4157	1.05025	68.31	2	Intermediate
30	The hospital provides all the requirements that help me complete my work	3.3596	.98287	67.19	3	intermediate
	Mean: working conditions	3.41	.17	68.2		intermediate

From Table (12), we note that the evaluation of the statements according to the respondents' answers were intermediate for all, and that the highest of these statements in terms of evaluation is the statement: The hospital has laboratories and equipment that meet the needs of work, with a mean of 3.64 and a standard deviation of 1.02, and its order is (1) and its relative weight is .73. while the lowest of these paragraphs in terms of evaluation is: The hospital is working to improve the work environment, with mean of 3.22, and a standard deviation of 1.02, its order is (4), its relative weight of 64.38, and its evaluation is (intermediate). The overall degree for (**working conditions**) was 3.41, its standard deviation was 0.17, and the evaluation (Intermediate).

**Table 13: Means and standard deviations, trends in job satisfaction:**

No.	Job satisfaction components	mean	SD	Relative weight	order	degree
1	Wages and bonuses	2.8146	.89075	56.29	6	Intermediate
2	Policies and procedures	3.1742	.81122	63.48	3	Intermediate
3	Training and qualification	2.9775	1.09257	59.55	4	Intermediate
4	Relationships with colleagues and superiors	3.5927	.76673	71.85	1	Intermediate
5	Features, services and benefits	2.9663	.96480	59.33	5	Intermediate
6	working conditions	3.4101	.80670	68.20	2	intermediate
	<b>Job satisfaction (over all mean)</b>	3.15	.30	63		intermediate

From the data in Table (13), it appears that the levels of the elements were average and evaluated (intermediate) for all fields, the highest evaluation was for the field of (relationships with colleagues and clients), their evaluation was intermediate, with a mean of 3.59, and a standard deviation of 0.77, with Rank (1), while the lowest evaluation was for the field of (Wages and bonuses) with mean (2.81) and standard deviation (.89) and Rank (6). And the overall mean which is the (job satisfaction) is 3.15 with standard deviation of .30.

Employees opinion regarding service quality:

There is a positive relationship between employees opinion regarding service quality and work production as when the employee's consciousness increases about service quality, in the other hand, work production goes up too. Moreover, employee's consciousness helps saving the entity resources, increases its work production, providing a better service for beneficiaries and also the workflow

**Table 14: Means and SD of Tangible aspect provided in the hospital**

No.	Statement	mean	SD	Relative weight	order	degree
1	This hospital has advanced technical equipment, and devices	3.5843	.98931	71.70	4	Intermediate
2	This hospital has beautiful and attractive facilities and halls	3.3539	.99349	67.08	8	Intermediate
3	The staff of this hospital appears dressed beautifully and cleanly	3.6180	.83707	72.36	2	Intermediate
4	The hospital has a suitable exterior design	3.5899	.89273	71.80	3	Intermediate
5	The hospital has sign boards	3.6798	.85947	73.60	1	Intermediate
6	The hospital provides meals at a high quality level	3.4775	.97543	69.55	7	Intermediate
7	The hospital provides a variety of supportive services (chairs, seating areas, waiting rooms)	3.5562	.90178	71.12	6	Intermediate
8	The hospital provides all kinds of medicines	3.5843	.95443	71.69	5	Intermediate
9	All hospital facilities are very clean	3.5730	.99021	71.46	6	intermediate
	Mean: Tangible aspect	3.55	.09	71		intermediate

From Table (14), we note that the evaluation of all the statements according to the respondents' answers are intermediate, the highest of these statement upon the respondents answers evaluation is: The hospital has sign boards, with mean of 3.67 and a standard deviation of 0.86, and its order is (1) and its relative weight is 73.6. while the lowest of these statements in terms of evaluation is the statement: This hospital has beautiful and attractive facilities and halls, with a mean of 3.35, a standard deviation of 0.67, its rank (8), The overall degree is 3.55 and its standard deviation is 0.09 with and evaluation of (intermediate).

**Table 15: Means and SD of the reliability aspect provided in the hospital**

No.	Statement	mean	SD	Relative weight	Order	Degree
10	The management of this hospital is committed to its promises to patients in the field of providing health and treatment services	3.4719	.96948	69.44	5	intermediate
11	This hospital is working hard to solve the patient's problems	3.6180	.90205	72.36	4	Intermediate
12	There is confidence in the capabilities and skills of the medical staff in the hospital	3.6180	.87663	72.36	3	Intermediate
13	This hospital provides health services and treatment according to the specified dates	3.6910	.83024	73.82	2	High
14	The management of this hospital is interested in accurately recording information about patients and their health status in records and computers	3.7191	.88284	74.38	1	high
	Mean: Reliability	3.63	.09	72.6		intermediate

From Table (15), we note that the evaluation of all the statements according to the respondents' answers were ranged between (intermediate and high) the highest of these statement upon the respondents answers evaluation is: The management of this hospital is interested in accurately recording information about patients and their health status in records and computers, with mean of 3.71 and a standard deviation of 0.90, and its order is (1) and its relative weight is 74.38. while the lowest of these statements in terms of evaluation is the statement: The management of this hospital is committed to its promises to patients in the field of



providing health and treatment services, with a mean of 3.47, a standard deviation of 0.97, its rank (5), The overall degree is 3.63 and its standard deviation is 0.09 with an evaluation of (intermediate).

**Table 16: Means and SD of the response aspect provided in the hospital**

No.	Statement	mean	SD	Relative weight	Order	Degree
15	Patients in this hospital are informed of the exact dates for their treatment	3.5393	.92126	70.79	5	Intermediate
16	The employees of this hospital provide immediate treatment or health service to patients	3.6292	.84214	72.58	4	Intermediate
17	The staff of this hospital wants to help patients on a regular basis	3.7528	.90549	75.06	1	High
18	Although the staff in this hospital is busy with providing services, they respond to patients' requests immediately	3.7135	.81784	74.27	2	High
19	The hospital staff quickly solves the patient's problems	3.6854	.92786	73.71	3	high
	Mean: Response	3.66	.08	73.2		intermediate

From Table (16), we note that the evaluation of all the statements according to the respondents' answers were ranged between (intermediate and high), and the highest of these statement upon the respondents answers evaluation is: The staff of this hospital wants to help patients on a regular basis, with mean of 3.75 and a standard deviation of 0.84, and its order is (1) and its relative weight is 75.06. while the lowest of these statements in terms of evaluation

is the statement: Patients in this hospital are informed of the exact dates for their treatment, with a mean of 3.53, a standard deviation of 0.92, its rank (5), The overall degree is 3.66 and its standard deviation is 0.08 with evaluation of (intermediate).

**Table 17: Means and SD of the safety provided in the hospital**

<b>No.</b>	<b>Statement</b>	<b>mean</b>	<b>SD</b>	<b>Relative weight</b>	<b>Order</b>	<b>Degree</b>
<b>20</b>	The patient feels safe in the hospital	3.5730	.88793	71.46	4	Intermediate
<b>21</b>	The hospital staff has high capabilities and skills	3.7303	.89901	74.61	3	High
<b>22</b>	The patient's condition is continuously monitored	3.7528	.87373	75.06	2	High
<b>23</b>	The hospital maintains confidentiality of patient information	3.8371	.90284	76.74	1	High
<b>24</b>	The hospital administration provides all kinds of support to the employees to carry out their work with high efficiency	3.5337	1.03142	70.67	5	Intermediate
	Over all mean	3.68	.13	73.6		High

From Table (17), we note that the evaluation of all the statements according to the respondents' answers were ranged between (intermediate and high), and the highest of these statement upon the respondents answers evaluation is: The hospital maintains confidentiality of patient information, with mean of 3.83 and a standard deviation of 0.90, and its order is (1) and its relative weight is 76.74. while the lowest of these statements in terms of evaluation is the statement: The hospital administration provides all kinds of support to the employees to carry out their work with high efficiency, with a mean of 3.53, a standard deviation of 1.03, its rank (5), The overall degree is 3.68 and its standard deviation is 0.13 with (high) evaluation .

**Table 18: Means and SD of the sympathy aspect provided in the hospital**

<b>No.</b>	<b>Statement</b>	<b>mean</b>	<b>SD</b>	<b>Relative weight</b>	<b>Order</b>	<b>Degree</b>
<b>25</b>	The hospital staff sympathizes with the patient in all his issues	3.6348	.86770	72.70	4	Intermediate
<b>26</b>	The hospital administration puts the patient's interests at the forefront of its concerns	3.6798	.92286	73.60	2	High
<b>27</b>	The working hours and the time allotted for the service provided are compatible	3.5225	.95790	70.45	5	Intermediate
<b>28</b>	Hospital staff perceive the patient's needs and problems	3.6685	.82148	73.37	3	Intermediate
<b>29</b>	Employees put the patient's interests first	3.736	.9038	74.72	1	High
	Mean: Sympathy	3.65	.08	73		intermediate

From Table (8), we note that the evaluation of all the statements according to the respondents' answers were ranged between (intermediate and high), and the highest of these statement upon the respondents answers evaluation is: Employees put the patient's interests first, with mean of 3.73 and a standard deviation of 0.90, and its order is (1) and its relative weight is 74.72. while the lowest of these statements in terms of evaluation is the statement: The working hours and the time allotted for the service provided are compatible, with a mean of 3.52, a standard deviation of .95, its rank (5), The overall degree is 3.65 and its standard deviation is 0.08 with (intermediate) evaluation

**Table 19: Means and SD of the element of quality of services provided in the hospital**

<b>No.</b>	<b>Answers</b>	<b>Mean</b>	<b>SD</b>	<b>relative weight</b>	<b>Rank</b>	<b>Evaluation</b>
<b>1</b>	Tangible aspects	3.5574	.70664	71.15	5	intermediate
<b>2</b>	Reliability	3.6236	.73254	72.47	4	Intermediate
<b>3</b>	Response	3.6640	.73041	73.28	2	Intermediate
<b>4</b>	Safety	3.6854	.71427	73.71	1	Intermediate
<b>5</b>	Sympathy	3.6483	.73594	72.97	3	intermediate
	Mean: Quality of service	3.63	.05	72.5		intermediate

Through the data contained in Table (19), we note that all their trends in services quality were of high levels, with means greater than the value 3.40, and (intermediate) assessment, and close to (high).

It appears From this table that the highest evaluation was for the field of (Safety), it's evaluation was high, with a mean of 3.68, and a standard deviation of 0.71, with Rank (1), while the lowest evaluation was for the field of (Tangible aspects) with mean (3.55) and standard deviation (.70) and Rank (5). And the overall mean which is the **(Quality of service provided in the hospital)** is 3.64 with standard deviation of .05.

## 4.5 Study hypotheses:

The analyses of the data have come to answer the following questions:

What is the relationship between elements of job satisfaction and demographic variables?

What is the relationship between elements of perceived quality of services and demographic variables?

What is the relation between job satisfaction, perceived quality of services and demographic variables?

**The first hypothesis: (testing the significance of differences based on the Gender variable)**

There are no statistically significant differences at the significance level  $\alpha > 0.05$  in the level of employee job satisfaction and the quality of services provided in the Arab Society for Rehabilitation Hospital from the respondents' point of view due to the gender variable.

There are no statistically significant differences at the significance level  $\alpha > 0.05$  in the level of employee job satisfaction's elements (Wages & bonuses, Policies & procedures, Training & qualification, Relationships, "Features, services, & benefits", Working conditions) provided in the Arab Society for Rehabilitation Hospital from the respondents' point of view due to the gender variable.

There are no statistically significant differences at the significance level  $\alpha > 0.05$  in the level of the quality of services' elements (Tangibility, Reliability, Responsiveness, Assurance and Empathy) provided in the Arab Society for Rehabilitation Hospital from the respondents' point of view due to the gender variable.

To verify the validity of these three hypotheses, we use the t-test to measure the significance of the differences in the means of the study' fields and in the elements of each field based on the respondents' answers for each of the fields' paragraphs, as in Table:(20)

**Table 20: Differences in the level of elements of job satisfaction from the respondents' point of view due to the gender**

Field	Gender	frequency	mean	Standard deviation	T_value	Df	P_value	significancy
Wages & bonuses	Male	103	2.8932	.86629	1.383	176	.168	Not sig
	Female	75	2.7067	.91814				
Policies & procedures	Male	103	3.2583	.77744	1.628	176	.105	Not sig
	Female	75	3.0587	.84711				
Training & qualification	Male	103	3.0097	.93994	.459	176	.646	Not sig
	Female	75	2.9333	1.27828				
Relationships	Male	103	3.6246	.73235	.649	176	.517	Not sig
	Female	75	3.5489	.81455				
Features, services, & benefits	Male	103	3.0427	.93877	1.240	176	.216	Not sig
	Female	75	2.8613	.99619				
Working conditions	Male	103	3.4976	.77214	1.704	176	.090	Not sig
	Female	75	3.2900	.84233				

The analysing of the data contained in Table (20) indicate that there are no statistically significant differences at the significance level  $\alpha > 0.05$  in the elements of the employee job satisfaction in the Arab Rehabilitation Society Hospital from the respondents' point view due to the gender variable. Where the mean's male evaluation of wages and bonuses is 2.89, while the females' mean evaluation for the wages and bonuses was 2.70 and the probability value 0.168, and the mean's males for the policies was 3.25 and the mean's females was 3.05 and the probability value was 0.105. and the mean's male evaluation for the training and qualifications is 3.01, while the females' mean evaluation for the training and qualifications was 2.93 and the probability value 0.646, and the mean's males for the (Relationships) was 3.62 and the mean's females was 3.55 and the probability value was 0.517. the mean's male evaluation of (features, services and benefits) is 3.04, while the females' mean evaluation for

the (features, services and benefits) was 2.86 and the probability value 0.216, and the mean's males for the (working conditions) was 3.50 and the mean's females was 3.29 and the probability value was 0.90. and because all these probabilistic values are greater than 0.05, they indicate However, these differences are not morally significant, but are only apparent.

**Table 21: Differences in the level of elements of the quality of services from the respondents' point of view due to the gender.**

Field	Gender	frequency	mean	Standard deviation	T_value	df	P_value	significancy
Tangibility	Male	103	3.6677	.68041	2.476	176	.014	Not sig
	Female	75	3.4059	.71834				
Reliability	Male	103	3.6854	.72035	1.323	176	.188	Not sig
	Female	75	3.5387	.74542				
Responsiveness	Male	103	3.7301	.68526	1.418	176	.158	Not sig
	Female	75	3.5733	.78385				
Assurance	Male	103	3.7126	.69150	.595	176	.553	Not sig
	Female	75	3.6480	.74749				
Empathy	Male	103	3.7204	.70813	1.537	176	.126	Not sig
	Female	75	3.5493	.76624				

The analysing of the data contained in Table (21) indicate that there are no statistically significant differences at the significance level  $\alpha \leq 0.05$  in the elements of the quality of services provided in the Arab Rehabilitation Society Hospital from the respondents' point view due to the gender variable. Where the mean's male evaluation of (Tangibility) is 3.67, while the females' mean evaluation for the (Tangibility) was 3.41 and the probability value 0.014, and the males' mean for (Reliability) was 3.69 and the females' mean was 3.53 and the probability value was 0.188. and the males' mean evaluation for the (Responsiveness) is 3.73, while the females' mean evaluation for the (responsiveness) was 3.57 and the probability value 0.158, and the males' mean for the (Assurance) was 3.71 and the females' mean was

3.65 and the probability value was 0.553. the males' mean evaluation for (empathy) is 3.72, while the females' mean evaluation for the (empathy) was 3.54 and the probability value 0.126,. and because all these probabilistic values are greater than 0.05, they indicate However, these differences are not morally significant, but are only apparent. Except for the tangipility, the probability value is .014.

**Table 22: Differences in the level of job satisfaction and the quality of services from the respondents' point of view due to the gender.**

Field	Gender	frequency	mean	SD	T_value	Df	P_value	significancy
Job satisfaction	Male	103	3.2214	.65641	1.449	176	.149	Not sig
	Female	75	3.0676	.75439				
quality of provided services	Male	103	3.6984	.59402	1.833	176	.068	Not sig
	Female	75	3.5241	.66766				

The analysing of the data contained in Table (22) indicate that there are no statistically significant differences at the significance level  $\alpha \leq 0.05$  in the level of employee job satisfaction and the quality of services provided in the Arab Rehabilitation Society Hospital from the respondents' point view due to the gender variable. Where the mean's male evaluation of job satisfaction is 3.22, while the females' mean evaluation was 3.06 and the probability value 0.149, and the mean's males for the quality of services was 3.70 and the mean's females for the quality of services was 3.52 and the probability value was 0.068, and because all these probabilistic values are greater than 0.05, they indicate However, these differences are not morally significant, but are only apparent.

**The second hypothesis:** (testing the significance of differences based on the variable of social status)

There are no statistically significant differences at the significance level  $\alpha \leq 0.05$  in the level of employee job satisfaction and the quality of services provided in the Arab Society for Rehabilitation Hospital from the respondents' point of view due to the (Marital status) variable.



There are no statistically significant differences at the significance level  $\alpha \leq 0.05$  in the level of employee job satisfaction's elements (Wages & bonuses, Policies & procedures, Training & qualification, Relationships , “Features, services, & benefits”, Working conditions) provided in the Arab Society for Rehabilitation Hospital from the respondents' point of view due to the (Marital status) variable.

There are no statistically significant differences at the significance level  $\alpha \leq 0.05$  in the level of the quality of services' elements (Tangibility, Reliability, Responsiveness, Assurance and Empathy) provided in the Arab Society for Rehabilitation Hospital from the respondents' point of view due to the (Marital status) variable.

To test these hypothesis, we use t-test to measure the significance of the differences in the means of the study fields based on the respondents' answers for each of the fields' paragraphs, as shown in table (23):

**Table 23:Differences in the level of elements of job satisfaction from the respondents' point of view due to the Marital Status**

Field	Marital status	frequency	mean	SD	T_value	df	P_value	significancy
Wages & bonuses	Single	110	2.7545	.84825	-1.145	176	.254	Not sig
	Married	68	2.9118	.95394				
Policies & procedures	Single	110	3.1291	.83219	-.942	176	.347	Not sig
	Married	68	3.2471	.77661				
Training & qualification	Single	110	2.9386	1.16189	-.603	176	.547	Not sig
	Married	68	3.0404	.97507				
Relationships	Single	110	3.5485	.77858	-.978	176	.329	Not sig
	Married	68	3.6642	.74730				
Features, services, & benefits	Single	110	2.8418	1.01623	-2.312	161.280	.022	Not sig
	Married	68	3.1676	.84402				
Working conditions	Single	110	3.3136	.85967	-2.048	176	.042	Not sig
	Married	68	3.5662	.69058				

The analysing of the data contained in Table (23) indicate that there are no statistically significant differences at the significance level  $\alpha \leq 0.05$  in the elements of the employee job satisfaction in the Arab Rehabilitation Society Hospital from the respondents' point view due to the (Marital Status) variable. Where the singles' mean evaluation of (wages and bonuses) is 2.75, while the Married' mean evaluation for the (wages and bonuses) was 2.91 and the probability value 0.254, and the singles' mean for the (policies and procedure) was 3.13 and the married' mean was 3.24 and the probability value was 0.347. and the single' mean evaluation for the (training and qualifications) is 2.93, while the married' mean evaluation for the (training and qualifications) was 3.04 and the probability value 0.547. and the single' mean for the (Relationships) was 3.54 and the married' mean was 3.66 and the probability value was 0.329. and because these probabilistic values are greater than 0.05, they indicate However, these differences are morally not significant, but are only apparent

While the single' mean evaluation of (features, services and benefits) is 2.84, and the married' mean evaluation for the (features, services and benefits) was 3.16 and the probability value 0.022, and the single' mean for the (working conditions) was 3.31 and the married' mean was 3.57 and the probability value was 0.042. and because these probabilistic values are less than 0.05, they indicate However, these differences are morally significant.

**Table 24:Differences in the level of elements of the quality of services from the respondents' point of view due to the marital status**

Field	Marital status	frequency	mean	SD	T_value	df	P_value	significancy
Tangibility	Single	110	3.4879	.75721	-1.679	176	.095	Not sig
	Married	68	3.6699	.60462				
Reliability	Single	110	3.6073	.81316	-.377	176	.706	Not sig
	Married	68	3.6500	.58373				
Responsiveness	Single	110	3.6382	.79885	-.600	176	.549	Not sig
	Married	68	3.7059	.60690				

Assurance	Single	110	3.6455	.75012	-.949	176	.344	Not sig
	Married	68	3.7500	.65232				
Empathy	Single	110	3.6564	.79546	.185	176	.853	Not sig
	Married	68	3.6353	.63334				

The analysing of the data contained in Table (24) indicate that there are no statistically significant differences at the significance level  $\alpha \leq 0.05$  in the elements of the quality of services provided in the Arab Rehabilitation Society Hospital from the respondents' point view due to the (marital status) variable. Where the single' mean evaluation of (Tangibility) is 3.48, while the married' mean evaluation for the (Tangibility) was 3.66 and the probability value 0.095, and the single' mean for (Reliability) was 3.61 and the married' mean was 3.55 and the probability value was 0.706. and the single' mean evaluation for the (Responsiveness) is 3.63, while the married' mean evaluation for the (responsiveness) was 3.71 and the probability value 0.549, and the single' mean for the (Assurance) was 3.64 and the married' mean was 3.75 and the probability value was 0.344. the single' mean evaluation for (empathy) is 3.66, while the married' mean evaluation for the (empathy) was 3.64 and the probability value 0.853, and because all these probabilistic values are greater than 0.05, they indicate However, these differences are not morally significant, but are only apparent.

**Table 25: Differences in the level of job satisfaction and the quality of services from the respondents' point of view, due to the marital status**

Field	Marital status	frequency	mean	SD	T_value	df	P_value	significancy
Job satisfaction	Single	110	3.0894	.72197	-1.632	176	.104	Not sig
	Married	68	3.2652	.65761				
quality of provided services	Single	110	3.5906	.69307	-.925	176	.356	Not sig
	married	68	3.6805	.51252				

The results of analyzing the data contained in Table (25) indicate that there are no statistically significant differences at the significance level  $\alpha \leq 0.05$  in the level of employee job satisfaction and the quality of services provided in the Arab Rehabilitation Society Hospital from the respondents' point of view due to the variable of social status. Where the mean of the singles category for job satisfaction was 3.09, while the mean of the married couples for job satisfaction was 3.06 and the probability value 0.104, the mean of the singles category was 3.59 for the quality of services and the mean of the married couples for the quality of services was 3.68 and the probabilistic value was 0.356, and because all these probabilistic values are greater than 0.05, so it indicates that these differences are not significant, but only apparent.

**The third hypothesis:** (testing the significance of differences based on the variable of the study country)

There are no statistically significant differences at the significance level  $\alpha \leq 0.05$  in the level of employee job satisfaction and the quality of services provided in the Arab Society for Rehabilitation Hospital from the respondents' point of view due to the (study country) variable.

There are no statistically significant differences at the significance level  $\alpha \leq 0.05$  in the level of employee job satisfaction's elements (Wages & bonuses, Policies & procedures, Training & qualification, Relationships , "Features, services, & benefits", Working conditions) provided in the Arab Society for Rehabilitation Hospital from the respondents' point of view due to the (Study country) variable.

There are no statistically significant differences at the significance level  $\alpha \leq 0.05$  in the level of the quality of services' elements (Tangibility, Reliability, Responsiveness, Assurance and Empathy) provided in the Arab Society for Rehabilitation Hospital from the respondents' point of view due to the (study country) variable.

To test these hypotheses, we use the t-test to measure the significance of the differences in the means of the study fields based on the respondents' answers for each of the fields' paragraphs, as shown in table (26):

**Table 26: Differences in the level of elements of job satisfaction from the respondents' point of view due to the study country**

field	Country of study	frequency	mean	SD	T_value	df	P_value	significancy
Wages & bonuses	Other country	21	2.5714	.80376	-1.335	176	.184	Not sig
	palestine	157	2.8471	.89911				
Polices & procedures	Other country	21	3.2667	.64601	.555	176	.579	Not sig
	palestine	157	3.1618	.83178				
Training & qualification	Other country	21	2.8929	1.12797	-.259	176	.796	Not sig
	palestine	157	2.9506	.93817				
Relationships	Other country	21	3.5952	.63590	-.259	176	.796	Not sig
	palestine	157	3.5924	.78433				
Features, services, & benefits	Other country	21	2.5905	1.06297	-1.915	176	.057	Not sig
	palestine	157	3.0166	.94325				
Working conditions	Other country	21	3.3810	.62559	-.176	176	.861	Not sig
	palestine	157	3.4140	.82950				

The analysing of the data contained in Table (8) indicate that there are no statistically significant differences at the significance level  $\alpha \leq 0.05$  in the elements of the employee job satisfaction in the Arab Rehabilitation Society Hospital from the respondents' point view due to the (country of study) variable. Where the mean evaluation of (wages and bonuses) for those studied at Palestine is 2.57, and for those studied at (other countries) is 2.57 and the probability value 0.184, and the means for those studied at palesine for the (policies and procedure) was 3.16 and for those studied at other countries is 3.26 and the probability value was 0.579. and the the mean evaluation for the (training and qualifications) for those studied at Palistine is 2.95, while for those studied at other countries is 2.89 and the probability value 0.796. and the mean for the (Relationships) for those studied at Palestine was 3.59 and for

those studied at other countries is 3.59 and the probability value was 0.796. While the mean evaluation of (features, services and benefits) for those studied at Palestine is 3.02, and for those studied at other countries 2.59 and the probability value 0.057. and the mean for the (working conditions) for those studied at Palestine is 3.41 and for those studied at other countries 3.38 and the probability value was 0.861. and because these probabilistic values are greater than 0.05, they indicate However, these differences are morally not significant, but are only apparent

**Table 27: Differences in the level of elements of the quality of services from the respondents' point of view due to the marital status.**

field	Country of study	frequency	mean	SD	T_value	df	P_value	significancy
Tangibility	Other country	21	3.6138	.70852	.388	176	.698	Not sig
	palestine	157	3.5499	.70831				
Reliability	Other country	21	3.8381	.77877	1.433	176	.154	Not sig
	palestine	157	3.5949	.72393				
Responsiveness	Other country	21	3.8476	.69543	1.228	176	.221	Not sig
	palestine	157	3.6395	.73360				
Assurance	Other country	21	3.7238	.67964	.262	176	.794	Not sig
	palestine	157	3.6803	.72070				
Empathy	Other country	21	3.6571	.78522	.058	176	.954	Not sig
	palestine	157	3.6471	.73175				

The analysing of the data contained in Table (8) indicate that there are no statistically significant differences at the significance level  $\alpha \leq 0.05$  in the elements of the quality of

services provided in the Arab Rehabilitation Society Hospital from the respondents' point view due to the (marital status) variable. Where the single' mean evaluation of (Tangibility) is 3.48, while the married' mean evaluation for the (Tangibility) was 3.66 and the probability value 0.095, and the single' mean for (Reliability) was 3.61 and the married' mean was 3.55 and the probability value was 0.706. and the single' mean evaluation for the (Responsiveness) is 3.63, while the married' mean evaluation for the (responsiveness) was 3.71 and the probability value 0.549, and the single' mean for the (Assurance) was 3.64 and the married' mean was 3.75 and the probability value was 0.344. the single' mean evaluation for (empathy) is 3.66, while the married' mean evaluation for the (empathy) was 3.64 and the probability value 0.853, and because all these probabilistic values are greater than 0.05, they indicate However, these differences are not morally significant, but are only apparent.

**Table 28: Differences in the level of job satisfaction and the quality of services from the respondents' point of view, due to the variable of the country to study**

field	Study country	frequency	mean	SD	T_value	df	P_value	significancy
Job satisfaction	Other country	21	3.0841	.59167	-.508	175	.612	Not sig
	Palestine	156	3.1673	.71813				
quality of provided services	Other country	21	3.7192	.61067	.697	175	.487	Not sig
	Palestine	156	3.6172	.63276				

The results of analyzing the data contained in Table (10) indicate that there are no statistically significant differences at the significance level  $\alpha \leq 0.05$  in the level of employee job satisfaction and the quality of services provided in the Arab Rehabilitation Society Hospital from the respondents' point of view due to the variable of the study country. Where the mean evaluation of the category who studied outside Palestine of job satisfaction was 3.08, while the mean evaluation of the category who studied inside Palestine of job satisfaction was 3.17 and the probabilistic value of 0.612, and the mean evaluation of the category who studied outside palestine for the quality of services was 3.72 and the mean evaluation for the category who studied inside Palestine for the quality of services was 3.62 and the probabilistic value It is

0.487, and because all of these probability values are greater than 0.05, they indicate that these differences are not significant, but are only apparent differences.

**Fourth hypothesis:** (testing the significance of differences based on the educational level variable)

There are no statistically significant differences at the significance level  $\alpha \leq 0.05$  in the level of employee job satisfaction and the quality of services provided in the Arab Society for Rehabilitation Hospital from the respondents' point of view due to the (educational level) variable.

There are no statistically significant differences at the significance level  $\alpha \leq 0.05$  in the level of employee job satisfaction's elements (Wages & bonuses, Policies & procedures, Training & qualification, "Features, services, & benefits", Working conditions) provided in the Arab Society for Rehabilitation Hospital from the respondents' point of view due to the (educational level) variable.

There are no statistically significant differences at the significance level  $\alpha \leq 0.05$  in the level of the quality of services' elements (Tangibility, Reliability, Responsiveness, Assurance and Empathy) provided in the Arab Society for Rehabilitation Hospital from the respondents' point of view due to the (educational level) variable.

To test these hypotheses, we use the One way ANOVA test to measure the significance of the differences in the study's means, due to the educational level variable, as shown in Table(11) .



**Table 29: Differences in the level of elements of job satisfaction from the respondents' point of view due to the educational level**

field	Educational level	frequency	mean	SD	F_value	P_value	significancy
Wages & bonuses	Diploma	29	2.5977	.92958	1.303	.274	Not sig
	Bachelor's	135	2.8395	.87541			
	Higher Diploma or Master's	14	3.0238	.94022			
Polices & procedures	Diploma	29	3.1034	.91748	.524	.593	Not sig
	Bachelor's	135	3.1689	.79958			
	Higher Diploma or Master's	14	3.3714	.70974			
Training & qualification	Diploma	29	2.9914	.93418	.877	.418	
	Bachelor's	135	2.9019	.97836			
	Higher Diploma or Master's	14	3.2500	.80861			
Relationships	Diploma	29	3.5575	.79467	.040	.961	Not sig
	Bachelor's	135	3.6012	.77269			
	Higher Diploma or Master's	14	3.5833	.69722			
Features, services, & benefits	Diploma	29	2.8276	1.17561	.578	.562	Not sig
	Bachelor's	135	2.9763	.94159			
	Higher Diploma or Master's	14	3.1571	.68916			
Working conditions	Diploma	29	3.4828	.99537	.139	.870	Not sig
	Bachelor's	135	3.3963	.76806			
	Higher Diploma or Master's	14	3.3929	.79490			

One way ANOVA Test

The results of analysing the data contained in Table (29) indicate that there are no statistically significant differences at the significance level  $\alpha \leq 0.05$  in the level of the elements of job satisfaction for the employee in the Arab Society for Rehabilitation Hospital from the respondents' point of view due to the educational level variable. The means for the wages and bonuses for the various categories of the (educational level) are closed and do not differ significantly, so that (wages and bonuses) mean for the Diploma degree is 2.6, and for Bachelor's degree is 2.84, and for master degree or higher is 3.02, and the probability value is .274. the mean of the (training and qualification) for the diploma degree is 3.00, for the Bachelor's is 2.90, for the master or higher is 3.25 and the probability value is . the mean of the (Relationship ) variable, is 3.55 for the diploma degree, 3.60 for the Bachelor's degree, 3.58 for master or higher, and the probability value .961. while the mean of the (features, services & benefits) is 2.83 for the Diploma degree, 2.90 for the Bachelor's, degree, 3.16 for the master degree or higher, and the probability degree is .592. and the mean of the (work conditions ) variable, is 3.48 for the diploma degree, 3.40 for the Bachelor's degree, 3.39 for master or higher, and the probability value .870. and as these probability values is more than the critical value (0.05) then, there is no statistical differences between these means for the different categories.

**Table 30: Differences in the level of the quality of services' elements from the respondents' point of view due to the educational level**

field	Educational level	frequency	mean	SD	F_value	P_value	significancy
Tangibility	Diploma	29	3.6973	.86215	.686	.505	Not sig
	Bachelor's	135	3.5276	.68193			
	Higher Diploma or Master's	14	3.5556	.59277			
Reliability	Diploma	29	3.8552	.80516	2.681	.071	Not sig
	Bachelor's	135	3.5526	.70825			
	Higher Diploma or Master's	14	3.8286	.72263			
Responsiveness	Diploma	29	3.7724	.85811	.674	.511	
	Bachelor's	135	3.6281	.68857			
	Higher Diploma or Master's	14	3.7857	.85742			
Assurance	Diploma	29	3.7034	.90494	.016	.984	
	Bachelor's	135	3.6800	.67722			
	Higher Diploma or Master's	14	3.7000	.67368			
Empathy	Diploma	29	3.7379	.89139	.323	.725	
	Bachelor's	135	3.6237	.70860			
	Higher Diploma or Master's	14	3.7000	.67823			

One way ANOVA Test

The results of analysing the data contained in Table (30) indicate that there are no statistically significant differences at the significance level  $\alpha \leq 0.05$  in the level of the elements of quality of services provided in the Arab Society for Rehabilitation Hospital from the respondents' point of view due to the educational level variable. The mean of (Tangibility) variable is 3.70

for the Diploma degree, 3.53 for Bachelor's degree, and 3.56 for master degree or higher, and the probability value is .505. the mean of the (Reliability) is 3.86 for the diploma degree, 3.55 for the Bachelor's , 3.83 and the probability value is .071. the mean of the (Responsiveness ) variable, is 3.77 for the diploma degree, 3.63 for the Bachelor's degree, 3.79 for master or higher, and the probability value .511. while the mean of the (Assurance) is 3.70 for the Diploma degree, 3.68 for the Bachelor's, degree, 3.70 for the master degree or higher, and the probability degree is .016. and the mean of the (Empathy) variable, is 3.74 for the diploma degree, 3.62 for the Bachelor's degree, 3.60 for master or higher, and the probability value .725. and as these probability values is more than the critical value (0.05) then, there is no statistical differences between these means for the different categories.

**Table (31):** Differences in the level of job satisfaction and the quality of services from the respondents' point of view, due to the variable of the educational level:

**Table 31:Results of the ANOVA according to the variable educational level:**

field	Educational level	frequency	mean	SD	F_value	P_value	significancy
Job satisfaction	Intermediate Diploma	29	3.1103	.76615	.337	.715	Not sig
	Bachelor's	135	3.1521	.69083			
	Specialized Higher Diploma or Master's	14	3.2952	.69992			
quality of provided services	Intermediate Diploma	29	3.7455	.77460	.792	.454	Not sig
	Bachelor's	135	3.5921	.59727			
	Specialized Higher Diploma or Master's	14	3.6921	.62414			

One way ANOVA Test

The results of analysing the data contained in Table (31) indicate that there are no statistically significant differences at the significance level  $\alpha \leq 0.05$  in the level of employee job satisfaction and the quality of services provided in the Arab Society for Rehabilitation Hospital from the respondents' point of view due to the educational level variable.

Through the data contained in Table (11), we conclude that there are no significant differences, as the mean of satisfaction among those who obtained an intermediate diploma was 3.11, and for those who obtained a bachelor's degree were 3.15, and for those obtained an specialized higher diploma or Master's, it was 3.30, and the mean of quality for those who obtained a diploma was 3.75, while For those with a bachelor's degree, 3.59 and for those with a specialized higher diploma or Master's, 3.69, and the probabilistic values were 0.715 for the field of job satisfaction, and 0.454 for the field of quality of services provided, and because that all these values are greater than the value 0.05, there are no significant differences between these categories.

**The fifth hypothesis: (testing the significance of differences based on the variable of age)**

There are no statistically significant differences at the significance level  $\alpha \leq 0.05$  in the level of employee job satisfaction and the quality of services provided in the Arab Society for Rehabilitation Hospital from the respondents' point of view due to the (age) variable.

There are no statistically significant differences at the significance level  $\alpha \leq 0.05$  in the level of employee job satisfaction's elements (Wages & bonuses, Policies & procedures, Training & qualification, Relationships , “Features, services, & benefits”, Working conditions) provided in the Arab Society for Rehabilitation Hospital from the respondents' point of view due to the (age) variable.

There are no statistically significant differences at the significance level  $\alpha \leq 0.05$  in the level of the quality of services' elements (Tangibility, Reliability, Responsiveness, Assurance and Empathy) provided in the Arab Society for Rehabilitation Hospital from the respondents' point of view due to the (age) variable.

To test these hypotheses, we use the One way ANOVA test to measure the significance of the differences in the study's means, due to the educational level variable, as shown in Table(11) .

**Table 32: Differences in the level of elements of job satisfaction from the respondents' point of view due to the Age variable.**

field	Age	frequency	mean	SD	F_value	P_value	significancy
Wages & bonuses	16-25	94	2.8387	.81776	.077	.926	Not sig
	26-35	75	2.7911	.93926			
	36-45	9	2.7593	1.26686			
Policies & procedures	16-25	94	3.1745	.79527	.362	.697	Not sig
	26-35	75	3.2000	.84021			
	36-45	9	2.9556	.78599			
Training & qualification	16-25	94	2.9521	.87857	.141	.869	Not sig
	26-35	75	2.9533	1.05723			
	36-45	9	2.7778	1.00347			
Relationships	16-25	94	3.6082	.84480	.230	.795	Not sig
	26-35	75	3.5933	.67852			
	36-45	9	3.4259	.64609			
Features, services, & benefits	16-25	94	2.9234	.98945	.302	.739	Not sig
	26-35	75	2.9973	.93837			
	36-45	9	3.1556	.99889			
Working conditions	16-25	94	3.4282	.81536	.104	.901	Not sig
	26-35	75	3.4000	.80644			
	36-45	9	3.3056	.79822			

One way ANOVA Test

The results of analysing the data contained in Table (32) indicate that there are no statistically significant differences at the significance level  $\alpha \leq 0.05$  in the level of the elements of job satisfaction for the employee in the Arab Society for Rehabilitation Hospital from the respondents' point of view due to the (age) variable. The means for the elements of job satisfaction for the various categories of the (age) are closed and do not differ significantly, so that (wages and bonuses) mean for those aged (16 -25) is 2.83, and for those aged (26 – 35) is 2.79, and for those aged (36- 45) is 2.76, and the probability value is .926. the mean of the (policies and procedure) for the for those aged (16 -25) is 3.17, and for those aged (26 – 35) is 3.20, and for

those aged (36- 45) is 2.96, and the probability value is .697. the mean of the (training and qualifications) for those aged (16 -25) is 2.95, and for those aged (26 – 35) is 2.95, and for those aged (36- 45) is 2.77, and the probability value is .869. the mean of the (Relationship ) variable, for those aged (16 -25) is 3.61, and for those aged (26 – 35) is 3.59, and for those aged (36- 45) is 3.43, and the probability value is .795. . while the mean of the (features, services & benefits) is 2.92 for those aged (16 -25), and 3.000 for those aged (26 – 35), and 3.16 for those aged (36- 45), and the probability value is .739. and finally the mean of (working conditions) is 3.42 for those aged (16 -25), and 3.40 for those aged (26 – 35), and 3.31 for those aged (36- 45), and the probability value is .901. and as these probability values is more than the critical value (0.05) then, there is no statistical differences between these means for the different categories.

**Table 33:Differences in the level of the quality of services' elements from the respondents' point of view due to the (Age).**

field	Age	frequency	mean	SD	F_value	P_value	significancy
Tangibility	16-25	94	3.6028	.77607	.757	.471	Not sig
	26-35	75	3.5289	.63273			
	36-45	9	3.3210	.49828			
Reliability	16-25	94	3.6468	.80719	.386	.680	Not sig
	26-35	75	3.6187	.64109			
	36-45	9	3.4222	.66667			
Responsiveness	16-25	94	3.7234	.79304	1.322	.269	Not sig
	26-35	75	3.6293	.66470			
	36-45	9	3.3333	.47958			
Assurance	16-25	94	3.7191	.78333	.304	.738	Not sig
	26-35	75	3.6587	.63141			
	36-45	9	3.5556	.65405			
Empathy	16-25	94	3.7191	.82244	1.011	.366	Not sig
	26-35	75	3.5573	.60653			
	36-45	9	3.6667	.76158			

One way ANOVA Test

The results of analysing the data contained in Table (33) indicate that there are no statistically significant differences at the significance level  $\alpha \leq 0.05$  in the level of the elements of quality of services provided in the Arab Society for Rehabilitation Hospital from the respondents'

point of view due to the age. The mean of (Tangibility) variable for those aged (16 -25) is 3.60, and for those aged (26 – 35) is 3.53, and for those aged (36- 45) is 3.32, and the probability value is .471. the mean of the (Reliability) so that (wages and bonuses) mean for those aged (16 -25) is 3.65, and for those aged (26 – 35) is 3.62, and for those aged (36- 45) is 3.42, and the probability value is .680. the mean of the (Responsiveness ) variable, for those aged (16 -25) is 3.72, and for those aged (26 – 35) is 3.63, and for those aged (36- 45) is 3.33, and the probability value is .269. while the mean of the (Assurance) variable, for those aged (16 -25) is 3.72, and for those aged (26 – 35) is 3.66, and for those aged (36- 45) is 3.56, and the probability value is .738. and the mean of the (Empathy) variable, for those aged (16 -25) is 3.72, and for those aged (26 – 35) is 3.56, and for those aged (36- 45) is 3.67, and the probability value is .366. and as these probability values is more than the critical value (0.05) then, there is no statistical differences between these means for the different categories.

**Table 34: ANOVA test according (age):**

field	Age	frequency		mean	SD	F_value	P_value	significancy
Job satisfaction	16-25	94		3.1564	.70030	.082	.921	Not sig
	26-35	75		3.1676	.70634			
	36-45	9		3.0667	.74815			
quality of provided services	16-25	94		3.6713	.71907	.760	.469	Not sig
	26-35	75		3.5890	.51381			
	36-45	9		3.4406	.50848			

The results of analysing the data contained in Table (34) indicate that there are no statistically significant differences at the significance level  $\alpha \leq 0.05$  in the level of employee job satisfaction and the quality of services provided in the Arab Rehabilitation Society Hospital from the respondents' point of view due to the age variable.

Through the data in Table (34), we conclude that there are no significant differences, as the satisfaction's mean in the age group (16-25) is 3.16, in the age group (26-35) is 3.17, and in the age group (36-45) is 3.07, while the quality's mean of the recipients in the age group (16-25) is 3.67, in the age group (26-35) 3.59 and in the age group (36-45) is 3.44, and the probabilities values were 0.921 for the field of job satisfaction, and 0.469 for the field of the



quality of services provided. And because all these values are greater than 0.05, there are no significant differences between the means.

**The sixth hypothesis:** (testing the significance of differences based on the monthly salary variable)

There are no statistically significant differences at the significance level  $\alpha \leq 0.05$  in the level of employee job satisfaction and the quality of services provided in the Arab Society for Rehabilitation Hospital from the respondents' point of view due to the (monthly salary) variable.

There are no statistically significant differences at the significance level  $\alpha \leq 0.05$  in the level of employee job satisfaction's elements (Wages & bonuses, Policies & procedures, Training & qualification, Relationships , “Features, services, & benefits”, Working conditions) provided in the Arab Society for Rehabilitation Hospital from the respondents' point of view due to the (monthly salary) variable.

There are no statistically significant differences at the significance level  $\alpha \leq 0.05$  in the level of the quality of services' elements (Tangibility, Reliability, Responsiveness, Assurance and Empathy) provided in the Arab Society for Rehabilitation Hospital from the respondents' point of view due to the (monthly salary) variable.

To test these hypotheses, we use the One way ANOVA test to measure the significance of the differences in the study's means, due to the (monthly salary) variable, as shown in Table(35) .

**Table 35: Differences in the level of the quality of services' elements from the respondents' point of view due to the (monthly salary)**

field	Monthly salary	frequency	mean	SD	F_value	P_value	significancy
Wages & bonuses	Less than 1500	7	3.0952	.55990	.545	.652	Not sig
	1500-2500	31	2.7742	.81938			
	2500-4000	123	2.7832	.89599			
	4000-5500	17	3.0000	1.09449			
Policies & procedures	Less than 1500	7	3.7429	.41173	1.644	.181	Not sig
	1500-2500	31	3.0323	.91956			
	2500-4000	123	3.1593	.76048			
	4000-5500	17	3.3059	1.01024			
Training & qualification	Less than 1500	7	3.3929	1.41316	2.415	.068	Not sig
	1500-2500	31	2.7823	.83102			
	2500-4000	123	2.8923	.92721			
	4000-5500	17	3.4265	1.08168			
Relationships	Less than 1500	7	3.9048	1.06222	.630	.596	Not sig
	1500-2500	31	3.4839	.92632			
	2500-4000	123	3.5935	.70876			
	4000-5500	17	3.6569	.75570			
Features, services, & benefits	Less than 1500	7	3.1143	.99235	1.672	.175	Not sig
	1500-2500	31	2.6839	1.07923			
	2500-4000	123	2.9821	.90753			
	4000-5500	17	3.3059	1.08425			
Working conditions	Less than 1500	7	3.7500	.45644	.911	.437	Not sig
	1500-2500	31	3.2823	.95031			
	2500-4000	123	3.4004	.76404			
	4000-5500	17	3.5735	.93024			

One way ANOVA Test

The results of analysing the data contained in Table (35) indicate that there are no statistically significant differences at the significance level  $\alpha \leq 0.05$  in the level of the elements of job satisfaction for the employee in the Arab Society for Rehabilitation Hospital from the respondents' point of view due to the (monthly salary) variable. The means for the elements of job satisfaction for the various categories of the monthly salary) are closed and do not differ significantly, so that (wages and bonuses) mean for those take salary (less than 1500) is 3.10, and for those take (1500 - 2500) is 2.77, and for those take (2500 - 4000) is 2.78, and for those take (4000-5500) is 3.000, and the probability value is .652. the mean of the (policies and procedure) for those take salary (less than 1500) is 3.74, and for those take (1500 - 2500) is 3.03, and for those take (2500 - 4000) is 3.16, and for those take (4000-5500) is 3.31, and the probability value is .652. the mean of the (training and qualifications) mean for those take salary (less than 1500) is 3.39, and for those take (1500 - 2500) is 2.78, and for those take (2500 - 4000) is 3.42, and for those take (4000 – 5500) is 3.43, and the probability value is .068. the mean of the (Relationship ) for those take salary (less than 1500) is 3.90, and for those take (1500 - 2500) is 3.48, and for those take (2500 - 4000) is 3.59, and for those take (4000 – 5500) is 3.66, and the probability value is .596. . while the mean of the (features, services & benefits) mean for those take salary (less than 1500) is 3.11, and for those take (1500 - 2500) is 2.68, and for those take (2500 - 4000) is 2.98, and for those take (4000 – 5500) is 3.30, and the probability value is .175. and finally the mean of (working conditions) mean for those take salary (less than 1500) is 3.75, and for those take (1500 - 2500) is 3.28, and for those take (2500 - 4000) is 3.40, and for those take (4000 – 5500) is 3.42, and the probability value is .437. and as these probability values is more than the critical value (0.05) then, there is no statistical differences between

**Table 36: Differences in the level of the quality of services' elements from the respondents' point of view due to the (monthly salary)**

field	salary	frequency	mean	SD	F_value	P_value	significancy
Tangibility	Less than 1500	7	3.6349	.79792	.242	.867	Not sig
	1500-2500	31	3.5663	.86608			
	2500-4000	123	3.5339	.64328			
	4000-5500	17	3.6797	.83692			
Reliability	Less than 1500	7	3.7429	.73679	.346	.792	Not sig
	1500-2500	31	3.7226	.95174			
	2500-4000	123	3.5886	.68247			
	4000-5500	17	3.6471	.66906			
Responsiveness	Less than 1500	7	3.7143	.73808	.223	.880	Not sig
	1500-2500	31	3.7548	.92910			
	2500-4000	123	3.6374	.69864			
	4000-5500	17	3.6706	.57854			
Assurance	Less than 1500	7	3.7714	.72506	.141	.935	Not sig
	1500-2500	31	3.7032	.87005			
	2500-4000	123	3.6650	.68735			
	4000-5500	17	3.7647	.64123			
Empathy	Less than 1500	7	3.6571	.94315	.460	.711	Not sig
	1500-2500	31	3.7097	.88670			
	2500-4000	123	3.6098	.70495			
	4000-5500	17	3.8118	.58937			

One way ANOVA Test

The results of analysing the data contained in Table (35) indicate that there are no statistically significant differences at the significance level  $\alpha \leq 0.05$  in the level of the elements of quality of services provided in the Arab Society for Rehabilitation Hospital from the respondents' point of view due to the age. The mean of (Tangibility) variable for those take salary (less than 1500) is 3.63, and for those take (1500 - 2500) is 3.57, and for those take (2500 - 4000) is 3.53, and for those take (4000-5500) is 3.68, and the probability value is .867. the mean of the

(Reliability) mean for those take salary (less than 1500) is 3.74, and for those take (1500 - 2500) is 3.72, and for those take (2500 - 4000) is 3.59, and for those take (4000-5500) is 3.65, and the probability value is .792. the mean of the (Responsiveness ) mean for those take salary (less than 1500) is 3.71, and for those take (1500 - 2500) is 3.75, and for those take (2500 - 4000) is 3.64, and for those take (4000-5500) is 3.71, and the probability value is .880. while the mean of the (Assurance) variable, mean for those take salary (less than 1500) is 3.7, and for those take (1500 - 2500) is 3.70, and for those take (2500 - 4000) is 3.67, and for those take (4000-5500) is 3.76, and the probability value is .935. and the mean of the (Empathy) for those take salary (less than 1500) is 3.66, and for those take (1500 - 2500) is 3.71, and for those take (2500 - 4000) is 3.61, and for those take (4000-5500) is 3.81, and the probability value is .711. and as these probability values is more than the critical value (0.05) then, there is no statistical differences between these means for the different categories.

Table (37): Results of the One way ANOVA test to measure the significance of the differences in the level of the quality of services' elements provided at the Arab Rehabilitation Society Hospital, from the respondents' point of view due to the (monthly salary) variable.

**Table 37: ANOVA test according (monthly salary):**

field	Monthly salary	frequency	mean	SD	F_value	P_value	significancy
Job satisfaction	Less than 1500	7	3.4952	.55258	1.511	.213	Not sig
	1500-2500	31	3.0129	.76137			
	2500-4000	123	3.1444	.67179			
	4000-5500	17	3.3667	.81377			
quality of provided services	Less than 1500	7	3.6946	.77322	.272	.845	Not sig
	1500-2500	31	3.6741	.80505			
	2500-4000	123	3.5969	.59249			
	4000-5500	17	3.7099	.50680			

The results of analyzing the data contained in Table (36) indicate that there are no statistically significant differences at the significance level  $\alpha \leq 0.05$  in the level of employee job

satisfaction and the quality of services provided in the Arab Rehabilitation Society Hospital from the respondents' point of view due to the educational level variable.

Through the data in Table (36), we conclude that there are no significant differences, as the satisfaction's mean among those who earn (less than 1500) shekels is 3.50, and for those who earn (1500-2500) shekels is 3.01, and for those who earn (2500 - 4000) shekels is 3.14, and for those who earn (4000-5500) shekels is 3.37, while the quality's mean for those who earn (less than 1500) is 3.69, and for those who earn (1500-2500) shekels is 3.67, and for those who earn (2500-4000) ) Shekel is 3.60, and for those who earn (4000-5500) shekels 3.71, and the probabilistic values were 0.2.13 for the job satisfaction field, and 0.845 for the quality of services provided field, and because all these values are greater than the value 0.05, there are no significant differences between theses means.

**The seventh hypothesis:** (Testing the significance of differences based on the variable of Occupation/Study)

There are no statistically significant differences at the significance level  $\alpha \leq 0.05$  in the level of employee job satisfaction and the quality of services provided in the Arab Society for Rehabilitation Hospital from the respondents' point of view due to the (occupation) variable.

There are no statistically significant differences at the significance level  $\alpha \leq 0.05$  in the level of employee job satisfaction's elements (Wages & bonuses, Policies & procedures, Training & qualification, Relationships , "Features, services, & benefits", Working conditions) provided in the Arab Society for Rehabilitation Hospital from the respondents' point of view due to the (occupation) variable.

There are no statistically significant differences at the significance level  $\alpha \leq 0.05$  in the level of the quality of services' elements (Tangibility, Reliability, Responsiveness, Assurance and Empathy) provided in the Arab Society for Rehabilitation Hospital from the respondents' point of view due to the (occupation) variable.

To test these hypotheses, we use the One way ANOVA test to measure the significance of the differences in the study's means, due to the (occupation) variable, as shown in Table(38).

**Table 38: Differences in the level of the quality of services' elements from the respondents' point of view due to the (occupation)**

field	occupation	frequency	mean	SD	F_value	P_value	significancy
Wages & bonuses	Nurse	100	2.7383	.86497	1.592	.179	Not sig
	General medicine	11	2.4091	.92605			
	physical or occupational therapy	35	3.0571	.82540			
	Laboratory medicine	7	3.0476	1.14953			
	others	25	2.8933	.95122			
Polices & procedures	Nurse	100	3.1080	.79971	1.069	.373	Not sig
	General medicine	11	2.9818	.97347			
	physical or occupational therapy	35	3.4057	.70874			
	Laboratory medicine	7	3.2857	1.06994			
	others	25	3.1680	.84000			
Training & qualification	Nurse	100	2.8225	.91653	2.184	.073	Not sig
	General medicine	11	2.9091	1.36140			
	physical or occupational therapy	35	3.3643	.83213			
	Laboratory medicine	7	2.8929	1.05926			
	others	25	2.8700	.97926			
Relationships	Nurse	100	3.5283	.82165	1.151	.334	Not sig
	General medicine	11	3.6515	.70889			
	physical or	35	3.8333	.71629			

	occupational therapy						
	Laboratory medicine	7	3.5000	.72008			
	others	25	3.5133	.61033			
Features, services, & benefits	Nurse	100	2.8080	.99409	2.642	.035	Not sig
	General medicine	11	2.9091	1.31260			
	physical or occupational therapy	35	3.3771	.73207			
	Laboratory medicine	7	2.7143	.91548			
	others	25	3.1200	.84063			
Working conditions	Nurse	100	3.3675	.83140	.352	.842	Not sig
	General medicine	11	3.4545	1.12260			
	physical or occupational therapy	35	3.5500	.70918			
	Laboratory medicine	7	3.3571	.65918			
	others	25	3.3800	.75042			
Job satisfaction	Nurse	100	3.0727	.71131	1.798	.131	Not sig
	General medicine	11	3.0424	.84447			
	physical or occupational therapy	35	3.4305	.62729			
	Laboratory medicine	7	3.1429	.61092			
	others	25	3.1627	.67001			

One way ANOVA Test

The results of analysing the data contained in Table (37) indicate that there are no statistically significant differences at the significance level  $\alpha \leq 0.05$  in the level of the elements of job



satisfaction for the employee in the Arab Society for Rehabilitation Hospital from the respondents' point of view due to the (occupation) variable. The means for the elements of job satisfaction for the various categories of the (occupation) variable are closed and do not differ significantly, so that the (wages and bonuses) the probability value is .179. for the (policies and procedure) the probability value is .373. for the (training and qualifications) the the probability value is .073. for the (Relationship ) the probability value is .334. while for the (features, services & benefits) the probability value is .035. and finally for the (working conditions) the probability value is .448. and as these probability values is more than the critical value (0.05) then, there is no statistical differences between these means for the different categories. Except that there is a significant difference at the (Features, services, & benefits), and we can use LSD test to determine the directions of these differences:

**Table 39:LSD test between the various categories:**

(I) study11	(J) study11	Mean Difference (I-J)	Sig.
Nurse	physical or occupational therapy	-.56914*	.003

Table(38) show that there is only one significant difference between (physical or occupational therapy) and (nurse) by .57 for the (physical or occupational therapy).

**Table 40:Differences in the level of the quality of services' elements from the respondents' point of view due to the (monthly salary)**

field		frequency	mean	SD	F_value	P_value	significancy
Tangibility	Nurse	100	3.4911	.78093	.604	.660	Not sig
	General medicine	11	3.5960	.82443			
	physical or occupational therapy	35	3.6984	.56178			
	Laboratory medicine	7	3.5556	.64788			
	others	25	3.6089	.53008			
Reliability	Nurse	100	3.5840	.82226	.303	.875	Not sig
	General medicine	11	3.6364	.74736			
	physical or	35	3.7429	.59125			

	occupational therapy						
	Laboratory medicine	7	3.6000	.48990			
	others	25	3.6160	.59419			
Responsiveness	Nurse	100	3.6460	.81395	.313	.869	Not sig
	General medicine	11	3.6545	.52223			
	physical or occupational therapy	35	3.7771	.57756			
	Laboratory medicine	7	3.6857	.52735			
	others	25	3.5760	.71954			
Assurance	Nurse	100	3.5940	.78597	1.516	.200	Not sig
	General medicine	11	3.8545	.53733			
	physical or occupational therapy	35	3.9143	.57248			
	Laboratory medicine	7	3.7429	.45774			
	others	25	3.6400	.67082			
Empathy	Nurse	100	3.5560	.80683	1.592	.179	Not sig
	General medicine	11	3.8364	.51239			
	physical or occupational therapy	35	3.8914	.59080			
	Laboratory medicine	7	3.5429	.82231			
	others	25	3.6240	.62801			
quality of provided services	Nurse	100	3.5628	.70862	.883	.475	Not sig
	General medicine	11	3.6991	.52230			
	physical or occupational therapy	35	3.7901	.48726			
	Laboratory medicine	7	3.6158	.51702			
	others	25	3.6124	.53125			

One way ANOVA Test

The results of analysing the data contained in Table (39) indicate that there are no statistically significant differences at the significance level  $\alpha \leq 0.05$  in the level of the elements of quality of services provided in the Arab Society for Rehabilitation Hospital from the respondents' point of view due to the age. The probability value for the (Tangibility) variable .660. and for

the (Reliability) is .875. and for (Responsiveness ) is .869. while for the (Assurance) variable, the probability value is .200. and for the (Empathy) the probability value is .a79. and for the (quality of provided services) is .475. and as these probability values is more than the critical value (0.05) then, there is no statistical differences between these means for the different categories.

**The seventh hypothesis:** (to test the significance of the influence relationship between job satisfaction and the quality of services provided).

**Hypothesis:** There is no effective relationship between job satisfaction and the perceived quality of services provided by the Arab Rehabilitation Association Hospital from the respondents' point of view, at the significance level  $\alpha \leq 0.05$ .

To test this hypothesis, we use simple linear regression analysis, as shown in the following tables:

**Table 41:correlation coefficient between the two variables:**

Model	R_value	R square	Adjusted R square
1	.641 <sup>a</sup>	.410	.407

The previous table shows the value of the correlation coefficient between job satisfaction and the quality of services provided, which is 0.641 and indicates a strong positive relation, which indicates an increase in job satisfaction with an increase in the quality of services provided.

**Table 42: The relationship between job satisfaction and the quality of services provided in the Arab Rehabilitation Society Hospital**

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	35.732	1	35.732	122.453	.000 <sup>b</sup>
	Residual	51.357	176	.292		
	Total	87.088	177			

The previous table shows that there is a significant correlation between job satisfaction and the quality of services provided, where the probability value was 0.000, and the value was less than 0.05.

**Table 43: Values of Relationship Coefficients and their Significant:**

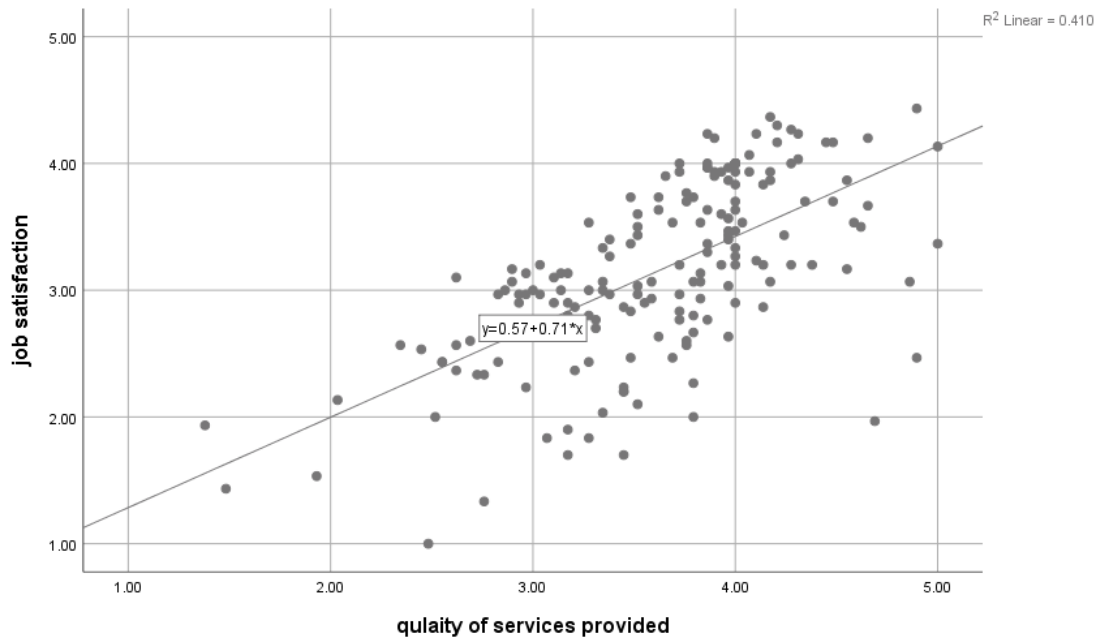
Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	.572	.237		2.414	.017
	BMEAN	.713	.064	.641	11.066	.000

The previous table shows the coefficients in the linear relationship between job satisfaction and the quality of services provided in the hospital:

$\text{Job satisfaction} = 0.572 + 0.713 * \text{quality of services}$
--

Where the values of the coefficients in the relationship indicate that job satisfaction starts from the value of 0.572 degrees out of 5, and increases at a rate of 0.713 degrees for every one degree increase in the quality of services provided.

The following graphic shows the nature of the relationship between job satisfaction and the quality of services provided:



**Figure 2: the relation between job satisfaction and perception of quality service:**

The graphic shows that the relationship between job satisfaction and the quality of services is a strong positive relationship, so that job satisfaction increases with the increase in the quality of services.

What is the impact of / between each element in job satisfaction on elements of perceived quality of services??

**Table(43): The connection and effects of the work satisfaction components on the impression of service quality components**

Independent (Job satisfaction)	Dependent (perception of the quality of the services)				
	Tangibility	Reliability	Responsiveness	Assurance	Empathy
Wages & bonuses	.486	.396	.317	.378	.360
Polices & procedures	.617	.538	.426	.564	.508
Training & qualification	.639	.484	.309	.492	.557
Relationships	.536	.621	.555	.609	.618
Features, services, & benefits	.707	.598	.439	.669	.679
Working conditions	.720	.660	.525	.601	.637

In measuring the impact between each field of (quality of provided services) and each field of the (job satisfaction), the coefficients are positive at all, and we see that the relation is moderate and positive, which mean that that the impact between any field of the job satisfaction and any field of the (quality provided services) is positive.

## Chapter five

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### Discussion of the Results

#### 5.1 Introduction:

This chapter will discuss the results and ascertain whether these results answer the questions of the study, or are in line with its objectives, in addition to comparing these results with the studies that were dealt with in the theoretical framework. This chapter represents the final results of the research in a holistic, integrated and interconnected manner, in which we find the answers to the problems, the results of hypotheses testing, and the achievement of the objectives.

#### 5.2 Discussion:

The results of data analysis showed that the axis of job satisfaction items was moderate, as the fields and components of the (job satisfactions) have a moderate means. The main theme which is the (Job satisfaction) is also come with moderate level, where the highest field's level is the (Relationships with colleagues and superiors) and the lowest field's level is for (wages and bonuses) This means that the level of job satisfaction of the employees was moderate, and that their lowest level of satisfaction was with the (wages and bonuses) system. But (Wesolowski & Mossholder, 1997) says that several factors affecting (job satisfaction) level, such that "Personality type, coping skills, fairness, trust, and organizational involvement are factors specific to an employee that affect his or her job satisfaction", so the moderate levels of the (job satisfaction) fields is a reflection of these properties. At other side (Dorothea wahyu arina, 2015) says that "Employee satisfaction can be viewed as a machine that brings a change in the internal environment in the employee's performance and service quality required in the repair and improvement services to customers", this environment can be reflected by the five components, which indicate that the job satisfaction is moderate, as the moderate level of these components determines the general environment of the organization. As example the wages and bonuses component reflect the encouragement side of that environment, which lead the employee to be more innovative, as he know there is more wages and there is more bonus for

every, which mean that rewarding, good salary that can cover family needs, can improve the employee performance and push him to do better, but at BASR's Specialized Hospital, it was moderate.

Policies and procedure at BASR's Specialized Hospital were perceived as moderate. The integration of the working units is also moderate. Training and qualification is also moderate, and this evaluation from the respondents point view is may be considered a standard situation unless it is compared to other organizations, which may draw a clear idea about the moderate level of job satisfaction at BASR's Specialized Hospital.

Regarding employees' perception of the provided health services, the level of the (tangible) field of the services provided was moderate, but close to high, and the level of the (Reliability) field was also close to high. The level of (responsibility) was also moderate. As for the aspect of (safety), it was high, and the field of (sympathy) was moderate. All in all, the level of (perceived quality of provided services) was moderate, which reflects the general level of the previous elements. The highest field's level is the (Safety) and the lowest field's level is for (Tangible aspects), which reflects that the organization have concerning the safety at highest level as it may cause bad results and consequences if any mistake happen at the safety side, but as the service quality is a service that can meet the needs or expectations of the customer (Dotchin & Oakland, 1994; Lewis & Mitchell, 1990) and it is the difference between customer expectations of the service and the service is perceived or received by the customer (Parasuraman, Zeithaml, & Berry, 1985), for this reason the moderate that close to high level of the provided services, must be proved at BASR's Specialized Hospital, and it is necessary to continue and to reach high quality.

While the employees' perception level of (provided services) was moderate, and that their lowest level of satisfaction was with the (wages and bonuses) system, so we can conclude that the level of both fields (job satisfaction and perceived quality of provided services) is moderate, even if that the (quality of provided services is slightly higher than job satisfaction), but they are both moderate, and it seems that their evaluation is related. Indeed, those services provided may have a moderate level, which is reflected in job satisfaction, and the level of job satisfaction may have been reflected in the employees' evaluation of the services provided, but



this study assert that there is a relationship between both fields. In many cases, we find the employees compared to other hospital, or we find them exposed to problems within the hospital, that's because a problem occurred with them or they found a better job.

### **5.3 Influencing factors:**

To identify the elements that influence the levels of the two primary variables (work satisfaction and perceived service quality) from the employee population to other, based on the study's assumptions, which suggested that:

Data analysis showed that there were no statistically significant differences between males and females, in all field's means, but showed that the means of males were greater than the that of females, superficially only, as all the means of males were greater than that of females, and this indicates that there is an effect of the gender factor, but effect is apparent, not significant.

This may depend on the nature of each of males or females and the conditions in which they work. For the effect of Marital status, it was not significant difference at the evaluated means, and the means were closed, but there were differences between single and married people in (features, services and benefits) and (Working conditions), so that the average rating of (features, services and benefits) and (work conditions) by married couples was higher than the means rating of singles, and it may have several reasons such as experience or seniority, given that married people are older and more experienced than singles. But at the same time there is no differences at the overall degree of the (job satisfaction) as the same time there is no significant differences at the fields of the (quality of provided services) and at the overall for (married) and (single) does not differ statistically, Through the examination which was a kind of privacy there were accurate results about what was going in the hospital.

It seems that the (country of study) factor has no effect on the level of the (job satisfaction fields) as the same as on the (perceived quality of provided services) fields, the slight differences is not significant at the evaluated means, and the means were closed, there is no differences at the overall degree of the (job satisfaction) as the same time there is no significant differences at the overall degree of the (quality of provided services), the means at

all does not differ statistically. This closed assessment may be based on a standard situation with no difference between place and another.

With regard to the educational level factor, there were no statistically significant differences, the means of the fields of job satisfaction were closed, and there were apparent differences in the level of grand means (job satisfaction) based on the educational level, the same with the fields of the (perceived quality of provided services) which are also do not significantly differ, and the overall means for (quality of the provided services) do differ for the educational level categories. But its apparent evaluation was the highest possible for a diploma, then for a master, then for a bachelor's degree

When testing the hypothesis of the effect of the age variable on the levels of means of the fields of (job satisfaction) and the fields of (quality of services provided) there was no statistically significant effect of the age variable on the levels of the averages of both fields, as well as, on the overall average of each variable (job satisfaction) and variable (quality of services provided), and this is from the respondents' point of view, and this result can be attributed and interpreted to special matters related to the respondents themselves.

While when testing the hypothesis over the (monthly salary) variable on the levels of means of the fields of (job satisfaction) and the fields of (quality of services provided) indicates that there was no statistically significant effect of the (monthly salary) variable on the levels of means of those fields, as well as on the overall mean of (job satisfaction) and variable (quality of services provided), and this is from the respondents' point of view. The monthly salary may be a sensitive point for workers, as it is linked to the years of work, the promotion system, and age, so if the system of payments and salaries is stable and unsatisfactory for everyone, it is natural to find that the evaluations are not affected by the monthly salary.

The influence of (occupation/study) variable on the levels of means of the fields of (job satisfaction) and the fields of (quality of services provided) is absent, but the means of (features, services, and benefits) have a significant effect on the means of (features, services,

and benefits), so that, for (physical or occupational therapy) variable, than (nurse) variable, with probability variable, and there was no additional significant differences.

While (Wesolowski & Mossholder, 1997) showed that “Personality type, coping skills, fairness, trust, and organizational involvement are factors specific to an employee that affect his or her job satisfaction” as the same as company related variables, like salary, benefits, physical work environment, safety issues, opportunity for promotion, and work partners.

Numerous studies have looked at how work-related incentives, such as compensation, colleague, and supervisor satisfaction, affect job satisfaction (Hackman & Oldham, 1975; Herzberg, Mausner, Peterson, & Capwell, 1957; Kallenberg, 1977; Locke, 1969; Mottaz & Potts, 1986). But in this study, the rewards of the employees were examined, noting that the rewards are an indicator that there is job satisfaction, and job satisfaction was moderate in terms of rewards.

The absence of the demographic variables effect indicate that their evaluation is accurate and precise, and it is not necessary to have differences basing on the demographic variables, and it indicate that they receive the same services, and live the same job environment, which lead us to stand on the job satisfaction components as a factors acting employee satisfactions.

#### **5.4 The relation between job satisfaction & perceived services quality:**

The analyses showed that there is a positive strong relation between the (job satisfaction) and the (perceived quality of provided services), and it is a two sided relation, which means that both variables affect each other, and it is one sided casual relation where the quality of the provided services raise job satisfaction, but at the same time, if we compare the perception of the employee about the quality of the provided services with (Coomber and Barriball, 2007) our results confirm that low job satisfaction can reduce the performance of services, since there is a significant correlation between job satisfaction and employee performance.

Our study agree with (Bitner, 1990) who concluded that “Job satisfaction lead to higher productivity” and this require a high quality provided services, which mean that there is a positive relation always. That study added that “person will work with better mood and will learn more skills and finally promotion in his performance” this occur when the job satisfaction is high, and we reach to the level of high quality provided services. Another study of (Jones & George, 1998, p. 538) which found that job satisfaction needs “Typical health care institutions, which are those that provide high quality services, and thus achieve job satisfaction”. Furthermore, Employee happiness and service quality have a good and substantial association, according to Priyathanalai and Moenjohn (2012). In their study of work satisfaction and service quality, Schlesinger and Zornitsky (1991) discovered a favorable correlation between employee views of job happiness and serving skills and opinions of service quality.

The impact between the field or elements of job satisfaction and the elements or fields of the quality of the provided services, is a mutual effect, as the correlation coefficient between each element of the job satisfaction and each element or field of the job satisfaction is positive and intermediate, which mean that every increase at any field of the job satisfaction is effect and affected by every field and element of the quality of job satisfaction, at a mutual form. This gives an idea that an improvement at on factor leads to an improvement at other factor or side. This coincides with (when they state that "Job or company-related variables also affect job satisfaction, influence of work-related rewards (including satisfaction with salary, coworkers, and supervisors)," (Hackman & Oldham, 1975; Herzberg, Mausner, Peterson, & Capwell, 1957; Kallenberg, 1977; Locke, 1969; Mottaz & Potts, 1986)". Mottaz and Potts (1986, p. 155) earlier developed several factors that affect job satisfaction and working conditions that can be classified to tangibility, or that related to sympathy such as supervisors – the degree to which supervisors are perceived as supportive and helpful to employees and include such traits as competence, fairness, trustworthiness, and friendliness. Which is a side of the sympathy, or it may be and exciting or saver for the sympathy. As (Wayne, Shore, & Linden, 1997; Flynn 2005) Additionally, according to the Social Exchange Theory, if an employer provides pleasant working circumstances that might make employees feel content, they are more likely

to go above and beyond for the company as a means to return the favor. As we can see from this favorable relationship, customer happiness reflects the caliber of the services rendered.

As an example, the influence of the sympathy factor, where employees want to feel that they are important participants in their job functions and want to have a voice in how their work will be done, including scheduling; work sequence; outcome assessment. and this leads to job satisfaction.

The satisfaction from employee side reflects more loyalty, productivity, and innovation, and from customer side reflect loyalty and this exactly related to the quality of the provided services, A contented workforce will be able to serve as a solid foundation for achieving excellence and organizational performance. In other words, a pleased employee will make an effort to satisfy the client, and a satisfied employee will have a favorable influence on the quality of service, which will affect customer satisfaction. In contrast to that, Mathieu and Zajac (1990) found in their meta-analysis that employee happiness had minimal direct influence on corporate performance.

## **5.5 Summary of results:**

In the light of the previous discussion and results of this study, we saw that job satisfaction among BASR employees is moderate. Most importantly, relative salaries(if it is enough to cover the needs of the family) and fairness in the distribution of rewards has direct relationship with performance.

Regarding hospital procedures in terms of clarity, flexibility, promotions connected to performance, and participation in decision-making are reported by employees as insufficient, as all have measured as averaged satisfaction. Also Enrolment in training programs, conferences, and seminars provided by the hospital was on average, there was officials dealing with workers fairly and respectfully, which greatly satisfied the employees.

There is a high degree of job satisfaction among employees about the officials' contribution to overcoming the obstacles they face at work, as well as about the help they receive from

colleagues. However, staff has moderate satisfaction with the advantages offered by the hospital compared to other hospitals, as well as with the services provided by the hospital to meet the needs, in addition to assistance in the time of need or emergency.

Employees find the job moderately comfortable and safe. There is great job satisfaction with the laboratories and equipment in the hospital, and moderate satisfaction with the quality of the work environment, in addition to the hospital's efforts to improve it, and the overall job satisfaction of the employees was moderate.

The hospital has facilities of great quality, such as halls are nice with moderate quality. In addition, staff clothing, hospital exterior design, directional signs, meals, and cleanliness of facilities, all achieved high perceived quality. At the same time, all kinds of medicines are available in the hospital, there is a great commitment by the hospital to promises to patients, as well as a commitment to solve patients' problems on time, there is confidence in the skills of the staff in the hospital, and patients feel safe with them, because of their high skills. There is a recording information about patients in their own files to a large extent, hospital workers want to help patients, provide them with immediate and permanent treatment, and meet their requests immediately, and we found that the hospital maintains the confidentiality of patient information. There is a general positive trends toward service quality which are tangible aspects, reliability, responsiveness, safety and empathy to a large extent.

Employees sympathize with patients and seek their requests and needs, and the hospital supports the workers to increase their efficiency, and the services provided by the hospital are of a high quality.

There is a general trends of job satisfaction, which are wages and rewards, policies and procedures, training and qualification, relations with colleagues and superiors, services and benefits and working conditions, of an average level.

There is no difference between employees in evaluating job satisfaction and perception of the quality of services according to gender, marital status, country of study, monthly salary, age

and educational qualification, and finally satisfaction is affected by the quality of services within a positive direct relationship.

## **5.6 Recommendations:**

Based on the findings of the study, the researcher recommend the following:

### **BASR level**

- 1- Finding a fair basis for distributing rewards to employees.
- 2- Develop the various aspects of the hospital, such as halls, equipment, laboratories, and attention to cleanliness and attractiveness of the place.
- 3- Paying more attention to the work environment, and comparing it with other hospitals in order to raise the level of the hospital.
- 4- Employing a medical staff with distinguished skills, as well as attracting highly qualified workers.
- 5- Providing care rooms with modern communication systems to call nurses by patients at emergency
- 6- The necessity of organizing seminars, training courses and conferences by the hospital to qualify the workers and increase their efficiency.
- 7- Establishing a specialized team to help patients and relieve their psychological pressure.

### **National level**

- 1- The necessity of approving national policies that determine salaries of employees according to their capabilities and linking this to performance, and comparing it with surrounding contries of a known standard.
- 2- Laying regulations with a clear ladder for promotions based on time service and excellence in performance.

### **- Future research level**

- 1- The necessity of increasing the salaries of employees according to the capabilities and linking this to performance, and comparing it with other hospitals of a known standard.
- 2- Laying a ladder for promotions based on time service and excellence in performance.

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## Appendixes:

### APPENDIX 1:



كلية الصحة العامة

ماجستير إدارة صحية

أخي الكريم / أختي الكريمة

يقوم الباحث بإجراء دراسة حول " تقييم علاقة الرضا الوظيفي للموظفين وجودة الخدمات المقدمة في مستشفى الجمعية العربية لتأهيل"، بإشراف الدكتور حسن الجبارين. وذلك استكمالا لمتطلبات الحصول على درجة الماجستير في تخصص سياسات وإدارة صحية من جامعة القدس. ولتحقيق هذا الهدف صممت هذه الاستبانة لجمع البيانات اللازمة. اذ يضم هذا الاستبيان ثلاثة اقسام:

- القسم الاول: يحتوي على البيانات الشخصية.

- القسم الثاني: يضم مقياس الرضى الوظيفي

- القسم الثالث: يضم مقياس جودة الخدمات

راجين من حضرتكم الاجابة على بنود هذا الاستبيان. علما ان كافة المعلومات ستعامل بسرية تامة وسيتم استخدامها لاغراض البحث العلمي وذلك لهدف التحسين والتطوير واخذ قرارات مبنية على حقائق، ولن يكون لها اي تأثير على وضعك الوظيفي في المؤسسة التي تعمل بها.

شاكرين لكم حسن تعاونكم

الباحث: ابراهيم غوالي

القسم الاول: المعلومات الشخصية

الجنس:

1. ذكر 2. انثى

المستوى التعليمي:

1. دبلوم متوسط 2. بكالوريوس 3. دبلوم عالي متخصص 4. ماجستير فأعلى

5. غير ذلك، حدد/ي \_\_\_\_\_

المسمى الوظيفي: \_\_\_\_\_

التخصص: \_\_\_\_\_

بلد الدراسة: \_\_\_\_\_

القسم: \_\_\_\_\_

العمر:

1. 18- 25 سنة 2. 26-35 سنة 3. 36-45 سنة 4. 46-55 سنة 5. 55 سنة فأعلى

الحالة الاجتماعية:

1. أعزب 2. متزوج 3. مطلق 4. أرمل

مكان السكن:

1. مدينة 2. قرية 3. مخيم

## المحافظة:

عدد سنوات الخبرة:

1. 1-5 سنوات 2. 6-10 سنوات 3. 11-15 سنة 4. 16 سنة فما فوق

معدل عدد ساعات العمل اسبوعياً:

الراتب الشهري:

1. اقل من 1500 شيكل 2. 1500-2500 شيكل 3. 2500-4000 شيكل

4. 4000-5500 شيكل 5. 5500-7000 شيكل 6. اعلى من 7000 شيكل

القسم الثاني: قياس الرضى الوظيفي

العبارات التالية مهمة لقياس جودة الخدمات المقدمة في هذا المستشفى، حيث يشير الرقم "1" إلى غير موافق بشدة، بينما يشير الرقم "5" إلى موافق بشدة، أرجو الإجابة عليها بما يناسبك					
العبارات	غير موافق بشدة	غير موافق	موافق إلى حد ما	موافق	موافق بشدة
الأجور والمكافآت					
1. يعد الراتب الحالي الذي تتقاضاه مقارنة بزملائك مجزي	1	2	3	4	5
2. يعد الراتب الحالي الذي تتقاضاه مجزي مقارنة برواتب تاملستشفيات الأخرى	1	2	3	4	5
3. يعد الراتب الحالي الذي تتقاضاه متناسب مع احتياجاتك العائلية	1	2	3	4	5
4. ترتبط عملية منح المكافآت والحوافز بالاداء	1	2	3	4	5
5. تتناسب المكافآت التي تتقاضاها مع ادائك المنجز	1	2	3	4	5

6	يمنح المستشفى المكافآت والحوافز بطرق عادلة	1	2	3	4	5
<b>السياسات والإجراءات</b>						
7	إجراءات وسياسات المستشفى واضحة ومناسبة	1	2	3	4	5
8	تقدم الوحدات المختلفة في المستشفى خدماتها وفقا للسياسات والإجراءات المعتمدة	1	2	3	4	5
9	تتصف إجراءات المستشفى وسياساته بالمرونة	1	2	3	4	5
10	تعد الترقية التي تحصل عليها مقارنة بأدائك مناسبة تماما	1	2	3	4	5
11	تتاح لي فرص كافية للمشاركة في صناعة القرار	1	2	3	4	5
<b>التدريب والتأهيل</b>						
12	يتم إلحاقك بالبرامج التدريبية التي تساعدك في تقديم الأفضل في العمل	1	2	3	4	5
13	فرص التدريب والتأهيل توزع في المستشفى بشكل متساوي	1	2	3	4	5
41	يتم تشجيعي على حضور المؤتمرات والندوات	1	2	3	4	5
51	يوفر المستشفى البرامج التدريبية التي تلبي متطلبات عمل الموظف باستمرار	1	2	3	4	5
<b>العلاقات مع الزملاء والرؤساء</b>						
61	يتعامل معي مسؤولي المباشر بعدالة كافية	1	2	3	4	5
71	يتعامل معي مسؤولي المباشر باحترام	1	2	3	4	5
81	يعمل مسؤولي المباشر على تطوير ادائي وزيادة خبرتي العملية	1	2	3	4	5
91	يعمل مسؤولي المباشر على تذليل الصعاب والمشكلات التي تواجه عملي	1	2	3	4	5
20	يساعدني زملائي في انجاز الاعمال الموكلة الي	1	2	3	4	5
21	يتعاون معي زملائي بشكل مستمر	1	2	3	4	5
<b>المزايا والخدمات والمنافع</b>						
22	يقدم المستشفى مزايا مناسبة مقارنة بالمستشفيات الاخرى (المواصلات- السلف- القروض، الخ )	1	2	3	4	5
23	يقدم المستشفى للعاملين فيه خدمات متنوعة تلبي احتياجاتهم	1	2	3	4	5
42	يقدم لك المستشفى مساعدة كافية في حالة الظروف الشخصية الطارئة	1	2	3	4	5
52	الوظيفة التي أمارسها مريحة وامنة	1	2	3	4	5
62	يقدم لي المستشفى تأمين صحي مناسب	1	2	3	4	5
<b>ظروف العمل</b>						
27	يعمل المستشفى على تحسين بيئة العمل	1	2	3	4	5

28	يمتلك المستشفى معامل ومختبرات وتجهيزات	1	2	3	4	5
92	تتنصف بيئة العمل (التكييف- المكتب- الاضاءة) بانها كافية ومريحة	1	2	3	4	5
30	يوفر المستشفى كافة المتطلبات التي تساعدني في انجاز عملي	1	2	3	4	5

### القسم الثالث: قياس جودة الخدمات الصحية

العبارة التالية مهمة لقياس جودة الخدمات المقدمة في هذا المستشفى، حيث يشير الرقم "1" إلى غير موافق بشدة، بينما يشير الرقم "5" إلى موافق بشدة، أرجو الإجابة عليها بما يناسبك						
العبارة	غير موافق بشدة	غير موافق	موافق	إلى حد ما موافق	موافق	موافق بشدة
<b>الجوانب الملموسة</b>						
1 يتوفر لدى هذا المستشفى تجهيزات و معدات و أجهزة تقنية متطورة	1	2	3	4	5	
2 يحتوي هذا المستشفى على مرافق و قاعات جميلة و جذابة	1	2	3	4	5	
3 يظهر العاملون في هذا المستشفى بلباس جميل و نظيف	1	2	3	4	5	
4 يتميز المستشفى بتصميم خارجي مناسب	1	2	3	4	5	
5 يوجد في المستشفى لوحات ارشادية	1	2	3	4	5	
6 يقدم المستشفى الوجبات الغذائية بمستوى جودة عالية	1	2	3	4	5	
7 يوفر المستشفى خدمات داعمة متنوعة ( كراسي،	1	2	3	4	5	
8 يوفر المستشفى جميع اصناف الادوية	1	2	3	4	5	
9 تتنصف جميع مرافق المستشفى بالنظافة العالمية	1	2	3	4	5	
<b>الاعتمادية</b>						
10 تلتزم إدارة هذا المستشفى بوعودها للمرضى في مجال تقديم الخدمات الصحية و العلاجية	1	2	3	4	5	
11 يعمل هذا المستشفى بجدية على حل مشاكل المريض	1	2	3	4	5	
12 توجد ثقة في قدرات ومهارات الطاقم الطبي في المستشفى	1	2	3	4	5	



13	يوفر هذا المستشفى الخدمات الصحية والعلاج حسب المواعيد المحددة	1	2	3	4	5
14	تهتم إدارة هذا المستشفى في تدوين المعلومات عن المرضى وحالتهم الصحية في السجلات والحاسوب بشكل دقيق	1	2	3	4	5
<b>الإستجابة</b>						
51	يتم إخبار المرضى في هذا المستشفى بالمواعيد الدقيقة لتقديم العلاج لهم	1	2	3	4	5
61	يقوم العاملون في هذا المستشفى بتقديم العلاج أو الخدمة الصحية للمرضى بشكل فوري	1	2	3	4	5
71	يرغب العاملون في هذا المستشفى بمساعدة المرضى بشكل دائم	1	2	3	4	5
81	رغم انشغال الموظفين في هذا المستشفى بتقديم الخدمات إلا أنهم يتجاوبون مع طلبات المرضى فوراً	1	2	3	4	5
19	يقوم العاملون في المستشفى بحل مشكلات المريض بشكل سريع	1	2	3	4	5
<b>الامان</b>						
20	يشعر المريض بأمان في التعامل مع المستشفى	1	2	3	4	5
21	يمتلك العاملون في المستشفى قدرات ومهارات عالية	1	2	3	4	5
22	يتم متابعة حالة المريض بشكل مستمر	1	2	3	4	5
23	يحافظ المستشفى على سرية المعلومات الخاصة بالمريض	1	2	3	4	5
24	تقدم ادارة المستشفى كافة انواع الدعم للعاملين للقيام بأعمالها بكفاءة عالية	1	2	3	4	5
<b>التعاطف</b>						
25	يتعاطف العاملون في المستشفى مع المريض في جميع قضاياها	1	2	3	4	5
26	تضع ادارة المستشفى مصالح المريض في مقدمة اهتماماتها	1	2	3	4	5
72	ملاءمة ساعات العمل والوقت المخصص للخدمة المقدمة	1	2	3	4	5
82	يتلمس العاملون في المستشفى احتياجات المريض ومشكلاته	1	2	3	4	5
92	يضع العاملون مصالح المريض في مقدمة اهتماماتهم	1	2	3	4	5

ولكم جزيل الشكر لمشاركتكم في تعبئة هذا الاستبيان

## ورقة معلومات حول الدراسة

### عنوان البحث:

تقييم علاقة الرضا الوظيفي للموظفين وجودة الخدمات المقدمة في مستشفى الجمعية العربية لتأهيل

نحن مهتمون في معرفة وجهات نظر الموظفين بشأن الرضا الوظيفي والخدمات المقدمة في مستشفى الجمعية العربية لتأهيل، كجزء من دراسة لاستكمال الحصول على درجة الماجستير في السياسات وإدارة صحة من جامعة القدس ويقوم بعمل هذه الدراسة الباحث ابراهيم غوالي، من طلبة كلية الدراسات العليا في جامعة القدس.

لقد تم اختيار الاستبيان المرفق وهو أداة عالمية لقياس الرضا الوظيفي وجودة الخدمات وتم ترجمته للغة العربية تحت إشراف الدكتور حسين الجبارين. سنكون ممتنين جدا إذا تكرمت بإعطاء بعض الوقت لتعبئة هذا الاستبيان . نعتقد أن تعبئة الاستبيان لا يحتاج إلى أكثر من 15 دقائق لإكماله. بإمكانك طلب إيضاحات أو معلومات إضافية عن أي شيء مذكور في هذه الاستمارة أو عن هذه الدراسة ككل من الباحث.

يتم توزيع هذا الاستبيان على موظفي المستشفى ولن يكون بإمكاننا الوصول إلى اسم أو هوية المشاركين في الدراسة، لذلك فإن مصدر المعلومات وردودكم ستكون مجهولة لنا بالكامل.

لأفراد العينة كامل الحرية في قرار اختيار المشاركة أو عدم المشاركة. في حال قررت المشاركة، الرجاء إعادة الاستبيان بعد الانتهاء منه بدون كتابة اسمك، عنوانك، اسم مكان عملك، أو أي معلومة تدل على هويتك. وبذلك فإننا نفترض أنك موافق على المشاركة في هذا البحث وهذا ما هو معروف باسم الموافقة الضمنية. وفي حال قرارك بعدم المشاركة، فإن ذلك لن يؤثر عليك في أي شكل من الأشكال.

نحن لا نعتقد أنه سيكون هنالك أي تأثير أو ردة فعل سلبية يسببها الاشتراك في هذه الدراسة، حيث أنها لا تعتمد على تقديم نوع جديد من العلاج أو أنها من الأبحاث المعتمدة على التجربة، بل هي محاولة للبحث في سبل تحسين مستوى الخدمات الصحية ومعرفة درجة الرضا الوظيفي لدى العاملين في المستشفى، لذلك لن تؤدي المشاركة في هذه الدراسة إلى إلحاق أي ضرر أو خطر بكم. ونتوقع أن المشاركة في هذه الدراسة سوف تعطيكم الفرصة لإبلاغ إدارة المستشفى بقضايا تهتم برفع مستوى جودة الخدمات المقدمة ومعرفة مستوى الرضا الوظيفي.

لقد تم الأخذ بالحسبان في تصميم البحث أن تبقى هوية المشارك مجهولة، لذلك فإنه من غير المطلوب كتابة اسمك، عنوانك، اسم المؤسسة التي تتواجد بها، أو أية معلومات تدل على شخصكم الكريم. وفي حال وافقت على المشاركة في هذه الدراسة، ستبقى آرائك طبي الكتمان. لن يكون لأي شخص، ما لم ينص القانون على ذلك، حق الاطلاع

على الاستبانة الخاصة بالمشارك بالبحث باستثناء الدكتور الباحث المسؤول عن الدراسة ومعاونيه ولجان الأخلاق المهنية المستقلة من إدارة جامعة الخليل.

عند الانتهاء من عمل هذا البحث، سوف يتم كتابته في رسالة ماجستير وستعرض نتائجه ضمن مشروع التخرج من كلية الدراسات العليا في جامعة القدس، إذا كنت ترغب في معرفة المزيد من المعلومات عن هذه الدراسة، يمكنك الاتصال ب:

اسم الباحث : ابراهيم غوالي - رقم الهاتف : 0598131422

البريد الإلكتروني [Ibrahim\\_ghawali@hotmail.com](mailto:Ibrahim_ghawali@hotmail.com)

وبدلاً من ذلك، يمكنك الاتصال بالمشرف عن الدراسة و هو:

الدكتور حسين جبارين، عميد كلية الصيدلية والتمريض، جامعة الخليل، ص ب40 ، الضفة الغربية، فلسطين

رقم تلفون المكتب 0095 02-222 0097 : - تحويلة 121 : السكرتيرة 127:

رقم المحمول 0097 - 0598 949 773 : البريد الإلكتروني hjabareen2000@yahoo.com

وتفضلوا بقبول فائق الاحترام،

ابراهيم غوالي ، والدكتور حسين جبارين

شكرا جزيلا لأخذ الوقت الكافي لقراءة هذا الرسالة.

**موافقة المشترك:** لقد قرأت استمارة القبول هذه وفهمت مضمونها، وتم الإجابة على جميع أسئلتني . وبناء عليه فإنني، حرا مختاراً، أجاز إجراء هذا البحث وأوافق على الاشتراك فيه واني اعلم أن الباحث وزملاءه ومعاونيه أو مساعديه سيكونون مستعدين للإجابة على أسئلتني، وانه باستطاعتي الاتصال بهم إذا شعرت لاحقاً أن الأجوبة تحتاج إلى مزيد من الإيضاح، كما اعرف تمام المعرفة بأنني حر في الانسحاب من هذا لبحث متى شئت حتى بعد إعطاء الموافقة على الاشتراك دون ان يؤثر ذلك سلبي علي بأي شكل من الأشكال.

وشكراً،،