

**Deanship of Graduate Studies**

**Al-Quds University**

**School of Public Health**



**Nurses' Satisfaction and its Effect on Job Performance:  
Comparative Study between Joint Commission International  
Accredited and Non-accredited Palestinian Hospitals**

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Nurses' Satisfaction and its Effect on Job Performance:  
Comparative Study between Joint Commission International  
Accredited and Non-accredited Palestinian Hospitals

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**Thesis Approval**

**Nurses' Satisfaction and its Effect on Job Performance: Comparative Study  
between Joint Commission International Accredited and Non-accredited  
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**Jerusalem-Palestine**

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## **Dedication**

The sake of Allah.

To the people of Palestine,

To my fellow doctors and nurses in Palestine's hospitals

A heartfelt letter to my dear parents

Dearly beloved brothers and sisters,

My second amazing house is the Al-Quds University,

to my three wonderful kids, Al-moatasem Bellah, Hamza, and Abdelrahman.

Sincere appreciation to Dr. Asma Imam for all of her help with finishing this project.

Mohammad Hamed

## **Declaration**

I certify that this thesis submitted for the degree of master is the result of my research, except where otherwise acknowledged, and that this thesis (or any part of the same material) has not been submitted for a higher degree to any other university or institution.

Signed:

A handwritten signature in blue ink, consisting of a series of loops and a long horizontal stroke.

Mohmmad Husni Hamed

Date: 21/05/2023

## **Acknowledgment**

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Also, I'd express my appreciation to the nurses at both the Istishari Arab Hospital in Ramallah and the Arab Specialized Hospital in Nablus, two hospitals in Palestine, one of which is accredited and the other of which is not.

I would also like to acknowledge Dr. Eba'a Barghouthi—Director of the Quality Department, my boss at the Arab Hospitals Group and Istishari Arab Hospital, for his continuous support and encouragement.

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Mohammad Hamed

## Abstract

**Background:** Nurses' job satisfaction and performance have become more important in recent years as a metric for gauging the success of healthcare organizations in implementing their long-term strategy. Several factors contribute to an individual's job satisfaction, including but not limited to those of a psychological, physiological, and environmental nature. In the literature, there is a strong relationship between job satisfaction and nurses' job performance. Job performance is the most challenging for healthcare organizations because it is inseparably linked to the patient's safety through knowledge, productivity, effectiveness, management, and quality of care.

**Methods:** A quantitative-based, cross-sectional descriptive design was utilized in 2022 to compare the job satisfaction and performance of nurses in two private Palestinian Hospitals. The data was collected from 217 nurses, representing 53.7% of the total targeted population of 404. The data were collected through two self-administered questionnaires and analyzed using SPSS version 28.

**Results:** When comparing JCI-accredited and Non-accredited hospitals, the results indicate a significant correlation between nurses' job satisfaction and performance level. Overall the nurses have a moderate satisfaction level in both hospitals with a total mean equal to (3.43) with a standard deviation (0.96). However, the Accredited hospital has a higher mean of job satisfaction (3.47) compared to (3.38) for the Non-accredited hospital. Moreover, the nurses have a high-performance level in both hospitals with a total mean equal to (3.65) and a standard deviation (0.84). However, the Non-accredited hospital has a slightly higher mean performance level (3.67) compared to (3.64) the accredited hospital. Therefore, there are no statistically significant differences between the JCI accreditation status and nurse ratings of work satisfaction and performance. The results showed that there are statistically significant differences in nurses' job performance in JCI-accredited hospitals related to the hospital Experience, and Educational Degree with P-value equal (0.007, 0.035) respectively. However, the nurse's job satisfaction in the non-accredited hospitals has significant differences related to Gender with a P-value of 0.023.

**Conclusion:** There were no statistically significant differences between nurses' job satisfaction or performance based on hospitals' accreditation status. The results demonstrate the importance of nurses' satisfaction and their performance in ensuring the quality of healthcare organizations' services and health system excellence.

# رضا التمريض وأثره على الأداء الوظيفي: دراسة مقارنة بين المستشفيات الفلسطينية المعتمدة من اللجنة الدولية المشتركة وغير المعتمدة

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## الملخص

**المقدمة:** أصبح الرضا الوظيفي للتمريض وأدائهم أكثر أهمية في السنوات الأخيرة كأداة لقياس نجاح مؤسسات الرعاية الصحية في تنفيذ استراتيجيتها طويلة الأجل. تساهم عدة عوامل في الرضا الوظيفي للفرد، بما في ذلك على سبيل المثال لا الحصر العوامل النفسية والفسولوجية والبيئية. في الأبحاث، هناك علاقة قوية بين الرضا الوظيفي والأداء الوظيفي للتمريض. يعد الأداء الوظيفي هو الأكثر تحدياً لمؤسسات الرعاية الصحية لأنه يرتبط ارتباطاً وثيقاً بسلامة المريض من خلال المعرفة والإنتاجية والفعالية والإدارة وجودة الرعاية.

**المنهجية:** تم استخدام مسح بحثي كمي وصفي و مقطعي لمقارنة الرضا الوظيفي للتمريض وأدائهم في مستشفيين خاصين فلسطينيين في سنة 2022. تم جمع البيانات من 217 ممرضة ، يمثلون 53.7% من إجمالي العينة المستهدفة البالغة 404. تم جمع البيانات من خلال استبيانين تم إجراؤهما ذاتياً وتحليلها باستخدام الإصدار 28 من SPSS.

**النتائج:** عند مقارنة المستشفيات المعتمدة وغير المعتمدة من قبل اللجنة المشتركة الدولية ، تشير النتائج إلى وجود علاقة ارتباط إحصائية بين الرضا الوظيفي للتمريض ومستوى أدائهم. يتمتع التمريض بمعدل رضاء متوسط في كل من المستشفيات المعتمدة من قبل اللجنة الدولية المشتركة وغير المعتمدة بمتوسط إجمالي يساوي (3.43) مع انحراف معياري (0.96). ومع ذلك ، فإن المستشفى المعتمد لديه متوسط أعلى قليلاً للرضا الوظيفي (3.47) مقارنة بـ (3.38) للمستشفى غير المعتمد. علاوة على ذلك ، يتمتع التمريض بمعدل أداء مرتفع في كلا المستشفيين بمتوسط إجمالي يساوي (3.65) وانحراف معياري (0.84). ومع ذلك ، فإن متوسط أداء المستشفى غير المعتمد أعلى قليلاً (3.67) مقارنة بـ (3.64) بالمستشفى المعتمد. لذلك ، لا توجد فروقات ذات دلالة إحصائية بين المستشفى المعتمد وغير المعتمد من اللجنة الدولية المشتركة وتقييمات التمريض لرضا العمل والأداء.

**الخلاصة:** لا توجد فروقات ذات دلالة إحصائية بين الرضا الوظيفي للتمريض أو أدائهم بناءً على حالة اعتماد المستشفيات. تظهر النتائج أهمية رضا التمريض وأدائهم في ضمان جودة خدمات مؤسسات الرعاية الصحية وتميز النظام الصحي.



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## List of Abbreviations

JCI	Joint Commission International
JCIA	Joint Commission International Accredited
WHO	World Health Organization
ANA	American Nurses Association
KPIs	Key Performance Indicators
SVM	Support Vector Machine
PPE	Personal Protective Equipment
IWPQ	Individual Work Performance Questionnaire
ESET	Escala de Satisfação dos Enfermeiros com o Trabalho
SPSS	Statistical Program for Social Sciences
IAH	Istishari Arab Hospital
SAH	Specialized Arab Hospital
HR	Human Resources
QM	Quality Management
IRB	Institutional Review Board
ISQ	International Staffing Questionnaire
PCBS	Palestinian Central Bureau of Statistics
ANCC	American Nurses Credentialing Center
RNs	Registered Nurses
LPNs	Licensed Practical Nurses
GLD	Governance, Leadership, and Direction
SQE	Staff Qualifications and Education
AOP	Assessment of Patients
PCI	Prevention and Control of Infection
COP	Care of Patient
APR	Accreditation Participation Requirements
CWB	Counterproductive Work Behavior
OCB	Organizational Citizenship Behavior
SD	Standard Deviation
Q	Question



# Chapter One

## 1.1 Introduction

Nursing is a critical component of the healthcare system, and the satisfaction of nurses can significantly impact their job performance (Sung & Jeong, 2006). In this study, we investigate the relationship between nurses' satisfaction and job performance in Palestinian hospitals. Specifically, we compare nurse satisfaction and job performance between Joint Commission International (JCI) accredited and non-accredited hospitals in Palestine. JCI accreditation is recognized worldwide as a symbol of quality in healthcare, and we aim to determine if JCI accreditation has an impact on nurses' satisfaction and job performance in Palestinian hospitals. Through this comparative study, we hope to gain insights into how accreditation and other factors can affect the satisfaction and job performance of nurses in the healthcare system.

Several people throughout history have attempted to explain what it means to be satisfied in one's employment, Hoppock (1938) defines job satisfaction as the result of a combination of factors, including but not limited to those of a psychological, physiological, and environmental nature. Job satisfaction means the pleasurable emotional state of feeling that results from the performance of work (Oluwole, 2020). According to Sageer (2012), employee satisfaction is a comprehensive term that comprises the job satisfaction of employees and their satisfaction overall with the organization's policies, environment, pays, and human resource strategies. In other words, employee Satisfaction is when an employee is feeling well, happy, and loyal to their job throughout the facility.

In healthcare facilities, employers need to know how their workers feel about their jobs because it reflects how productive those workers are. The satisfied employee produces high-quality job performance with the desired outcome for patient care, safety, and satisfaction. The primary purpose of most healthcare organizations' efforts to evaluate worker satisfaction is learning how staff members feel about the company's overall strategic plan and how that feels like it's being applied in the work place. Employees need to be encouraged to take ownership of their job, which will increase their productivity in service of the company's objectives since satisfied employees are more willing to take initiative (Rizwan et al., 2013).

Job performance is when an employee accomplishes the expected value to the organization of the discrete behavioral episodes that a measure over a standard period (Motowidlo & Kell, 2012). Job performance is a means to reach a goal or set of goals within a job, role, or organization (Campbell, 1990). The nurses' job performance is the most

challenging for healthcare organizations because it is inseparably linked to the patient's safety through knowledge, productivity, effectiveness, management, and quality of care, another link to the organization's development, strategic plan, and management financing.

Accreditation programs are a common tool used to ensure quality in various industries, including healthcare. In the healthcare sector, accreditation programs are designed to assess the quality of care provided by hospitals and other healthcare organizations. However, there is a growing body of research that suggests that these programs can also have an impact on employee satisfaction and performance. The accredited hospital has had a higher employee satisfaction level than other non-accredited hospitals (Park et al., 2017). Healthcare organizations consider the accreditation program as a measurement tool used to evaluate the quality program and measure the practitioner's commitment to standards, along with other quality indicators, such as hospital infection rates, turnover, and employee satisfaction (Sack et al., 2011). Over the years in Palestine, the healthcare industry has witnessed an increase in awareness of accreditation programs. The Augusta Victoria Hospital in Jerusalem was the first hospital in Palestine to receive JCIA accreditation in May 2013. Presently, five healthcare organizations in Palestine have achieved JCI accreditation.

## **1.2 Study Problem**

While the majority of healthcare facilities use employee satisfaction surveys as a guide for improvement and an indicator of the effectiveness of the management strategic plan, some simply use the indicator for documentation and haven't modified the strategic plan to include employee satisfaction as a way to increase productivity on the job, especially in the human resources plan, that's probably why there's such a high rate of employee turnover. Employee turnover rates have within the last decade become a nationwide epidemic (Achieng'Odembo, 2013), which decreased employee productivity, decreased employee engagement, loss of performance, increased training costs, insecurity feeling, and an undesirable reputation of employee attrition (AGARWAL, 2018). While in Palestine a study conducted by Alkadash (2020) in West Bank, shows a significant relationship between authentic leadership and organizational commitment with employee turnover intention.

The challenges to healthcare organizations are to achieve the expected outcome from the employee performance on their tasks with available resources and running budget. These challenges can be met through improvements to the job description, pay, incentives, reward system, employee health and safety policies, and other aspects of the workplace that have an impact on workers' morale and commitment.

Job performance and employee satisfaction affect the organization overall, the employee's dissatisfaction can negatively affect the quality of patient care and their commitment to standards that are implemented in the organization, under these circumstances, the performance level will get down, which could be harmed to the patient (Atkins et al., 1996).

The certification and licensing programs improve the quality of care and concern with the employee's satisfaction and implement cultural safety as mandatory standards, while in Palestine the accreditation is voluntary and employee satisfaction and its effect on job performance is not well monitored.

### **1.3 Study justification**

Healthcare systems around the world are facing the challenge of retaining qualified and experienced nurses. Understanding the factors that contribute to nursing satisfaction and job performance can help healthcare organizations to develop strategies to improve retention and reduce turnover.

The linkages between safety performance and job satisfaction are reflected in the views of healthcare managers who aim for excellence in their work when developing improvement initiatives and high-performing employees who see human error as the primary cause of workplace accidents (Tengilimoglu et al., 2014). In that regard, the study's findings will provide light on the connection between work satisfaction and performance on the job.

The study can help to identify the specific factors that contribute to nursing satisfaction and job performance in Palestinian hospitals. This information can be used by healthcare organizations to develop targeted interventions to improve the work environment and support the professional development of nurses. Work performance is influenced by workers' commitment to their jobs and their general satisfaction with their job (Yalabik et al., 2013). Increased output is directly proportional to employee satisfaction with their work. If employees are satisfied in their jobs, they'll be more motivated in providing excellent care for patients, which in turn will improve their health and well-being. (Khalid & Qureshi, 2007).

The literature emphasizes that accreditation programs are important to maintain the delivered healthcare quality and safety when going for accreditation (Almoajel, 2012). The Joint Commission International (JCI) is a widely recognized accreditation body that sets standards for quality and safety in healthcare. Comparing nurses' satisfaction and job performance between JCI-accredited and non-accredited hospitals in Palestine can provide insights into the impact of accreditation on the quality of care provided and the well-being of healthcare employees. There haven't been many studies done in Palestine on how satisfied

employees are with their jobs at JCI-accredited hospitals, and there's no study according to the researcher's knowledge figuring out how satisfied employees are and how that affects how well they do their jobs, therefore, this research may be the first to look at the nurses' satisfaction and its effect on their job performance in the JCI-accredited and non-accredited Palestinian hospitals.

In summary, the study "Nurses' Satisfaction and its Effect on Job Performance: Comparative Study between Joint Commission International Accredited and Non-accredited Palestinian Hospitals" can provide valuable insights into the factors that influence nurses' satisfaction and job performance in the healthcare sector, which can ultimately lead to improved patient outcomes and a more positive work environment for healthcare employees.

#### **1.4 Study Aim**

This study aims to assess the relationship between nurses' levels of job satisfaction and their performance in both JCI-accredited and non-accredited hospitals in Palestine.

#### **1.5 Study Objectives**

The study aims to achieve the following specific objectives:

- 1.5.1 To compare the levels of nurses' job satisfaction and job performance between JCI-accredited and non-accredited hospitals in Palestine.
- 1.5.2 To assess the relationship between overall nurses' job satisfaction and level of job performance with the characteristics of the participant's nurses (such as age, gender, years of experience, education level, and occupational category) and with the hospitals' JCI accreditation status.
- 1.5.3 To provide recommendations for healthcare organizations to improve nurses' satisfaction and job performance in Palestinian hospitals, particularly in relation to JCI accreditation.

#### **1.6 Research Hypothesis**

- 1.6.1 H1: There is a statistically significant positive correlation between nurses' satisfaction and job performance in both JCI-accredited and non-accredited hospitals.
- 1.6.2 H2: There are significant differences in nurses' job satisfaction dimensions (leadership, resources, recognition, coworkers, remuneration, and staffing) and the hospital's accreditation status at the level ( $P \leq 0.05$ ).

- 1.6.3 H3: There are significant differences in nurses' job Performance dimensions (task performance, contextual performance, and counterproductive behaviors) and the hospital's accreditation status.
- 1.6.4 H4: There are statistically significant differences in characteristics of demographic data (age, gender, years of experience, education level, and occupational category) of the nurses' job satisfaction, nurses' job performance, and hospital accreditation status.

## **1.7 Study Limitations;**

The limitations of this study related to:

- 1.7.1 Generalizability: The study is limited to Palestinian hospitals, and the findings may not be applicable to other healthcare systems in different countries or regions.
- 1.7.2 Confounding variables: The study may not be able to control for all potentially confounding variables, such as personal factors or contextual factors, that may affect the relationship between nurses' satisfaction and job performance.
  - 1.7.2.1 Personal Factors: Variables such as age, gender, education level, years of experience, and individual characteristics can influence both nurses' satisfaction and job performance. For example, nurses with more experience or higher education levels may be more satisfied and also perform better due to their enhanced skills and knowledge.
  - 1.7.2.2 Contextual Factors: Factors related to the work environment, such as workload, staffing levels, organizational culture, leadership style, and availability of resources, can impact both nurses' satisfaction and job performance. A supportive work environment with adequate resources and staffing may lead to higher satisfaction and better performance

## **Chapter Two**

### **Literature Review**

#### **2.1 Introduction**

The chapter presents the relevant literature relating to employee satisfaction and performance, JCI accreditation in the workplace, and other relevant studies. Moreover, it includes a review of the studies on the dimensions of nurses' job satisfaction and nurses' job performance.

#### **2.2 Employee Satisfaction**

Employee satisfaction refers to the degree to which employees feel content, fulfilled, and happy with their work environment and job responsibilities. It is a key factor in determining an organization's success, as satisfied employees are more likely to be productive, engaged, and committed to their work (Khalid & Qureshi, 2007). Employee satisfaction is influenced by a wide range of factors, including job security, salary and benefits, work-life balance, organizational culture, leadership, and opportunities for growth and development.

In the healthcare sector, employee satisfaction is particularly important, as it has a direct impact on the quality of patient care and plays an important role in making the enterprise's mission and vision a reality. Satisfied healthcare employees are more likely to provide high-quality care and have better patient outcomes (Janicijevic et al., 2013).

Employee satisfaction is regarded as a function of the harmony between rewards given by the work environment and the desire of the individual for these rewards (Scarpello & Vandenberg, 1992). Employees need a work environment that allows them to work freely without problems that can stop them from reaching their full potential, many factors influence employee satisfaction leadership, organization resources, professional recognition, co-workers' recognition remuneration, and staffing (João et al., 2017). Healthcare managers can benefit from satisfaction ratings to enhance structures, processes, and outcomes of care, as well as pinpoint areas for improvement (Haj-Ali et al., 2014).

The governance, executives, and directors/leadership in the healthcare facilities especially the Human Resource Management need to measure the employee's loyalty and satisfaction and their commitment to the organization's workflow and other strategic planning, if workers are contented with the way of things for gauging their likelihood to stay with the company, the high satisfaction rate positively affecting the organizations (Sageer, 2012), which

increasing productivity, responsiveness, customer satisfaction, and improve employee loyalty and decrease recruitment, selection, and training expenses.

On the contrary, the dissatisfied employee negatively affects the organization, when employees are dissatisfied, they are more likely to have low motivation, lower productivity, and lower engagement in their work. This can result in decreased quality of work, missed deadlines, and increased errors, all of which can negatively impact the organization's success. Furthermore, dissatisfied employees can also have a negative impact on team morale and the overall workplace culture. They may be more likely to engage in negative behaviors such as gossiping, complaining, and resisting change, which can spread throughout the organization and create a toxic work environment.

### **2.3 Job Satisfaction and Nursing**

Job satisfaction is a critical factor in the nursing profession (Dickson & Flynn, 2008), as it affects the quality of patient care, nurse retention, and the overall success of healthcare organizations. Nurses who are satisfied with their jobs are more likely to provide high-quality care, have better patient outcomes, and be committed to their organizations (Ning et al., 2009). The nurses' department has a big number of practitioners at the healthcare facilities and they have a major role to achieve the organization's goals. Investigations reveal first of all that the hospital features a structure that can greatly influence the job satisfaction of nurses, such features are lack of equipment and personnel shortages (Adams & Bond, 2000).

Many researchers emphasize that job satisfaction for nurses has a high correlation with specific issues such as occupational conditions, and work environment (Jennings, 2008; Sveinsdóttir et al., 2006). Organization management's and leadership's commitment to covering the employee's rights and needs, and engaging them in the strategic plan will gain highly satisfaction rate for improving job performance and the organization's goals. Organizational commitment is seen as the degree to which an employee is loyal to their organization (Al-Aameri, 2000).

### **2.4 Employee Satisfaction as an Indicator in the Quality Management**

Indicators in health care are compilations of measures meant to characterize certain facets of individual health or the overall efficiency of health care systems. The indicator can be a proportion (percentage, number/per x), average, index, count (number of...), rate (frequency of an event during a specified period expressed as per 1,000...), and ratio (numerator not included in the denominator).

Employee satisfaction is an essential indicator of the quality of management in any organization, including healthcare facilities. In the context of quality management, employee satisfaction is a measure of how well the organization is meeting the needs and expectations of its employees. Employee satisfaction can also be an indicator of the effectiveness of an organization's quality management program (Ning et al., 2009). When employees are satisfied, it is an indication that the organization is meeting its obligations to provide a safe and healthy work environment, good communication, adequate staffing, recognition, and reward systems, opportunities for professional development, and other factors that contribute to employee satisfaction.

As mondiale de la Santé and Organization (2019) the World Health Organization adopt healthcare indicators and equity stratifies framework used for monitoring and evaluating the support planning and tracking national health strategic progress toward organization goals, the framework is identified in four stages the Inputs and Processes, Outputs, Outcomes, and Impact. The indicator in the healthcare organization is divided into clinical, and non-clinical, with the clinical measuring the performance of the medical care process and individual performance for example length of stay. Non-clinical indicators measure the performance and/or compliance of the workflow and evaluation of the strategic plan overall or in a specific area in the organization for example patient and employee satisfaction.

Measure employee satisfaction gives a perception to the organization's leadership and the human resource department about the effectiveness of the implemented strategic plan and improvement process, manly employee satisfaction is measured annually or half annually and covered all healthcare and non-healthcare workers, the result will be classified based on domains for example (loyalty, financial, work environment, workload, communication, enrichment and rewarding, and job confidence).

## **2.5 Nurses Satisfaction Domains**

### **2.5.1 Nurses' Satisfaction with Leadership**

Cohen et al. (2009) defined leadership as the art of influencing others to achieve their maximum potential to accomplish any task, objective, or project. Nurses' satisfaction with leadership is an important aspect of healthcare management. When nurses are satisfied with their leaders, they are more likely to feel engaged in their work, committed to their organization, and motivated to provide high-quality care to their patients (Manning, 2016). On the other hand, if they are dissatisfied with their leaders, they may feel disengaged, demotivated, and may even consider leaving their job. There are seven leadership styles



common in nursing (Autocratic, laissez-faire, democratic leader, transformational, servant, situational, and transactional), each one has strengths and weaknesses points depending on the overall qualities of an exceptional nurse leader, which include integrity, critical thinking, communication, and professionalism (Wofford, 2021).

### **2.5.2 Nurses' Satisfaction with Organizational Resources**

Nurses' satisfaction with organizational resources is an important aspect of healthcare management and basic needs enabling the employee to complete their job. Organizational resources can include staffing levels, equipment/materials, supplies, financial resources, and support from other departments. The resources available within the organizations supported the work and provide high-quality care to their patients. A good indicator of the supportive resources available in the nurses' workplace is what resources are provided by the organization (Brunetto et al., 2016). On the other hand, nurses' satisfaction with organizational resources is critical to the success of any healthcare organization. Organizations that prioritize the needs of their nurses and provide them with the necessary resources are more likely to have engaged and committed staff, which can lead to better patient outcomes and higher levels of job satisfaction.

### **2.5.3 Nurses' Satisfaction with Professional Recognition**

Employee recognition, employee appreciation, and Social recognition are all names for the same thing: the public acknowledgment of an employee for who they are and the work they accomplish, makes the workplace feel more inclusive and satisfied. Employee recognition is one of the most important factors in driving workplace engagement, productivity, and employee retention (KINNE, 2022). Nurses want to feel valued and recognized for their hard work and contributions to patient care. Professional recognition can include awards, certifications, promotions, and other forms of recognition for their expertise and dedication. The World Health Organization (WHO) and American Nurses Association (Rizwan et al.) designated National Nurses Week from 6-12 May as a permanent date to be celebrated annually, to recognize nurses for their contributions, and to honor the nurses for their tireless commitment over the year.

### **2.5.4 Nurses' Satisfaction with Co-Workers**

Co-worker means one who works with another, the work environment of the healthcare organization is complex and wide with several professional categories whether medical or non-

medical. Nurses work closely with other healthcare professionals, including other nurses, physicians, and allied health professionals, to provide high-quality patient care. When working conditions guarantee respectful relations and are free of hazards, employees tend to stay with their organizations, and this is especially true of nurses, whose satisfaction is positively correlated with assistance with job-related problems provided by coworkers and supervisor support (Achieng'Odembo, 2013).

#### **2.5.5 Nurses' Satisfaction with Recognition and Remuneration**

The term "remuneration" refers to all payment forms that an employee receives for their work. It includes not only base salary but any bonuses, commission payments, overtime pay, professional development opportunities, and other financial benefits that an employee receives from an employer (Investopedia, 2022). The existence of both financial rewards and recognition influences knowledge workers and employee satisfaction (Amar, 2004). Nurses view their remuneration as an indication of their value to the organization, and they compare their inputs to received outputs relevant to that of others (Rouget et al., 2004). Nurses want to feel valued and recognized for their hard work and contributions to patient care, and they also want to be compensated fairly for their work.

#### **2.5.6 Nurses' Satisfaction with Staffing**

The process of locating and selecting capable individuals for employment openings inside an organization is referred to as personnel staffing. In management, the meaning of staffing is an operation of recruiting employees by evaluating their skills, and knowledge and then offering them specific job roles accordingly (Ashhar Firdausi, 2022). The researchers have associated nurse staffing with nurse and patient outcomes; a higher level of registered nurses could reduce preventable in-hospital deaths (Cho et al., 2015). According to ANA (2022) Increased patient safety, higher quality of care, and happier patients and nurses can all be attributed to a more optimal staffing ratio, adequate staffing levels provide safe and effective patient care.

### **2.6 JCI Accreditation and Employee Satisfaction**

Accreditation is a process that evaluates the level of performance through an external review based on a set of predetermined standards and implements ways to continuously improve the JCI organization, intending to enhance health care's reliability and quality. There is evidence that achieving JCI certification improves morale in the workplace, researchers

discovered that JCI accreditation was related to higher levels of staff satisfaction (Bord et al., 2021; Dutra & Guirardello, 2021; M. Hussein et al., 2021). Additionally, the process of preparing for and achieving JCI accreditation can foster a culture of teamwork, communication, and continuous improvement, which can also contribute to employee satisfaction.

The JCI accreditation standards consist of four main sections including chapters each chapter consists of standards, and each standard contains the measurable elements that must be implemented with high compliance if applicable:

- 1 Accreditation Participation Requirements. (12 standards)
- 2 Patient-Centered Standards. (148 standards)
- 3 Health Care Organization Management Standards. (128 standards)
- 4 Academic Medical Center Hospital Standards. (6 standards)

JCI standard focused on employee satisfaction and it was illustrated in the Governance Leadership and Direction Chapter (GLD.13 and GLD13.1), as a mandatory standard "Hospital leadership implements, monitors, and takes action to improve the program for a culture of safety throughout the hospital". And many standards mention employee satisfaction, employee safety, and cultural safety in different and separate chapters for example (SQE.8.2, SQE.8.3, AOP.5.3, AOP.5.3.1, PCI.2, PCI.8, PCI.8.1, QPS.7, QPS.7.1, COP.4, COP.4.1 and APR.9) (jointcommissioninternational, 2020).

## **2.7 Job performance**

Job performance refers to “scalable actions, level of effectiveness and efficiency, behavior, and outcomes that employees engage in or bring about that is linked with and contribute to organizational goals” (Viswesvaran et al., 1996). Job performance is a complex construct that is influenced by multiple factors, including job satisfaction, employee engagement, leadership, and job characteristics. Organizations can improve job performance by focusing on these factors and creating a work environment that supports and motivates employees to perform at their best. Numerous studies have looked at how contentment in one's work affected one's productivity, and how it, in turn, affected patient care.

Job satisfaction has been found to be a significant predictor of job performance, and several studies have reported a positive relationship between job satisfaction and job performance. For instance, a study by Ertekin and Avunduk (2021) found that job satisfaction is positively related to job performance and that the relationship was more substantial with job experience. Similarly, another study by Mohammad and Wang (2019) found that job satisfaction was positively related to job performance among nurses. Other researchers

contribute that the relationship between satisfaction and performance is weak (Ahmad et al., 2010) and some researchers concluded that those with lower performance levels reported higher satisfaction (Jones, 2006).

Job performance affects the organization on many levels, linked to both employee- and organizational-level outcomes, micro-level (the individual), meso-level (the group), and macro-level (the organization) (Pandey, 2019). The importance of job performance is the employee work outcome for the benefit of the company as a whole. As a result of the highly satisfied worker's capacity to fulfill the organization's deadlines, the level of care and the satisfaction of the patients will rise. Dissatisfied employees tend to resign from their jobs thus, increases the incidence of absenteeism, a condition that causes the company's increase in overhead costs and poor performance (Jalagat, 2016).

## **2.8 Job Performance and Nursing Profession**

The job performance of nurses is defined as the level of effectiveness of nurses in carrying out their roles and responsibilities related to direct nursing care and the quality of healthcare services (Schwirian, 1978). As nurses represent the largest occupational group in the healthcare workforce and provide the most care at all levels of care, which reflects the performance of the organization overall (Jelinek & Pierce, 1982). Similarly, a study conducted in Lahore - Pakistan by Kousar et al. (2018) found that job satisfaction was positively associated with job performance among nurses.

The nurses have a major role directly in patient care and involve tasks performed at the patient's bedside. When the job tasks are completed professionally and safely, the high expected outcome of the performance will be achieved, which is the expectation of the organization's leaders and governance entity. Kinds of literature study the factors affecting nurses' job performance such as lack of recognition of employees who are performing well, quality performance outcomes and an absence of a formal performance appraisal system, and poor working conditions (Awases et al., 2013). Both job satisfaction and organizational commitment and differences in employee demographics are strong predictors of nurses' performance (Al-Ahmadi, 2009).

## **2.9 Job Performance as an Indicator in the Quality Management**

Job performance is an important indicator in quality management, as it directly impacts the quality of the services provided by an organization. Quality management aims to ensure that services provided by an organization meet or exceed customer expectations, and job

performance is a key factor in achieving this goal. Job performance is considered an important indicator in the nursing profession, and improving it positively affects the healthcare organization overall, and in particular, the development of nurses, patients, guardians, hospitals, and society (Cho & Kim, 2022). The leaders in the healthcare system need to adjust constantly to optimize performance in response to ever-changing workflow circumstances and it gives attention to alternative strategies for reducing negativity that comes from poor nurse performance.

Individual employee Key Performance Indicators, or KPIs, are metrics that measure and track the ability of nurses to meet the expectations in the care process. The KPIs are developed based on a set of standards implemented in the organization to meet the expected outcome and improve the quality of care and patient safety. The quality team measures compliance with standards and reports the result to the facility management for improvement. One way that job performance is used by the human resources department as an indicator of quality management is through performance evaluations. Regular evaluations of employee job performance can help identify areas of strength and areas for improvement, allowing for targeted training and development opportunities to improve overall job performance. These evaluations can also help identify employees who may not be meeting performance expectations, allowing for corrective action to be taken. may not be meeting performance expectations, allowing for corrective action to be taken.

## **2.10 Job Performance Dimensions**

### **2.10.1 Task Performance**

Task performance is one of the dimensions of job performance and refers to the behaviors and activities that are directly related to the job requirements and duties of an employee (Ahmad Zawawi & Nasurdin, 2017). It involves performing the tasks and responsibilities that are expected of an employee to complete in their job role. Task performance is an essential component of job performance, as it reflects the ability of an employee to fulfill their job responsibilities and contribute to organizational goals. It is difficult to find generic frameworks for task performance, the frameworks reviewed and performed by (Koopmans et al., 2011) included the task-performance indicators, such as completing job tasks, working accurately and neatly, keeping knowledge up-to-date, solving problems, planning, and organizing.

### **2.10.2 Contextual Performance**

Contextual performance is another dimension of job performance and refers to behaviors that contribute to the social and psychological environment of the workplace. It involves going beyond the basic requirements of the job and includes behaviors such as helping colleagues, showing initiative, being punctual, and adhering to organizational rules and policies (Rotundo, 2002). The company's objective, vision, and goals can only be achieved if all employees are actively and productively working toward them. The antecedents of task performance and contextual performance are different, one describes the core job responsibilities of an employee, and the other goes beyond formal job responsibilities (Motowidlo & Van Scotter, 1994).

Contextual performance is essential for the effective functioning of an organization. Employees who engage in contextual performance behaviors help create a positive work environment and contribute to the success of the organization. They promote teamwork, foster positive relationships among colleagues, and create a sense of organizational commitment and loyalty.

### **2.10.3 Counterproductive Behaviors**

Counterproductive work behavior (CWB) is a type of voluntary behavior that harms or intends to harm organizations, co-workers, or customers. CWB can take various forms, including theft, sabotage, workplace violence, bullying, gossiping, and intentional failure to perform job duties. It can lead to decreased productivity, increased turnover, absenteeism, financial loss for organizations, and other performance negative effects (Koopmans et al., 2011).

Various theories attempt to explain why employees engage in CWB, such as the frustration-aggression theory, social exchange theory, and the theory of planned behavior (Li et al., 2015). Frustration-aggression theory suggests that employees engage in CWB when they experience frustration or anger. Social exchange theory proposes that employees engage in CWB when they perceive that the costs of their work outweigh the benefits. The theory of planned behavior suggests that employees engage in CWB when they believe that it is justified or when they feel that they have no other option.

Organizations can take steps to prevent and address CWB by creating a positive work environment, providing clear policies and procedures, training employees on appropriate behavior, and taking swift and appropriate disciplinary action when CWB occurs. It is also

important for organizations to create a culture of trust and respect, provide opportunities for employee feedback, and address any employee concerns or grievances promptly.

## **2.11 Global Reviewed Studies**

A systematic review and Meta-Analyses conducted by Jun et al. (2021) investigate the relationship between nurses' burnout, patient outcomes, and organizational outcomes. The search process was conducted between October 2018 and January 2019, and it was updated in both January and October 2020. The researchers reviewed 20 studies and utilized several search engines, including PubMed, CINAHL, PsychInfo, Scopus, and Embaseand, found consistent evidence of a significant negative relationship between nurse burnout and outcome measures, such as patient satisfaction, quality of care, and nurses' satisfaction and productivity. They found that work productivity and performance were inversely affected by nurses' emotional exhaustion ( $r = -0.50$ ,  $p < .01$ ) and ( $r = 0.57$ ,  $p < .01$ ) respectively. Conversely, feeling personally accomplished will enhance by personal accomplishment. Moreover, they felt less emotionally and professionally devoted to their organizations when they had low personal achievement and increased exhaustion.

Kuzey (2018) studied the dimensions that contribute to job satisfaction among healthcare workers and their impact on organizational job performance. Job satisfaction was measured along four dimensions: management's attitude, job security, pay/reward, and coworkers. The sample size was 249. The research approach used the Support Vector Machine (SVM) to determine the best hyperplane that separates clusters of vectors. There was a correlation that might be considered statistically significant between the management style, the amount of compensation, and the level of satisfaction felt by the workforce. There was not much of a connection between this and the security of one's work.

In one's beginning career and the transition from school to professional life, it's crucial to define the challenges ahead and whether their expectations are met. Daehlen (2008) examined the work experience and satisfaction of nurses within this transition period and how it did affects their work ideals, through the assumption that knowledge and teaching skills are not applicable to the real-life job, also the pressure of social life like getting married, parenthood, or buying a house, all contributes to work challenges and the importance of job rewards. In the questionnaire, Respondent nurses expressed moderate happiness with their work, showing more interest in high job income and security, and independence. However, when they were students they emphasized having a job that is interesting, helpful, and useful

to society. Consequently, nurses are highly satisfied with an interesting job in helping others especially when performance is rewarded economically.

The study of Oyewobi et al. (2012), revealed quantity surveyors are mostly satisfied when acknowledging their work with encouragement for advancement, this was emphasized with a correlation factor of 85% also means that if employees are less satisfied with their job this will cause job turnover. It was stressed further that increased praise, recognition, and motivations are important aspects in enhancing commitment to the organization and career advancement.

In Purnamasari and Subroto (2021) study they examined the effect and relationship between many variables. Employee loyalty was found to be positively affected by factors including work motivation, leadership, and job satisfaction with a magnitude of 71.2%, as for job performance it was affected with a magnitude of 80.3%. On the managerial level, it is very important to better communicate with the employee with better leadership and provide improved benefits and motivations to gain their loyalty, it has a significant and positive effect on the way they perform. Due to the small number of people that participated in the survey, it is not possible to draw any broad conclusions from the results of this study.

It was found that 38.8% of the nurses in the study of Al-Manea (2019) were less likely to stay in their respective jobs, those who are less likely to say have a high income, low academic qualifications, some who don't have their diplomas, or being immigrants having to struggle to gain a job and earn money despite their high education and qualification. According to the findings of the statistical research, there was no correlation between being satisfied with one's work and the likelihood of moving jobs. On the other hand, a strong association was found between intentions to stay in a work and job satisfaction; this is because of the indirect influence that vast demographic, ecological, and organizational elements have. Consequently, the major determinant for job turnover was organizational commitment, professional improvement, and job satisfaction.

One of the dominant factors influencing employee turnover is working conditions, as indicated in the study of Ayalew (2015). In this study most of the employees were dissatisfied with and had an agreement of leaving the job, this is emphasized in the mean value of 3.18, especially with their promotions and payment. Whereas, job turnover intentions were negatively correlated with working conditions, pay and benefit, and promotion, so it is important to meet employees' expectations and improve their work conditions.

Furthermore, leadership and management must ensure adequate work conditions to lower stress among employees. In a case study by Mandawala and Karunanayake (2021). The



researchers observed that nurses who have direct patient contact reported much higher levels of stress when their superiors were also highly stressed. Also found that 51.64% of perceived stress contributed to financial benefits, working style, and organizational structure, while leadership contributes the least towards stress.

Moreover, in a descriptive cross-sectional study by Safarpour et al. (2018), a significant inverse relationship was found between occupational stress with job satisfaction, and job performance with a P-value of 0.001 and 0.04 respectively. There was no correlation between happy employees and productive workers. On the other hand, the majority of respondents reported high levels of productivity while working, although the majority of them indicated a moderate degree of job satisfaction and occupational stress. When it comes to the stress caused by one's job, it was shown that married nurses, certain types of work experience, and certain wards were at a higher risk for experiencing high levels of stress.

Abushaikha and Saca-Hazboun (2009) studied Job satisfaction and burnout among Palestinian nurses was investigated. Nurses from 152 different private hospitals were selected at random. Job satisfaction and burnout were reported to be about average among respondents. Satisfaction levels were highest in the areas of moral principles and social services. There was no correlation between the amount of education and contentment in the workplace that could be reliably measured. Furthermore, private sector nurses' satisfaction with their occupations corroborated findings from earlier research on their Palestinian counterparts. Even in challenging social and political contexts, nurses valued the positive relationships they fostered with their patients by showing them care and concern. This conclusion demonstrates the power of social pressure and norms in the Arab world, where marriage and the capacity to support a family are highly valued.

However, 63.5% of respondents assessed patient safety level as "excellent/very good" when asked about their experiences in publicly funded Palestinian hospitals. (Hamdan & Saleem, 2013). The highest positive score was reported for teamwork, organizational learning, and continuous improvement, the score was 71% and 62% respectively. In addition, it was discovered that there is a substantial gap between the outcome factors and the patient safety scores, particularly in hospitals where there was no correlation between the hospital's size, the number of staff jobs, or the number of working hours.

In a cross-sectional study conducted by Meng et al. (2018) in 14 medical institutions in Wuhan, China. Overall an average satisfaction was observed among 696 medical staff with a level of  $58.28 \pm 14.60$ . Particularly in the job itself, the highest-ranked factor, followed by the work environment, hospital administration, the practice setting, and job rewards. The working

environment and job rewards should be a priority for policymakers and executive management to ensure employees' happiness, and increase the sense of commitment to delivering safe and effective medical care.

A 28-item questionnaire was used in a study conducted by Savitsky et al. (2021) to investigate working circumstances among nurses during the time of Covid-19. During a pandemic, nurses who worked in the community had higher occupational satisfaction in comparison with those who worked in hospitals. Whereas, working with Covid-19 patients and a shortage of personal protective equipment (PPE) lead to lower satisfaction. However, no association was found between reporting low occupational satisfaction and increased workload, due to a shortage in staff. Even during pandemic circumstances, the most significant occupational values for nurses include worthwhile accomplishments, diversity, interest in the job, personal growth and development, the importance of professional challenge, and independence in their practice.

In assessing the effectiveness of accreditation programs on patients' safety culture. Al-Surimi et al. (2021) found that there is a positive perception of safety while the need for improvement among participants was lower after accreditation and had no significance in the number of reported events. Moreover, it was mentioned that implementing accreditation programs had a positive significance in increasing teamwork, hospital handoffs, and staff awareness, which guarantees the importance of accreditations on the safety culture. This survey was administered in the form of a questionnaire throughout three time periods (baseline, before accreditation, and after accreditation) and was conducted at a "secondary-tertiary public hospital in Saudi Arabia," with a response rate of one hundred percent.

Lee et al. (2021) compare the major clinical outcomes between accredited and non-accredited hospitals for the inpatient care of acute myocardial infarction (AMI). There were 80,262 people hospitalized in general hospitals in South Korea due to AMI between 2010 and 2017. 67,939 were admitted to hospitals that had been granted accreditation, whereas 12,323 were admitted to institutions that had not been granted accreditation. Found that accredited hospitals had lower rates of in-hospital mortality, major adverse cardiovascular events, and bleeding complications compared to non-accredited hospitals. Accredited hospitals also had higher rates of guideline-directed medical therapy and timely reperfusion therapy. The authors conclude that accreditation status is associated with improved clinical outcomes for patients with AMI, and suggest that accreditation programs may be a useful tool for improving the quality of care.

A Jordanian cross-sectional study in accredited primary healthcare centers showed that more than 75% of nurses valued job satisfaction and work performance as one of the main domains of patient safety culture, whereas the perception of management was least valued, also the centers need to improve areas in stress recognition, teamwork, and safety climate, based on nurses' perceptions in the study (Khamaiseh et al., 2020).

In M. Hussein et al. (2021) review aimed to evaluate the impact of accreditation on institutional performance. 17,830 studies were screened, compliance with accreditation standards has a positive impact on employee performance especially job stress and safety culture, whereas, employee satisfaction was irrelevant to accreditation along with 30-day hospital readmission rate, and patient satisfaction and experience. The assumption that complying with accrediting criteria provides numerous plausible advantages in enhancing performance in the hospital setting is supported by reasonable data.

The review by Feyissa et al. (2019) sought to emphasize the role of mentoring and accreditation programs in healthcare facilities in Africa. Improvements in clinical care - especially, infectious diseases, neonatal and maternal disorders, managerial performance, laboratory accreditation scores, and protocol adherence can all be achieved with the use of mentoring initiatives. Although several interventions (such as embedded mentoring, mobile mentor visits, facility twinning, and within-facility mentorship by a focal person) have been claimed to be successful, there is no evidence to support the recommendation of any one form of mentoring above others.

A pilot study conducted by Despotou et al. (2020) aims to explore nurses' perceptions of the JCI accreditation on patient safety in tertiary care in South Korea. The study used a cross-sectional survey design and collected data from registered nurses working in Egiht tertiary care hospitals accredited by JCI. The findings suggest that nurses have a positive perception of JCI accreditation on patient safety and its impact on their work environment. However, the study also identified certain areas that need improvement, such as communication.

The study by Abolfotouh et al. (2014) used a cross-sectional survey design and collected data from 476 registered nurses working in the hospital. The results indicate that nurses view JCI accreditation as having a favorable effect on both the quality of care and their work environment. The outcome of accreditation is a predictor of the quality of healthcare, and there is evidence of a positive association between accreditation and the quality of healthcare. To enhance the connection between accreditation and improved quality of care, it is necessary to implement strategies that strengthen leadership, culture, and climate, and to investigate how these factors can mediate the performance of accreditation.

Avia and Hariyati (2019) conducted a review of articles that were published in English and Indonesian between 2008 and 2018, focusing on the impact of hospital accreditation on the quality of care. To do this, they conducted comprehensive searches of online databases. 11 articles were reviewed and found that hospital accreditation is associated with improvements in patient outcomes, quality of management, and organizational performance, and found that the level of care provided increased positively with an increase in work experience.

## **Chapter Three**

### **Conceptual Framework**

#### **3.1 Introduction**

The conceptual framework of this study has different components for assessing the nurses' satisfaction and its effect on job performance in accredited and non-accredited Palestinian hospitals. This chapter includes the conceptual and operational definitions of the study variables.

#### **3.2 Conceptual Definitions**

- 3.2.1 Job Satisfaction: is a measure of workers' contentedness with their job, whether they like the job or individual aspects or facets of jobs, such as the nature of work or supervision (Hoppock, 1938).
- 3.2.2 Demographic Factors: characteristics of a population such as age, race, and sex, which refers to socioeconomic information expressed statistically, including employment, education, income, marriage rates, birth date, and more (Investopedia, 2022).
- 3.2.3 Job Performance: actions or behaviors under the control of the individual, that contribute to the organization's goals, and that can be measured according to the individual's level of proficiency (Rotundo, 2002).

#### **3.3 Operational Definitions**

##### **3.3.1 Dependent Variable**

Job performance (Part three of the questionnaire): The 18-item scale was created in the Netherlands to evaluate job performance across three key dimensions: task performance, contextual performance, and counterproductive work behavior. Respondents rate each item using a 5-point scale, where 1 Strongly Disagree, 2 Disagree, 3 Neutral, 4 Agree, and 5 Strongly Agree. individual work performance questionnaire (IWPQ) was reviewed and validated by Ramos-Villagrasa et al. (2019) for the Spanish population. The questionnaire contains the nurses' performance dimensions in section (3) with 18 questions categorized into:

- 1 Task performance: Five questions from 1 to 5.
- 2 Contextual performance: Eight questions from 6 to 13.
- 3 Counterproductive work behavior: Five questions from 14 to 18.

### **3.3.2 Independent Variable**

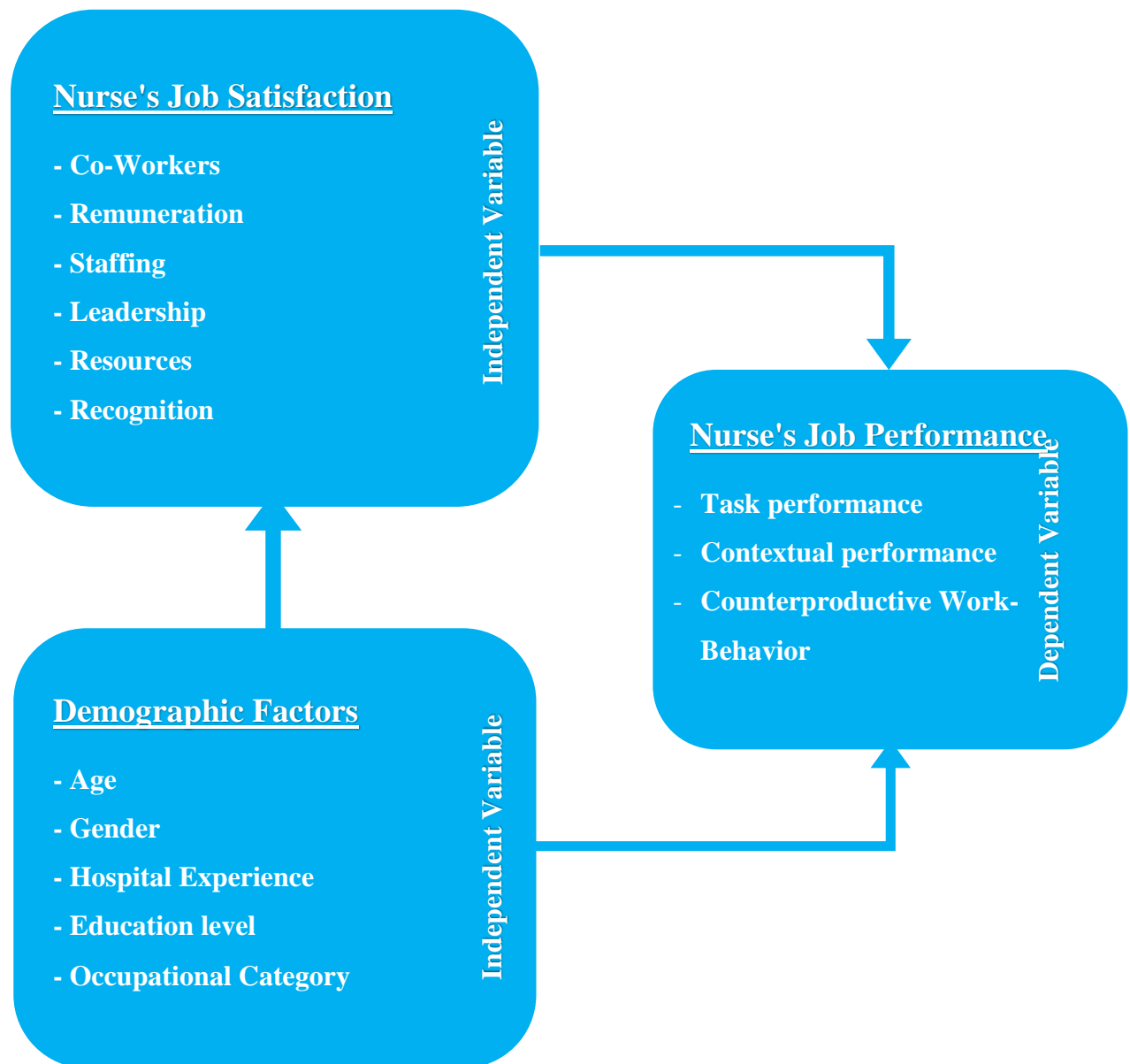
Demographic Factors (Part one in the questionnaire): the respondent's demographic data, which includes age, gender, education level, years of experience, and occupational category (Junior nurse, senior nurse, head nurse, supervisor, and others).

Nurses' Satisfaction (Part two in the questionnaire): The factors used to measure nurses' satisfaction were developed and obtained by da Silva João et al. (2017) from the Nurses' Job Satisfaction Scale (Escala de Satisfação zation resources). The questionnaire contains the nurses' performance dimensions in section (2) with 37 questions categorized into:

- 1 Satisfaction with co-workers: Five statements include question numbers (1, 2, 4, 9, and question number 20).
- 2 Satisfaction with Remuneration: Five statements include question numbers (3, 8, 27, 31, and question number 32).
- 3 Satisfaction with staffing Two statements include question number (7 and 11).
- 4 Satisfaction with Leadership: Twelve statements include question number (5, 6, 10, 14, 17, 19, 21, 24, 28, 29, 33, and question number 35).
- 5 Satisfaction with Resources: Eight statements include question number (12, 13, 18, 22, 23, 25, 26, and question number 30).
- 6 Satisfaction with professional Recognition: Five statements include question numbers (15, 16, 34, 36, and question number 37).

### 3.3.3 Conceptual Framework

Figure (3.1): Research Conceptual Framework



## **Chapter Four**

### **Methodology**

#### **4.1 Introduction**

This chapter explains the methods used to examine the effect of nurses' satisfaction factors on job performance at JCIA and non-JCIA Palestinian hospitals. It includes study design, study setting, population, sample, study tools, data collection, data analysis, and ethical considerations.

#### **4.2 Design:**

The study design used in this study is, quantitative-based, cross-sectional descriptive. Descriptive methods are used to describe the specific perception of the nurses on their satisfaction and job performance, descriptive survey helps a researcher to gather, summarize, present, and interpret information for clarification (Achieng'Odembo, 2013).

The quantitative method allows a researcher to digest and understand large quantities of data and effectively communicate the important aspects of a research study (Achieng'Odembo, 2013).

A self-administered questionnaire has been developed to assess the nurses' job satisfaction factors and nurses job performance factors based on previous studies (da Silva João et al., 2017; Ramos-Villagrasa et al., 2019), it allows the researcher to compare many different variables at the same time and helps to test the study variables (See appendix 1 and 2).

A cross-sectional design is convenient and attainable with the available resources. It's useful for investigating associations between variables and for describing the characteristics of a population or sample. It is also practical and efficient as it allows data to be collected from a large number of participants within a short period (Setia, 2016).

#### **4.3 Study Settings:**

Two hospitals have been chosen that belong to a group of private hospitals known as the "Arab Hospitals Group" which consists of three hospitals: Specialized Arab Hospital, Istishari Arab Hospital, and Ibn Sina Specialized Hospital. The hospitals offer a broad range of secondary and tertiary care services to the Palestinian community and have been at the forefront of introducing advanced medical services to Palestine such as In Vitro Fertilization, Corneal transplant, Kidney transplant, a Genetics Lab, and Radiotherapy services.



Specialized Arab Hospital was founded in Nablus in 1998, with a bed capacity of 100 and a workforce of 350 individuals, including 164 nurses (SAH, 2022).

Istishari Arab Hospital was established in 2016 in Al-Rehan Suburb (Ramallah), with 220 beds and 500 staff including 240 nurses. Since 2020, the IAH has been accredited by JCI (IAH, 2022).

#### **4.4 Population:**

The study population consists of 404 nurses from all departments at two hospitals in Palestine, one of which is JCI-accredited (N=240), and the other is non-accredited (N= 164).

#### **4.5 Sample:**

The study targeted all the 404 nurses working in both selected hospitals for this study (one JCI-accredited hospital and another non-accredited hospital).

#### **4.6 Study Tool:**

The study tool used in this research was questionnaires comprised of three distinct parts. Drawing from two previous studies, the questionnaire was designed to measure nurse satisfaction and individual work performance. The first study, Escala de Satisfação dos Enfermeiros com o Trabalho (ESET), was reviewed and validated by da Silva João et al. (2017), while the second study, the Individual Work Performance Questionnaire (IWPQ), was reviewed and validated by Ramos-Villagrasa et al. (2019).

The questionnaire is composed of three main sections, each designed to capture specific data related to the participant's job performance and satisfaction levels:

1. Section one; included the respondent's Demographic Factors include: age, gender, education level, years of experience at the hospital, and occupational category (Junior nurse, senior nurse, head nurse, supervisor, and others).
2. Section two; the Satisfaction factors part consisted of 37 questions that were divided into 6 domains (Leadership, Organization Resources, Professional Recognition, Co-workers, Remuneration, and Staffing), which were rated on a five-point Likert scale ranging.
3. Section Three; the self-performance evaluation part consisted of 18 questions that measure the main dimensions of job performance (task performance, contextual performance, and counterproductive behaviors), Collectively, these sections offer a

concise and inclusive method of assessing overall job performance, and rated on a five-point Likert scale ranging from strongly agree to strongly disagree.

To ensure that the questionnaire was suitable for the Palestinian context, it was translated and back-translated, and then reviewed by a certified Palestinian translator (See appendix 1 and 2).

#### **4.7 Pilot Study**

A pilot study was conducted at Istishari Arab Hospital (IAH) in Al-Rehan Suburb (Ramallah), as the number of nursing staff in this hospital is 240, A group of 24 nurses was collected for the pilot study based on the pilot sample, which should have been 10% of the total sample size for the larger part study (Connelly, 2008). Before the pilot study was done, ethical approval and permission were given by the Faculty of Public Health / Al-Quds University IRB.

The IAH gained the JCIA, which meets the thesis proposal criteria that's why the hospital has been chosen to conduct the pilot. The internal medicine department was selected, with a nurses staff of 32, and the number of participant nurses was 28 which meets our target pilot sample.

The pilot sample from the selected department was excluded from the self-administered online survey but included in the data analysis.

#### **4.8 Questionnaire Reliability**

Reliability is the degree to which a measurement is constant and accurate for a certain time (Barghouthi, 2018). To ensure that the questionnaire was able to measure nurses' levels of job satisfaction and performance, Cronbach's alpha was employed. a Cronbach's alpha of 0.70 or above is considered acceptable for research purposes, while a value of 0.90 or higher is considered excellent. Therefore, a Cronbach's alpha of 0.927 indicates that the scale or test has excellent internal consistency and is a reliable measure of the construct it is intended to measure. Table (4.1) shows Cronbach's Alpha results for the nurses' job satisfaction and job performance dimensions.

**Table (4.1): Cronbach's Alpha results (reliability of the study)**

Domain Name	Number of Items	Alpha Value
Leadership	12	0.861
Organization Resources	8	0.817
Professional Recognition	5	0.783
Co-workers	5	0.654
Recognition Remuneration	5	0.741
Staffing	2	0.692
Task Performance	5	0.801
Contextual Performance	8	0.738
Counterproductive Behaviors	5	0.728
<b>Overall</b>	<b>55</b>	<b>0.927</b>

#### 4.9 Questionnaire Validity

Questionnaire validity refers to the extent to which a questionnaire accurately measures the intended variable. In this case, the questionnaire's validity was assessed by consulting with three experts in research, human resources, and quality management. Their insightful evaluations and recommendations were integrated to refine the survey. The results of the Person Correlation Test can be found in Table (4.2), offering a glimpse into the extent to which the questionnaire is valid in measuring the desired variables.

**Table (4.2): Person Correlation result for job satisfaction and job performance with the total degree.**

Variables	Value (r)	Significant Value
<b>Nurses' Job Satisfaction Domain</b>		
Co-workers	1	0.001
Remuneration	.445*	0.018
Leadership	.711**	0.001
Staffing	0.266	0.17
Resources	.567**	0.002
Recognition	.504**	0.006
<b>Nurses' Job Performance Domain</b>		
Task Performance	.530**	0.004
Contextual Performance	.608**	0.001
Counterproductive Behaviors	-0.197	0.315

\* Correlation is significant at the 0.05 level (2-tailed).

\*\* Correlation is significant at the 0.01 level (2-tailed).

Based on the data in Table (4.2), it appears that there is a significant correlation between the various measures of work satisfaction and performance.



#### **4.12 Ethical Consideration:**

In conducting this study, ethical considerations were of paramount importance. To ensure that the investigation was conducted responsibly and ethically, multiple steps were taken. First and foremost, prior to initiating the study, approval was granted by the Faculty of Public Health / Al-Quds University IRB, ensuring that the study complied with ethical guidelines.

In addition, the hospitals involved in the study were notified of its intent through an official letter from the university. The research was also approved by the hospitals' respective Ethics Committees, further underscoring the importance placed on ethical considerations throughout the study.

To protect the participants' rights and privacy, the study aims and objectives were outlined on the questionnaire's front page, with a clear emphasis on the confidential and scientific nature of the research. The participants' information did not include any identifying details such as names, departments, or other personal information.

In addition, clear instructions and researcher contact details were included, coupled with the process of obtaining informed consent by pressing the "next page" button. When participants press the next page that means permission from the participants is obtained. These measures ensured that the study was conducted in a manner that upheld the highest ethical standards and respected the participants' rights and privacy.

## **Chapter Five**

### **Results**

#### **5.1 Introduction**

In this chapter results of nurses' satisfaction and its effect on job performance in JCI-accredited and non-accredited hospitals in Palestine are presented. The first section displays the demographic data of the participants, the second part shows descriptive statistics and compares nurses' satisfaction and their job performance in Hospitals with and without Joint Commission International Accreditation, and the third part is for the findings of hypothesis testing.

#### **5.2 Characteristics of Respondents**

The total number of samples was two hundred seventy-one nurses distributed in the two selected hospitals as the following: 58.1% of the sample for the accredited hospital and 41.9% for the non-accredited hospital. About half of the sample aged between 23 to 26. Fifty-three point five percent of the total sample were male nurses and 46.5% were female nurses. About 48% of nurses have experience in the hospital from (1 to 5 years). About two-thirds of nurses have a bachelor's degree and are registered nurses as shown in Table (5.1).

**Table (5.1): Demographic variables of respondents (Part one).**

<b>Demographic Variables</b>		<b>Frequency</b>	<b>Percentage</b>
<b>Hospital</b>	Accredited Hospital	126	58.1%
	Non-Accredited Hospital	91	41.9%
<b>Age</b>	Less than 23 Years	24	11.1%
	From 23 to 26 Years	101	46.5%
	From 27 to 29 Years	38	17.5%
	From 30 to 32 Years	21	9.7%
	From 33 to 35 Years	18	8.3%
	More than 35 Years	15	6.9%
<b>Gender</b>	Male	116	53.5%
	Female	101	46.5%
<b>Hospital Experience</b>	Less than One Year	48	22.1%
	From 1 to 2 Years	68	31.3%
	From 3 to 5 Years	36	16.6%
	From 6 to 10 Years	51	23.5%
	More than 10 Years	14	6.5%
<b>Educational Degree</b>	Master's degree	15	6.9%
	Bachelor of nursing science	155	71.4%
	Bachelors of Maternity	1	0.5%
	Diploma Degree	39	18%
	Higher Diploma	7	3.2%
<b>Occupational Category</b>	Chief Nursing Officer	1	0.5%
	Nursing Supervisor	3	1.4%
	Registered Nurse	150	69.1%
	Head Nurse	21	9.7%
	Licensed Practical Nurse	41	18.9%
	Aid Nurse	1	0.5%

### 5.3 Overall Nurses' job satisfaction and performance level:

The study utilized a 10-point Likert scale to gauge the participants' responses, with a range of 1-4.9 classified as low, 5-6.9 as moderate, and 7-10 as high. Overall, the average job satisfaction level among nurses in their respective hospitals was 5.91 (SD = 2.42), indicating a moderate level of satisfaction. However, a closer look reveals that nurses in the Accredited hospital had a higher level of satisfaction, with an average of 6.11, compared to those in the Non-Accredited Hospital with an average of 5.63.

On the other hand, the average nurse's performance rate was 8.14 (SD = 1.66), considered a high level of performance. However, the average nurse's performance in the Accredited hospital was lower with a mean of 7.99, compared to the Non-accredited hospital's average of 8.34. These findings are presented in Table (5.2), shedding light on the differences in job satisfaction and performance levels among nurses in the two hospitals.

**Table (5.2): Overall nurses' satisfaction and performance rates in the two hospitals**

Variable	Accredited		Non-accredited		Overall	
	Mean	SD.	Mean	SD	Mean	SD
From 0 to 10, the Satisfaction rate	6.11	2.28	5.63	2.59	5.91	2.42
From 0 to 10, the Performance rate	7.99	1.58	8.34	1.75	8.14	1.66

### 5.4 Descriptive statistics

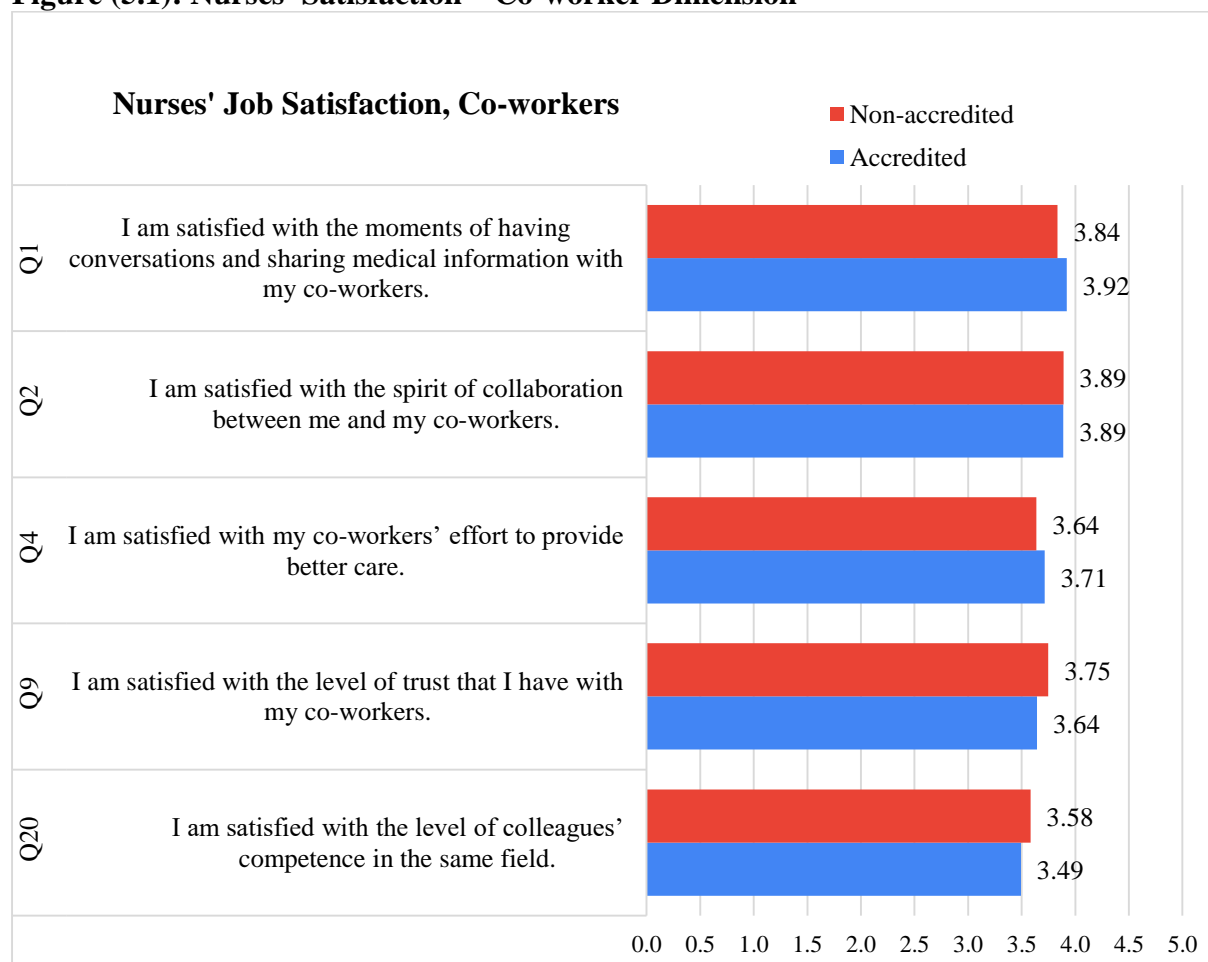
#### 5.4.1 Nurses' job satisfaction and hospital accreditation status.

In this study, the 5-point Likert scale is interpreted as follows: 1-2.49 (low), 2.5-3.49 (moderate), 3.5-5 (high). The overall mean of nurses' satisfaction in the two hospitals equals 3.43 and the standard deviation (0.96) is considered a moderate level of satisfaction as shown in Table (5.3). Nurses were also found to have moderate to high levels of satisfaction across all of the subscales used to measure job satisfaction:



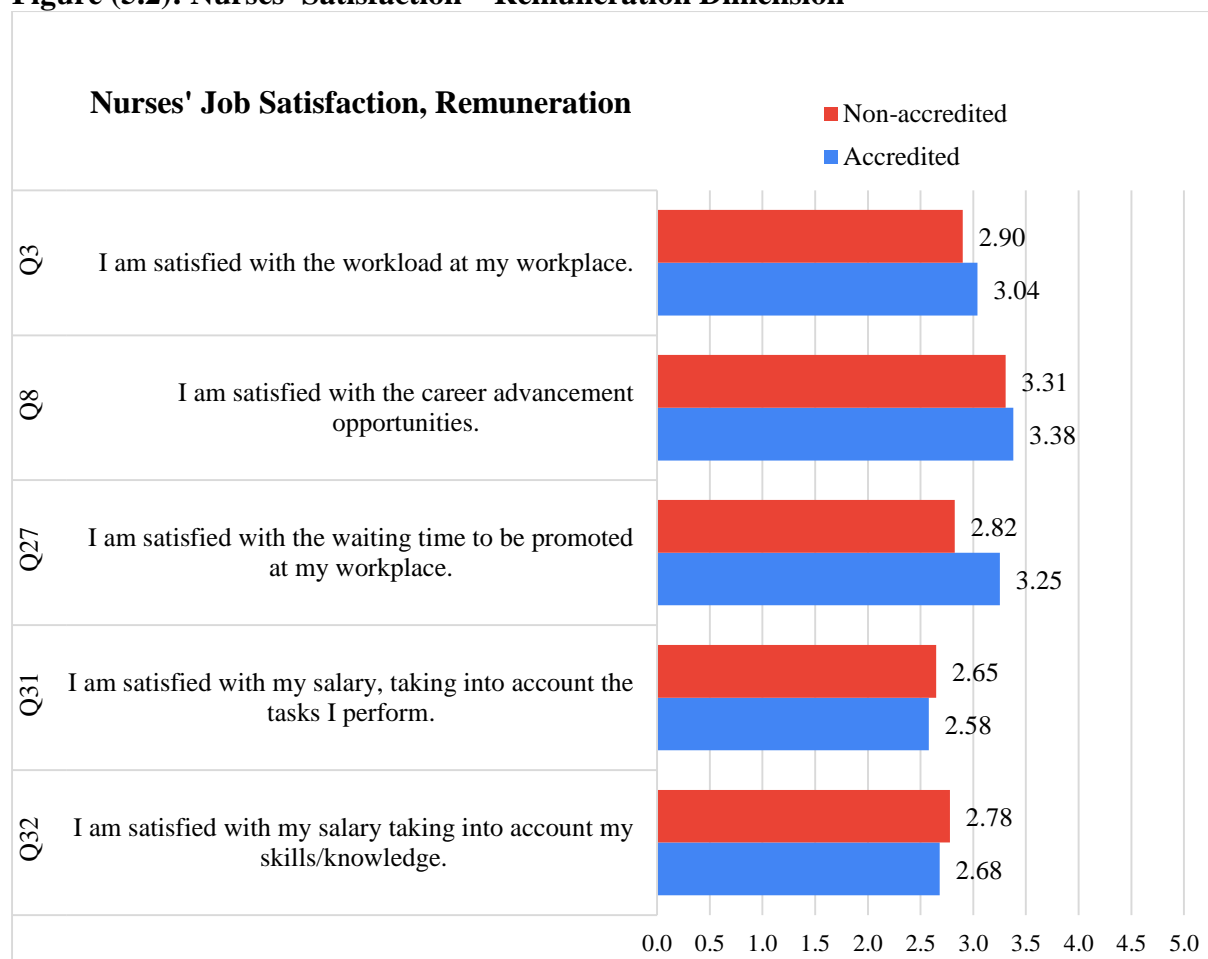
In the **Co-worker** dimension, the total mean equal (3.73) and the standard deviation (0.87) is considered a high level of satisfaction, the item has the highest satisfaction (I am satisfied with the spirit of collaboration between me and my co-workers) (Q2) and the item has the lowest satisfaction (I am satisfied with the level of colleagues' competence in the same field) (Q20) based on data presented in table (5.3). Although satisfaction with co-workers is generally high in both the accredited and non-accredited hospitals, a closer analysis reveals a slightly higher level of satisfaction among nurses in the Non-Accredited hospital, with an average score of 3.74 compared to those in the Accredited Hospital who had an average score of 3.73 see (Figure 5.10, Appendix 8 & 9). Figure (5.1) compares hospitals with and without JCI certification on the Co-worker satisfaction subscale.

**Figure (5.1): Nurses' Satisfaction – Co-worker Dimension**



For **Remuneration** Items, nurses' satisfaction is equal to 2.95 (SD. = 1.12) considered a moderate level of satisfaction, the item has the highest satisfaction (I am satisfied with the career advancement opportunities) (Q8) and the item has the lowest satisfaction (I am satisfied with my salary, taking into account the tasks I perform) (Q31) as shown in table (5.3) and figure (5.2). Satisfaction with Remuneration is moderate in both accredited and non-accredited hospitals, after a thorough analysis of the data, it was discovered that despite a generally moderate level of satisfaction with Remuneration in both hospitals, nurses in the Accredited hospital expressed a slightly greater level of satisfaction, scoring an average of 2.99, compared to those in the Non-Accredited Hospital who scored an average of 2.89.

**Figure (5.2): Nurses' Satisfaction – Remuneration Dimension**



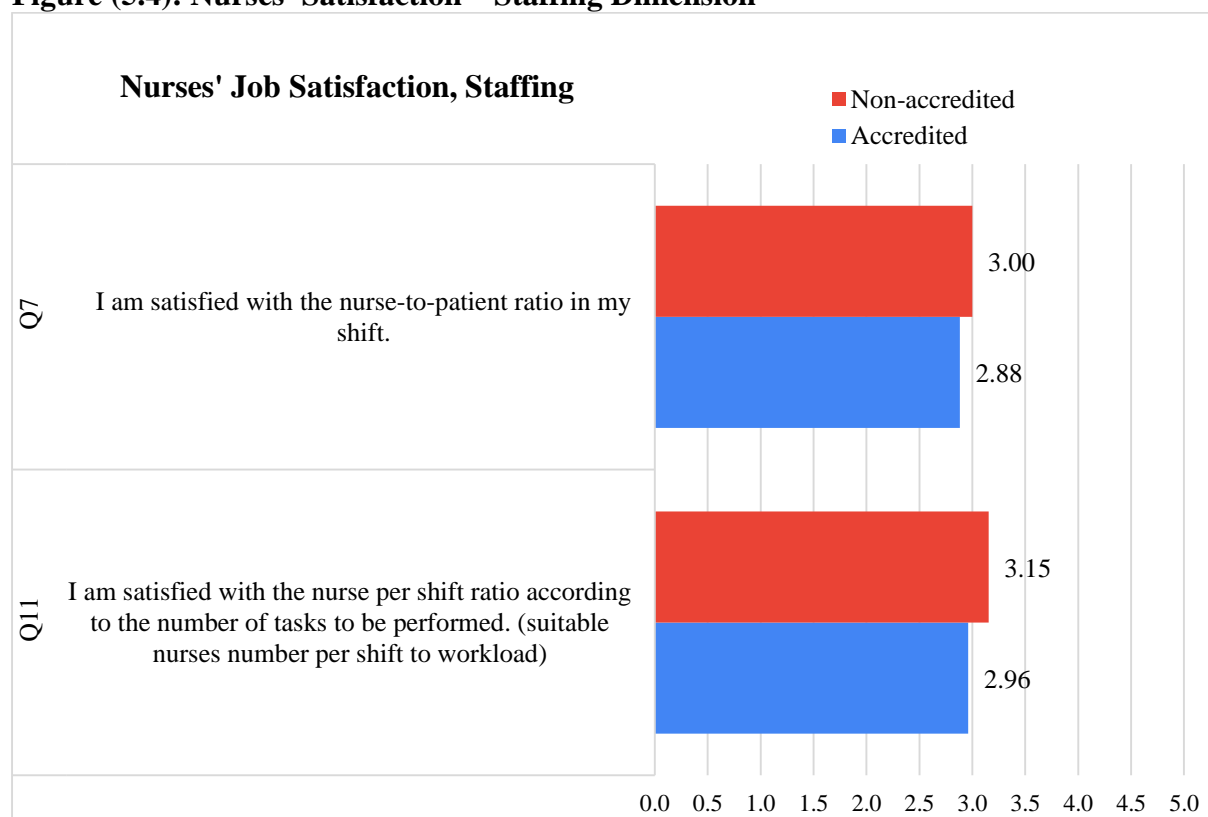
For **Leadership** Items, the nurses' satisfaction is equal to 3.43 (SD = 0.97) considered a moderate level of satisfaction, the item has the highest satisfaction (I am satisfied with the tasks performed in my unit) (Q28) and the item has lowest satisfaction (I am satisfied with the fact that my work is rewarded and/or valued by my superiors) (Q14) as shown in table (5.3) and figure (5.3). Satisfaction with Leadership is moderate in both accredited and non-accredited hospitals. Upon conducting a comprehensive analysis of the collected data, it was revealed that although job satisfaction with Leadership was generally moderate in both accredited and non-accredited hospitals, nurses working in the Accredited hospital reported a higher level of satisfaction with an average score of 3.48, compared to their counterparts in the Non-Accredited Hospital who scored an average of 3.37.

**Figure (5.3): Nurses' Satisfaction – Leadership Dimension**



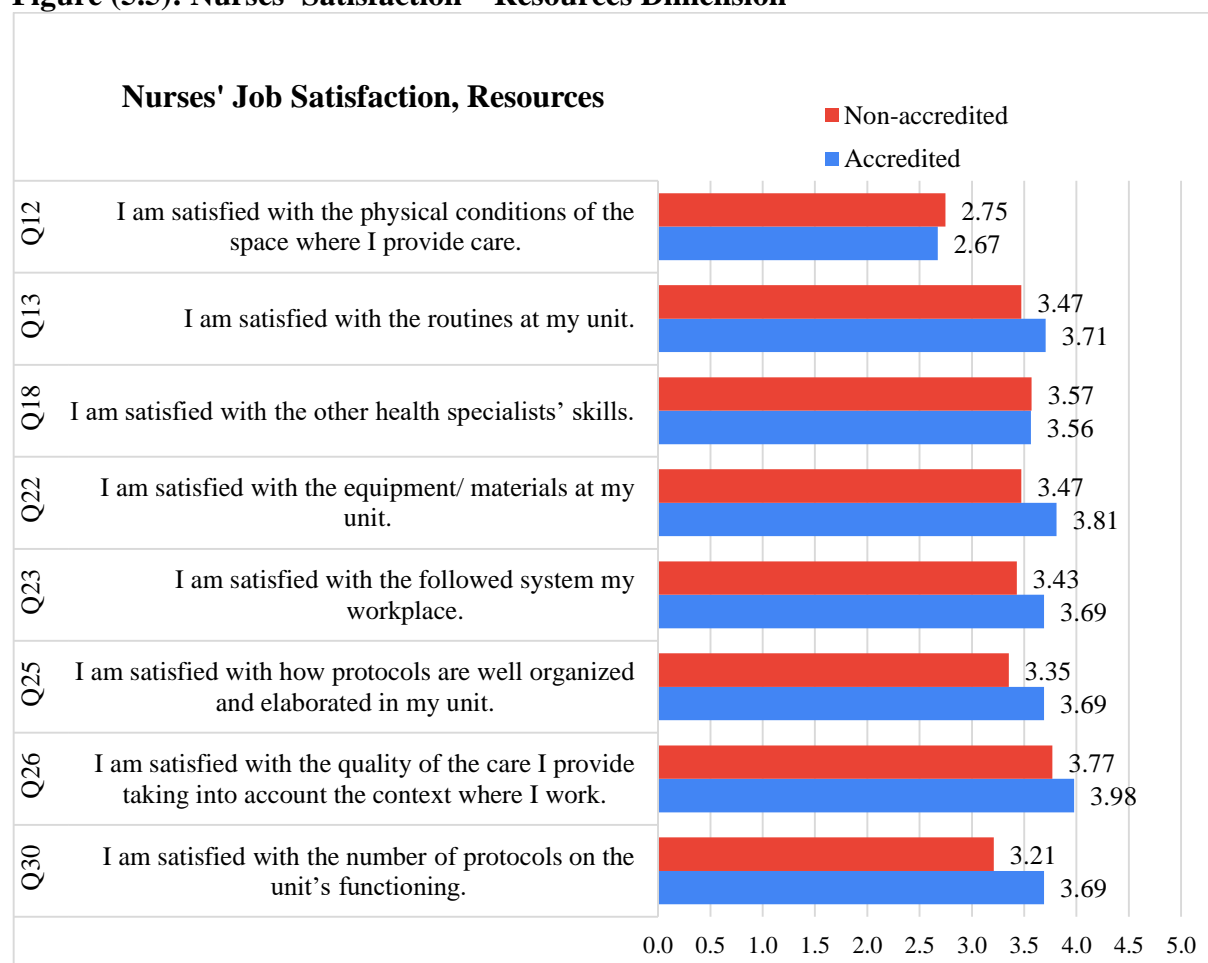
For **Staffing** Items, the nurses' satisfaction is equal to 2.99 (SD = 1.13) considered a moderate level of satisfaction, the item has moderate satisfaction (I am satisfied with the nurse per shift ratio according to the number of tasks to be performed) (Q11). (suitable nurses' number per shift to workload) (Q7) as shown in table (5.4) and figure (5.4). Satisfaction with Staffing is moderate in both accredited and non-accredited hospitals. However, nurses employed in the Non-accredited hospital expressed a greater level of satisfaction in Staffing, with an average rating of 3.08, as opposed to those working in the accredited hospital who received an average rating of 2.92.

**Figure (5.4): Nurses' Satisfaction – Staffing Dimension**



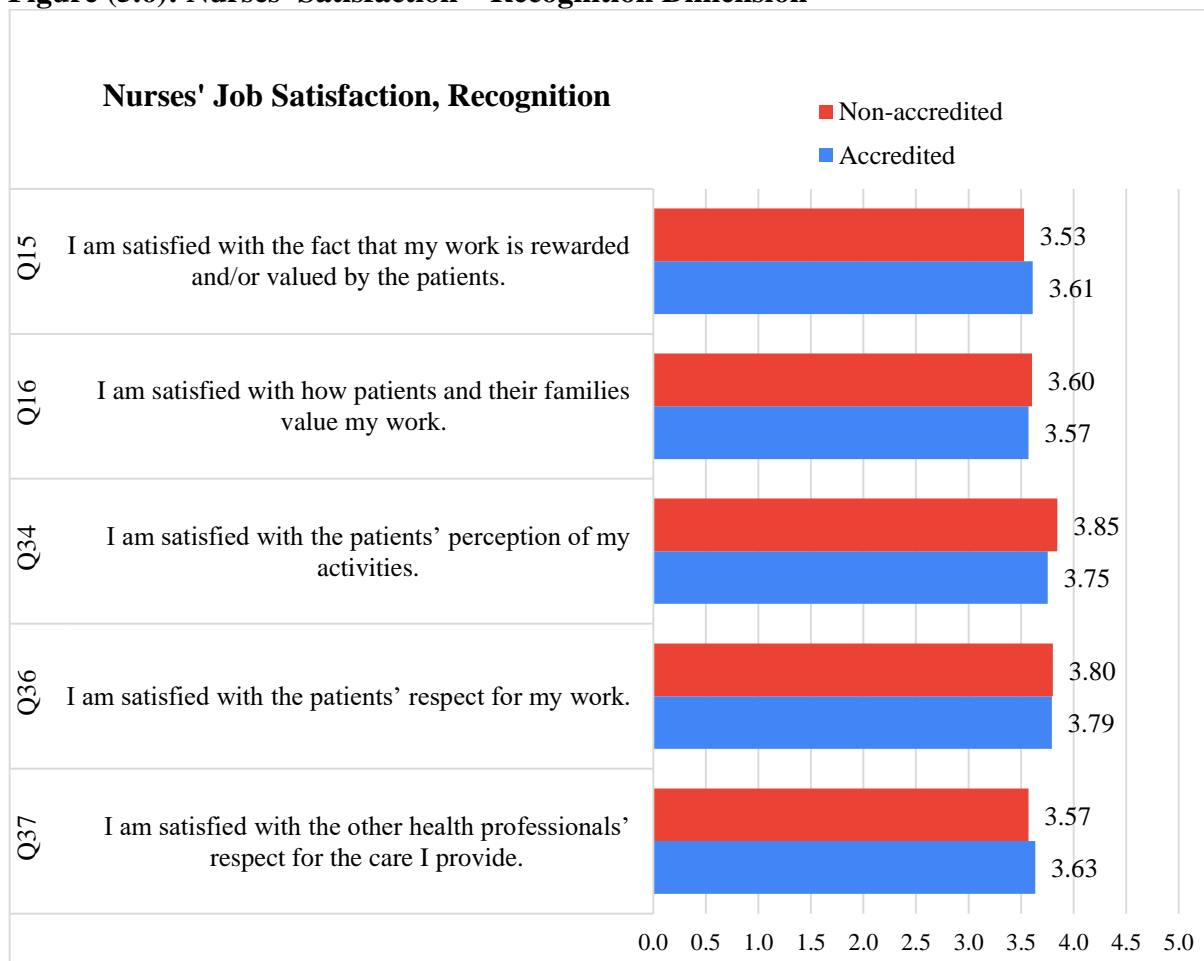
For **Resources** Items nurses' satisfaction equals 3.51 (SD = 0.9) considered a high level of satisfaction, the item has the highest satisfaction (I am satisfied with the quality of the care I provide taking into account the context where I work) (Q26) and the item has lowest satisfaction (I am satisfied with the physical conditions of the space where I provide care) (Q12) as shown in table (5.3) and figure (5.5). Satisfaction with Resources is high in an accredited and moderate in a non-accredited hospital. The data showed that nurses in the accredited hospital were more content with Resources, as reflected by their impressive average rating of 3.6. In contrast, their peers in the Non-accredited hospital average rating of 3.38.

**Figure (5.5): Nurses' Satisfaction – Resources Dimension**



For **Recognition** Items nurses' satisfaction is equal to 3.67 (SD = 0.88) considered a high level of satisfaction, the item has the highest satisfaction (I am satisfied with the patients' respect for my work.) (Q36) and the item has lowest satisfaction (I am satisfied with the fact that my work is rewarded and/or valued by the patients) (Q15) as shown as in table (5.3) and figure (5.6). Satisfaction with Recognition is high in non-accredited and accredited hospitals. The level of satisfaction with Recognition was the same in both hospitals, with an average score of 3.67 in each.

**Figure (5.6): Nurses' Satisfaction – Recognition Dimension**



**Table (5.3): The nurses' satisfaction in accredited and non-accredited hospitals.**

No.	Statement	% of Negative response	Neutral	% of Positive response	Mean	SD
<b>Co-workers items</b>						
Q1	I am satisfied with the moments of having conversations and sharing medical information with my co-workers.	7.40%	10.10%	82.5%	3.88	0.82
Q2	I am satisfied with the spirit of collaboration between me and my co-workers.	9.20%	9.70%	81.1%	3.89	0.92
Q4	I am satisfied with my coworkers' efforts to provide better care.	10.10%	18.40%	71.4%	3.68	0.86
Q9	I am satisfied with the level of trust that I have with my co-workers.	9.20%	17.50%	73.3%	3.69	0.86
Q20	I am satisfied with the level of colleagues' competence in the same field.	14.80%	20.70%	64.5%	3.53	0.91
<b>Total</b>		<b>10.1%</b>	<b>15.3%</b>	<b>74.6%</b>	<b>3.73</b>	<b>0.87</b>
<b>Remuneration Items</b>						
Q3	I am satisfied with the workload at my workplace.	35.50%	20.30%	44.2%	2.98	1.14
Q8	I am satisfied with the career advancement opportunities.	17.00%	29.00%	53.9%	3.35	0.88
Q27	I am satisfied with the waiting time to be promoted at my workplace.	33.70%	18.40%	47.9%	3.07	1.15
Q31	I am satisfied with my salary, taking into account the tasks I perform.	49.30%	18.00%	32.7%	2.61	1.23
Q32	I am satisfied with my salary taking into account my skills/knowledge.	46.10%	18.40%	35.5%	2.72	1.19
<b>Total</b>		<b>36.3%</b>	<b>20.8%</b>	<b>42.8%</b>	<b>2.95</b>	<b>1.12</b>
<b>Leadership Items</b>						
Q5	I am satisfied with my superiors' efforts to improve my working conditions.	22.10%	17.10%	60.8%	3.35	1.09
Q6	I am satisfied with my participation in decision-making at my workplace.	18.40%	18.40%	63.1%	3.43	1.03
Q10	I am satisfied with how my superiors allow me to participate in training courses/projects.	31.80%	18.90%	49.3%	3.1	1.12
Q14	I am satisfied with the fact that my work is rewarded and/or valued by my superiors.	30.90%	27.60%	41.5%	2.99	1.1
Q17	I am satisfied with the nursing assigned to me in my department.	11.50%	13.80%	74.7%	3.65	0.86
Q19	I am satisfied with the training opportunities provided at my workplace.	27.20%	21.70%	51.2%	3.19	1.008
Q21	I am satisfied with the possibility to implement new knowledge at my workplace.	11.10%	15.70%	73.3%	3.66	0.81
Q24	I am satisfied with my autonomy to provide adequate care to patients according to my skills.	12.00%	15.70%	72.4%	3.66	0.85
Q28	I am satisfied with the tasks performed in my unit.	9.70%	15.70%	74.7%	3.67	0.82

Q29	I am satisfied with my superiors' respect for my work.	18.00%	12.90%	69.1%	3.51	1.05
Q33	I am satisfied with the moments of dialogue and sharing of information with my superiors.	12.50%	16.10%	71.4%	3.6	0.94
Q35	I am satisfied with my superiors' encouragement to participate in training.	19.80%	21.70%	58.5%	3.36	1.01
<b>Total</b>		<b>18.8%</b>	<b>17.9%</b>	<b>63.3%</b>	<b>3.43</b>	<b>0.97</b>
<b>Staffing Items</b>						
Q7	I am satisfied with the nurse-to-patient ratio in my shift.	39.60%	20.70%	39.6%	2.93	1.15
Q11	I am satisfied with the nurse-per-shift ratio according to the number of tasks to be performed. (suitable nurses' number per shift to workload)	34.10%	23.00%	42.9%	3.04	1.11
<b>Total</b>		<b>36.9%</b>	<b>21.9%</b>	<b>41.3%</b>	<b>2.99</b>	<b>1.13</b>
<b>Resources Items</b>						
Q12	I am satisfied with the physical conditions of the space where I provide care.	45.20%	22.60%	32.3%	2.71	1.16
Q13	I am satisfied with the routines at my unit.	12.90%	12.00%	75.1%	3.61	0.84
Q18	I am satisfied with the other health specialists' skills.	9.30%	25.30%	65.4%	3.57	0.78
Q22	I am satisfied with the equipment/materials at my unit.	13.90%	13.40%	72.8%	3.67	0.98
Q23	I am satisfied with the followed system my workplace.	14.30%	17.10%	68.7%	3.58	0.94
Q25	I am satisfied with how protocols are well organized and elaborated in my unit.	12.90%	19.80%	67.3%	3.55	0.87
Q26	I am satisfied with the quality of the care I provide taking into account the context where I work.	4.10%	10.10%	85.7%	3.89	0.66
Q30	I am satisfied with the number of protocols on the unit's functioning.	15.20%	20.70%	64.1%	3.49	0.95
<b>Total</b>		<b>16.0%</b>	<b>17.6%</b>	<b>66.4%</b>	<b>3.51</b>	<b>0.90</b>
<b>Recognition Items</b>						
Q15	I am satisfied with the fact that my work is rewarded and/or valued by the patients.	13.90%	16.60%	69.6%	3.58	0.93
Q16	I am satisfied with how patients and their families value my work.	13.40%	19.40%	67.3%	3.59	0.94
Q34	I am satisfied with the patients' perception of my activities.	8.30%	12.90%	78.8%	3.79	0.85
Q36	I am satisfied with the patients' respect for my work.	8.80%	10.10%	81.1%	3.8	0.84
Q37	I am satisfied with the other health professionals' respect for the care I provide.	11.50%	17.50%	71.0%	3.61	0.86
<b>Total</b>		<b>11.2%</b>	<b>15.3%</b>	<b>73.6%</b>	<b>3.67</b>	<b>0.88</b>
<b>Total satisfaction</b>		<b><u>19.3%</u></b>	<b><u>17.8%</u></b>	<b><u>62.9%</u></b>	<b><u>3.43</u></b>	<b><u>0.96</u></b>

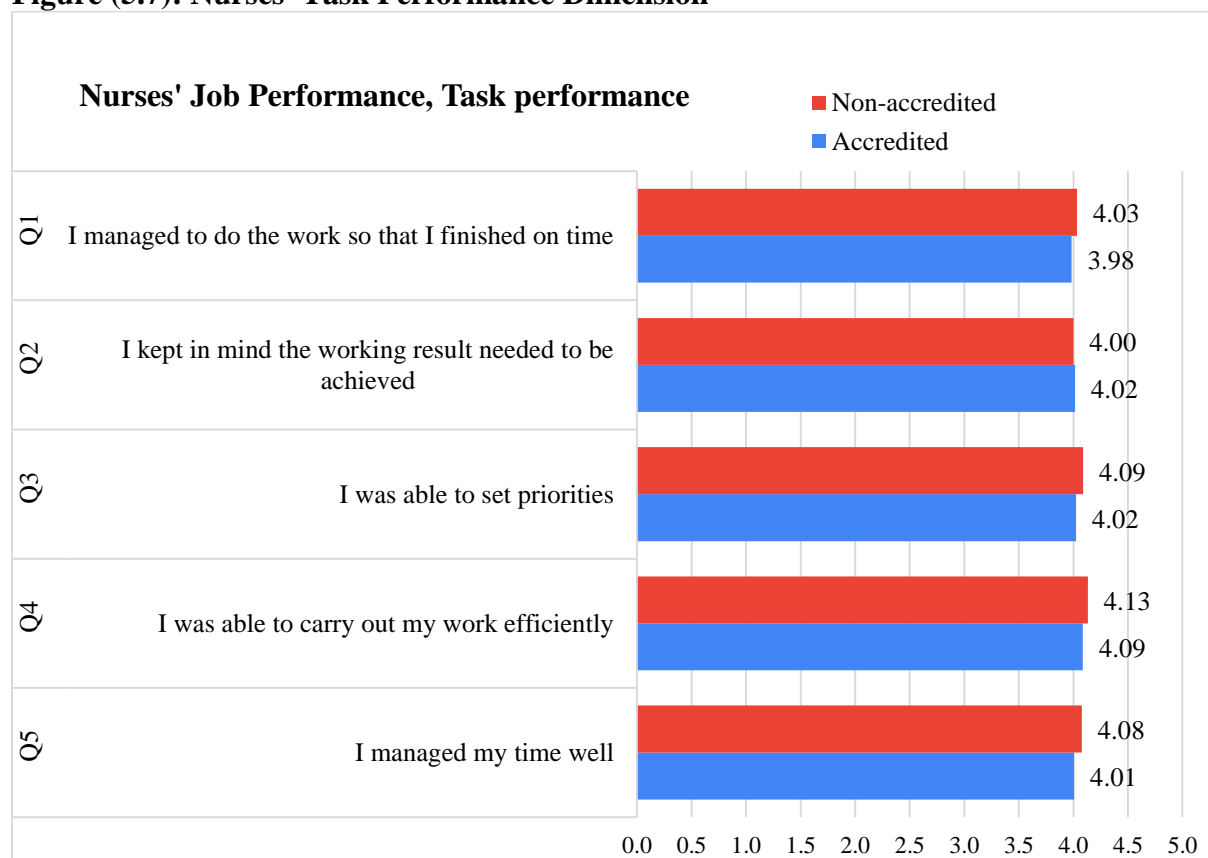


#### 5.4.2 Nurses' job performance with hospitals accreditation status.

As can be seen in Table (5.4), a total mean of Performance equal to 3.65 (SD = 0.84) indicates a high level of performance among nurses in both hospitals. Evidence also indicated that nurses perform at moderate to high levels across all measures of nursing performance:

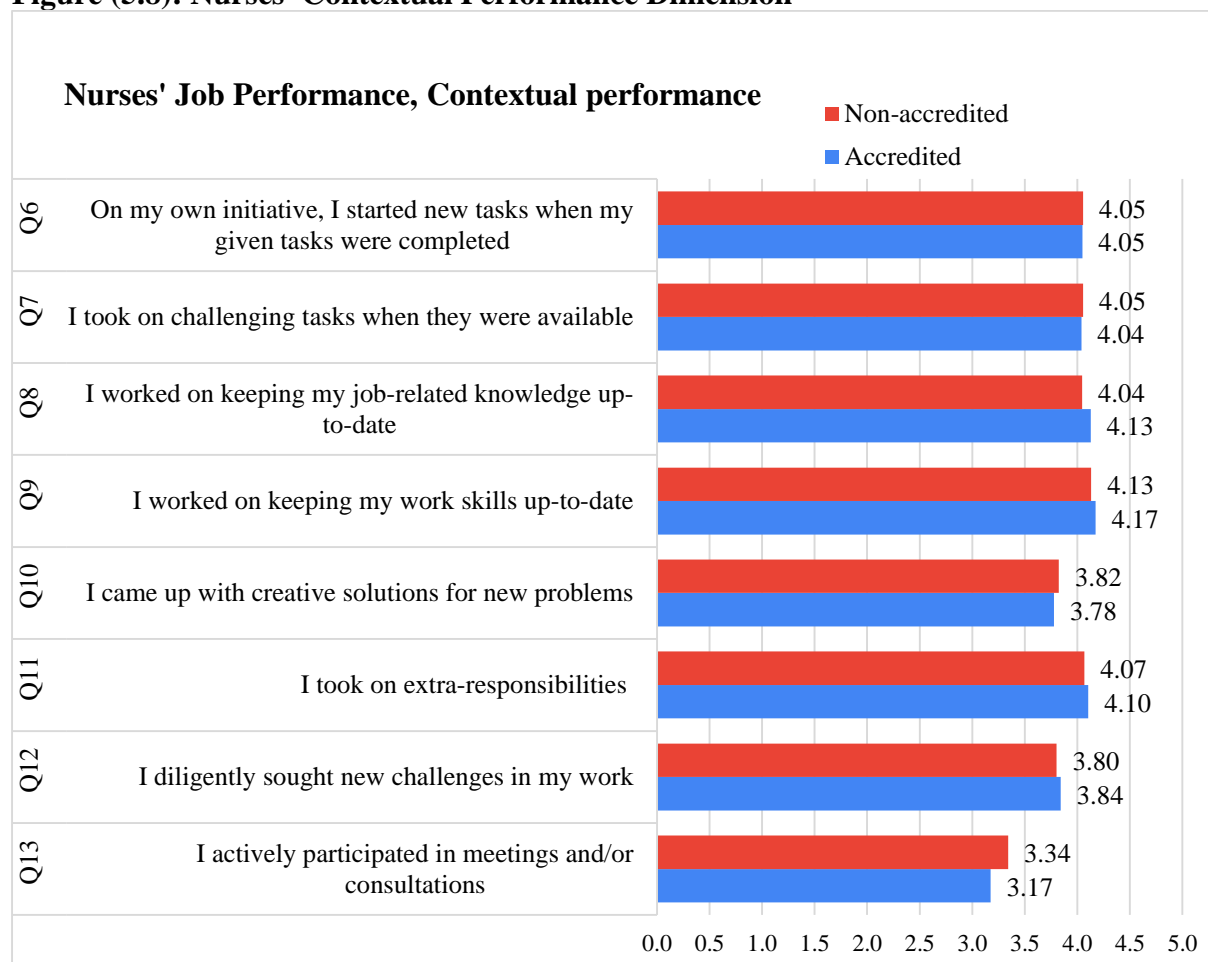
For **Task performance** nurses' performance is equal to 4.04 (SD = 0.69) considered a high level of performance, the item has the highest performance (I was able to carry out my work efficiently) (Q4) and the item has the lowest performance (I managed to do the work so that I finished on time) (Q1) as shown in table (5.4). While the Task performance dimension exhibited high levels of satisfaction in both accredited and non-accredited hospitals, a more detailed examination revealed that nurses in the Non-Accredited hospital reported a slightly higher level of satisfaction, scoring an average of 4.07 compared to their counterparts in the Accredited Hospital who received an average score of 4.02. Figure (5.7) illustrates the average for the hospital with and without JCI accreditation for the Nurses' Task Performance Dimension.

**Figure (5.7): Nurses' Task Performance Dimension**



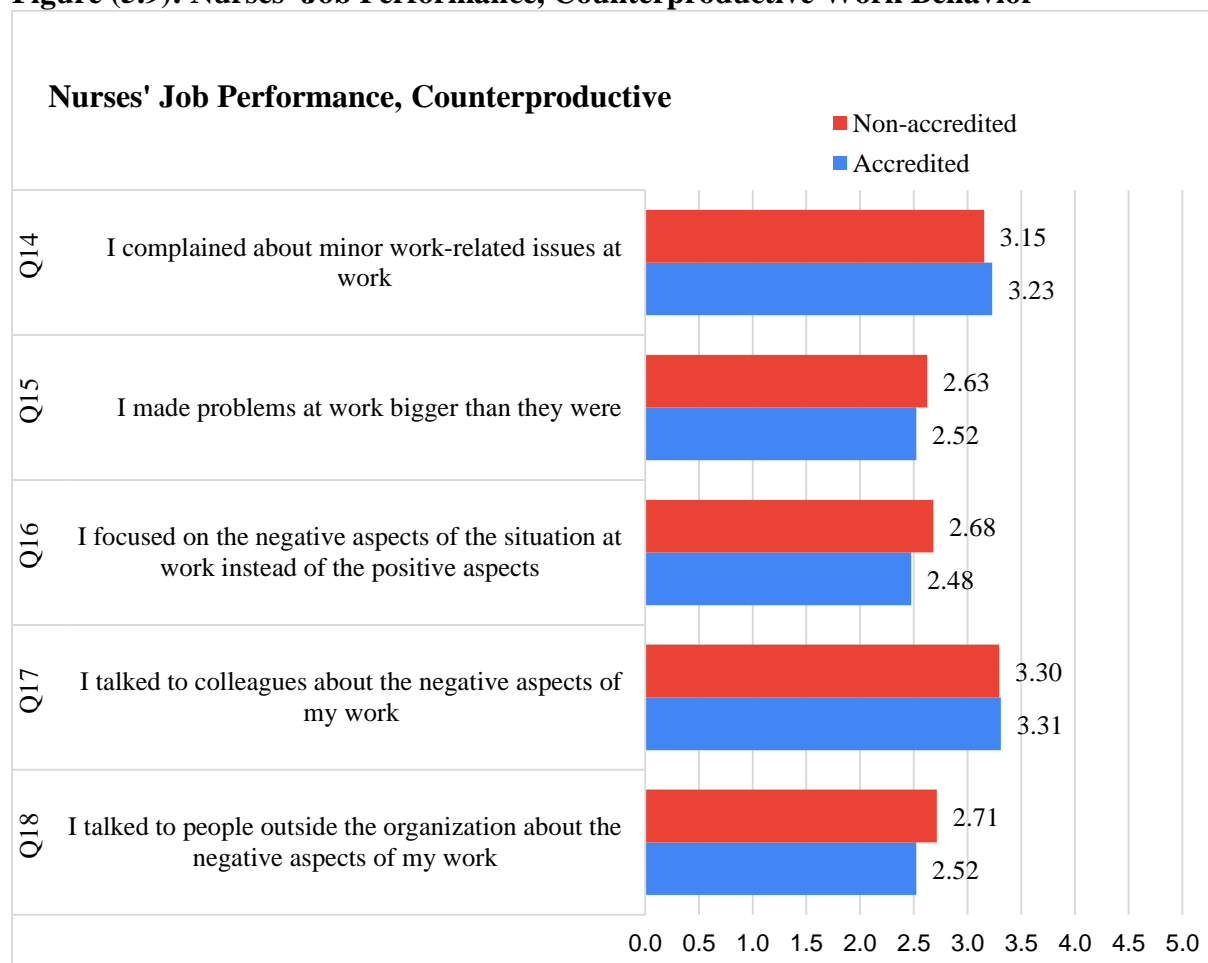
The nurses' **Contextual** performance is equal to 3.91 (SD = 0.76), which is considered a high level of performance, the item has the highest performance (I worked on keeping my work skills up-to-date) (Q9) and the item has the lowest performance (I actively participated in meetings and/or consultations) (Q13) as presented in table (5.4) and figure (5.8). Although the Contextual dimension showed high levels of satisfaction in both accredited and non-accredited hospitals, a closer analysis revealed that nurses in both hospitals had similar levels of performance, scoring an average of 3.91.

**Figure (5.8): Nurses' Contextual Performance Dimension**



For the **Counterproductive work behavior** nurses' performance is equal to 2.85 (SD =1.1) considered a moderate level of performance, the item has the highest performance (I focused on the negative aspects of the situation at work instead of the positive aspects) (Q16), the item has the lowest performance (I talked to colleagues about the negative aspects of my work) (Q17) as shown in table (5.4) and figure (5.9). The result showed up with moderate levels of performance in both accredited and non-accredited hospitals. However, the nurses in the Non-accredited hospital have a slightly higher level of Counterproductive work behavior than those in the accredited hospital with an average respectively, 2.89, 2.81.

**Figure (5.9): Nurses' Job Performance, Counterproductive Work Behavior**



**Table (5.4): The nurses' performance in accredited and non-accredited hospitals.**

No.	Statement	% of Negative response	Neutral	% of Positive response	Mean	SD
<b>Task performance</b>						
Q1	I managed to do the work so that I finished on time	4.10%	10.60%	85.30%	4	0.76
Q2	I kept in mind the working result needed to be achieved	3.70%	6.90%	89.40%	4.01	0.67
Q3	I was able to set priorities	3.70%	7.80%	88.50%	4.05	0.69
Q4	I was able to carry out my work efficiently	1.80%	7.80%	90.30%	4.11	0.64
Q5	I managed my time well	3.30%	10.10%	86.60%	4.04	0.67
<b>Total</b>		<b>3.3%</b>	<b>8.6%</b>	<b>88.0%</b>	<b>4.04</b>	<b>0.69</b>
<b>Contextual performance</b>						
Q6	On my own initiative, I started new tasks when my given tasks were completed	3.30%	9.20%	87.60%	4.05	0.67
Q7	I took on challenging tasks when they were available	2.30%	12.40%	85.30%	4.05	0.69
Q8	I worked on keeping my job-related knowledge up-to-date	1.90%	8.80%	89.40%	4.09	0.67
Q9	I worked on keeping my work skills up-to-date	1.80%	7.80%	90.30%	4.16	0.67
Q10	I came up with creative solutions for new problems	7.40%	19.40%	73.30%	3.8	0.82
Q11	I took on extra-responsibilities	4.20%	11.50%	84.30%	4.09	0.76
Q12	I diligently sought new challenges in my work	6.50%	18.90%	74.70%	3.82	0.8
Q13	I actively participated in meetings and/or consultations	24.00%	30.00%	46.10%	3.24	1.005
<b>Total</b>		<b>6.4%</b>	<b>14.8%</b>	<b>78.9%</b>	<b>3.91</b>	<b>0.76</b>
<b>Counterproductive work behavior</b>						
Q14	I complained about minor work-related issues at work	47%	25.30%	27.60%	3.2	1.06
Q15	I made problems at work bigger than they were	22.10%	22.60%	55.30%	2.57	1.05
Q16	I focused on the negative aspects of the situation at work instead of the positive aspects	25.80%	17.50%	56.70%	2.56	1.15
Q17	I talked to colleagues about the negative aspects of my work	52.10%	25.30%	22.60%	3.3	1.05
Q18	I talked to people outside the organization about the negative aspects of my work	28.60%	22.10%	49.30%	2.6	1.21
<b>Total</b>		<b>35.10%</b>	<b>22.6%</b>	<b>42.30%</b>	<b>2.85</b>	<b>1.10</b>
<b>Total Performance</b>		<b>13.53%</b>	<b>15.22%</b>	<b>71.26%</b>	<b>3.65</b>	<b>0.84</b>

### 5.4.3 Comparing JCI Accredited and Non-accredited Palestinian Hospitals.

The total average nurses' satisfaction in the JCI-accredited hospital was more than in non-accredited hospital at 3.74 (SD = 0.9) for accredited hospital and 3.38 (SD = 1.02) for non-accredited hospital, and there were no considerable differences between the two hospitals' mean nurses' job satisfaction ratings in any of the satisfaction categories. Satisfaction with Co-worker and Staffing was slightly higher in the non-accredited hospital however, satisfaction with Remunerations, Leadership, and Resources was slightly higher in the accredited hospital. Moreover, the same level of satisfaction was shown in the Recognition factor, as shown in Figure (5.10).

Appendix (8 & 9) demonstrates that nurses were more likely to respond positively to surveys at both hospitals, with an overall positive response rate of 63.9% at the accredited hospital compared to 61.5% at the non-accredited hospital.

**Figure (5.10): Nurses' Job Satisfaction in Accredited and Non-Accredited Hospitals**

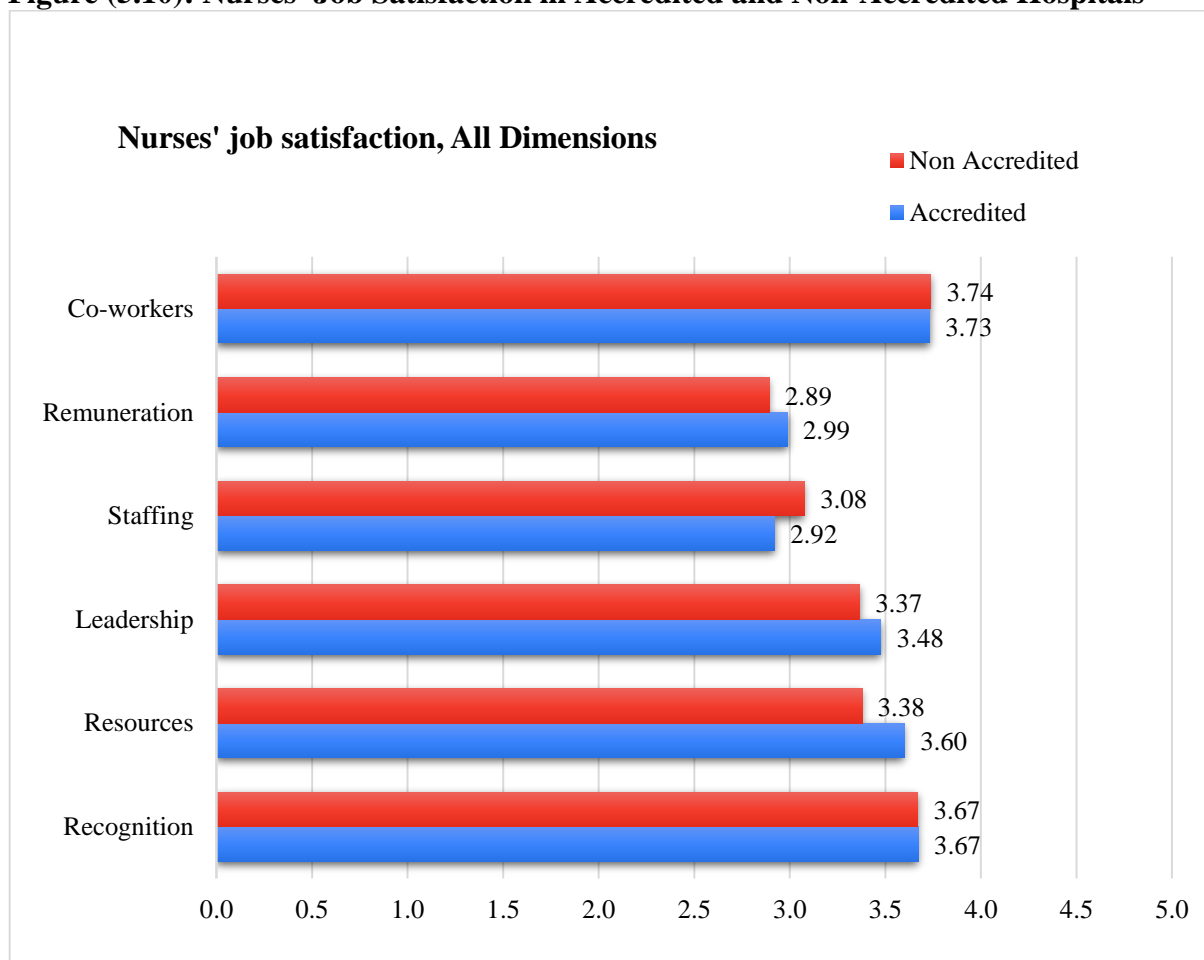
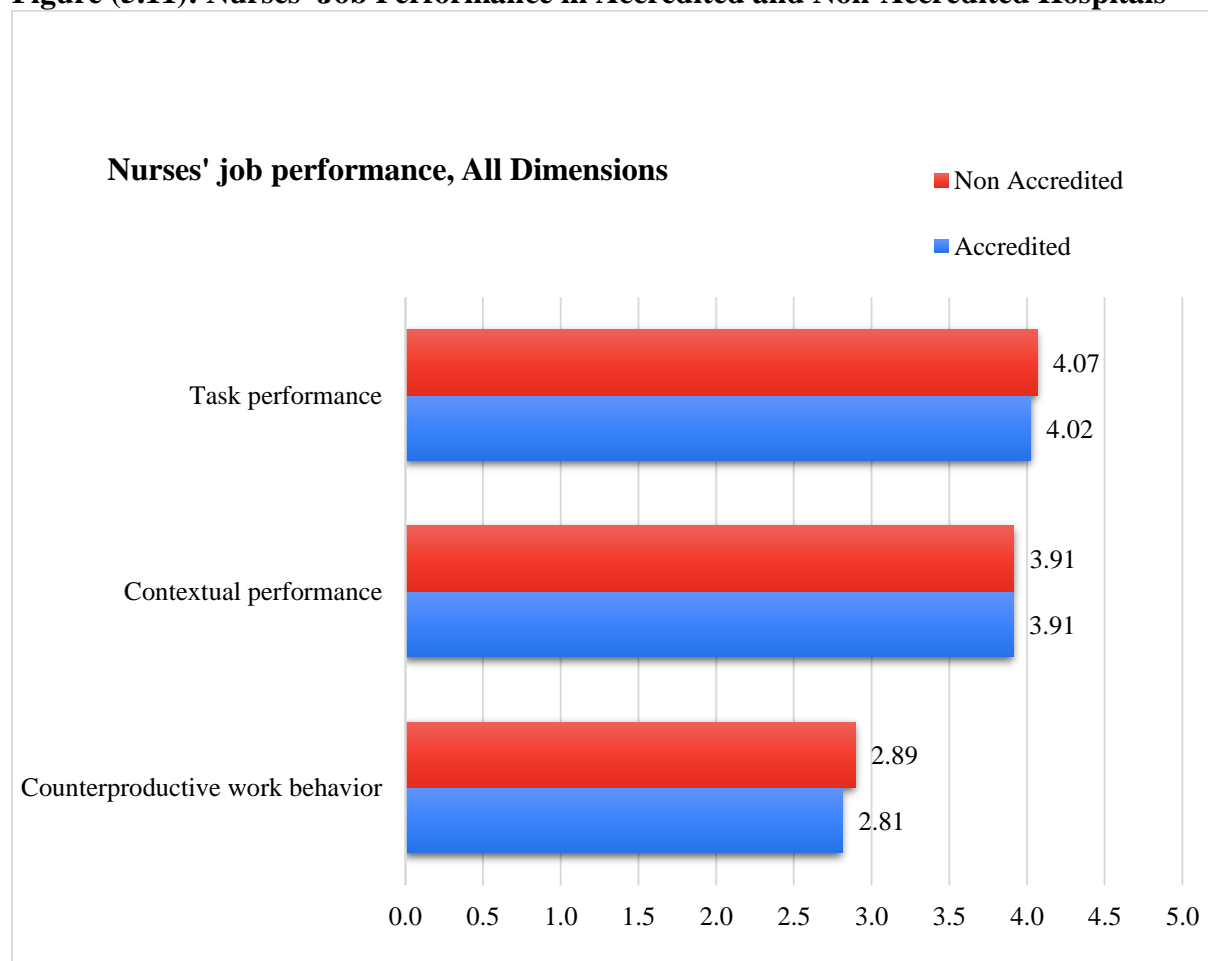


Figure (5.11) shows that the overall average performance of nurses was slightly higher in non-accredited hospital than in accredited hospital (3.67 for non-accredited hospital and 3.64 for accredited hospital). Performance with Counterproductive work behavior was equal in both the accredited and non-accredited hospitals however, performance with Task, Contextual was slightly higher in the non-accredited hospitals.

Appendix (10 & 11) demonstrates that the non-accredited hospital had a higher positive response rate than the accredited hospital, with a positive response rate of 71.5% compared to 67.6% for accredited hospitals.

**Figure (5.11): Nurses' Job Performance in Accredited and Non-Accredited Hospitals**



## 5.5 Testing Hypothesis

### 5.5.1 Relationships between overall nurses' job satisfaction and job performance in an accredited hospital and non-accredited hospital.

A relationship existed between overall nurses' job satisfaction and job performance in accredited hospitals ( $r = 0.319$  and  $p\text{-value} = 0.001$ ). Moreover, there was a relationship between overall nurses' job satisfaction and job performance in non-accredited hospitals ( $r = 0.46$  and  $p\text{-value} = 0.001$ ) as shown in Table (5.5).

**Table (5.5): The relationship between overall Nurses' Job Satisfaction and Job Performance in Accredited and Non-accredited Hospitals (Person Correlation test).**

Variable	Accredited hospital		Non-Accredited hospital	
	Person correlation test		Person correlation test	
	r value	P value (sig)	r value	P value (sig)
Job Satisfaction	0.319	<b>0.001*</b>	0.46	<b>0.001*</b>
Job Performance				

### 5.5.2 Nurses' job satisfaction and performance according to Accreditation Status

There are no significant differences in nurse satisfaction and performance based on accreditation status since P-value is more than (0.05), as shown in Table (5.6).

**Table (5.6): Nurses' Job Satisfaction and Performance according to Accreditation Status (T. Test).**

Variables	Accreditation Status	Mean	T-value	P-value
Nurses Job Satisfaction	Accredited	3.398	.555	.493
	Non-Accredited	3.353		
Nurses Job Performance	Accredited	3.582	-.701	.263
	Non-Accredited	3.625		

On the other hand, table (5.7) indicates that there are no statistically significant differences between nurses' satisfaction subscales (Co-workers, Remuneration, Staffing, Leadership, Resources, Recognition) related to accreditation status at level ( $P \leq 0.05$ ) where the p-values equal (0.29, 0.501, 0.967, 0.162, 0.074, 0.713) respectively.

**Table (5.7): Nurses' Job Satisfaction Subscales according to Accreditation Status (T. Test)**

Variables	Accreditation Status	Mean	T-value	P-value
Co-Worker	Accredited	3.731	-.075	.290
	Non-Accredited	3.738		
Remuneration	Accredited	2.987	.083	.501
	Non-Accredited	2.892		
Staffing	Accredited	2.920	-1.085	.967
	Non-Accredited	3.076		
Leadership	Accredited	3.477	1.152	.162
	Non-Accredited	3.365		
Resources	Accredited	3.600	2.728	.074
	Non-Accredited	3.377		
Recognition	Accredited	3.673	.027	.713
	Non-Accredited	3.670		

Table (5.8), indicates that there are no statistically significant differences between the means of nurses' performance subscales (Task, Contextual, Counterproductive work behavior) related to accreditation status at level ( $P \leq 0.05$ ) where the p-values equal (0.17, 0.355, 0.85) respectively.

**Table (5.8): Nurses' Job Performance Subscales according to Accreditation Status (T. Test)**

Variables	Accreditation Status	Mean	T-value	P-value
Task performance	Accredited	4.023	-.512	.170
	Non-Accredited	4.065		
Contextual performance	Accredited	3.910	-.056	.355
	Non-Accredited	3.914		
Counterproductive work behavior	Accredited	2.812	-.700	.085
	Non-Accredited	2.894		



**5.5.3 Differences in job satisfaction and performance in relation to demographic characteristics of the nurses in the accredited hospital. (By using One-way ANOVA and Independent sample t-tests).**

Tables (5.9 and 5.10) show that there are no statistically significant differences in nurses' job satisfaction and performance in the accredited hospital in regard to Gender and Age.

**Table (5.9): Nurses' Job Satisfaction and Performance according to Gender in the Accredited Hospital (T. Test)**

Variables	Gender	Mean	T-value	P-value
Nurses' job satisfaction in an accredited hospital	Male	3.474	1.609	0.756
	Female	3.314		
Nurses' Job Performance in an accredited hospital	Male	3.667	2.602	0.874
	Female	3.489		

**Table (5.10): Nurses' job satisfaction and performance according to Age in the accredited hospital (ANOVA)**

hospital (ANOVA)

Variables		Nurses' job satisfaction in an accredited hospital			
		Sum of Squares	df	F-value	P-value
Age	Between Groups	0.867	5	0.542	0.744
	Within Groups	38.424	120		

Variables		Nurses' job performance in an accredited hospital			
		Sum of Squares	df	F-value	P-value
Age	Between Groups	0.658	5	0.85	0.517
	Within Groups	18.577	120		

Table (5.11) shows that there are significant differences between the Nurses' job performance related to hospital experience ( $P = 0.007$ ) between those who have 3-5 years and less than one year and 1-2 years of experience in favor of 3-5 years of experience in the accredited hospital as shown in the Tukey test below.

**Table (5.11): Nurses' Job Satisfaction and Performance according to Hospital Experience in the Accredited Hospital (ANOVA)**

Variables		Nurses' job satisfaction in the accredited hospital					
		Sum of Squares	df	F-value	P-value		
Hospital Experience	Between Groups	2.012	4	1.632	0.17		
	Within Groups	37.28	121				
Variables		Nurses' job performance in the accredited hospital					
		Sum of Squares	df	F-value	P-value		
Hospital Experience	Between Groups	2.109	4	3.725	0.007*		
	Within Groups	17.126	121				
	Tukey test						
	(I) Hospital Experience	(J) Hospital Experience	Mean Difference (I-J)	Std. Error	Sig.	95% Confidence Interval	
						Lower Bound	Upper Bound
	From 3 to 5 Years	Less than One Year	.349*	0.108	0.016	0.041	0.657
		From 1 to 2 Years	.380*	0.102	0.003	0.088	0.671
		From 6 to 10 Years	0.28	0.116	0.167	-0.05	0.611
		More than 10 Years	0.386	0.386	1	-0.718	1.49
	* The mean difference is significant at the 0.05 level.						

There are statistically significant differences in the Nurses' work performance related to educational degrees between Higher Diploma, and Bachelor degrees, with the results favoring those with a (Diploma Degree) based on the results of the Tukey test, which are summarized in Table (5.12).

**Table (5.12): Nurses' Job Satisfaction and Performance according to Educational Degree in Accredited Hospital (ANOVA)**

Variables		Nurses' job satisfaction in the accredited hospital					
		Sum of Squares	df	F-value	P-value		
Educational Degree	Between Groups	0.709	3	0.747	0.526		
	Within Groups	38.583	122				
Variables		Nurses' job performance in the accredited hospital					
		Sum of Squares	df	F-value	P-value		
Educational Degree	Between Groups	1.307	3	2.966	0.035*		
	Within Groups	17.928	122				
	Tukey test						
	(I) Educational Degree	(J) Educational Degree	Mean Difference (I-J)	Std. Error	Sig.	95% Confidence Interval	
	Diploma Degree	Master's degree	0.34875	0.18183	0.226	-0.125	0.8224
		Bachelor degree	.37113*	0.12708	0.021	0.04	0.7022
		Higher Diploma	0.42821	0.18891	0.112	-0.064	0.9203
	* The mean difference is significant at the 0.05 level.						

There were no significant differences related to demographic characteristics since p-value was more than (0.05) related to Occupational Category, as shown in Table (5.13).

**Table (5.13): Nurses' Job Satisfaction and Performance according to Occupational Category in Accredited Hospital (ANOVA)**

Variables		Nurses' job satisfaction in the accredited hospital			
		Sum of Squares	df	F-value	P-value
Occupational Category	Between Groups	1.762	4	1.42	0.231
	Within Groups	37.53	121		
Variables		Nurses' job performance in the accredited hospital			
		Sum of Squares	df	F-value	P-value
Occupational Category	Between Groups	1.325	4	2.238	0.069
	Within Groups	17.91	121		

#### 5.5.4 Differences in job satisfaction and performance in relation to demographic characteristics of the nurses in the Non-accredited hospital. (By using One-way ANOVA and Independent sample t-tests).

By comparing demographic features between male and female nurses in the non-accredited hospital for the Nurses' job satisfaction, and performance, there were significant differences since p-value was less (0.05) related to Gender for the Nurses' job satisfaction in favor of females with a mean of (3.37), which was higher than the males (3.33) as presented in table (5.14). Moreover, there are no significant differences related to Gender in the Nurses' job performance in a Non-accredited hospital as shown in the Table (5.14).

**Table (5.14): Nurses' Job Satisfaction and Performance according to Gender in the Non-accredited Hospital (T. Test)**

Variables	Gender	Mean	T-value	P-value
Nurses' job satisfaction	Male	3.3395	5.377	0.023*
	Female	3.3707		
Nurses' job performance	Male	3.6713	2.765	0.1
	Female	3.5687		

There were no significant differences related to demographic characteristics since the p-value was more than (0.05) related to Age, as shown in Table (5.15).

**Table (5.15): Nurses' Job Satisfaction and Performance according to Age in the Non-accredited Hospital (ANOVA)**

Variables		Nurses' job satisfaction in a Non-accredited hospital			
		Sum of Squares	df	F-value	P-value
Age	Between Groups	3.979	5	2.191	0.063
	Within Groups	30.877	85		
Variables		Nurses' job performance in a Non-accredited hospital			
		Sum of Squares	df	F-value	P-value
Age	Between Groups	1.354	5	1.071	0.382
	Within Groups	21.485	85		

As the p-value for Hospital Experience for the non-accredited hospital was more than (0.05), there were no statistically significant differences between the two groups based on demographic characteristics, as shown in Table (5.16).

**Table (5.16): Nurses' Job Satisfaction and Performance according to Hospital Experience in the Non-accredited Hospital (ANOVA)**

Variables		Nurses' job satisfaction in a Non-accredited hospital			
		Sum of Squares	df	F-value	P-value
Hospital Experience	Between Groups	1.2	4	0.767	0.55
	Within Groups	33.655	86		
Variables		Nurses' job performance in a Non-accredited hospital			
		Sum of Squares	df	F-value	P-value
Hospital Experience	Between Groups	1.614	4	1.635	0.173
	Within Groups	21.225	86		

There were no significant differences related to demographic characteristics since p-value was more than (0.05) related to Educational Degree, as shown in Table (5.17).

**Table (5.17): Nurses' Job Satisfaction and Performance according to Educational Degree in the Non-accredited Hospital (ANOVA)**

Variables		Nurses' job satisfaction in a Non-accredited hospital			
		Sum of Squares	df	F-value	P-value
Educationa l Degree	Between Groups	0.172	3	0.144	0.933
	Within Groups	34.684	87		
Variables		Nurses' job performance in a Non-accredited hospital			
		Sum of Squares	df	F-value	P-value
Educationa l Degree	Between Groups	0.909	3	1.202	0.314
	Within Groups	21.93	87		

The p-value for Occupational Category was greater than (0.05), so there were no statistically significant differences in demographic data for the Non-accredited hospital, as shown in Table (5.18).

**Table (5.18): Nurses' Job Satisfaction and Performance according to Occupational Category in the Non-accredited Hospital (ANOVA)**

Variables		Nurses' job satisfaction in a Non-accredited hospital			
		Sum of Squares	df	F-value	P-value
Occupationa l Category	Between Groups	1.219	4	0.779	0.542
	Within Groups	33.637	86		
Variables		Nurses' job performance in a Non-accredited hospital			
		Sum of Squares	df	F-value	P-value
Occupationa l Category	Between Groups	2.033	4	2.101	0.088
	Within Groups	20.806	86		

## **Chapter Six**

### **Discussion of Findings**

#### **6.1 Introduction**

Results are discussed in this chapter, including the characteristics of the nurses who participated in the study and correlations between nurses' work satisfaction levels and job performance levels. Moreover, the influence of Nurses' demographic characteristics on Nurses' job satisfaction and performance in both hospitals and how the hospital's accreditation status affected the different dimensions of Nurses' job satisfaction and performance are also discussed.

#### **6.2 Correlations Between Overall Nurses' Job Satisfaction and Performance in Both Accredited and Non-accredited Hospitals**

There was a link between overall nurses' job satisfaction and job performance in both accredited and non-accredited hospitals since p-value was equal to 0.001. The findings of this study are in line with the results of most previous studies. In the nursing sector, there is a strong link between job satisfaction and performance (Al-Ahmadi, 2009). Nabirye et al. (2011) found that job satisfaction was a significant predictor of self-rated quality of job performance in a study of 333 hospital nurses in Uganda. The International Staffing Questionnaire (ISQ) on nurses' levels of job satisfaction, commitment, well-being, and performance was studied in a study of 412 nurses from 20 private healthcare centers in Pakistan, employee satisfaction was found to have a beneficial effect on performance (Abdullah et al., 2021). Overall, the findings and the literature suggests the presence of a strong relationship between nurses' levels of job satisfaction and their performance on the job. The quality of care provided to patients and the efficiency with which hospitals operate can both improve when nurses like their work.

#### **6.3 Demographic Characteristics of the Nurses**

There were a total of 217 nurses who handed out filled-in questionnaires; 126 were from nurses at the accredited hospital with a response rate equal to 58.1%, and 91 were from nurses at the non-accredited hospital (response rate = 41.9%). This result suggests that nurses in the accredited hospital may have been more inclined to participate in the research questionnaires, possibly due to their heightened interest in the research topic or their greater familiarity with the research questionnaire.

Females made up 46.5% of the overall sample, while males made up 53.5%, males relatively outweigh women in this survey and it's possible that men are simply more interested in the subject of the survey than women.

Sixty-four percent of the respondents are between 23-29 years old. because the Private hospitals in Palestine may choose to recruit young nurses due to the:

1. Cost: lower salaries than more seasoned nurses,
2. Flexibility: Willing to work non-traditional hours or take on additional responsibilities,
3. Technology: Younger nurses may be more familiar with new technologies, and
4. Recruitment pool: More young nurses are available to hire than older ones.

The hospital experience level of the nurses who participated in this study was (five years and less than) 70%. This result reflects that both hospitals integrate fresh graduates into employment at a high rate while retaining 30% of those with experience (more than five years), the hospitals mix experienced and fresh graduate nurses on staff for

1. Lower salaries: Fresh graduates tend to command lower salaries than more experienced nurses, which can help keep costs down for hospitals, and
2. Reduced turnover (Retaining experienced nurses can help to reduce turnover, which can be costly for hospitals in terms of recruitment and training.

The majority of the nurses who participated in the study had mostly Bachelor's degrees with 155 out of a total of 217 nurses, accounting for a significant 71.4%. This result is attributed to a majority of Palestinians (17.4%), having a Bachelor's degree or higher, as shown in the statistical yearbook of Palestine (PCBS, 2021).

A thorough analysis of the research participants revealed that the majority of the nurses were registered nurses (RNs), comprising 150 out of a total of 217 nurses (69.1%). The next in line were licensed practical nurses (LPNs), making up 41 out of a total of 217 nurses, (18.9%). These findings hint that RNs are the dominant group of healthcare professionals in staffing at both hospitals. To further support this, the Palestinian population data from the Palestinian Central Bureau of Statistics (2021) corroborate these findings, showing that 5.9% of Palestinians are enrolled in Practical nursing programs.

#### **6.4 Nurses' Demographic Characteristics and Job Satisfaction and Performance with Hospitals Accreditation Status.**

Findings show that there are statistically significant differences between nurses' gender and their overall satisfaction at the non-accredited hospital, but that there are no such differences between nurses' gender and their overall job satisfaction at the accredited hospital.



This study finding for the accredited hospital corroborated those of Khair (2015), who found there is no significant difference in nurses' perceptions of the influence of JCI accreditation based on gender. On the other hand, there were no significant differences in hospitals based on accreditation status and overall performance ratings of male and female nurses. This study's findings supported those of Zahara et al. (2011), who found no link between nurses' gender and work performance.

The study found no statistically significant differences between the two hospitals' mean ratings of nurses' satisfaction and performance based on age group. Contrary to the findings of the previous research, which found a significant age-related difference in nurses' levels of satisfaction and performance nurses improve with age (Abdullah et al., 2021).

The findings showed that there are no statistically significant differences between nurses' hospital experience and their overall satisfaction at both hospitals, which is contrary to the kinds of literature that found major statistical significance between experience and job satisfaction, Poudel and Sharma (2019) found the Nurses' job satisfaction was positively linked to their nursing work experience since ( $P=0.004$ ). Nevertheless, there are no such differences between nurses' hospital experience and their overall work performance in the non-accredited hospital, but there are significant differences between hospital experience and nurses' job performance in the accredited hospital in favor of hospital experience (3-5 years). Avia and Hariyati (2019) examined and studied the influence of hospital accreditation on healthcare quality, the study evaluated nurses and other health workers based on their work performance and discovered that the quality of care was positively improved with work experience. Experienced nurses' knowledge, skills, and attitudes in patient care, as well as their problem-solving skills, can be linked to higher individualized care perception in nurses with longer work duration (Danaci & Koç, 2020).

The findings indicated that nursing education level had no effect on job satisfaction and that there were no statistically significant differences between nurses' educational degrees and their overall satisfaction at both hospitals, This finding is contrary to a previous study conducted by AbuAlRub et al. (2009) on the impact of social support on the stress-satisfaction relationship among Jordanian hospital nurses and discovered that there is a statistically significant relationship between education level and the reported mean of job stress, which reflected on job satisfaction, and that nurses with diploma degrees reported having more job stress with than other nurses. However, it found that the education levels of nurses at the non-accredited hospital do not seem to bear any significant impact on their job performance. In contrast to the non-accredited hospital, the accredited hospital shows significant differences in

the job performance of nurses based on their education levels. The data suggest that possessing a diploma degree has an advantage over other levels of education in this particular hospital, which is similar to a study conducted by Al-Makhaita et al. (2014) in the realm of secondary-level healthcare, multiple factors were revealed to have a considerable correlation with job performance, including qualification, nationality, work shifts, and work department. Interestingly, the data suggests that nurses holding non-bachelor qualifications exhibited superior performance compared to their bachelor-holding peers. Moreover, (Al-Ahmadi, 2009) reported analogous findings, indicating that as the level of education rises, self-reported performance tends to decline. However, possessing a diploma degree in nursing may have advantages in terms of practical, hands-on patient care and accessibility, while a BSN degree may offer advantages in terms of career advancement, leadership opportunities, and potential for improved patient outcomes.

There are no statistically significant differences between the mean ratings of nurses' satisfaction and performance based on the occupational category group in both hospitals. To clarify, the study found no evidence to support the idea that there is a major difference between the two hospitals in terms of how satisfied nurses are with their work and how they perform based on their occupational category. Additionally, regardless of their accreditation status, nurses may share some similarities in their training and responsibilities, despite their occupational categories. Curtis (2008) studied the performance and job satisfaction of nurses in relation to their duties. There was little difference in ratings between qualified clinical nurses and non-clinical nurses. Based on these findings, one might conclude that when nurses go up the career ladder, they are more likely to be content with their job. Professional autonomy is another aspect that may contribute to higher job satisfaction among senior nurses (Rouhi-Balasi et al., 2020).

## **6.5 Hospital Accreditation Status and Nurses' Job Satisfaction Subscales**

Throughout both hospitals, research participants reported moderate levels of nurses' job satisfaction with a total mean of (3.43). Nurses reported high to moderate levels of satisfaction across all dimensions of the job, including coworkers (3.73), Remuneration (2.95), Leadership (3.43), Staffing (2.99), Resources (3.51), and Recognition (3.67). In general, the satisfaction questions yielded a mean score ranging from 2.61 to 3.89. The results showed the average Nurse's job satisfaction for the accredited hospital is slightly high in the non-accredited hospital with a total average equal to 3.47 for the accredited hospital and 3.38 for the non-accredited hospital. The satisfaction rates for three out of six subscales (Remuneration, Leadership, and

Resources) were found to be greater at accredited hospital compared to non-accredited hospital. as shown in Table (6.1).

**Table (6.1): Nurses' Job Satisfaction Subscales according to Accreditation Status**

Variables	Accreditation Status			
	Accredited		Non-Accredited	
	Mean	SD	Mean	SD
Co-Worker	3.73	0.83	3.74	0.93
Remuneration	2.99	1.08	2.89	1.16
Staffing	2.92	1.11	3.08	1.16
Leadership	3.48	0.92	3.37	1.04
Resources	3.60	0.8	3.38	0.99
Recognition	3.67	0.85	3.67	0.93
<b>Overall</b>	3.47	0.9	3.38	1.02

There are no statistically significant differences in the job satisfaction subscales average reported by nurses between the two hospitals. There have been several studies that have examined the relationship between nurses' job satisfaction and hospital accreditation status. While there is some variability in the findings, overall, research suggests that hospital accreditation status can have an impact on nurses' job satisfaction. de Oliveira JLC (2019) found that nurses working in accredited hospitals reported higher job satisfaction compared to those working in non-accredited hospitals. In a study by Dutra and Guirardello (2021), the accreditation of hospitals appears to have a positive effect on nurses' impressions of their work in terms of autonomy, nurse-physician connection, control over the practice setting, and organizational support. The status of the work environment and employee satisfaction increased once a hospital obtained accreditation and/or certification, such as the Magnet award (Labrague et al., 2022). Despite this, numerous studies have shown that nurses working in accredited institutions report much lower levels of job satisfaction. For instance, Kelly et al. (2011) study the work environments, staffing, and nurse outcomes differ between Magnet and non-Magnet hospitals which are accredited by the American Nurses Credentialing Center (ANCC), found that nurses working in Magnet hospitals had lower job satisfaction scores than nurses in non-Magnet hospitals. However, it is unclear if accreditation status influences job

satisfaction or the working environment because of the limited studies available (Mohammed Hussein et al., 2021).

Co-Worker, the job satisfaction dimension, does not show any statistically significant difference in both hospitals. However, it is important to note that this conclusion is based on statistical analysis and may not reflect the subjective experiences of individual nurses, it is still important for healthcare organizations to prioritize building a positive work culture and promoting teamwork and collaboration among nurses. This finding is contrary to the previous study in Ireland conducted by Hanafin et al. (2022) indicates that nurses in public healthcare settings report a satisfaction level with their co-workers that falls somewhere between moderate and high. job satisfaction and positive patient outcomes are all impacted by the quality of connections between co-workers (Kokoroko & Sanda, 2019).

For the nurses' Remuneration satisfaction dimension, the study found there is no statistically significant difference in both hospitals, which is contrary to several studies that have investigated the remuneration satisfaction dimension of nurses' job satisfaction. For instance, in a study by Kim and Moon (2021), which surveyed 306 male nurses in South Korea, remuneration was found to be the most important factor affecting nurses' job satisfaction. Similarly, Nurses' satisfaction is significantly improved by financial compensation (Asiamah et al., 2019). It indicates that there is a positive and strong association between remuneration and employee satisfaction, particularly pay and supervision, as measured by the Job Description Index (Wahyuhadi et al., 2023). There could be several reasons for this lack of significant difference in nurses' satisfaction with their remuneration. For instance, nurses may prioritize other aspects of their job, such as job security, work-life balance, and opportunities for career advancement, over their salary. Additionally, the level of satisfaction with remuneration could be influenced by individual factors such as lifestyle, responsibilities, and financial goals.

There is no statistically significant difference between nurses in the Staffing satisfaction subscale in both hospitals. Adequate staffing can reduce stress and workload, improve safety, and ultimately lead to better patient care. Nurses are often on the front lines of patient care and the availability of adequate staffing can have a significant impact on their ability to provide quality care. This result is contrary to this study's findings, 37 studies reviewed by Adynski et al. (2022) found that better staffing helps improve nurses' attitudes toward their job and increase job satisfaction. Jiang et al. (2015) emphasized in their study that it is crucial to establish staffing plans that satisfy the requirements of both clients and staff. A study conducted by Al-Faouri et al. (2021), stressed the significance of establishing a work environment that

places importance on having sufficient staffing and promoting staff satisfaction as effective methods to decrease incidents of "missed nursing care".

There is no statistically significant difference between nurses in the Leadership satisfaction subscale in both hospitals, this may refer to the different nurses they may have different expectations and perceptions of what makes a good leader, which is contrary to recent studies, according to the study results of Alilyyani et al. (2022), nurse managers have a significant effect on their staff nurses' level of job satisfaction and their likelihood of remaining with their current employer. A team's morale can be greatly impacted by the leader's management style, the findings point to the importance of a leader's character in influencing the satisfaction of their employees and imply that transformational leaders are preferable to transactional leaders when it comes to increasing staff nurses' satisfaction on the job (Alrasheedi et al., 2022).

There is no statistically significant difference between nurses in the Resources satisfaction subscale in both hospitals, and the cause for that may be the nurses have adapted to working with limited resources and have learned to prioritize other aspects "for example patient care" over resource availability. The study conducted by Pineau Stam et al. (2015) demonstrated that the satisfaction of nurses with their jobs is influenced significantly by both personal and organizational resources. Because of the limited resource, higher levels of burnout and dissatisfaction in the workplace lead to greater consideration of leaving one's current position (Van der Heijden et al., 2019).

There is no statistically significant difference between nurses in the Recognition satisfaction subscale in both hospitals, which is contrary to the studies, Maslach and Leiter (2017) emphasized the need of creating an environment of appreciation and recognition as motivation for the healthcare worker. Some of the most important tools at a leader's command for keeping nurses around include open lines of communication, respect, competitive pay, perks, and adequate recognition (Duru & Hammoud, 2022). Other studies have highlighted the significance of nurse satisfaction and substantial recognition in ensuring quality care and retaining employees (Hunsaker et al., 2015; Kelly et al., 2015; McHugh et al., 2011).

## **6.6 Hospital Accreditation Status and Nurses' Job Performance**

The nurses reported high levels of job performance with a total mean of (3.63). Nurses reported high to moderate levels of satisfaction across all dimensions of job performance including Task performance (4.04), Contextual performance (3.91), and Counterproductive work behavior (2.85). Overall, the performance questions yielded a mean score ranging from

2.56 and 4.16. The result showed the average Nurse's job performance for the non-accredited hospital is high than the accredited hospital, with a total average equal to 3.67 for the Non-accredited hospital and 3.46 for the accredited hospital. The performance rates for two out of three subscales (Task performance, Counterproductive work behavior) were found to be greater at non-accredited hospitals compared to accredited hospitals, and the mean of Contextual performance was equal in both hospitals. as shown in Table (6.2).

**Table (6.2): Nurses' Job Performance Subscales according to Accreditation Status**

Variables	Accreditation Status			
	Accredited		Non-Accredited	
	Mean	SD	Mean	SD
Task performance	4.02	0.62	4.07	0.77
Contextual performance	3.91	0.71	3.91	0.84
Counterproductive work behavior	2.81	1.03	2.89	1.2
<b>Overall</b>	3.64	0.77	3.67	0.92

There are no statistically significant differences in the job performance subscales average reported by nurses between the two hospitals. This result may be because several factors influence the job performance of nurses, such as their skills, abilities, training, experience, workload, and culture within the organization. Accreditation is merely one of many factors that can affect job performance. There have been several studies that have examined the relationship between nurses' job performance and hospital accreditation status. While there is some variability in the findings, overall, research suggests that hospital accreditation status can have an impact on nurses' job performance. The results show that accreditation improves hospitals' operational performance and the level of care they provide (Avia & Hariyati, 2019). A Danish study based on a census of public hospitals found that institutions whose baseline performance fell short of best practice goal values saw gains in quality of service when an accreditation program was put in place (Bogaert et al., 2018). Another study conducted by Naveh and Stern (2005) discovered that neither broad nor limited Quality Improvement initiatives had any effect on the overall performance of hospitals.

There is no statistically significant difference between nurses in the Task performance subscale in both hospitals. As the results suggest, it appears that Palestinian nurses in hospital settings are not necessarily equating their task performance with their overall job performance.

Perhaps these nurses prioritize other aspects of their job, or maybe there are external factors at play, such as limited resources or understaffing, that make it difficult to focus solely on task performance. This is contrary to recent studies, in a study by Habib et al. (2020), 700 questionnaires were dispersed to nurses working in 14 prominent hospitals across Pakistan country. The study found that nurses who display interpersonal leadership qualities are more inclined to develop positive relationships with both colleagues and patients. Role conflict, self-efficacy, and resilience were all positively connected to nursing task performance (Jeong, 2018). Overall, nurses performed better on nursing tasks performance than their assistants (Sim & Kim, 2010).

There is no statistically significant difference between nurses in the Contextual performance subscale in both hospitals, which is contrary to recent studies, Evidence from a nursing sample indicates that the four-factor measurement model (mindfulness, learning, vitality, and contextual performance) had a good fit with the data and All factor loadings were significant (Şahin et al., 2020).

There is no statistically significant difference between nurses in the Counterproductive work behavior performance subscale in both hospitals, Research differed in their focus on counterproductive work behavior, based on more than 90 research published in more than 70 journals: task performance, contextual performance, adaptive performance, and counterproductive work behavior. it might have both positive and negative impacts on work performance (Krijgsheld et al., 2022).

## **6.7 Summary**

The study finds a significant correlation between job satisfaction and job performance in both types of hospitals. The study also analyzes the demographic characteristics of participating nurses, showing a slightly higher representation of males and most nurses being between 23-29 years old with a Bachelor's degree. In the non-accredited hospital, significant gender-based differences in job satisfaction were found, but not in the accredited hospital. The study also finds no significant differences in nurses' satisfaction with their performance level, encompassing all dimensions of job satisfaction and performance.

## **Chapter Seven**

### **7.1 Conclusion**

Promoting nurses' work satisfaction is essential for improving their performance and ensuring high-quality patient care (Karaca & Durna, 2019). Healthcare facilities should offer nurses a pleasant place to work and the tools they need to do their jobs well. This can have a positive effect on patient outcomes by increasing nurse satisfaction, morale, and performance.

This study indicates that there is a correlation between nurses' work satisfaction and performance in an accredited hospital and a non-accredited hospital.

The study findings showed that the nurses at both hospitals have a moderate level of satisfaction in favor of the accredited hospital. However, a high level of performance was observed particularly in the non-accredited hospital. Moreover, the results indicated that there were no significant differences between nurses' job satisfaction and performance, including each variable dimension.

The result showed no significant differences in levels of satisfaction with nurses' demographic characteristics in the accredited hospital and showed significant differences in the non-accredited hospital with Gender in favor of females. Also, the result showed no significant differences in levels of performance to nurses' demographic characteristics in the non-accredited hospital, and statistically significant differences were seen between nurses in the accredited hospital in the areas of hospital experience (from 3 to 5 years) and educational degree (Diploma Degree).

In the healthcare sector in Palestine, where the accreditation program culture is still new, and the program demands strict adherence to several standards, which requires meticulous documentation and rigorous attention to detail. This might increase the work demands on nurses which may explain why the accreditation has not affected nurses' job satisfaction and performance levels in Palestine. Therefore, It is recommended to conduct a similar study in the future for more accurate results, with the potential to foster a culture of accreditation among nurses in Palestine.

### **7.2 Recommendations**

Maintaining nurses' satisfaction and performance requires a comprehensive approach that addresses various factors related to the work environment, compensation, professional development, workload management, and work-life balance. By adopting the following



recommendations, hospitals may provide their nursing staff with a positive and encouraging place of employment that improves satisfaction as well as performance:

1. **Satisfaction with Co-Workers:** Promote a culture of teamwork by encouraging nurses to work together and recognize the contributions of their colleagues. This can be achieved through team-building activities, shared decision-making, and open communication.
2. **Satisfaction with Remuneration:** Provide bonuses and incentives based on performance, such as meeting certain quality metrics or achieving specific goals. This can help to motivate nurses to perform at their best and feel valued.
3. **Satisfaction with Staffing:** Offer flexible scheduling options to accommodate the needs of nurses, such as part-time or remote work arrangements. This can help to improve work-life balance and reduce burnout.
4. **Satisfaction with Leadership:** Provide leadership training for managers and supervisors to help them develop the skills necessary to lead and motivate their teams effectively.
5. **Satisfaction with Resources:** Provide necessary equipment and supplies to ensure that nurses have the resources they need to provide quality care to their patients. This includes items such as medical supplies, technology, and ergonomic furniture.
6. **Satisfaction with Recognition:** Regularly recognize and acknowledge nurses' contributions to patient care and the organization as a whole. This can be done through awards, recognition programs, or even a simple thank you.
7. **Performance Level with Task Performance:** Provide nurses with access to technology and resources that can help them perform their tasks more efficiently and effectively. This can include electronic health records, clinical decision support tools, and medical equipment.
8. **Performance Level with Contextual Performance:** Encourage nurses to develop positive relationships with patients and their families by practicing empathy, active listening, and effective communication.
9. **Performance Level with Counterproductive Work- Behavior:** Ensure that nurses have a clear understanding of their job expectations, including performance standards, codes of conduct, and acceptable behavior. This can help to prevent counterproductive work behaviors and improve job performance.

### **7.3 Further Studies**

By addressing these areas of inquiry, future studies can expand our understanding of the factors that influence nurse satisfaction and job performance, and identify new strategies for maintaining a high-performing nursing workforce:

1. Only two hospitals participated in the study; further research comparing JCI-accredited and non-accredited hospitals is considered essential.
2. Investigate the impact of hospital accreditation on patient outcomes: While this study examined the relationship between nurse satisfaction, job performance, and hospital accreditation, future research could explore the impact of hospital accreditation on patient outcomes, such as mortality rates, readmission rates, and patient satisfaction.
3. Compare nurse satisfaction and job performance across different hospital settings: Future research could compare nurse satisfaction and job performance across different hospital settings, such as public versus private hospitals, urban versus rural hospitals, and teaching versus non-teaching hospitals.
4. Examine the role of leadership in nurse satisfaction and job performance: The study touched on the importance of leadership in creating a positive work environment, but future research could explore the specific leadership practices that are associated with nurse satisfaction and job performance.
5. Investigate the impact of technology on nurse satisfaction and job performance: With the increasing use of technology in healthcare, future research could examine the impact of technology on nurse satisfaction and job performance, including the use of electronic health records, telehealth, and other digital tools.
6. Explore the impact of cultural factors on nurse satisfaction and job performance: Given the cultural context of the study in Palestinian hospitals, future research could explore the impact of cultural factors on nurse satisfaction and job performance, including the role of gender, religion, and other cultural norms.

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## **Appendix**

### **Appendix (1): Questionnaire – English Version**

Dear nurses,

In your hands is a questionnaire distributed by a master's degree student in the health policy and management program at the School of Public Health - Al-Quds University. The study aims to assess the nurses' satisfaction and its effect on their job performance in the Joint Commission International accredited and Non-accredited Palestinian hospitals.

It is estimated to take you 10-15 minutes to complete the questionnaire, the collected data will be used for academic research. It is anonymous and your name or department is not required. The aggregated data will be reported as summary statistics only. Your participation in this survey is voluntary, and you have the right not to respond. Answering all questions will indicate your agreement.

However, I highly appreciate your participation as your input will add value to the findings of the study.

If you have any questions regarding the study or the questionnaire, please feel free to contact the researcher on mobile 00972-597598840

**Thanks for your cooperation and time**

**\*Part One (Demographics Data). Please fill in the following**

**1. Age: -**

- ☐ Less than 23 Years                      ☐ From 23 to 26 Years                      ☐ From 27 to 29 Years
- ☐ From 30 to 32 Years                      ☐ From 33 to 35 Years                      ☐ More than 35 Years

**2. Gender: -**

- ☐ Male    ☐ Female.

**3. How long have you been working in this hospital?**

- ☐ Less than 1 Year                      ☐ From 1 to 2 Years                      ☐ From 3 to 5 Years
- ☐ From 6 to 10 Years                      ☐ More than 10 Years

**4. What is your highest educational degree?**

- ☐ Diploma Degree                      ☐ Bachelor of Nursing Science
- ☐ Higher Diploma                      ☐ Master's degree

**5. What is your occupational category?**

- ☐ Licensed Practical Nurse                      ☐ Registered Nurse                      ☐ Head Nurse
- ☐ Nursing Supervisor                      ☐ Deputy of Nursing Director/Chief Nursing Officer
- ☐ Director of Nursing/Chief Nursing Officer

**6. From 0 to 10, how do you rate your satisfaction level in your organization?**

Not at all satisfied						Completely satisfied				
0	1	2	3	4	5	6	7	8	9	10

**7. From 0 to 10, how do you rate your Performance level in your organization?**

Poor Below expectations						Exceptional Always exceeds expectations				
0	1	2	3	4	5	6	7	8	9	10

## **\*Part Two (Satisfactions Questionnaire)**

Please indicate the extent to which you agree or disagree that the statement characterizes your satisfaction, and use the Likert. symbol for the appropriate response (Strongly Disagree, Disagree, Neutral, Agree and Strongly Agree).

No.	Items	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1.	I am satisfied with the moments of having conversations and sharing medical information with my co-workers.					
2.	I am satisfied with the spirit of collaboration between me and my co-workers.					
3.	I am satisfied with the workload at my workplace.					
4.	I am satisfied with my co-workers' effort to provide better care.					
5.	I am satisfied with my superiors' effort to improve my working conditions.					
6.	I am satisfied with my participation in decision-making at my workplace.					
7.	I am satisfied with the nurse-to-patient ratio in my shift.					
8.	I am satisfied with the career advancement opportunities.					
9.	I am satisfied with the level of trust that I have with my co-workers.					
10.	I am satisfied with how my superiors allow me to participate in training courses/projects.					
11.	I am satisfied with the nurse per shift ratio according to the number of tasks to be performed. (suitable nurses number per shift to workload)					
12.	I am satisfied with the physical conditions of the space where I provide care.					
13.	I am satisfied with the routines at my unit.					
14.	I am satisfied with the fact that my work is rewarded and/or valued by my superiors.					
15.	I am satisfied with the fact that my work is rewarded and/or valued by the patients.					
16.	I am satisfied with how patients and their families value my work.					
17.	I am satisfied with the nursing assigned to me in my department.					
18.	I am satisfied with the other health specialists' skills.					

19.	I am satisfied with the training opportunities provided at my workplace.					
20.	I am satisfied with the level of colleagues' competence in the same field.					
21.	I am satisfied with the possibility to implement new knowledge at my workplace.					
22.	I am satisfied with the equipment/ materials at my unit.					
23.	I am satisfied with the followed system my workplace.					
24.	I am satisfied with my autonomy to provide adequate care to patients according to my skills.					
25.	I am satisfied with how protocols are well organized and elaborated in my unit.					
26.	I am satisfied with the quality of the care I provide taking into account the context where I work.					
27.	I am satisfied with the waiting time to be promoted at my workplace.					
28.	I am satisfied with the tasks performed in my unit.					
29.	I am satisfied with my superiors' respect for my work.					
30.	I am satisfied with the number of protocols on the unit's functioning.					
31.	I am satisfied with my salary, taking into account the tasks I perform.					
32.	I am satisfied with my salary taking into account my skills/knowledge.					
33.	I am satisfied with the moments of dialogue and sharing of information with my superiors.					
34.	I am satisfied with the patients' perception of my activities.					
35.	I am satisfied with my superiors' encouragement to participate in training.					
36.	I am satisfied with the patients' respect for my work.					
37.	I am satisfied with the other health professionals' respect for the care I provide.					

### **\*Part Three (Nurse Job Performance, Self-Evaluation Questionnaire)**

Please indicate the extent to which you agree or disagree that the statement characterizes your evaluation, and use the (Li et al.) symbol for the appropriate response (Strongly Disagree, Disagree, Neutral, Agree, Strongly Agree).

No.	Items	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1.	I managed to do the work so that I finished on time					
2.	I kept in mind the working result needed to be achieved					
3.	I was able to set priorities					
4.	I was able to carry out my work efficiently					
5.	I managed my time well					
6.	On my own initiative, I started new tasks when my given tasks were completed					
7.	I took on challenging tasks when they were available					
8.	I worked on keeping my job-related knowledge up-to-date					
9.	I worked on keeping my work skills up-to-date					
10.	I came up with creative solutions for new problems					
11.	I took on extra-responsibilities					
12.	I diligently sought new challenges in my work					
13.	I actively participated in meetings and/or consultations					
14.	I complained about minor work-related issues at work					
15.	I made problems at work bigger than they were					
16.	I focused on the negative aspects of the situation at work instead of the positive aspects					
17.	I talked to colleagues about the negative aspects of my work					
18.	I talked to people outside the organization about the negative aspects of my work					

## Appendix (2): Questionnaire – Arabic Version

أعزائي الممرضون/ الممرضات،

هذا الإستبيان الذي بين أيديكم، هو استبيان قام بتوزيعه طالب ماجستير في كلية الصحة العامة في جامعة القدس، وسيتم استخدام البيانات التي تم جمعها في البحث الأكاديمي؛ وتهدف هذه الدراسة المقارنة بين رضا التمريض وتأثير هذا الرضا على أدائهم الوظيفي في مستشفى معتمدة للجنة الدولية المشتركة (JCIA) ومستشفى غير حاصل على الاعتماد.

من المقدر أن يستغرق منك لإتمام هذا الاستبيان ما بين 10 – 15 دقيقة، والمشاركين في هذا الاستبيان مجهولين الهوية، أي أنه لا يشترط منك كتابة إسمك أو قسمك، وعليه فإن البيانات المجمعة سيتم تقديمها على شكل احصاءات لتحقيق اهداف البحث .

إن مشاركتك في هذا الإستبيان هي مشاركة طوعية، ولديك كامل الحق في عدم الإجابة عليه ويرجى العلم بأن إجابتك على جميع الاسئلة تشير إلى موافقتك.

وأتقدم أيضاً بجزيل الشكر والتقدير لمشاركتك في هذا الإستبيان حيث أن مساهمتك ستضيف قيمةً إلى نتائج الدراسة .

إذا كان لديك أي أسئلة بخصوص الدراسة أو الاستبيان ، فلا تتردد في الاتصال بالباحث على الهاتف المحمول 00972-597598840

أشرك لتعاونك ووقتك



القسم الأول: (البيانات الديموغرافية) يُرجى ملئ ما يلي:-

1. العمر:-

- [ ] أقل من 23 سنة [ ] من 23 الى 26 سنة [ ] من 27 الى 29 سنة  
[ ] من 30 الى 32 سنة [ ] من 33 الى 35 سنة [ ] أكثر من 35 سنة

2. الجنس:-

- [ ] ذكر [ ] أنثى

3. منذ متى وأنت تعمل في هذا المستشفى؟

- [ ] أقل من 1 سنة [ ] من 1 الى 2 سنوات [ ] من 3 الى 5 سنوات  
[ ] من 6 الى 10 سنوات [ ] أكثر من 10 سنوات

4. ما هي أعلى درجة علمية حصلت عليها؟

- [ ] درجة الدبلوم المتوسط [ ] بكالوريوس في علوم التمريض. [ ] دبلوم عالي.  
[ ] درجة الماجستير.

5. ما هي فنتك الوظيفية؟

- [ ] ممرض مؤهل (دراسة سنتين) [ ] ممرض قانوني (دراسة 3 الى 4 سنوات)  
[ ] رئيس قسم تمريضي. [ ] مشرف التمريض. [ ] نائب مدير دائرة التمريض  
[ ] مدير التمريض

6. من 0 حتى 10 كم تقيم مستوى رضاك عن المستشفى؟

غير راض على الاطلاق						راض تماما				
0	1	2	3	4	5	6	7	8	9	10

7. من 0 الى 10 كم تقيم مستوى أدائك الوظيفي في المستشفى؟

ضعيف /أقل من المتوقع						مميز / اعلى من المتوقع				
0	1	2	3	4	5	6	7	8	9	10

## القسم الثاني (استبيانات لتقييم الرضا):-

يرجى تحديد مدى موافقتك أو عدم موافقتك على أن العبارة تصف مستوى رضاك، و يرجى استخدام الرمز (( Li et al.)) لتحديد الإجابة التي تناسبك (أوافق بشدة، أوافق، حيادي، لا أوافق، لا أوافق بشدة).

الرقم	البند	أوافق	أوافق بشدة	محايد	لا أوافق	لا أوافق بشدة
1.	أنا راضٍ عن إجراء الحوارات ومشاركة المعلومات الطبية مع زملائي في العمل.					
2.	أنا راضٍ عن روح التعاون بيني وبين زملائي في العمل.					
3.	أنا راضٍ عن عبء العمل في مكان عملي.					
4.	أنا راضٍ عن جهود زملائي في العمل لتوفير رعاية أفضل.					
5.	أنا راضٍ عن جهد رؤسائي لتحسين ظروف عملي.					
6.	أنا راضٍ عن مشاركتي في اتخاذ القرارات في مكان عملي.					
7.	أنا راضٍ عن نسبة الممرضين لكل مريض أثناء مناوبتي.					
8.	أنا راضٍ عن فرص التقدم الوظيفي.					
9.	أنا راضٍ عن مستوى الثقة التي لدي مع زملائي في العمل.					
10.	أنا راضٍ عن الفرص التي يوفرها لي رؤسائي في العمل للمشاركة في الدورات التدريبية/ المشاريع.					
11.	أنا راضٍ عن نسبة الممرضين لكل مناوبة وفقاً للمهام المُرَاد اداؤها. (عدد الممرضين مناسب لكل وردية نسبياً لأعباء العمل).					
12.	أنا راضٍ عن الظروف المادية للمكان الذي أقدم فيه الرعاية.					
13.	أنا راضٍ عن الأعمال الروتينية في قسمي.					
14.	أنا راضٍ عن حقيقة أن رؤسائي يكافئون و/أو يقدرّون عملي.					
15.	أنا راضٍ عن حقيقة أن الممرضين يكافئون و/أو يقدرّون عملي.					
16.	أنا راضٍ عن حقيقة أن الممرضين وعائلاتهم يقدرّون عملي.					
17.	أنا راضٍ عن مهام التمريض الموكلة إليّ في قسمي.					
18.	أنا راضٍ عن مهارات أخصائيو الصحة الآخرين.					
19.	أنا راضٍ عن فرص التدريب المتوفرة في مكان عملي.					
20.	أنا راضٍ عن كفاءة زملائي الذين يشغلون نفس وظيفتي.					
21.	أنا راضٍ عن إمكانية تطبيق المعرفة الجديدة في مكان عملي.					
22.	أنا راضٍ عن المعدات/ الأدوات المتوفرة في قسمي.					
23.	أنا راضٍ عن التنظيم في مكان عملي.					
24.	أنا راضٍ عن استقلاليّتي في تقديم الرعاية الطبية المناسبة وفقاً لمهاراتي.					
25.	أنا راضٍ عن مدى تفصيل وتنظيم البروتوكولات المتبعة في قسمي.					
26.	أنا راضٍ عن جودة الرعاية التي أقدمها مع مراعاة السياق الذي أعمل فيه بالحسبان.					
27.	أنا راضٍ عن الوقت الذي يجب انتظاره حتى تتم ترقيّتي في مكان عملي.					
28.	أنا راضٍ عن المهام التي يتم تأديتها في قسمي.					

					29. أنا راضٍ عن احترام رؤسائي لعملي.
					30. أنا راضٍ عن عدد البروتوكولات الخاصة بالقسم.
					31. أنا راضٍ عن راتبي مقارنة بالمهام التي أؤديها.
					32. أنا راضٍ عن راتبي مقارنة بمهاراتي/معرفتي.
					33. أنا راضٍ عن إجراء الحوار ومشاركة المعلومات مع رؤسائي في العمل.
					34. أنا راضٍ عن نظرة المرضى لعملي.
					35. أنا راضٍ عن تشجيع رؤسائي للمشاركة في التدريب.
					36. أنا راضٍ عن احترام المرضى لعملي.
					37. أنا راضٍ عن احترام أخصائيو الصحة الآخرين للرعاية التي أقدمها.

القسم الثالث (الأداء الوظيفي للمرض، استبيان التقييم الذاتي)

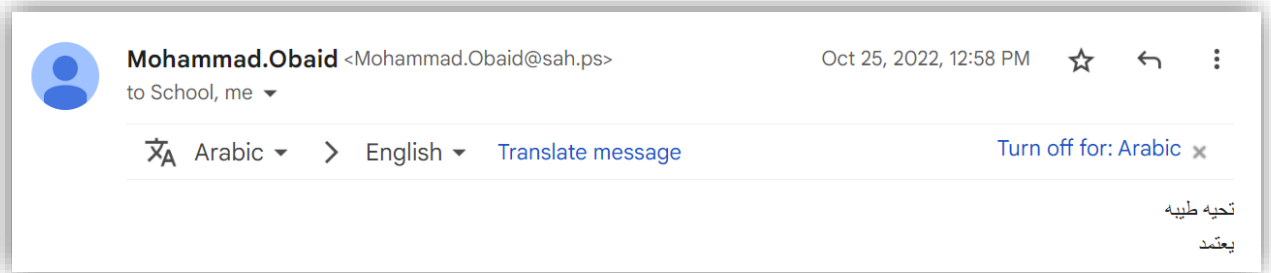
يرجى تحديد مدى موافقتك أو عدم موافقتك على أن العبارة تصف تقييمك لنفسك أو لعملك، و يرجى استخدام الرمز ( Li et al.) لتحديد الإجابة التي تناسبك. (أوافق بشدة، أوافق، حيادي، لا أوافق، لا أوافق بشدة).

الرقم	البند	أوافق	أوافق بشدة	محايد	لا أوافق	لا أوافق بشدة
1.	أتمكن من التخطيط لعملي لانتهاءه بالوقت المحدد.					
2.	أبقيت النتيجة المرجوة من عملي حاضرة في ذهني؛ لتحقيقها.					
3.	كنت قادراً على تحديد الأولويات.					
4.	كنت قادراً على انجاز عملي بكفاءة.					
5.	تمكنت من ادارة وقتي بشكل جيد.					
6.	بمبادرة شخصية مني، قمت بمهام جديدة بعد انجاز المهمات المطلوبة مني.					
7.	لقد توليت مهاماً صعبة عندما كانت متاحة.					
8.	أنا أحرص على مواكبة كل جديد بما يتعلق بالمعلومات التي تخص العمل					
9.	أنا أحرص على جعل مهاراتي العملية مُواكبة ومتجددة.					
10.	لقد توصلت لحلول ابداعية لمشاكل جديدة.					
11.	لقد قمت بتحمل مسؤوليات إضافية.					
12.	لقد بحثت بشكل متواصل عن تحديات جديدة في عملي.					
13.	شاركت بنشاط في الاجتماعات /المؤتمرات.					
14.	اشتكيت من المشاكل المهنية البسيطة في العمل.					
15.	جعلت المشاكل في العمل أكبر مما هي عليه الفعل.					
16.	لقد ركزت على الجوانب السلبية في العمل بدلاً من التركيز على الجوانب الإيجابية.					
17.	لقد تحدثت لزملائي عن الجوانب السلبية للعمل.					
18.	لقد أخبرت أشخاصاً من خارج المؤسسة عن الجوانب السلبية لعملي.					

### Appendix (3): Permission Letter from Al-Quds University to Specialized Arab Hospital

<p><b>Al-Quds University</b> Jerusalem School of Public Health</p>		<p><b>جامعة القدس</b> القدس كلية الصحة العامة</p>
<p>التاريخ: 2022/10/23</p>		
<p>حضرة الدكتور محمد عبيد المحترم المدير التنفيذي للمستشفى العربي التخصصي</p>		
<p><u>الموضوع: تسهيل مهمة للطالب محمد حامد</u></p>		
<p>تحية طيبة وبعد،،</p> <p>يقوم الطالب محمد حسني محمد حامد/ برنامج ماجستير السياسات والإدارة الصحية/ كلية الصحة العامة/ جامعة القدس بإجراء بحث الرسالة بعنوان:</p> <p style="text-align: center;">Nurse's Satisfaction and its Effect on Job Performance: Comparative Study between Joint Commission International Accredited and Non-accredited Palestinian Hospitals</p> <p>وتهدف الدراسة الى تقييم رضا المرضى وتأثير هذا الرضا على أدائهم الوظيفي في المستشفيات الفلسطينية. لذا يحتاج الطالب الى توزيع استبانة الدراسة على المرضى العاملين في جميع اقسام المستشفى العربي التخصصي، ولإستكمال إجراءات البحث ارجو من حضرتكم تسهيل مهمة الطالب والسماح له بتوزيع الاستبانة على عينة الدراسة، علما بأن المعلومات ستكون لأغراض البحث العلمي فقط.</p> <p style="text-align: center;">وتفضلوا بقبول فائق الاحترام،</p>		
<p> د. حازم الحاج عميد كلية الصحة العامة</p>		
<p>نسخة: الملف</p>		
<p>فرع القدس / تلفاكس 02-2799234 ص.ب. 51000 القدس البريد الإلكتروني: sphealth@admin.alquds.edu</p>		
<p>Jerusalem P.O.Box 51000 Telefax +970-2-2799234 Email: sphealth@admin.alquds.edu</p>		

#### Appendix (4): Approved Email from Specialized Arab Hospital to Al-Quds University



## Appendix (5): Permission Email from Al-Quds University to Istishari Arab Hospital

Dear Mr. Othman

Hope this email finds you well

I am a master's student from Al-Quds University writing my thesis titled "Nurse's Satisfaction and its Effect on Job Performance in Joint Commission International Accredited Hospitals in Palestine", under the direction of my supervisor Dr. Asma Imam, who can be reached at formal email: [aimam@staff.alquds.edu](mailto:aimam@staff.alquds.edu).

I would like your permission to do the pilot study in your hospital for the questionnaire in my research study.

### Study Aim

The study aims to assess nurses' satisfaction and its effect on job performance in Joint Commission International Accredited hospitals in Palestine.

### Study Objectives

The main objectives of this study are:

1. To determine the relationship between overall nurses' job satisfaction and job performance at JCIA hospitals in Palestine.
2. To determine the relationship between the domains of nurses' job satisfaction (Leadership, Organization Resources, Professional Recognition, Co-workers Recognition Remuneration, Staffing), and job performance at JCIA hospitals in Palestine.
3. To assess the relationship between overall all nurses' job performance and some socio-demographic characteristics of the employee, such as age, gender, years of experience, education level, and occupational category (Junior nurse, senior nurse, head nurse, supervisor, and others).

\*Attached Research Questionnaire.

\*IAH Research Application Form.

\*Investigator CV.

Sincerely,

Mohammad Hamed,  
Director of Quality Department - ISH (Jenin - Palestine)  
Master Student - Policies and Health Management

Public Health School - Al – Quds University (Jerusalem - Palestine)

## Appendix (6): Approved Email from Istishari Arab Hospital to Al-Quds University

Approved over the Phone.





## **Appendix (7): Name of Experts**

- A. Dr. Mohammed Shaheen, Al-Quds University - Center for Development in Primary Health Care Ph.D.
- B. Dr. Eba'a Barghouthi, Arab Hospitals Group - Head of Quality Program, In-Charge of HIS Implementation.
- C. Asma Imam, BSN, MSN, Ph.D. Associate Professor in Health Management Coordinator, a Ph.D. program in Public Health Coordinator, Health Policy and Management Master's Program Al-Quds University.
- D. Mr. Hussein Abu Ali, Statistician – Palestine. Registered Nurse - Augusta Victoria Hospital.
- E. Ms. Eman Obaidi, English language and Communication, Arab American University, Medical Secretary – Ibn Sina Specialized Hospital – Jenin – Palestine.

# Appendix (8) Nurses' Satisfaction in the Accredited Hospital.

No.	Statement	% of Negative Responses	Neutral	% of Positive Responses	Mean	SD
<b>Co-workers items</b>						
Q1	I am satisfied with the moments of having conversations and sharing medical information with my co-workers.	5.60%	10.30%	84.10%	3.92	0.71
Q2	I am satisfied with the spirit of collaboration between me and my co-workers.	9.50%	7.10%	83.30%	3.89	0.86
Q4	I am satisfied with my coworkers' efforts to provide better care.	8.70%	19.00%	72.20%	3.71	0.79
Q9	I am satisfied with the level of trust that I have with my co-workers.	10.30%	19.00%	70.60%	3.64	0.87
Q20	I am satisfied with the level of colleagues' competence in the same field.	15.90%	23.00%	61.10%	3.49	0.91
<b>Total</b>		<b>10.0%</b>	<b>15.7%</b>	<b>74.3%</b>	<b>3.73</b>	<b>0.83</b>
<b>Remuneration Items</b>						
Q3	I am satisfied with the workload at my workplace.	31.70%	23.80%	44.40%	3.04	1.08
Q8	I am satisfied with the career advancement opportunities.	15.10%	29.40%	55.60%	3.38	0.82
Q27	I am satisfied with the waiting time to be promoted at my workplace.	27.00%	19.80%	53.20%	3.25	1.05
Q31	I am satisfied with my salary, taking into account the tasks I perform.	49.20%	19.80%	31.00%	2.58	1.24
Q32	I am satisfied with my salary taking into account my skills/knowledge.	46.80%	19.00%	34.10%	2.68	1.21
<b>Total</b>		<b>34.0%</b>	<b>22.4%</b>	<b>43.7%</b>	<b>2.99</b>	<b>1.08</b>
<b>Leadership Items</b>						
Q5	I am satisfied with my superiors' efforts to improve my working conditions.	18%	18.25%	63.49%	3.45	0.97
Q6	I am satisfied with my participation in decision-making at my workplace.	19%	15.87%	65.08%	3.52	0.96
Q10	I am satisfied with how my superiors allow me to participate in training courses/projects.	24%	30.95%	45.24%	3.09	1.08
Q14	I am satisfied with the fact that my work is rewarded and/or valued by my superiors.	33%	24.60%	42.06%	3.06	1.08
Q17	I am satisfied with the nursing assigned to me in my department.	13%	12.70%	74.60%	3.62	0.88
Q19	I am satisfied with the training opportunities provided at my workplace.	26%	25.40%	48.41%	3.19	0.96
Q21	I am satisfied with the possibility to implement new knowledge at my workplace.	20%	7.14%	73.02%	3.68	0.71
Q24	I am satisfied with my autonomy to provide adequate care to patients according to my skills.	17%	11.90%	71.43%	3.64	0.84
Q28	I am satisfied with the tasks performed in my unit.	15%	7.94%	76.98%	3.71	0.77

Q29	I am satisfied with my superiors' respect for my work.	14%	13.49%	72.22%	3.62	0.95
Q33	I am satisfied with the moments of dialogue and sharing of information with my superiors.	16%	11.11%	73.02%	3.67	0.89
Q35	I am satisfied with my superiors' encouragement to participate in training.	21%	16.67%	62.70%	3.47	0.96
<b>Total</b>		<b>19.6%</b>	<b>16.3%</b>	<b>64.02%</b>	<b>3.48</b>	<b>0.92</b>
<b>Staffing Items</b>						
Q7	I am satisfied with the nurse-to-patient ratio in my shift.	41.30%	21.40%	37.30%	2.88	1.14
Q11	I am satisfied with the nurse-per-shift ratio according to the number of tasks to be performed. (suitable nurses' number per shift to workload)	36.50%	26.20%	37.30%	2.96	1.08
<b>Total</b>		<b>38.9%</b>	<b>23.8%</b>	<b>37.3%</b>	<b>2.92</b>	<b>1.11</b>
<b>Resources Items</b>						
Q12	I am satisfied with the physical conditions of the space where I provide care.	46.00%	23.80%	30.20%	2.67	1.14
Q13	I am satisfied with the routines at my unit.	10.30%	9.50%	80.20%	3.71	0.79
Q18	I am satisfied with the other health specialists' skills.	7.90%	27.80%	64.30%	3.56	0.74
Q22	I am satisfied with the equipment/ materials at my unit.	10.30%	10.30%	79.40%	3.81	0.89
Q23	I am satisfied with the followed system my workplace.	8.70%	17.50%	73.80%	3.69	0.78
Q25	I am satisfied with how protocols are well organized and elaborated in my unit.	7.10%	19.00%	73.80%	3.69	0.74
Q26	I am satisfied with the quality of the care I provide taking into account the context where I work.	2.40%	8.70%	88.90%	3.98	0.58
Q30	I am satisfied with the number of protocols on the unit's functioning.	7.90%	20.60%	71.40%	3.69	0.76
<b>Total</b>		<b>12.6%</b>	<b>17.2%</b>	<b>70.3%</b>	<b>3.60</b>	<b>0.80</b>
<b>Recognition Items</b>						
Q15	I am satisfied with the fact that my work is rewarded and/or valued by the patients.	12.70%	15.10%	72.20%	3.61	0.9
Q16	I am satisfied with how patients and their families value my work.	14.30%	17.50%	68.30%	3.57	0.94
Q34	I am satisfied with the patients' perception of my activities.	7.10%	16.70%	76.20%	3.75	0.8
Q36	I am satisfied with the patients' respect for my work.	7.90%	11.10%	81.00%	3.79	0.77
Q37	I am satisfied with the other health professionals' respect for the care I provide.	11.90%	15.10%	73.00%	3.63	0.84
<b>Total</b>		<b>10.8%</b>	<b>15.1%</b>	<b>74.1%</b>	<b>3.67</b>	<b>0.85</b>
<b>Total satisfaction</b>		<b><u>18.6%</u></b>	<b><u>17.5%</u></b>	<b><u>63.9%</u></b>	<b><u>3.47</u></b>	<b><u>0.90</u></b>

# Appendix (9) Nurses' Satisfaction in a Non-accredited Hospital.

No.	Statement	% of Negative Responses	Neutral	% of Positive Responses	Mean	SD
<b>Co-workers items</b>						
Q1	I am satisfied with the moments of having conversations and sharing medical information with my co-workers.	9.90%	9.90%	80.20%	3.84	0.96
Q2	I am satisfied with the spirit of collaboration between me and my co-workers.	8.80%	13.20%	78.00%	3.89	1
Q4	I am satisfied with my coworkers' efforts to provide better care.	12.10%	17.60%	70.30%	3.64	0.96
Q9	I am satisfied with the level of trust that I have with my co-workers.	7.70%	15.40%	76.90%	3.75	0.85
Q20	I am satisfied with the level of colleagues' competence in the same field.	13.20%	17.60%	69.20%	3.58	0.9
<b>Total</b>		<b>10.3%</b>	<b>14.7%</b>	<b>74.9%</b>	<b>3.74</b>	<b>0.93</b>
<b>Remuneration Items</b>						
Q3	I am satisfied with the workload at my workplace.	40.70%	15.40%	44.00%	2.9	1.23
Q8	I am satisfied with the career advancement opportunities.	19.80%	28.60%	51.60%	3.31	0.96
Q27	I am satisfied with the waiting time to be promoted at my workplace.	42.90%	16.50%	40.70%	2.82	1.24
Q31	I am satisfied with my salary, taking into account the tasks I perform.	49.50%	15.40%	35.20%	2.65	1.22
Q32	I am satisfied with my salary taking into account my skills/knowledge.	45.10%	17.60%	37.40%	2.78	1.16
<b>Total</b>		<b>39.6%</b>	<b>18.7%</b>	<b>41.8%</b>	<b>2.89</b>	<b>1.16</b>
<b>Leadership Items</b>						
Q5	I am satisfied with my superiors' efforts to improve my working conditions.	27.50%	15.40%	57.10%	3.22	1.22
Q6	I am satisfied with my participation in decision-making at my workplace.	22.00%	17.60%	60.40%	3.3	1.13
Q10	I am satisfied with how my superiors allow me to participate in training courses/projects.	33.00%	12.10%	54.90%	3.11	1.18
Q14	I am satisfied with the fact that my work is rewarded and/or valued by my superiors.	39.60%	19.80%	40.70%	2.89	1.14
Q17	I am satisfied with the nursing assigned to me in my department.	9.90%	15.40%	74.70%	3.68	0.82
Q19	I am satisfied with the training opportunities provided at my workplace.	29.70%	15.40%	54.90%	3.19	1.07
Q21	I am satisfied with the possibility to implement new knowledge at my workplace.	16.50%	9.90%	73.60%	3.64	0.94
Q24	I am satisfied with my autonomy to provide adequate care to patients according to my skills.	12.10%	14.30%	73.60%	3.69	0.86
Q28	I am satisfied with the tasks performed in my unit.	12.10%	16.50%	71.40%	3.6	0.88

Q29	I am satisfied with my superiors' respect for my work.	24.20%	11.00%	64.80%	3.35	1.15
Q33	I am satisfied with the moments of dialogue and sharing of information with my superiors.	14.30%	16.50%	69.20%	3.49	1.01
Q35	I am satisfied with my superiors' encouragement to participate in training.	24.20%	23.10%	52.70%	3.22	1.06
<b>Total</b>		<b>22.1%</b>	<b>15.6%</b>	<b>62.3%</b>	<b>3.37</b>	<b>1.04</b>
<b>Staffing Items</b>						
Q7	I am satisfied with the nurse-to-patient ratio in my shift.	37.40%	19.80%	42.90%	3	1.17
Q11	I am satisfied with the nurse-per-shift ratio according to the number of tasks to be performed. (suitable nurses' number per shift to workload)	30.80%	18.70%	50.50%	3.15	1.15
<b>Total</b>		<b>34.1%</b>	<b>19.3%</b>	<b>46.7%</b>	<b>3.08</b>	<b>1.16</b>
<b>Resources Items</b>						
Q12	I am satisfied with the physical conditions of the space where I provide care.	44.00%	20.90%	35.20%	2.75	1.19
Q13	I am satisfied with the routines at my unit.	16.50%	15.40%	68.10%	3.47	0.91
Q18	I am satisfied with the other health specialists' skills.	11.00%	22.00%	67.00%	3.57	0.83
Q22	I am satisfied with the equipment/ materials at my unit.	18.70%	17.60%	63.70%	3.47	1.06
Q23	I am satisfied with the followed system my workplace.	22.00%	16.50%	61.50%	3.43	1.1
Q25	I am satisfied with how protocols are well organized and elaborated in my unit.	20.90%	20.90%	58.20%	3.35	1
Q26	I am satisfied with the quality of the care I provide taking into account the context where I work.	6.60%	12.10%	81.30%	3.77	0.74
Q30	I am satisfied with the number of protocols on the unit's functioning.	25.30%	20.90%	53.80%	3.21	1.12
<b>Total</b>		<b>20.6%</b>	<b>18.3%</b>	<b>61.1%</b>	<b>3.38</b>	<b>0.99</b>
<b>Recognition Items</b>						
Q15	I am satisfied with the fact that my work is rewarded and/or valued by the patients.	15.40%	18.70%	65.90%	3.53	0.97
Q16	I am satisfied with how patients and their families value my work.	12.10%	22.00%	65.90%	3.6	0.94
Q34	I am satisfied with the patients' perception of my activities.	9.90%	7.70%	82.40%	3.85	0.91
Q36	I am satisfied with the patients' respect for my work.	9.90%	8.80%	81.30%	3.8	0.93
Q37	I am satisfied with the other health professionals' respect for the care I provide.	11.00%	20.90%	68.10%	3.57	0.89
<b>Total</b>		<b>11.7%</b>	<b>15.6%</b>	<b>72.7%</b>	<b>3.67</b>	<b>0.93</b>
<b>Total satisfaction</b>		<b>21.8%</b>	<b>16.7%</b>	<b>61.5%</b>	<b>3.38</b>	<b>1.02</b>

# Appendix (10) Nurses' Performance in the Accredited Hospital.

No.	Statement	% of Negative Responses	Neutral	% of Positive Responses	Mean	SD
<b>Task performance</b>						
Q1	I managed to do the work so that I finished on time	3.20%	12.70%	84.10%	3.98	0.69
Q2	I kept in mind the working result needed to be achieved	1.60%	9.50%	88.90%	4.02	0.59
Q3	I was able to set priorities	2.40%	11.10%	86.50%	4.02	0.66
Q4	I was able to carry out my work efficiently	0.80%	9.50%	89.70%	4.09	0.56
Q5	I managed my time well	2.40%	11.90%	85.70%	4.01	0.62
<b>Total</b>		<b>2.1%</b>	<b>10.9%</b>	<b>87.0%</b>	<b>4.02</b>	<b>0.62</b>
<b>Contextual performance</b>						
Q6	On my own initiative, I started new tasks when my given tasks were completed	2.40%	9.50%	88.10%	4.05	0.61
Q7	I took on challenging tasks when they were available	0.80%	15.10%	84.10%	4.04	0.62
Q8	I worked on keeping my job-related knowledge up-to-date	0.00%	8.70%	91.30%	4.13	0.53
Q9	I worked on keeping my work skills up-to-date	0.80%	8.70%	90.50%	4.17	0.6
Q10	I came up with creative solutions for new problems	8.70%	19.80%	71.40%	3.78	0.83
Q11	I took on extra-responsibilities	3.20%	13.50%	83.30%	4.1	0.74
Q12	I diligently sought new challenges in my work	4.80%	19.80%	75.40%	3.84	0.74
Q13	I actively participated in meetings and/or consultations	25.40%	34.10%	40.50%	3.17	0.97
<b>Total</b>		<b>5.8%</b>	<b>16.2%</b>	<b>78.1%</b>	<b>3.91</b>	<b>0.71</b>
<b>Counterproductive work behavior</b>						
Q14	I complained about minor work-related issues at work	47.60%	27.00%	25.40%	3.23	0.99
Q15	I made problems at work bigger than they were	17.50%	27.00%	55.60%	2.52	0.96
Q16	I focused on the negative aspects of the situation at work instead of the positive aspects	19.80%	19.00%	61.10%	2.48	1.03
Q17	I talked to colleagues about the negative aspects of my work	48.40%	31.70%	19.80%	3.31	0.97
Q18	I talked to people outside the organization about the negative aspects of my work	24.60%	23.80%	51.60%	2.52	1.18
<b>Total</b>		<b>31.58%</b>	<b>25.7%</b>	<b>42.7%</b>	<b>2.81</b>	<b>1.03</b>
<b>Total performance</b>		<b><u>11.9%</u></b>	<b><u>17.4%</u></b>	<b><u>70.7%</u></b>	<b><u>3.64</u></b>	<b><u>0.77</u></b>

### Appendix (11) Nurses' Performance in a Non-accredited Hospital.

No.	Statement	% of Negative Responses	Neutral	% of Positive Responses	Mean	SD
<b>Task performance</b>						
Q1	I managed to do the work so that I finished on time	5.50%	7.70%	86.80%	4.03	0.84
Q2	I kept in mind the working result needed to be achieved	6.60%	3.30%	90.10%	4	0.77
Q3	I was able to set priorities	5.50%	3.30%	91.20%	4.09	0.74
Q4	I was able to carry out my work efficiently	3.30%	5.50%	91.20%	4.13	0.74
Q5	I managed my time well	4.40%	7.70%	87.90%	4.08	0.74
<b>Total</b>		<b>5.1%</b>	<b>5.5%</b>	<b>89.4%</b>	<b>4.07</b>	<b>0.77</b>
<b>Contextual performance</b>						
Q6	On my own initiative, I started new tasks when my given tasks were completed	4.40%	8.80%	86.80%	4.05	0.75
Q7	I took on challenging tasks when they were available	4.40%	8.80%	86.80%	4.05	0.79
Q8	I worked on keeping my job-related knowledge up-to-date	4.40%	8.80%	86.80%	4.04	0.82
Q9	I worked on keeping my work skills up-to-date	3.30%	6.60%	90.10%	4.13	0.76
Q10	I came up with creative solutions for new problems	5.50%	18.70%	75.80%	3.82	0.79
Q11	I took on extra-responsibilities	5.50%	8.80%	85.70%	4.07	0.8
Q12	I diligently sought new challenges in my work	8.80%	17.60%	73.60%	3.8	0.88
Q13	I actively participated in meetings and/or consultations	22.00%	24.20%	53.80%	3.34	1.14
<b>Total</b>		<b>7.3%</b>	<b>12.8%</b>	<b>79.9%</b>	<b>3.91</b>	<b>0.84</b>
<b>Counterproductive work behavior</b>						
Q14	I complained about minor work-related issues at work	46.20%	23.10%	30.80%	3.15	1.16
Q15	I made problems at work bigger than they were	28.60%	16.50%	54.90%	2.63	1.17
Q16	I focused on the negative aspects of the situation at work instead of the positive aspects	34.10%	15.40%	50.50%	2.68	1.29
Q17	I talked to colleagues about the negative aspects of my work	57.10%	16.50%	26.40%	3.3	1.15
Q18	I talked to people outside the organization about the negative aspects of my work	34.10%	19.80%	46.20%	2.71	1.25
<b>Total</b>		<b>41%</b>	<b>18.3%</b>	<b>41.8%</b>	<b>2.89</b>	<b>1.20</b>
<b>Total performance</b>		<b><u>15.8%</u></b>	<b><u>12.3%</u></b>	<b><u>72%</u></b>	<b><u>3.67</u></b>	<b><u>0.92</u></b>

**Appendix (12) Person Correlation results for the Job Satisfaction and Job Performance Questions with the total degree.**

No.	Variables	Value (r)	Significant Value
<b>Nurses' Job Satisfaction Domain</b>			
1.	I am satisfied with the moments of having conversations and sharing medical information with my co-workers.	1	
2.	I am satisfied with the spirit of collaboration between me and my co-workers.	.441*	0.019
3.	I am satisfied with the workload at my workplace.	0.079	0.689
4.	I am satisfied with my co-workers' effort to provide better care.	0.287	0.138
5.	I am satisfied with my superiors' effort to improve my working conditions.	.378*	0.047
6.	I am satisfied with my participation in decision-making at my workplace.	0.257	0.187
7.	I am satisfied with the nurse-to-patient ratio in my shift.	-0.189	0.334
8.	I am satisfied with the career advancement opportunities.	0.174	0.377
9.	I am satisfied with the level of trust that I have with my co-workers.	.422*	0.025
10.	I am satisfied with how my superiors allow me to participate in training courses/projects.	0.052	0.794
11.	I am satisfied with the nurse per shift ratio according to the number of tasks to be performed. (suitable nurses number per shift to workload)	.439*	0.019
12.	I am satisfied with the physical conditions of the space where I provide care.	-0.059	0.765
13.	I am satisfied with the routines at my unit.	0.144	0.466
14.	I am satisfied with the fact that my work is rewarded and/or valued by my superiors.	-0.049	0.805
15.	I am satisfied with the fact that my work is rewarded and/or valued by the patients.	0.211	0.28
16.	I am satisfied with how patients and their families value my work.	0.322	0.094
17.	I am satisfied with the nursing assigned to me in my department.	0.16	0.416
18.	I am satisfied with the other health specialists' skills.	.437*	0.02
19.	I am satisfied with the training opportunities provided at my workplace.	0.167	0.395
20.	I am satisfied with the level of colleagues' competence in the same field.	0.194	0.323
21.	I am satisfied with the possibility to implement new knowledge at my workplace.	0.074	0.708
22.	I am satisfied with the equipment/ materials at my unit.	0.355	0.064
23.	I am satisfied with the followed system my workplace.	0.01	0.962
24.	I am satisfied with my autonomy to provide adequate care to patients according to my skills.	0.194	0.323
25.	I am satisfied with how protocols are well organized and elaborated in my unit.	0.214	0.275
26.	I am satisfied with the quality of the care I provide taking into account the context where I work.	0.141	0.474
27.	I am satisfied with the waiting time to be promoted at my workplace.	0.207	0.291
28.	I am satisfied with the tasks performed in my unit.	0.255	0.19
29.	I am satisfied with my superiors' respect for my work.	0.282	0.145
30.	I am satisfied with the number of protocols on the unit's functioning.	.629**	0
31.	I am satisfied with my salary, taking into account the tasks I perform.	-0.106	0.59
32.	I am satisfied with my salary taking into account my skills/knowledge.	-0.029	0.883



33.	I am satisfied with the moments of dialogue and sharing of information with my superiors.	.559**	0.002
34.	I am satisfied with the patients' perception of my activities.	.602**	0.001
35.	I am satisfied with my superiors' encouragement to participate in training.	0.266	0.171
36.	I am satisfied with the patients' respect for my work.	.680**	0
37.	I am satisfied with the other health professionals' respect for the care I provide.	0.194	0.323
<b>Nurses Job Performance Domain</b>			
1.	I managed to do the work so that I finished on time	0.291	0.132
2.	I kept in mind the working result needed to be achieved	0.344	0.073
3.	I was able to set priorities	.479**	0.01
4.	I was able to carry out my work efficiently	.460*	0.014
5.	I managed my time well	0.281	0.148
6.	On my own initiative, I started new tasks when my given tasks were completed	0.361	0.059
7.	I took on challenging tasks when they were available	0.291	0.132
8.	I worked on keeping my job-related knowledge up-to-date	0.373	0.051
9.	I worked on keeping my work skills up-to-date	0.151	0.442
10.	I came up with creative solutions for new problems	0.314	0.103
11.	I took on extra-responsibilities	0.288	0.138
12.	I diligently sought new challenges in my work	.559**	0.002
13.	I actively participated in meetings and/or consultations	0.147	0.454
14.	I complained about minor work-related issues at work	0.202	0.302
15.	I made problems at work bigger than they were	.381*	0.046
16.	I focused on the negative aspects of the situation at work instead of the positive aspects	0.205	0.295
17.	I talked to colleagues about the negative aspects of my work	-0.091	0.644
18.	I talked to people outside the organization about the negative aspects of my work	-0.21	0.284

\*. Correlation is significant at the 0.05 level (2-tailed).

\*\*. Correlation is significant at the 0.01 level (2-tailed).