

JOB SATISFACTION AS RELATED TO  
NURSES' ATTITUDES REGARDING  
INCREASING EMPLOYEE SELF-CONTROL

by

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## TABLE OF CONTENTS

| <u>CHAPTER</u>  | <u>PAGE</u> |
|---|-------------|
| I. INTRODUCTION . . . . .   | 1           |
| Conceptual Framework . . . . .  | 2           |
| Review of the Literature . . . . .                                    | 3           |
| Turnover . . . . .  | 3           |
| Job Satisfaction . . . . .  | 4           |
| Employee Self-Control . . . . .                                       | 7           |
| Statement of the Purpose . . . . .                                    | 10          |
| Hypothesis . . . . .  | 11          |
| II. METHOD . . . . .  | 12          |
| Sample and Setting . . . . .  | 12          |
| Data Collection Instruments . . . . .                                 | 12          |
| Increasing Employee Self-Control . . . . .                            | 13          |
| Job Descriptive Index . . . . .                                       | 14          |
| Data Collection Procedure . . . . .                                   | 15          |
| Data Analysis . . . . .   | 15          |
| III. RESULTS AND DISCUSSION . . . . .                                 | 17          |
| Final Sample . . . . .  | 17          |
| Characteristics of the Study . . . . .                                | 18          |
| Job Descriptive Index . . . . .                                       | 18          |
| Work . . . . .  | 21          |
| Pay . . . . .   | 23          |
| Promotion . . . . .   | 23          |
| Supervision . . . . .   | 24          |
| Co-workers . . . . .  | 25          |
| Increasing Employee Self-Control . . . . .                            | 25          |
| Job Satisfaction Correlated with IESC<br>Discrepancy Scores . . . . . | 27          |
| IV. SUMMARY, CONCLUSIONS AND RECOMMENDATIONS . . . . .                | 29          |
| Summary . . . . .   | 29          |
| Conclusions . . . . .   | 30          |
| Recommendations . . . . .   | 31          |
| REFERENCES . . . . .  | 33          |
| APPENDICES  |             |
| A. Cover Letter and Consent Form . . . . .                            | 35          |
| B. Information Sheet . . . . .  | 36          |

TABLE OF CONTENTS (continued)

| <u>CHAPTER</u>   | <u>PAGE</u> |
|--|-------------|
| APPENDIX   |             |
| C. Increasing Employee Self-Control<br>Scoring of IESC . . . . . | 37          |
| D. Job Descriptive Index Scoring of JDI . . . . .                | 40          |
| ABSTRACT   |             |

LIST OF TABLES

| TABLE |   | PAGE |
|-------|---|------|
| 1     | Distribution of Respondents According to<br>Clinical Area . . . . .   | 17   |
| 2     | Characteristics of the Study Sample . . . . .   | 19   |
| 3     | Mean Scores and Standard Deviations of Staff<br>Nurses' and Co-ordinators' Responses to<br>the JDI . . . . .  | 20   |
| 4     | Staff Nurses' JDI Scores According to<br>Department . . . . .   | 22   |
| 5     | IESC Mean Scores and Standard Deviations for<br>Staff Nurses and Co-ordinators and Discrepancies<br>between Staff and Co-ordinators' Scores . . . . . | 26   |
| 6     | Pearson's Correlation of IESC Discrepancy Scores<br>and JDI Scores of Staff Nurses . . . . .  | 27   |

## CHAPTER I

### INTRODUCTION

The recent publicity regarding the "nursing shortage" has brought widespread attention to the problems of retention and turnover, common indicators of job satisfaction or dissatisfaction. In a recent national survey, nurses listed their reasons for dissatisfaction with their work. Unresponsive administrators, not being allowed to "nurse", and being helpless to effect change ranked high (Hallas, 1980). Results of another survey indicated that nurses "are no longer willing to tolerate on a full-time basis having what they feel is a traditionally ineffective voice in making decisions that affect patient care" (White, 1980, p. 69).

In an attempt to correct this perceived lack of control in the decision-making process, one hospital instituted a participative management program which included all staff nurses. As a result the turnover rate in nursing dropped to its lowest level in five years (Araujo, 1980).

In the traditional hospital bureaucratic structures, staff nurses are not typically permitted to participate in policy decision making. Rigid, specialized, tight control and directive leadership has been shown to create antagonistic adaptive activities among the workers. Many hospitals may be characterized in this manner as regards to their nursing staff. The resultant adaptive activities may appear as absenteeism and turnover, aggression often directed at management, and unionization. Absenteeism has been shown to decrease when workers are permitted to use the skills they feel are important and when they



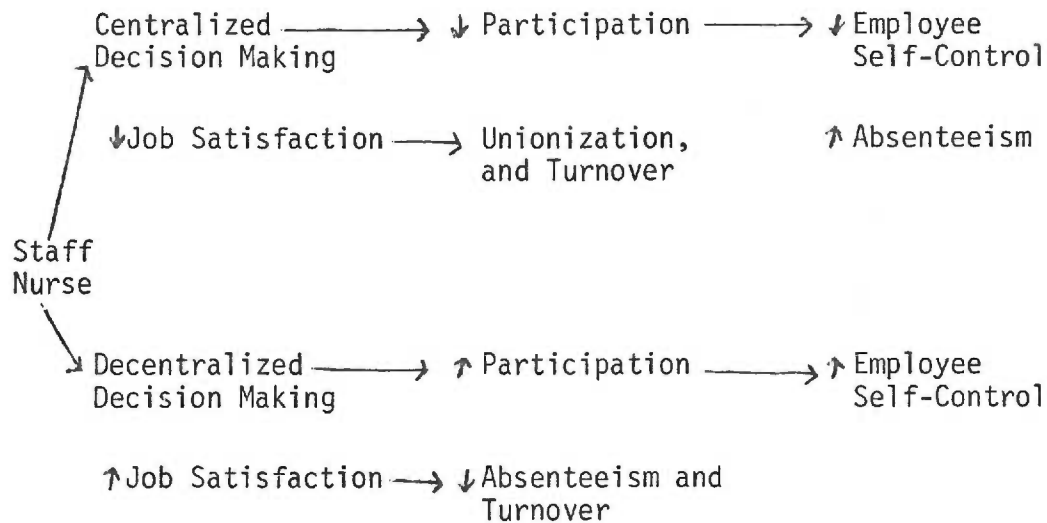
have a greater voice in the solution of job problems (Argyris, 1957 & 1964).

A recent trend to decentralize nursing administration in hospitals and disperse decision making to a greater number of managers has become increasingly popular. The questions to be answered are: Does this structural change allow the staff nurse to participate in the decision-making process? Secondly, how do the managers feel about increased staff participation? If management is not sincere about employee participation, this will be recognized by the employees and potentially increase discontent and adaptive activities. In addition to structural change, an attitude change must also take place in both the employees and their direct supervisors. To successfully increase the amount of employee self-control, a congruency in the attitudes of the supervisors and employees is necessary. Before instituting a major structural change, the attitudes of each group should be studied, not only to determine if the change actually is what the staff feels is important, but also to determine areas of disagreement which may need to be resolved before proceeding with the change. Just because a change is successful in one group, does not mean that the change applies to another group.

#### Conceptual Framework

The problem of turnover and retention will be approached through the conceptual framework of participative management. Participative management's basic premise is the increased job satisfaction of the employees. Participative management assumes that there is a commonality of interests between the managers and the workers and that the

workers have the skills necessary to participate in decision making. For the purpose of this study, the framework may appear similar to the following diagram:



The increase in participation increases the amount of employee self-control, which increases employee job satisfaction, which in turn decreases absenteeism and turnover.

### Review of the Literature

The following review of the literature will be presented in three parts: first, the problem of turnover in nursing is examined; secondly, general theories of job satisfaction are reviewed; and finally, aspects of employee self-control and participative management are discussed.

#### Turnover

The average worker changes jobs six to seven times during his/her working lifetime. Of the total work force, individuals have held their jobs for an average of 4.2 years (Kossen, 1975).

Turnover rates are one measurement of employee frustration levels in an organization. Frustrated employees tend to react by increasing absenteeism, turnover, aggression toward the top management, apathy or indifference, trade unions, demand to relate compensation to the degree of dissatisfaction experienced on the job, and alienation. These adaptive techniques by employees tend to frustrate management. In most cases, management tends to respond by increasing its control over the employees through tighter administrative procedures, stricter edicts, and a liberal sprinkling of personal advantages (human relations programs) to make the employees accept their situation. This tightening of controls and pseudo human relations actually causes increasing frustration and conflict for the employee (Argyris, 1957, 1964, & 1971).

A vicious cycle has begun which leads to increasing dissatisfaction for the worker. The cycle has impact on multiple areas of potential job satisfaction, including both physical and psychological aspects of the job environment. Before an intervention can be planned, the areas of actual dissatisfaction need to be determined for the particular work force in question.

### Job Satisfaction

Smith, Kendall, and Hulin (1969) define job satisfaction as "feelings or affective responses to facets of the situation" (p. 6). They hypothesize that these feelings are associated with perceived differences between what is expected as a fair and reasonable return and what is experienced, in relation to the alternatives available in a given situation. Their work has found that satisfaction tends to

be positively correlated with job level and salary. In addition to pay, other factors exerting an influence over satisfaction include specific aspects of the job such as the nature of the work, promotional opportunities, supervision, and co-workers. All of these may be considered as sources of satisfaction or dissatisfaction. Job satisfaction is a function of perceived characteristics of the job in relation to the individual's frame of reference. Alternatives available, expectations, and experience play a role in providing a relevant frame of reference. In this perspective,

"a particular job condition can be a satisfier, a dissatisfier, or irrelevant, depending on conditions in comparable jobs, on conditions of other people, on the qualifications and past experience of the individual and alternatives to him as well as on numerous, situational variables of the present job" (Smith, et al., p. 18).

The factors that are most consistent with job satisfaction are pay, work, supervision, co-workers and promotional opportunities. Satisfaction in these areas is thought to be associated with the perceived differences between what is expected and what is experienced in a given situation.

The expectancy theory of motivation (Vroom, 1964) closely correlates with the theory of job satisfaction proposed by Smith (1969). Vroom also emphasizes the importance of the situations and alternatives in determining the frame of reference and influencing satisfaction and behavior (1964). He defines expectancy as the "belief concerning the likelihood that a particular act will be followed by a particular outcome" (p. 17). The other important component of Vroom's theory is

preference, which refers to the possible outcomes a person may experience as the result of an activity.

Vroom's definition of job satisfaction is also closely related to that proposed by Smith. Vroom states that job satisfaction "refers to affective orientations on the part of individuals toward work roles which they are presently occupying" (p. 99). He continues by saying that job satisfaction must be assumed to be the result of the operation of both situational and personality variables. Several work variables relating to the "ideal" work situation have been isolated by Vroom. These variables include high pay, promotional opportunities, considerate and participative supervision, opportunity to interact with one's peers, varied duties, and a high degree of control over work methods and pace. Vroom further theorizes that workers who are highly attracted to their jobs (high job satisfaction) should be subjected to stronger forces to remain in them than those who are less attracted. This attraction will be reflected in a lower probability of behavior which take the person out of the job (turnover and absenteeism).

When investigating the job satisfaction of supervisors, Vroom concluded that there is a positive coreelation between perceived participation and job satisfaction among the entire group, that the relationship between participation and satisfaction increases in those with high independence needs, that the relationship increases among non-authoritarian personalities, and that participation may have little effect on those who have a low independence need, but does not have a negative effect (Blumberg, 1968).

After reviewing many studies, Blumberg concluded that "satisfaction in work is significantly enhanced by increasing workers' decision-making powers on the job" (p. 1). He defines participation as:

"a process in which two or more parties influence each other in making certain plans, policies, and decisions. It is restricted to decisions that have further effects on all those making the decision and on those represented by them" (p. 70).

Employee self-control is increased by participation in the decision making process. This process in turn increases job satisfaction, which reduces turnover.

### Employee Self-Control

The concept of employee self-control is at odds with traditional formal organizations. The principles of formal organizations create an atmosphere in which employees are provided minimal control over their work, are expected to be passive and subordinate, are expected to have a short time perspective, are expected to value only a few of their abilities, and are expected to produce under conditions leading to psychological failure. All of these are incongruent to developing a healthy personality in an adult manner. This incongruity increases as employees mature, as the organizational structure becomes more rigid, as one goes down the organizational hierarchy, and as jobs become more mechanized (Argyris, 1957).

The incongruity between the organizational forces and the development of adults may create conflict within the employee. The employee may adapt to the conflict by leaving the organization, climbing the organizational ladder, by becoming disinterested and noninvolved, by creating informal groups which develop into unions,

by accepting dissatisfaction as inevitable and by increasingly demanding money instead of human rewards in the work place. The organization reacts to these adaptive measures by increasingly making the structure more directive and rigid, tightening management controls, and developing pseudo human relations to increase communication. These attempts do not reduce the original problem, but may compound it. Instead the employees must be given power over their own work environment and given responsibility, authority, and increased control over the decision making that affects their work environment. This may be one explanation as to why job satisfaction increases as you go up the organizational ladder. The manager is able to control the work environment to a greater degree than the employee further down the ladder, resulting in higher intrinsic work satisfaction (Argyris, 1957).

One method of increasing employee self-control is through the use of participative management. Research findings have associated more effective performance with participative management than with any other management style (Hampton, 1973). Participative management was based on organizational characteristics that required:

- 1) high confidence and trust by the leaders;
- 2) economic rewards based on compensation systems developed through genuine participation;
- 3) free and valid flow of information at all levels;
- 4) high degree of mutual trust;
- 5) wide involvement and well integrated through linking processes; and

- 6) wide responsibility for review and control at all levels  
(Argyris, 1971).

The basic assumption underlying participative management is that there is considerable commonality of interest between the managers and the employees, and that the workers have the necessary knowledge and skills to participate in decision making (Kossen, 1975).

Sorcher (1973) emphasizes that participative management requires true participation and involvement in activities and decisions which management may be either unwilling to provide or unaware of the need to consider. Participative management requires a commitment to employee involvement, basic trust in the employees, and a willingness to take risks. Trust will be fully evident only if management is willing to let the employees become involved in ways that are personally relevant to the employee. This is shown by letting them set quality goals, determine methods, and set time standards.

When applying participative management to a health care setting, Barbara Hill cautioned that careful planning before implementation is necessary. "Leader selection and preparation will not provide successful implementation unless preparation of the group members is also instituted" (Hill, 1976, p. 20). One aspect of preparation would be to determine life style orientations of the group and determine any incompatibilities of life style orientations of the individual and those of the other group members and the organization. Employee satisfaction has been shown to increase when there is superior-subordinate similarity and compatibility. When incompatible, tension results between the individual and the work group which could affect



the employee satisfaction with various job dimensions. Satisfaction with supervision is associated with agreement as to the value the superior and subordinate place on freedom and independence (Dimarco, 1975).

#### Statement of the Purpose

The congruency between the staff nurse's beliefs and those of her immediate supervisor appears to be crucial to the staff nurse's job satisfaction. The compatibility of the employee and management regarding life-style, organizational values, and the expectancy of rewards increases job satisfaction. This study investigated the relationship of this compatibility of beliefs regarding employee self-control.

The literature also suggests a relationship between increasing employee self-control through increasing decision making regarding the work situation. Employee job satisfaction increases as their level of self-control increases. This appears to be especially important to employees desiring more independence.

This study investigated the congruency, or incongruencies of staff nurses' attitudes toward increasing their self-control, with those of their immediate supervisors and the effect the incongruencies may have on the staff nurses' job satisfaction. It was hypothesized that the staff nurses' job satisfaction will decrease as they desire more independence and self-control than their supervisors want to give.

### Hypothesis

As the discrepancy between the staff nurse's attitudes regarding increasing self-control and those of their supervisor increases, the job satisfaction of the staff nurses will decrease.

The dependent variable will be job satisfaction scores of the staff nurses. The independent variable will be the discrepancy in attitudes, regarding increasing employee self-control between the staff nurses, and their immediate supervisor.

## CHAPTER II

### METHOD

#### Sample and Setting

The setting of the study was a 212-bed health maintenance organization hospital, which underwent a decentralization of the nursing department two years prior to the study. At the present time, most nursing policy decisions are made by the nursing management group, which consists of the Associate Administrator, four Assistant Directors of Nursing, and the co-ordinators of each clinical area. Decisions are usually made by consensus or democratic vote. Frequent use of task forces and surveys aid in the decision-making process.

Ninety-one registered nurses currently employed full-time were included in this study. Ten nursing co-ordinators and a random sample of staff nurses employed in the corresponding areas participated in the study.

Units included in the study were: Intensive Care, Coronary Care, Labor and Delivery, Newborn Nursery, Pediatrics, Post Partum, Gynecology, Surgical-Oncology, Surgical-Urology and Orthopedics, and Medical.

#### Data Collection Instruments

Demographic information was collected from each participant by the use of a face sheet. Information regarding potential extraneous variables, such as present position, educational level, age, and experience was included (see Appendix B for information sheet).

Two data collection instruments were used. The first was the Increasing Employee Self-Control (IESC) tool developed by Harvey

(1980). This was used to measure the extent to which both the staff and their managers favored employee self-control. The second was the Job Descriptive Index (JDI), which was used to measure the job satisfaction of the nurses with their present jobs (Smith, et al., 1969). A detailed description of both instruments follows.

#### Increasing Employee Self-Control (IESC)

The IESC instrument consists of 16 statements, 8 of which favor increasing employee self-control and 8 of which do not favor increasing control. Examples of the items which indicate support for increasing employee self-control are:

1. employees, on their own, will in most cases do what is required of them, and
2. employees should be given more opportunities to determine their tasks to be accomplished.

Examples of those items not supporting increasing employee self-control:

1. although attempts are made at giving employees more responsibility, they will seldom utilize these opportunities, and
2. allowing more employee initiative in the work place would cause much confusion.

In an attempt to make the statements easier to understand, the word "employee" was changed to "staff nurse" for use with this group. The word "co-ordinator" was substituted for the word "superior" to help delineate that the superior in reference was their immediate supervisor, the co-ordinator of the clinical unit.

The IESC is scored by a Likert scale ranging from one to five. Possible responses for each statement are strongly agree (SA), agree (A), undecided (U), disagree (D), and strongly disagree (SD).

Positive statements were those that support increasing employee self-control scored SA=5, A=4, U=3, D=2, and SD=1, and negative statements were scored SA=1, A=2, U=3, D=4, and SD=5. The total score can range from 16 to 80 points (See Appendix C for IESC scoring key).

The final score indicates the respondent's attitude, or receptiveness toward increasing employee self-control. Interpretation of the score is as follows:

- 16-23 definitely not in favor
- 24-39 not in favor
- 40-55 undecided
- 56-71 in favor
- 72-80 strongly in favor.

Reliability of the instrument has been established at .76 using the internal consistency method (Harney, 1980).

#### Job Descriptive Index

To determine the dependent variable of job satisfaction, each participant completed the Job Descriptive Index (JDI) by Smith et al. The index is divided into five parts: work, supervision, pay, promotions, and co-workers (see Appendix D for JDI and scoring key). Respondents indicate "yes", "no", or "?" to a list of adjectives under each category, depending on how they perceive their present job. Each answer is weighted as follows:

| Response                 | Weight |
|--------------------------|--------|
| "yes" to a positive item | 3      |
| "no" to a negative item  | 3      |
| "?" to any item          | 1      |
| "yes" to a negative item | 0      |
| "no" to a positive item  | 0      |

The range of scores for each section of the JDI is 54, with a score of 18 being indifferent and of 27 being a balanced score. Each section is scored separately in order to indicate specific items of satisfaction, instead of obtaining a general overall rating.

Since nurses were not included in the original job satisfaction study by Smith, et al. (1969), no comparative JDI scores exist which are specific to this group. The mean scores for male dominated occupations usually ranged in the 33-35 range for each section of the JDI. Female dominated occupations on the whole, scored lower in all areas with the range being frequently 20-32. Smith, et al., attributed these differences to the nature of traditional "women's" occupations, such as lower pay, fewer promotional opportunities, and more monotonous type of work.

#### Data Collection Procedure

The data were collected by the investigator meeting with individual nurses, or small groups of nurses during their work shift on their individual clinical units. Each respondent was provided a cover letter/consent form, followed by the Information Sheet, a two-page Job Descriptive Index, and then the Increasing Employee Self-Control tools. Those nurses requiring more time were allowed to complete the forms, and place them in envelopes for later pick-up by the investigator. The investigator made attempts to meet with all shifts on each unit.

#### Data Analysis

The IESC scores of the individual staff nurses were compared with those of their co-ordinators to determine the congruency of

their attitudes regarding increasing employee self-control. The discrepancies between the IESC scores were calculated and correlated with the individual JDI scores using the Pearson's Correlation formula. The Pearson's Correlation is used, when the variables have been measured on either an interval or ratio scale and indicates the degree of association between two variables.

A negative correlation in this study would indicate that as the discrepancy in IESC scores widened, with the staff nurse favoring increasing self-control more than the co-ordinator, the job satisfaction score would lower. A positive correlation would indicate that as the discrepancy in IESC scores narrowed, the job satisfaction of the staff nurses increases.

CHAPTER III  
RESULTS AND DISCUSSION

This chapter will present the results of the investigation into the impact of the congruency, or incongruency of staff nurses' and their co-ordinators' attitudes regarding increasing employee self-control on the job satisfaction of staff nurses. The Increasing Employee Self-Control scale (Harvey, 1980) was used to measure attitudes of staff nurses and their co-ordinators toward increasing staff nurses control on the job. The Job Descriptive Index (Smith, et al, 1969) was used to measure the level of job satisfaction of the nurses.

Final Sample

Ninety-one Registered Nurses, representing ten hospital departments, were randomly selected to complete the questionnaire. Included were staff nurses and the co-ordinators for these areas. Seven out of eight of the co-ordinators for these ten areas completed the survey (two co-ordinators have two areas each). As seen in Table 1, each area had from six to twelve respondents.

Table 1  
Distribution of Respondents According to Clinical Area

| Area | n  | Percentage of Sample |
|------|----|----------------------|
| A    | 6  | 7                    |
| B    | 10 | 11                   |
| C    | 8  | 9                    |
| D    | 8  | 9                    |
| E    | 9  | 10                   |
| F    | 9  | 10                   |
| G    | 8  | 9                    |
| H    | 10 | 11                   |
| I    | 11 | 12                   |
| J    | 12 | 13                   |



### Characteristics of the Study Sample

The majority of the study sample could be characterized as being young (under 40) and having either an Associate Degree in Nursing, or a diploma as both their basic and highest level of education (see Table 2). Ninety-six percent of the respondents were female, and seventy percent did not participate in any form on committee or task force work.

Several participants indicated that they had been Licensed Practical Nurses or employed in some nursing area before completing an RN program. This factor accounts for some of the discrepancy between length of time since graduation, and the time active in nursing or employed by the hospital. The majority had been employed by this institution less than six years.

### Job Descriptive Index

The index is divided into five separate sections which deal with different aspects of the work setting; work, pay, promotion, supervision, and co-workers. The scores for each section vary from 0 to 54, with 18 being "undecided". Table 3 presents the scores of both the staff nurses, and their co-ordinators, giving the means and standard deviations.

The co-ordinators' scores showed a higher level of job satisfaction in all areas except the work section, where the scores are almost identical. From this comparison, it appears that the variation in work activities does not affect this sample's level of satisfaction. The JDI scores for supervision and co-workers are slightly higher for the co-ordinators. The higher level of satisfaction among

Table 2  
 Characteristics of the Study Sample

| Characteristic                  | Frequency | Percentage |
|---------------------------------|-----------|------------|
| Age                             |           |            |
| under 30                        | 32        | 35         |
| 31-40                           | 36        | 40         |
| 41-50                           | 15        | 16         |
| over 51                         | 8         | 9          |
| Basic Education                 |           |            |
| ADN                             | 43        | 47         |
| diploma                         | 28        | 31         |
| BSN                             | 20        | 22         |
| Highest Education               |           |            |
| ADN                             | 34        | 37         |
| diploma                         | 22        | 24         |
| BSN                             | 21        | 23         |
| other bachelor's degree         | 8         | 9          |
| Master's in Nursing             | 6         | 7          |
| Time since Graduation           |           |            |
| less than one year              | 3         | 3          |
| 1-5 years                       | 30        | 33         |
| 6-10 years                      | 25        | 27         |
| 11-20 years                     | 20        | 22         |
| over 20 years                   | 13        | 14         |
| Years active in nursing         |           |            |
| less than one year              | 4         | 4          |
| 1-5 years                       | 23        | 25         |
| 6-10 years                      | 30        | 33         |
| 11-20 years                     | 22        | 24         |
| over 20 years                   | 12        | 13         |
| Length of time in this hospital |           |            |
| less than one year              | 16        | 18         |
| 1-5 years                       | 44        | 48         |
| 6-10 years                      | 18        | 20         |
| 11-20 years                     | 11        | 12         |
| over 20 years                   | 2         | 2          |
| Committee Participation         |           |            |
| none                            | 64        | 70         |
| 1 committee                     | 19        | 21         |
| 2 committees                    | 2         | 2          |
| 3 committees                    | 1         | 1          |
| 4 (all co-ordinators)           | 5         | 5          |

Table 3

Mean Scores and Standard Deviations of Staff Nurses and Co-ordinators Responses to the JDI

| Participants | Work |      | JDI Pay |      | Promotion |      | Supervision |      | Co-workers |      |
|--------------|------|------|---------|------|-----------|------|-------------|------|------------|------|
|              | Mean | SD   | Mean    | SD   | Mean      | SD   | Mean        | SD   | Mean       | SD   |
| Staff Nurses | 29.8 | 10.6 | 19.6    | 10.1 | 14.2      | 9.8  | 38.1        | 12.3 | 39.6       | 12.6 |
| Co-ordinator | 29.1 | 7.3  | 24.6    | 6.6  | 26.2      | 14.7 | 41.7        | 8.4  | 40.2       | 10.6 |
| Total group  | 29.7 | 10.3 | 20.1    | 9.9  | 15.4      | 10.9 | 38.5        | 11.9 | 39.7       | 12.3 |
| Score ranges | 6-52 |      | 2-42    |      | 0-48      |      | 6-54        |      | 14-54      |      |

Note: Maximum score = 54.

co-ordinators, may be attributed to their increased participation in the decision-making process. Increased participation is shown by their membership on committees and on task forces. Of those participating on two or more committees, all but one of them were co-ordinators.

As members of the management group, the co-ordinators work closely with other levels of hospital management. The joint decision making process of the management group may add to the job satisfaction in the sections of supervision and co-workers. Vroom (1964) and Argyris (1957) both reported that the increase in decision making and participation have a positive effect upon the job satisfaction of supervisors. The largest discrepancies in mean scores between the groups are found in the pay and promotion sections of the JDI. These discrepancies most likely are a result of the higher pay scale of the co-ordinators and their previous promotions. The significance of the numerical scores will be presented in the following discussion.

In addition to the differences noted between co-ordinators' and staff nurses' scores, differences were also noted between clinical areas. The mean scores for nurses in each clinical area are presented in Table 4.

An overview of Table 4 shows wide discrepancies in the JDI scores across sections of the JDI, and also between clinical units. Each section of the JDI will be discussed individually.

Work. The range of scores within the work category fall within the previously reported mean scores for female dominated occupations (Smith, 1969). When compared with findings of two previous studies

Table 4  
Staff Nurses' JDI Scores According to Departments

| Area | n  | Work | Pay  | Promotion** | Supervision* | Co-workers |
|------|----|------|------|-------------|--------------|------------|
| A    | 6  | 22.8 | 22.4 | 3.6         | 30.0         | 39.8       |
| B    | 10 | 30.4 | 23.1 | 21.6        | 46.2         | 39.7       |
| C    | 8  | 23.7 | 16.3 | 13.4        | 35.0         | 37.0       |
| D    | 8  | 36.3 | 18.8 | 22.0        | 48.3         | 46.3       |
| E    | 9  | 23.1 | 22.8 | 15.0        | 27.3         | 36.8       |
| F    | 9  | 33.7 | 18.3 | 5.8         | 38.8         | 36.6       |
| G    | 8  | 28.6 | 23.5 | 8.5         | 33.1         | 40.0       |
| H    | 10 | 32.3 | 18.0 | 16.2        | 39.2         | 37.6       |
| I    | 11 | 30.9 | 21.4 | 11.1        | 36.8         | 42.5       |
| J    | 12 | 32.0 | 13.8 | 19.6        | 41.9         | 40.1       |

| Range of Departmental Scores |               |               |              |               |               |
|------------------------------|---------------|---------------|--------------|---------------|---------------|
|                              | 22.8-<br>36.3 | 13.8-<br>23.5 | 3.6-<br>22.0 | 27.3-<br>48.3 | 36.6-<br>46.3 |

| Mean for Staff Nurses |      |      |      |      |      |
|-----------------------|------|------|------|------|------|
|                       | 29.8 | 19.6 | 14.2 | 38.1 | 39.6 |

\*  $p = < .01$   
 \*\*  $p = < .0002$

done in the Portland area (Roberts, 1978 & Woltdt, 1980), the satisfaction scores for work are considerably lower in this study population. Mean work scores in the previous studies were 35.3, 42.4, and 34.99, as compared to 29.7 for the present study. This particular institution does have unusually high occupancy rates of 80-98 percent, and shorter than average lengths of stay for patients. The rapid turnover in patients and the continually high census may lead to feelings that the work is endless and repetitive. The pressure felt by the staff would be reflected in the work section of the JDI.

Pay. The mean score of 19.6 for staff nurses in the pay portion of the JDI is similar to the means obtained in the most recent study (Woltdt, 1980). The means at the two hospitals in the Woltdt study were 19.4 and 21.2. The earlier Roberts' (1978) study reported a mean of 31.3. The increasing dissatisfaction with pay in the most recent studies may be a reflection of the economic times.

Another possibility may be the increasing awareness of the higher pay scales in other more male dominated occupations. The dissatisfaction with pay is probably a combination of all the above influences in combination with the desire to be compensated for the dissatisfaction experienced in the work aspect of their jobs.

Promotion. The mean promotion scores of 15.4 for the entire study population are the lowest satisfaction scores in the JDI. Both Woltdt and Roberts reported promotion as the lowest area of job satisfaction with scores of 16.1, 21.6, and 24.3. The mean of 14.2 for the staff nurses is extremely low. The variation among clinical units is significant ( $p=0.0002$ ). The scores falling below 15.0 represent units

from all of the clinical areas; Medical-Surgical, Maternal-Child, and Critical Care with no one area being consistently low. The low scores are not especially prominent among the Obstetrical units such as was reported by Roberts (1978).

The traditional route of promotion remains the move into management. The management positions are relatively few in comparison to the number of staff nurses. In addition, management positions frequently are requiring at least a Bachelor's degree. As seen in Table 2, 61 percent of the study population has a diploma or Associate Degree as their highest education level. The degree requirement eliminates the vast majority of staff nurses from any promotional opportunities. If this aspect of job satisfaction is to be improved, some other method of promotional compensation must be considered. One such compensation may be a clinical ladder, where a nurse may be recognized for clinical expertise instead of being promoted into management as a means of recognition. Another solution may be to assist those nurses who want to further their education in a more active manner, such as by financial assistance.

Supervision. The mean scores of clinical departments ranged from 27.3 to 48.3 with a group mean of 38.1. The variation between groups was significant ( $p=0.01$ ). The mean compares with means of 42.9, 47.3, and 39.4 in the Roberts' and Woldt's studies. While slightly lower, the group as a whole is satisfied with their supervision. The two groups with the lowest scores, group A and E, have undergone recent changes in co-ordinators. Whether these changes are a result of the dissatisfaction of the staff, or

contributing to the dissatisfaction cannot be determined by this study.

Co-workers. The JDI section regarding co-workers scored the most satisfying aspect of job satisfaction for this study population. The mean ranges for departments were 36.6 to 46.3 with a group mean of 39.6. The group means were again lower than those of the two previous studies. Roberts reported a mean of 43.4, while Woltdt reported means of 45.5 and 46.6. All of these scores suggest that nurses find their co-workers one of the most satisfying aspects of their jobs.

#### Increasing Employee Self-Control

The Increasing Employee Self-Control (IESC) score was derived from the responses of the participant to a series of 16 statements, half of them in favor of increasing employee self-control and half of them not in favor. Each answer is given a score from one to five, with the higher score being in favor of increasing self-control (see appendix C for the scoring of individual items). Scores may range from 16 to 80, with a score of 48 being undecided. The higher the score, the more the respondent favors increasing the self-control of the employee in the work place.

The scores in the study ranged from 48 (undecided) to 74 (strongly in favor). Scores for the staff nurses and their co-ordinators are presented in Table 5.



Table 5

IESC Mean Scores and Standard Deviations for Staff Nurses  
and Co-ordinators and Discrepancies between Staff  
and Co-ordinator's Scores

| Area         | Staff Nurses |     | Co-ordinators<br>Scores/<br>and Mean |     | Discrepancy |     |
|--------------|--------------|-----|--------------------------------------|-----|-------------|-----|
|              | Mean         | SD  |                                      | SD  | Mean        | SD  |
| A            | 64.2         | 6.1 | 49.0                                 |     | 15.2        |     |
| B            | 62.8         | 4.6 | 69.0                                 |     | -6.2        |     |
| C            | 57.6         | 2.8 | 54.0                                 |     | 3.6         |     |
| D            | 61.0         | 6.3 | 51.0                                 |     | 10.0        |     |
| E            | 63.4         | 6.8 | 61.0                                 |     | 2.4         |     |
| F            | 63.5         | 5.8 | 51.0                                 |     | 12.5        |     |
| G            | 60.3         | 3.7 | none available                       |     |             |     |
| H            | 62.2         | 7.4 | 54.0                                 |     | 8.2         |     |
| I            | 63.3         | 5.5 | 55.0                                 |     | 8.3         |     |
| J            | 63.1         | 3.9 | 55.0                                 |     | 8.1         |     |
| Entire group | 62.2         | 5.4 | 55.4                                 | 6.1 | 6.5         | 7.9 |

The mean discrepancy between the staff nurses and their co-ordinators was 6.5 with a standard deviation of 7.9. The t-test for paired groups yielded a t-value of 6.9 (p 0.001).

The staff nurses scored higher than their co-ordinators in all units except one. This would indicate that in most instances the staff nurse favors more self-control than the co-ordinator favors. This discrepancy could be a source of dissatisfaction for both of them.

A comparison of Tables 4 and 5 shows that the group with the largest mean discrepancy score (15.2) between the staff and co-ordinator, group A, also has the lowest satisfaction scores of all

ten groups in the areas of work and promotion and the second lowest in supervision. Group F has the next largest discrepancy, 12.5, has the second lowest promotion mean score, but ranks only slightly below the population mean in pay and co-workers. Group D which has a discrepancy of 10.0 scores below the population mean in the pay section only. The only group where the co-ordinator favors increasing employee self-control more than the staff, group B, has a higher mean satisfaction score in every section of the JDI than the overall population mean. This discrepancy is not large which may reflect the on-going management training, and organizational development in this hospital. The influence of these discrepancies on the individual staff nurse's job satisfaction will be presented in the following section.

#### Job Satisfaction Correlated with IESC Discrepancy Scores

Correlation of the discrepancy scores of the staff nurses with their job satisfaction scores is shown in Table 6.

Table 6

Pearson's Correlation of IESC Discrepancy Scores  
and JDI Scores of Staff Nurses

|             | <u>Work</u> | <u>**Pay</u> | <u>**Promotion</u> | <u>*Supervision</u> | <u>Co-workers</u> |
|-------------|-------------|--------------|--------------------|---------------------|-------------------|
| Discrepancy | .12         | -.33         | -.28               | .03                 | .15               |

\* p = .008

\*\* p = .002

There is a negative correlation between the discrepancy scores and those of the pay and promotion satisfaction scores. The correlation for pay is significant at .002 level. There is a trend toward significance for promotion (p=.008). A negative correlation occurs

when the staff nurse favors an increasing amount of control and the job satisfaction score decreases.

The correlation indicates that a discrepancy in attitudes regarding employee self-control between the staff nurses and their immediate supervisor affects the staff nurse's job satisfaction in the area of pay. There is also a trend that a discrepancy also affects the promotion section of satisfaction. The correlation supports the hypothesis in that as the discrepancy in IESC scores increases between staff nurse and co-ordinator, the job satisfaction scores decrease in pay and promotion for the staff nurse. The correlation does not support the hypothesis in the areas of satisfaction with work, supervision, and co-workers.

The correlations are not strong, which leads the investigator to believe that other factors are influencing nurses' job satisfaction. Neither instrument deals with the unique aspects of nursing, which makes it difficult to adapt to the problems with which nurses are dealing. For instance, the statement on the IESC dealing with flexible work time does not coincide with the shift work that affects most of the nursing staff. The pay section of the JDI also raised many comments, most of them dealing with whether they were the second income in the family. Several wrote that they were the second income, so they scored this area favorably whereas they would score this area as totally inadequate if they were the sole family support. More refined tools need to be developed to measure specific needs of staff nurses.

CHAPTER IV  
SUMMARY, CONCLUSIONS, AND RECOMMENDATIONS

Summary

The increasing demand for professional nurses, coupled with poor retention rates and ever increasing professional opportunities for women, has created a nursing shortage. Hospital nurses have demonstrated their dissatisfaction by either leaving nursing altogether or finding positions outside the hospital. Frequently stated dissatisfactions with hospital nursing include a lack of control over patient care and policy decisions, and an unresponsive administration.

The traditional bureaucratic hospital structure may result in adaptive activities among the staff, including turnover, absenteeism, and unionization. In an attempt to alter this situation, some nursing departments have decentralized. Decentralization is an attempt to bring control of decision making to the staff level, in turn decreasing adaptive behaviors. Basic to the success of such changes are the attitudes of both the staff nurses and their supervisors. To be successful the change must be valued by both the staff and supervisors. As Vroom's expectancy theory states for a change to be satisfying to the employee, it needs to be an expected reward by the employee. Employee satisfaction also increases when there is a similarity of values and attitudes among the employees and supervisors (Dimarco, 1975).

This study investigated the effect incongruencies in attitudes regarding increasing employee self-control had upon the job satisfaction of the employees. The hypothesis was:

As the discrepancy between the staff nurse's attitudes regarding increasing self-control and those of their supervisor increases, the job satisfaction of the staff nurses will decrease.

### Conclusions

Ninety-one Registered Nurses, including seven co-ordinators, participated in the study. The population was young, 75 percent under the age of 40. Seventy-eight percent held either a diploma or Associate Degree as their basic nursing education, with this being the highest education level for 61 percent of the study. Thirty-six percent graduated within the last five years, while 66 percent had worked for this hospital less than five years. Seventy percent did not participate in any form of committee or task force work. All of those on more than two committees were co-ordinators.

Job satisfaction, as measured by the Job Descriptive Index (JDI) was extremely low for the pay and promotion sections. The work section also scored low on satisfaction. Most satisfying were the supervision and co-worker sections. Co-ordinators on the average were more satisfied than the staff nurses. Significant variations existed between clinical areas for the promotion portions of the JDI, which could not be explained by clinical specialty.

The Increasing Employee Self-Control instrument was used to measure the staff nurses' and their co-ordinators' attitudes regarding increasing the self-control of the staff nurses. As a group the staff nurses favored increasing self-control more than their corresponding co-ordinators. The discrepancy in scores was significant ( $p < 0.001$ ). The two departments with the greatest mean discrepancies also had the

lowest satisfaction scores in the promotion section of the JDI and lower than the population mean scores for at least two other sections of the JDI. The one group whose co-ordinator favored increasing employee self-control more than the staff, scored above the population mean in all sections of the JDI. Other than these three departments, the effects of the discrepancies on IESC scores were inconsistent.

To determine the effect of the discrepancy scores upon the individual nurse's job satisfaction, Pearson's correlation coefficients were calculated between the discrepancy scores and the five sections of the JDI. A negative correlation was found for the pay component of the JDI ( $p=.002$ ). A negative correlation ( $p=.008$ ) for the promotion aspect of job satisfaction was also found. No significant relationships between the discrepancy scores and the other three aspects of job satisfaction were found.

A conclusion can be drawn that the nurses in this study favor increasing employee self-control more than most supervisors favor giving them. The dissatisfaction that this discrepancy may create, is focused on the pay and promotion aspects of the work environment.

#### Recommendations

It is recommended that further research be done to determine the factors influencing nurses' job satisfaction. These studies should include:

1. Replication of this study
  - a. In other types of institutions, and
  - b. To include more layers of the hierarchy, such as the Administrator, Director of Nurses, Assistant Director of

Nurses, and other supervisors;

2. Develop measures of self-control, or autonomy, more specific to nursing;
3. Develop a measure of job satisfaction that is standardized, and more specific to the job aspects found in nursing;
4. Research the effects of educational level on job expectations, job satisfaction, participation, and attitudes toward increasing autonomy or self-control; and
5. Investigate the expectancies of nurses as to appropriate compensations for work, such as alternate promotional opportunities and pay scales, other than those based solely on past experiences.

Policy recommendations are that a promotional system other than into management be devised, such as one based on clinical expertise or quality of work. Another may be some method of recognition, pay or promotional, for those nurses who do actively participate in extra task forces or committees. An investigation should be done of both the staff nurses and their supervisors, as to the specific areas in which the staff nurses would like to increase their self-control.

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APPENDIX A

Cover Letter

Consent Form

UNIVERSITY OF OREGON HEALTH SCIENCES CENTER  
SCHOOL OF NURSING

Job Satisfaction as Related to Employee Self-Control

by Esther King, R.N., B.S.N.

Under the supervision of:

Marie Berger, R.N., Ph.D.

I agree to participate in the above named study investigating various potential influences, on nurses job satisfaction in the hospital setting. Participation will include completing a set of three questionnaires, which will take approximately 30 minutes.

While, I may not benefit directly from participation in this study, the information obtained may be used to create a more satisfying work place for other nurses. All information obtained will be kept confidential. Code numbers will be assigned to each nurse, to maintain anonymity. The questionnaires will be destroyed after completion of the study. Data will be reported in composite form, so that, no single person will be identified with specific answers. Participation in this study will in no way affect my employment.

Esther King has offered to answer any questions, I may have regarding this study. If, I have additional questions, I may reach her at (206) 574-6081.

I understand, that I may refuse to participate in this study without any consequences.

I have read the above explanation, and agree to participate in the study.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Witness: \_\_\_\_\_

APPENDIX B

Information Sheet

INFORMATION SHEET

Please complete the following information as completely as possible. Indicate which choice applies to your current position. If unable to select a choice, write in the appropriate answer.

- 1) Male \_\_\_\_\_ Female \_\_\_\_\_ 2) Age \_\_\_\_\_
- 3) What was your basic nursing program?  
 \_\_\_\_\_ ADN  
 \_\_\_\_\_ Diploma  
 \_\_\_\_\_ BSN
- 4) What is your highest education obtained?  
 \_\_\_\_\_ ADN  
 \_\_\_\_\_ Diploma  
 \_\_\_\_\_ BSN \_\_\_\_\_ other baccalaureate. If so, major \_\_\_\_\_  
 \_\_\_\_\_ Masters Please specify major \_\_\_\_\_
- 5) Length of time since completion of basic nursing program? \_\_\_\_\_
- 6) Number of years active in nursing? \_\_\_\_\_
- 7) Number of years at this hospital? \_\_\_\_\_
- 8) Indicate your current position.  
 \_\_\_\_\_ Staff nurse or charge nurse  
 \_\_\_\_\_ Co-ordinator
- 9) Please indicate your area of work.
- |          |                        |
|----------|------------------------|
| _____ 4S | _____ Nursery          |
| _____ 5S | _____ Pediatrics       |
| _____ 5N | _____ Labor & Delivery |
| _____ 3N | _____ ICU              |
| _____ 4N | _____ CCU              |
- 10) Are you currently on any committes of task forces?  
 \_\_\_\_\_yes \_\_\_\_\_no

If yes, please indicate the number and type below.

APPENDIX C

Increasing Employee Self-Control

Scoring of IESC

For each statement below circle your response: Strongly Agree (SA), Agree (A), Undecided (U), Disagree (D), Strongly Disagree (SD).

- |  |    |   |   |   |    |
|--|----|---|---|---|----|
| 1. When opportunities exist for nurses to work independently (without supervision), there will be an increase in efficiency.           | SA | A | U | D | SD |
| 2. Although attempts are made at giving staff nurses more responsibility, they will seldom utilize these opportunities.                | SA | A | U | D | SD |
| 3. Staff nurses, on their own will in most cases do what is required of them.  | SA | A | U | D | SD |
| 4. Staff nurses should be given more opportunities to determine their tasks to be accomplished.  | SA | A | U | D | SD |
| 5. Strict controls in organizations are required for efficient operation.  | SA | A | U | D | SD |
| 6. Staff nurse participation in decision making produces greater harmony between co-ordinator and nurse.                               | SA | A | U | D | SD |
| 7. More responsibility given to staff nurses will result in benefits to the individual nurse and hospital.                             | SA | A | U | D | SD |
| 8. Allowing nurses to manage their own personal leave time (sick, vacation, personal business, and holiday time) will result in abuse. | SA | A | U | D | SD |
| 9. Allowing more staff nurse initiative in the work place would cause much confusion.  | SA | A | U | D | SD |
| 10. Participative decision making is of little value because most nurses do not understand the overall objectives of the hospital.     | SA | A | U | D | SD |
| 11. When nurses are given more responsibility in the work environment, they will be more committed to hospital goals and objectives.   | SA | A | U | D | SD |
| 12. Allowing nurses to start work anytime they desire (within a two-hour flexible range) will result in confusion and inefficiency.    | SA | A | U | D | SD |

13. When left on their own, most nurses will not do the work that is required of them. SA A U D SD
14. Nurses who are committed to the hospital goals and objectives require little supervision. SA A U D SD
15. Give the opportunity, most nurse will make decisions that benefit the hospital and nurses. SA A U D SD
16. Most nurses are unable to identify with the hospital or its objectives. SA A U D SD



IESC SCORING AND INTERPRETATION SHEET

|     | <u>SA</u> | <u>A</u> | <u>U</u> | <u>D</u> | <u>SD</u> |
|-----|-----------|----------|----------|----------|-----------|
| 1.  | 5         | 4        | 3        | 2        | 1         |
| 2.  | 1         | 2        | 3        | 4        | 5         |
| 3.  | 5         | 4        | 3        | 2        | 1         |
| 4.  | 5         | 4        | 3        | 2        | 1         |
| 5.  | 1         | 2        | 3        | 4        | 5         |
| 6.  | 5         | 4        | 3        | 2        | 1         |
| 7.  | 5         | 4        | 3        | 2        | 1         |
| 8.  | 1         | 2        | 3        | 4        | 5         |
| 9.  | 1         | 2        | 3        | 4        | 5         |
| 10. | 1         | 2        | 3        | 4        | 5         |
| 11. | 5         | 4        | 3        | 2        | 1         |
| 12. | 1         | 2        | 3        | 4        | 5         |
| 13. | 1         | 2        | 3        | 4        | 5         |
| 14. | 5         | 4        | 3        | 2        | 1         |
| 15. | 5         | 4        | 3        | 2        | 1         |
| 16. | 1         | 2        | 3        | 4        | 5         |

APPENDIX D

Job Descriptive Index

Scoring of JDI

SUPERVISION

\_\_\_\_\_ Ask my advice  
 \_\_\_\_\_ Hard to please  
 \_\_\_\_\_ Impolite  
 \_\_\_\_\_ Praises good work  
 \_\_\_\_\_ Tactful  
 \_\_\_\_\_ Influential  
 \_\_\_\_\_ Up-to-date  
 \_\_\_\_\_ Doesn't supervise  
 enough  
 \_\_\_\_\_ Quick tempered  
 \_\_\_\_\_ Tells me where I stand  
 \_\_\_\_\_ Annoying  
 \_\_\_\_\_ Stubborn  
 \_\_\_\_\_ Knows job well  
 \_\_\_\_\_ Bad  
 \_\_\_\_\_ Intelligent  
 \_\_\_\_\_ Leaves me on my own  
 \_\_\_\_\_ Lazy  
 \_\_\_\_\_ Around when needed

CO-WORKERS

\_\_\_\_\_ Stimulating  
 \_\_\_\_\_ Boring  
 \_\_\_\_\_ Slow  
 \_\_\_\_\_ Ambitious  
 \_\_\_\_\_ Stupid  
 \_\_\_\_\_ Responsible  
 \_\_\_\_\_ Fast  
 \_\_\_\_\_ Intelligent  
 \_\_\_\_\_ Easy to make enemies  
 \_\_\_\_\_ Talk too much  
 \_\_\_\_\_ Smart  
 \_\_\_\_\_ Lazy  
 \_\_\_\_\_ Unpleasant  
 \_\_\_\_\_ No privacy  
 \_\_\_\_\_ Active  
 \_\_\_\_\_ Narrow interests  
 \_\_\_\_\_ Loyal  
 \_\_\_\_\_ Hard to meet

Put a "Y" beside an item if the item describes that particular aspect of your job. If the item does not describe your job, place an "N" in the blank. If you can not decide whether it applies, place a "?" in the space.

WORK

Y Fascinating  
N Routine  
Y Satisfying  
N Boring  
Y Good  
Y Creative  
Y Respected  
N Hot  
Y Pleasant  
Y Useful  
N Tiresome  
Y Healthful  
Y Challenging  
N On your feet  
N Frustrating  
N Simple  
N Endless  
Y Give sense of accomplishment

PAY

Y Income adequate for normal expenses  
Y Satisfying profit sharing  
N Barely live on income  
N Bad  
Y Income provides luxuries  
N Insecure  
N Less than I deserve  
Y Highly paid  
N Underpaid

PROMOTIONS

Y Good opportunity for advancement  
N Opportunity somewhat limited  
Y Promotion on ability  
N Dead-end job  
Y Good chance for promotion  
N Unfair promotion policy  
N Infrequent promotions  
Y Regular promotions  
Y Fairly good chance for promotion

Note: the "satisfied" response is indicated in the spaces for scoring.

SUPERVISION

Y Ask my advice  
N Hard to please  
N Impolite  
Y Praises good work  
Y Tactful  
Y Influential  
Y Up-to-date  
N Doesn't supervise  
 enough  
N Quick tempered  
Y Tells me where I stand  
N Annoying  
N Stubborn  
Y Knows job well  
N Bad  
Y Intelligent  
Y Leaves me on my own  
N Lazy  
Y Around when needed

CO-WORKERS

Y Stimulating  
N Boring  
N Slow  
Y Ambitious  
N Stupid  
Y Responsible  
Y Fast  
Y Intelligent  
N Easy to make enemies  
N Talk too much  
Y Smart  
N Lazy  
N Unpleasant  
N No privacy  
Y Active  
N Narrow interests  
Y Loyal  
N Hard to meet

AN ABSTRACT OF THE THESIS OF

ESTHER KING

For the MASTER OF NURSING

Date of Receiving this Degree: June 11, 1982

Title: JOB SATISFACTION AS RELATED TO NURSES' ATTITUDES REGARDING  
INCREASING EMPLOYEE SELF-CONTROL

Approved: \_\_\_\_\_

Marie Berger, Ph.D., Thesis Advisor

Hospital staff nurses have demonstrated their job dissatisfaction by either leaving nursing altogether or finding positions outside of the hospital. Frequently stated dissatisfactions with hospital nursing include a lack of control over patient care, lack of participation in policy decisions, and an unresponsive administration. Employee satisfaction has been shown to increase when there is superior-subordinate similarity and compatability.

This study looked at the similarity of attitudes regarding the increasing of employee self-control of staff nurses and their immediate supervisors, then correlated the discrepancy with the staff nurses' job satisfaction scores. It was hypothesized that the staff nurses' job satisfaction would decrease when they desired more self-control than their immediate supervisors favored. The independent variable was the staff nurses' and their co-ordinators' attitudes regarding increasing employee self-control. The dependent variable was the

## ABSTRACT OF THESIS CONTINUED

staff nurses' job satisfaction.

Each participant completed three tools; an information sheet for biographical information, the Increasing Employee Self-Control (IESC) tool for the independent variable, and the Job Descriptive Index (JDI) to measure the dependent variable. The sample consisted of eight coordinators representing ten clinical areas and a random selection of 82 staff nurses from the same areas. The setting was a 212-bed hospital. The investigator met individually or with small groups of nurses during their work shift. Each participant completed all three tools during this one meeting.

Each staff nurse's IESC score was compared with that of the supervisor and a discrepancy score derived. The discrepancy scores were then correlated with their JDI scores by using the Pearson Correlation. The mean discrepancy score was 6.5 with a standard deviation of 7.9. Of the five sections of the JDI; work, supervision, and co-workers, showed no correlation with the IESC discrepancy scores. There was a negative correlation with pay,  $-.33$  ( $p=.002$ ), and with promotion,  $-.28$  ( $p=.008$ ). Pay and promotion were also the areas of greatest dissatisfaction among both the staff nurses and their coordinators, with the staff nurses lower in all sections of the JDI, except work.

The hypothesis was supported in two areas of job satisfaction. A discrepancy of attitudes regarding increasing employee self-control does appear to have some influence upon the pay and promotion satisfaction of staff nurses. The correlation is weak, which may mean that other factors are influencing the job satisfaction of these staff

ABSTRACT OF THESIS CONTINUED

nurses. Other factors that may influence the pay and promotion satisfaction of nurses need to be investigated.