

Organisational climate as a cause of job dissatisfaction among nursing staff in selected hospitals within the Mpumalanga Province

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This article focuses on a study conducted with the purpose of exploring and describing the organisational climate as a cause of job dissatisfaction among nursing staff in selected hospitals within the Mpumalanga Province. The major objectives were to determine what organisational climate encompasses; ascertain which factors related to organisational climate can cause dissatisfaction among nurses; determine whether there is a difference in the way nursing management and the nursing staff perceive the existing organisational climate; and make recommendations for health service managers to improve the organisational climate in order to facilitate greater job satisfaction among the nursing staff.

A quantitative approach with an exploratory and descriptive design encompassing the survey method was used. A questionnaire was applied as the data collection instrument and was distributed to 140 respondents. The results indicated that the nursing management and the nursing staff were content with the intrinsic factors of their jobs, but were dissatisfied with the extrinsic factors of the organisational climate. The outcome of this research affirms that there are extrinsic factors within the organisational climate that affect the nursing management and the nursing staff adversely.

Recommendations were made to promote job satisfaction in selected public hospitals within the Mpumalanga province.

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Introduction and background

Organisational climate differs from one institution to another, as the difference is based on how employees perceive their specific work related interactions and environment. The organisational climate is largely determined by the management leadership style adopted in the organisation (Booyens, 1998:203).

Based on the researcher's observations and interactions with members of the nursing staff, the nursing staff in public hospitals appears to be dissatisfied with several aspects of their work environment. Indications are that this dissatisfaction is due to their work environment being characterised by factors such as unchallenging jobs, shortage of personnel where nurses are expected to perform non-nursing duties

in addition to their own heavy workload, lack of feedback about performance and work done well, insufficient material resources hindering employees to carry out their duties, poor communication where there is no two-way communication between managers and subordinates, and lack of staff development activities preventing personnel from acquiring knowledge and skills needed to perform their duties effectively.

Nurses normally attain job satisfaction if their jobs are challenging, when they are involved in decision-making on collegial bases with other health professionals and when managers recognise their achievements (Booyens, 1998:202). According to Booyens (1998:203) nurses achieve satisfaction if the work environment encourages the use of a variety of skills and talents to fulfil the patient's health care needs. Therefore environments that do not facilitate challenging jobs are prone to job dissatisfaction.

Employees are inherently obliged to carry out certain activities in order to achieve the organisation's goals. For employees to carry out these responsibilities, good working conditions should be evident in order to enable the employees to function to their full potential. Facilitation of job satisfaction amongst employees is a prerequisite for organisations to achieve their goals and objectives. When nurses' interests are harmonised with the organisational goals, they feel appreciated and are likely to have increased job satisfaction (Marriner-Tomey, 1996:73). On the other hand, a workplace characterised by poor relationships between co-workers and supervisors and unclear work policies, leave workers unfulfilled and dissatisfied in their work.

Organisational climate

Organisational climate is the employees' subjective impressions of the organisation in which they work (Booyens, 1998:202). According to Moorhead and Griffin (1998:516), organisational climate is seen as referring to current situations in an organisation, and the linkages among work groups and their performance. Activities taking place in the organisation and current situations can influence employees' performance and sense of well-being, depending on how they view their work environment,

for instance, the existence of unfair labour practices will have a negative impact on their performance. Employees can thus view their current situation in the organisation as positive or negative. Their views will depend on how they personally perceive their work environment.

Based on the above definition, the interactions of employees with each other can also reveal the climate of the organisation. If there are not good linkages between workgroups, the climate will be full of conflict, poor communication, and lack of commitment and understanding among groups. Organisational climate can have positive and negative effects on employees. A climate that does not promote communication upwards, downwards and laterally leads to a fear of expression of ideas and opinions.

Dimensions of organisational climate

Work organisations are characterised by a variety of dimensions which relate to the organisational climate. These dimensions embody criteria such as means emphasis, goal emphasis, reward orientation, task support and social support (Peterson, 1995:23).

- **Means emphasis** relates to the extent to which managers inform employees of methods and procedures they are expected to observe when performing their jobs.
- **Social support** relates to the extent to which managers take into consideration the personal welfare of their employees, for example, granting sick leave to employees who are not feeling well.
- **Goal emphasis** is concerned with the way managers make their employees aware of organisational outcomes and standards that they are expected to achieve.
- **Reward orientation** refers to the way rewards are conferred to employees. These awards are determined by how well the employee performs his/her job based on the standards set by the organisation.
- **Task support** is the dimension that emphasises that managers

should provide employees with the necessary equipment, services and resources in order to be able to perform their allocated duties.

Activities that promote organisational climate

A positive organisational climate is important for the smooth running of the organisation and promotes a high level of performance and satisfaction among employees. As employees may perceive the environment as being either positive or negative, the nurse manager thus has a duty to make sure that the workplace climate is always positive to prevent job dissatisfaction among employees, and should aim to create a sense of well-being amongst his/her personnel.

The following are actions that a nurse manager can utilise to create a positive organisational climate (Booyens, 1998:204):

- **The development of the organisation's vision, mission, goals and objectives.** The nurse manager can promote a positive climate by allowing full use of input from employees in the formulation of the organisation's vision, mission, goals and objectives.
- **Keep morale high by establishing trust and openness through frequent feedback.** Through open and free communication employees will feel comfortable in raising problems that they encounter in the work environment as well as problems relating to them as individuals. Prompt feedback helps employees to know their strengths and weaknesses so that they can improve their performance.
- **Provision of an open-door-policy.** Management's approachability and open communication cultivates good interpersonal relationships between managers and their subordinates.
- **Provision of a workable career ladder.** Managers should provide promotion opportunities for deserving employees or apply other

methods of acknowledgement.

McNeese-Smith (1999:59) reported in her study that nurses indicated that they become more productive when the atmosphere in the unit is pleasant, because they like coming to work where the employer/manager/supervisor is friendly and helps them to do their best. Some nurses indicated that they value a manager who makes sure that the staff is kept informed and updated and when they complain, helps them to solve their problems.

Problem statement

Public services in general are characterised by staff shortages thus leaving the remaining nurses overloaded with the amount of work that needs to be done. Factors within the organisational climate that appear to affect the effective functioning of organisations include poor communication with supervisors, poor planning, inadequate explanations of decisions affecting the job of employees, and an excessive workload. Owing to these circumstances, employees tend to absent themselves from the work environment which causes anxiety and stress.

The researcher also observed that dissatisfaction resulted from lack of feedback regarding personnel evaluation reports and unfair disciplinary practices leaving nurses dissatisfied and negative towards their job. It is evident that many factors exist within the organisational climate, which contribute to job dissatisfaction among the nursing staff.

Thus the following research questions arise:

- Is there a relationship between organisational climate and job dissatisfaction?
- Which factors experienced by nurses contribute to job dissatisfaction?
- Is there a difference in the way nursing managers and nursing staff experience their organisation's climate?

Assumptions

Assumptions are propositions or statements whose truth are either considered self-evident or have been satisfactorily established by earlier research (Polit & Hungler, 1991:88). The following assumption is relevant to this

research:

- The organisational climate, as perceived by employees, will have an effect on their well-being within the organisation.

Goal and objectives of the study

The purpose of the study was to identify elements within the organisational climate that may cause dissatisfaction among nursing staff and to provide guidelines for improving the situation.

The objectives were to:

- Determine what organisational climate encompasses
- Ascertain which factors related to organisational climate can cause dissatisfaction among nurses
- Determine whether there is a difference in the way nursing managers and their nursing staff perceive the existing organisational climate
- Determine if there is a difference in the way different hospitals perceive the organisational climate, and
- Make recommendations for health service managers to improve the organisational climate in order to facilitate greater job satisfaction among their subordinates.

Theoretical framework

Organisational climate differs from one institution to another, and since this study focuses on the nursing staffs' perception of their workplace environment, it was appropriate to use Herzberg's Two-Factor Theory as a framework. This theory encompasses two sets of factors namely satisfiers and dissatisfiers within the workplace which can have an effect on the employees' well-being and motivation.

Herzberg indicates that individual's relationship to their work is a basic one and that their attitudes to their work can determine their success or failure (Robbins, 1988:31). Herzberg argues that there are two separate dimensions that contribute to an employee's behaviour at work. The first dimension, hygiene factors, involves the presence or absence of job dissatisfiers relating to working

conditions, salary, company policies, interpersonal relationships, personal life, status and security. When these factors are present and satisfactory it ensures that employees are not dissatisfied it does however not cause job satisfaction. The second dimension deals with motivators. When motivators are absent, workers are neutral towards their work, but when motivators are present, they are satisfied and highly motivated. Motivation factors include recognition, responsibility, achievement, the work itself and opportunities for advancement.

Definitions of key concepts

The focus of the study was on the organisational climate as a cause of job dissatisfaction among nursing staff. The following concepts were relevant to the discussion.

Job satisfaction

Job satisfaction is a pleasurable or positive emotional state resulting from the appraisal of one's job, job experiences, or job environment (Luthans, 1998:126).

Job dissatisfaction

Dissatisfaction means lack of satisfaction (Concise Oxford Dictionary, 1999:44). Job dissatisfaction is caused by factors within the job or job environment, which affect the employee negatively. Job dissatisfaction results in dysfunctional outcomes such as increased turnover and absenteeism (Ivancevich & Matteson, 1996:662).

Management

Management is the process of managing people or an organisation (Concise Oxford Dictionary, 1999:864) in order to realise the organisational goals. It is also the process of getting work done through others (Gillies, 1994:1).

Motivation

Motivation is a concept used to describe both extrinsic conditions that stimulate certain behaviours and intrinsic responses that demonstrate behaviour in human beings (Swansburg, 1996:442). Motivation is a process of need identification, performing activities to meet the need, and need satisfaction.

Nursing staff

Nursing staff are persons who are registered or enrolled with the South African Nursing Council (SANC)

allowing them to work in health care services, providing nursing care to clients and patients. Nursing staff usually consist of different categories of nurses such as registered nurses, enrolled nurses, student nurses and auxiliary nurses.

Nurse manager

Nurse managers are professional nurses registered with the SANC and who may hold an additional nursing diploma or degree in health services management, they function at unit, departmental or executive level as health service managers.

Organisational climate

Organisational climate can be explained as the employees' subjective impression of the organisation in which they work (Booyens, 1998:202). Luthans (1998:550) describes organisational climate as an overall "feeling" conveyed by the physical layout, the way participants interact and the way members of the organisation conduct themselves in view of customers or other outsiders, it is thus a measure of the individual's perception or feeling about their organisation.

Satisfaction

According to the Collins English Dictionary (1995:1475) satisfaction means the pleasure that a person feels when he/she does something or gets something that he/she wants. Satisfaction in this study relates to the work climate, interpersonal relationships within the work environment, as well as the job itself.

Research methodology

The research methodology provides an overview of the methods and instruments applied in this study.

Research design

A quantitative research approach with an exploratory and descriptive design was applied utilising a self-developed questionnaire to acquire information about the organisational climate as a cause of job dissatisfaction among nursing staff.

Population

According to Brink (1996:132) a population is the entire group of persons that is of interest to the researcher, and which meets the criteria for inclusion in the study. The population consisted of professional nurses in charge of wards/

units up to top management, and auxiliary nurses up to professional nurses who were working in public hospitals with more than 200 beds in the Mpumalanga Province.

Sampling approach

A probability sampling approach was utilised for this study. According to Burns and Grove (1997:791) probability sampling refers to random sampling techniques in which each member in the population should have a greater than zero opportunity to be selected for the sample. Six hospitals were randomly selected from two districts namely, Ehlanzeni district, and Eastvaal district in Mpumalanga who both have five hospitals with 200 or more beds. The names of all the hospitals in each of these two districts, which complied with the selection criteria, were placed in a container and three were randomly drawn. Since there are only three hospitals in the Enkangala district with 200 beds and more, all three these hospitals were included. One hospital did not respond to the questionnaire, the remaining eight hospitals were labelled by means of alphabetical letters (A to H) to ensure confidentiality.

Sampling method

The sampling method chosen for this study was the stratified random sampling method as two groups of respondents were selected. Stratified random sampling means that the population is divided into subgroups or strata according to some variables of importance to the study, so that each element of the population belongs to one stratum (Brink, 1996:138). This resulted in a 10 percent sample of the nurse management population forming respondent Group A, and a 50 percent sample of the nurse population forming respondent Group B. Respondents were selected by means of the duty list, selecting every second nurse on duty at a particular time to participate, thus acquiring 50 respondents for Group A and 90 for Group B.

Data collection approach

The researcher used the same structured data collection instrument to collect data from Group A (nursing management) and Group B (nursing staff) respondents. The questionnaire was divided into three sections: Section A collected the personal information, Section B contained questions on organisational

climate while Section C consisted of open-ended questions on organisational climate.

Data analysis

According to Brink (1996:178) data analysis entails categorising, ordering, manipulating and summarising the data and describing them in meaningful terms. As every second nurse was selected from the duty roster on a specific day all those selected participated in the study giving a total of 140 respondents. Descriptive statistics were used to describe and summarise the data by converting and condensing data into an organised, visual way, so that it was more readily understandable for the reader. The t-test was used to determine the differences between the means of Group A and Group B respondents on specific items (Treece & Treece, 1986:437). The different views in the data generated by the open-ended questions were categorised and applied to the seven identified organisational climate factors in the discussion of the results.

Pilot study and pre-testing of the instrument

A pilot study is a small-scale version or trail run, done before the main study on a limited number of subjects from the same population as that intended for the eventual project (Brink, 1996:174). For pre-testing, the questionnaire was given to supervisors, senior colleagues and a statistician, and thereafter a pilot study was conducted. A pilot study was carried out at Rob Ferreira Hospital where provisional questionnaires were distributed to five nurse managers and five nursing staff members, (representing the three different categories of nurses in this selected group), to determine the feasibility of the proposed study and to detect flaws in the data collecting instrument. The Rob Ferreira Hospital was not used in the main study.

No corrections or recommendations emanated from the pilot study, and the questions were found to be clear.

Reliability and validity of the research instrument

Data collected from participants during the pilot study was scrutinised to make sure the instrument measures the variable it was intended to measure.

- **Validity**

Validity refers to the degree to which an

instrument measures what it is supposed to measure (Polit & Hungler 1991:374). Content validity of an instrument is the degree to which a test appears to measure a concept by a logical analysis of items, and is supported by the literature review. Face validity involves an analysis of whether the instrument appears to be on a valid scale (Treece & Treece, 1986:265). Experts who reviewed the objectives of the study and questionnaire items were asked to decide on the appropriateness of the test items in view of face and content validity. The following persons took part in the assessment of the questionnaire for validity purposes: a statistician, and the researcher's supervisor and co-supervisor.

• Reliability

According to Burns and Grove (1997:229) a measure is reliable if it gives the same results each time a factor is measured under the same conditions. Reliability was measured by doing a correlation coefficient or Cronbach's Alpha. The correlation coefficient for the seven organisational climate factors varied between 0.6 and 0.8, with six factors scoring above 0.7, which is indicative of a fairly high measure of internal consistency in the data collection instrument.

Ethical principles

When people are used as participants, great care must be exercised in ensuring that the rights of those humans are protected (Polit & Hungler, 1991:29). To ensure that rights of participants were protected, permission to conduct the study was obtained from the Ethics Research Committee of the Department of Health, in the Mpumalanga Province. The researcher considered the following ethical principles during this study to protect human rights: the principles of respect, informed consent, anonymity, and confidentiality (Brink, 1996:39).

Respect

Respect and courteous treatment were applied throughout the research process.

Informed consent

According to Polit and Hungler (1991:36) informed consent means that participants have adequate information regarding the research,

Table 1 : Scale explaining the measures for interpretation of means in relation to respondents' satisfaction versus dissatisfaction

Very dissatisfied	Dissatisfied	Satisfied	Very satisfied
2.27	2.77	3.27	3.77

and are able to comprehend the information. They have the power of free choice, enabling them to voluntarily consent to participate in the research or decline participation. When meeting with participants prior to the distribution of the questionnaire, informed consent was accomplished.

Anonymity and confidentiality

Hospitals were not identified in the research report and as the respondents were not required to put their names on the questionnaires the latter were coded to guarantee anonymity.

Results

The interpretation of results was based on the research findings reflected in different tables. The mean scores were used to interpret results. The researcher interpreted the perceptions of nursing management and nursing staff from selected hospitals within the Mpumalanga Province by making use of benchmark figures illustrated in Table 1.

Organisational climate factors

Seven main organisational climate factors

were identified from the literature and were assessed by means of several criteria contained in the questionnaire. These factors will form the core for the interpretation of the data and are listed as

- Management
- Physical environment
- Career development
- Performance management
- Motivation
- Empowerment
- Organisational alignment

Both the nurse managers and the nursing staff groups were dissatisfied with the following organisational climate factors: **management, physical environment, career development and performance management**. Except for the management factor where the groups scored almost equally, it is evident that the nurse managers were more dissatisfied with the physical environment, career development and performance management factors.

With reference to the **physical environment** it is evident that nurse

Table 2 : Comparison between the mean scores of nursing management (n=50) and nursing staff (n=90) related to the seven organisational climate factors (n=140)

Organisational climate factors	Nursing Management (n = 50)		Nursing Staff (n = 90)	
	Mean	Std Deviation	Mean	Std Deviation
Management	3.14	0.71	3.13	0.74
Physical Environment	2.91	0.63	3.13	0.80
Career Development	3.05	0.81	3.14	0.74
Performance Management	3.00	0.82	3.24	0.82
Motivation	3.57	0.68	3.66	0.76
Empowerment	3.43	0.71	3.28	0.78
Organisational alignment	3.40	0.66	3.53	0.70

Table 3 : Descriptive information on the seven organisational climate factors according to the combined views of nurse managers and nursing staff differentiated by the eight hospitals (A-H)

Factor	A (n = 21)		B (n = 20)		C (n = 22)		D (n = 17)	
	Mean	Std Deviation						
Management	3.13	0.85	2.86	0.62	2.95	0.60	3.20	0.50
Physical environment	2.69	0.80	2.74	0.58	3.24	0.35	3.12	0.74
Career Development	2.86	0.96	3.05	0.71	2.82	0.71	3.25	0.57
Performance Management	3.07	0.98	3.05	0.71	2.97	0.70	3.22	0.78
Motivation	3.66	0.73	3.42	0.75	3.46	0.68	3.82	0.82
Empowerment	3.38	0.68	3.22	0.78	3.17	0.63	3.27	0.71
Organisational alignment	3.37	0.91	3.52	0.57	3.42	0.50	3.46	0.54

Factor	E (n = 20)		F (n = 15)		G (n = 9)		H (n = 16)	
	Mean	Std Deviation	Mean	Std Deviation	Mean	Std Deviation	Mean	Std Deviation
Management	3.25	0.57	3.63	0.63	2.50	1.08	3.38	0.71
Physical environment	3.18	0.58	3.59	0.86	2.41	1.12	3.28	0.60
Career Development	3.23	0.68	3.58	0.67	2.76	1.03	3.35	0.54
Performance Management	3.22	0.66	3.70	0.76	2.71	1.32	3.27	0.72
Motivation	3.69	0.66	3.83	0.63	3.12	1.12	3.92	0.40
Empowerment	3.53	0.57	3.64	0.59	2.93	1.46	3.40	0.78
Organisational alignment	3.52	0.62	3.84	0.62	2.84	1.21	3.64	0.42

managers are more dissatisfied than the nurses because they have to deal with the extreme shortages of personnel and material resources, which makes it difficult for them to ensure that organisational goals are met.

The reason for the dissatisfaction of both groups regarding **career development** is probably the limited opportunities for promotion and advancement. However, the nurse management group appears to be more dissatisfied which might be related to the fact that the managers at various levels are personally experiencing a ceiling, being unable to

move upward in the hierarchy. They also have to deal with the frustrations of the nursing staff who deserve advancement but cannot be promoted due to the unavailability of appropriate vacancies. **Performance management** is another factor where the management group showed greater dissatisfaction than the nursing staff, probably due to the unreasonableness and difficulties entailed in expecting staff to do the right thing without the necessary resources.

According to the benchmark mean of 3.27, which is congruent with job satisfaction, it is evident that both the

nursing management and nursing staff groups were satisfied with the aspects of motivation, empowerment and organisational alignment. The nursing staff was slightly more satisfied than the nursing managers with the motivation and organisational alignment factors.

Comparison of the hospitals' responses regarding the seven organisational climate factors

In comparing the views of nursing staff from the different hospitals, the combined views of nurse managers and nursing staff was used to interpret the data as is

illustrated in Table 3.

- **Management factor**

According to table 3, six hospitals (A, B, C, D, E and G) had a mean lower than 3.27, indicating that they were dissatisfied with the management factor in their organisations. This could be indicative of the fact that nurse managers do not involve the nursing staff in decision-making, they are not given challenging jobs and there is a lack of openness and trust between nurse managers and the nursing staff. Nurses ought to be involved in decision-making and to be given challenging jobs to facilitate growth and development (Booyens, 1998:203). Hospitals F and H acquired a mean greater than 3.27 which illustrates their satisfaction with the management factor in their hospitals. This could be indicative of the fact that nurse managers in these hospitals were implementing participative management styles resulting in feelings of responsibility towards the organisational goals and objectives and created better working relationships (Booyens, 1998:135). As was noted before, the nurse managers and nursing staff groups shared similar views about the management factor in their organisations, both groups appear to be dissatisfied in this regard.

- **Physical environment factor**

Six hospitals (A, B, C, D, E and G) were dissatisfied with the physical environment of their organisations. Their dissatisfaction may be attributed to the shortages of human and material resources, which make it difficult for them to carry out their duties as expected. It was previously noted that both the nurse managers and nursing staff groups experienced dissatisfaction with regards to the physical environment factor. Only two hospitals were satisfied with the physical environment factor of their organisations namely hospitals F and H, while hospital G appeared to be more satisfied with a mean score of 3.59.

- **Career development factor**

The nursing staff of two hospitals (F and H) were satisfied with the career development factor as they obtained a mean score above 3.27. Their satisfaction may be ascribed to the fact that they have suitable career ladders and job enrichment programmes that meet their staffs' personal and professional developmental needs. Hospitals (A, B, C, D, E and G) were dissatisfied with the

career development factor. Their dissatisfaction might be due to shortages of personnel, and a long waiting list restricting them from being given opportunities for career development. Both groups of respondents were dissatisfied with career development as they obtained a mean score below 3.27.

- **Performance management**

Six hospitals (A, B, C, D, E, and G) were dissatisfied with the performance management factor of their organisations. This could be due to a lack of feedback on their performance, or even a lack of criteria by which to assess nurses' performance. It is essential for personnel to be aware of the criteria used to evaluate their performance (Marriner-Tomey, 1996:463). Table 2 indicates that both the respondent groups were dissatisfied about performance management in their organisations. Two hospitals, F and H were satisfied with the performance management factor due to open and effective communication mechanisms and practices between nursing management and nursing staff.

- **Motivation factor**

Seven hospitals (A, B, C, D, E, F, and H) acquired a mean score greater than 3.27, on the motivation factor, of which hospital H obtained the highest score. This could indicate that management recognises the quality of work done by the nursing staff, they give them challenging jobs and allow them to exercise responsibility in their organisations. Only hospital G's personnel were dissatisfied with the motivation factor. Both the nurse managers and nursing staff appear to be satisfied with the motivation factor of their hospitals. Marriner-Tomey (1996:342) indicates that sources of satisfaction include opportunities for increased responsibility and recognition.

- **Empowerment**

Of the eight hospitals, five hospitals (A, D, E, F and H) had a mean score greater than 3.27, thus indicating that they were satisfied with the empowerment factor of their organisations. This could indicate that nurses were involved in decision-making in their organisations and were allowed to exercise autonomy in their units. Three hospitals (B, C and G) were dissatisfied with their empowerment factor which could be attributed to a lack of opportunities and involvement in developing new skills. When decision

authority is concentrated in the hands of few people, employees feel that they are relatively powerless and thus feel frustrated (Greenberg & Baron, 1993:169). With reference to Table 2, the nursing management and nursing staff groups were both satisfied with the empowerment factor, the nurse managers being more satisfied than the nursing staff group.

- **Organisational alignment**

The nursing staff of seven hospitals (A, B, C, D, E, F, and H) were satisfied with organisational alignment factor of their hospitals. This indicated that nurses were aware of the mission, goals and objectives of their organisations, and they knew what was expected from them as employees of the organisation. As indicated in Table 2, both the nursing management and nursing staff groups were satisfied with the organisational alignment factor in their organisations. Only hospital G's nurses were dissatisfied with this factor.

The nursing staff of hospital G showed dissatisfaction with all seven factors related to the organisational climate. Whereas, hospitals F and H were consistently more satisfied with all the seven factors of the organisational climate.

Recommendations

The recommendations are made in line with the seven organisational climate factors.

- **Management factor**

The management factor includes aspects such as supervision, leadership and communication that facilitate achievement of the organisation's goals and objectives.

- **Supervision**

The management team should design an in-service education programme in order to update nurses who are in supervisory positions with regard to technical, interpersonal and conceptual skills which are necessary in carrying out supervisory and managerial tasks.

- **Leadership**

The management team should conduct workshops or seminars to update managers about different leadership styles so that they can select the most appropriate leadership style in accordance with a particular situation and

the maturity level of their subordinates allowing autonomy where it is deserved.

Communication

Managers should facilitate communication in their institutions by creating an open-door policy to allow nurses to access their offices whenever they need help, or when they want to give their inputs. Monthly meetings to promote communication between supervisors and the nursing staff could be beneficial for both parties, and circulars can be used as a means of written communication to ensure that all nurses have received the same information.

Physical environment factor

The physical environment in hospitals is important for both nursing personnel and patients. An important factor in the physical environment is resources, consisting of human and material resources.

Shortage of personnel

Managers should ensure that existing benefits for employees are fairly and justly allocated to deserving employees to ensure a sense of fair treatment by all concerned. Employees should be allocated according to their skills and preferences to prevent nurses from leaving the organisation because they are allocated to jobs that do not fall within their field of interest and specialisation. A survey should be conducted in order to identify the causes that lead to staff shortages and then motivate for the filling of vacant posts or create more posts where applicable.

Shortage of material resources

The management team should conduct a survey within their hospitals in order to determine the availability and adequacy of resources so that specific remedial actions can be negotiated with the authorities. Strict control over existing material resources should be taken to prevent unnecessary wastage and loss.

Career development factor

The management team should design a year plan in view of the proposed career development for the different categories of nursing staff to ensure that all nurses are given a fair opportunity for growth and development. Specific criteria should be consistently and fairly applied in selecting employees who are to be given opportunities for training and

development.

Managers should not practice favouritism when employees are selected for career development. A selection committee can be established with representatives from the different groups of nursing staff e.g. managers, different categories of nursing personnel and union representatives to assess the applications for training and development. Policies and opportunities regarding career development should be posted and communicated to all employees through circulars and meetings to ensure that all the employees are equally well informed.

Performance management factor

The management team should conduct seminars and workshops to update all employees about the aspects related to performance management such as changes in policies and assessment criteria in order to prevent misunderstanding. The necessary standards and criteria should be available for key performance areas to be assessed. And in-service training can be provided to all groups of nursing staff regarding performance management policies, processes and procedures.

Motivation factor

The management team should show recognition and appreciation for work well done by acknowledgement and provision of incentives to facilitate job satisfaction e.g. announcement in meetings, personal letters or a rotating trophy. Marriner-Tomey (1996:402) states that positive reinforcement increases the probability of a recurrence of the desired behaviour.

Empowerment factor

The management team should design a system that will encourage employees to put forward their inputs regarding empowering possibilities by creating suggestion boxes that can be placed in prominent areas. Managers should acknowledge good ideas put forward by subordinates by giving credit privately and publicly, and opportunities for growth and development can be created by giving more challenging assignments and responsibility.

Organisational alignment factor

The management team should involve employees when developing or revising

the goals and objectives of the institution through workshops, so that employees' suggestions can form part of the development process, thus enabling a sense of belonging and successful implementation. Conduct workshops on cultivating and emphasising ethical standards, loyalty and value clarification.

Limitations of the study

It appears as if the interpretation of questions was a problem for some respondents, especially the nursing auxiliary category even though a nursing auxiliary was included in the pilot study.

Conclusion

In this research, the organisational climate as a cause of job dissatisfaction in selected hospitals within the three districts of Mpumalanga Province was studied. Various positive and negative aspects were identified and suggestions were made in relation to the seven factors that were identified as part of the organisational climate in public hospitals.

The results of the study indicate that there is a relationship between organisational climate and job dissatisfaction. It is hoped that the findings and the recommendations of this research will aid the management teams in revising aspects and issues to positively influence the organisational climate within their hospitals.

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