JOB SATISFACTION IN RELATION TO COMMUNICATION AMONG NURSES

The Science of Safe Communication in Healthcare

Peter Vermeir
Health communication?
Impact of health communication

- Quality of care
- Continuity
- Diagnostics
- Treatment
- Compliance
- Patient safety
- Referral follow-up

Online access to medical record leads to higher quality doctor’s visit

Surgeon and anesthesist receive warning for miscommunication

Women dies during surgery because of spelling error
Efficiency of resource utilisation

Effectiveness of core operations

Quality of work life

Service quality

Physician time

Nurse time

Length of stay

Medical errors

Stress

Job satisfaction

Patient experience

Conceptual model of communication outcomes in a hospital

Communication satisfaction: effects

- Job satisfaction*
  - 22% of the Belgian nurses are dissatisfied about their job
  - Comparable to rates in Sweden, Norway and Switzerland
  - Less than rates in Spain (38%), UK (39%) and Greece (56%)

- Turnover intention
  - Consciously and willingly leaving the work organization

- Burnout
  - Reaction to chronic emotional and interpersonal stress experienced in the job**


Results from literature
Interprofessional communication in healthcare

- Social networks & teams

- Leadership with strong authority tends to decrease communication within a team

- Leadership able to handle hierarchy appropriately by creating a trustworthy environment ensures faster communication and more participation

Deficits in communication and influence on patient safety

- Complexity of medical care & limitations of human action reinforce the importance of standardized communication and a secure environment

- Medical errors are predominantly the consequence of a system failure (82 %)

Communication & communication satisfaction

- Contributor to job satisfaction & job performance

- Downs & Hazen:
  - Communication climate
  - Supervisor communication
  - Media quality
  - Horizontal communication
  - Organizational integration
  - Personal feedback
  - Organizational perspective
  - Subordinate communication

Job satisfaction, intention to leave and burnout

- Intrinsic factors
  - Autonomy, good interpersonal relationships, appreciation
  - Communication with supervisor and peers
  - Job dissatisfaction ~ intention to leave
  - Job dissatisfaction ~ burnout
Results from the study in Flanders
Methods

- Nurses from 3 hospitals
- Questionnaire
  - Socio-demographics
  - Job satisfaction VAS
  - Communication Satisfaction Questionnaire
  - Questionnaire on the Experience and Evaluation of Work
  - Maslach Burnout Inventory

### Results

Response rate 1452/3371 (43.2%)

<table>
<thead>
<tr>
<th>Hospital</th>
<th>n</th>
<th>%</th>
<th>Department</th>
<th>n</th>
<th>%</th>
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<tbody>
<tr>
<td>Ghent University hospital (1062 beds)</td>
<td>891</td>
<td>61.4</td>
<td>Surgery</td>
<td>247</td>
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<tr>
<td>AZ Groeninge, Courtrai (1065 beds)</td>
<td>160</td>
<td>11.0</td>
<td>Internal medicine/geriatics</td>
<td>368</td>
<td>25.9</td>
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<td>Sint Vincentius, Deinze (170 beds)</td>
<td>401</td>
<td>27.6</td>
<td>Mixed</td>
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<tr>
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<td>Male</td>
<td>186</td>
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<td>Female</td>
<td>1249</td>
<td>87.0</td>
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<table>
<thead>
<tr>
<th>Function</th>
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<tr>
<td>Ward nurse</td>
<td>1153</td>
<td>72.8</td>
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<tr>
<td>Staff function nurse</td>
<td>5</td>
<td>0.3</td>
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<tr>
<td>Specialist nurse</td>
<td>47</td>
<td>3.2</td>
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<tr>
<td>Social nurse</td>
<td>10</td>
<td>0.7</td>
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<tr>
<td>Psychiatric nurse</td>
<td>11</td>
<td>0.8</td>
</tr>
<tr>
<td>Midwife</td>
<td>99</td>
<td>6.8</td>
</tr>
<tr>
<td>Head nurse</td>
<td>94</td>
<td>6.6</td>
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<tr>
<td>Care manager/head of nursing</td>
<td>5</td>
<td>0.3</td>
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<tr>
<td>Other</td>
<td>24</td>
<td>1.7</td>
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<th>Educational level</th>
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<tr>
<td>Certified nurse</td>
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<tr>
<td>Bachelor degree</td>
<td>615</td>
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<td>Master degree</td>
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<td>Other</td>
<td>38</td>
<td>2.7</td>
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<tr>
<th>Years of experience</th>
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<tr>
<td>50</td>
<td>130</td>
<td>9.9</td>
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<tr>
<td>60</td>
<td>26</td>
<td>1.9</td>
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<td>70</td>
<td>21</td>
<td>1.4</td>
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<tr>
<td>75</td>
<td>135</td>
<td>9.4</td>
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<tr>
<td>80</td>
<td>320</td>
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<tr>
<td>90</td>
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<tr>
<td>100</td>
<td>767</td>
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<tr>
<td>Other</td>
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Communication Satisfaction Questionnaire

Job and communication satisfaction

- Job satisfaction
  - 7.5/10

- Communication satisfaction

<table>
<thead>
<tr>
<th>Items</th>
<th>Satisfied</th>
<th>Indifferent</th>
<th>Dissatisfied</th>
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<tbody>
<tr>
<td>General organizational perspective</td>
<td>38.8</td>
<td>31.3</td>
<td>29.9</td>
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<tr>
<td>Organizational integration</td>
<td>68.5</td>
<td>19.5</td>
<td>12.0</td>
</tr>
<tr>
<td>Personal feedback</td>
<td>60.6</td>
<td>20.0</td>
<td>19.3</td>
</tr>
<tr>
<td>Relation with supervisor</td>
<td>73.5</td>
<td>13.9</td>
<td>12.5</td>
</tr>
<tr>
<td>Horizontal Informational Communication</td>
<td>58.8</td>
<td>25.4</td>
<td>15.7</td>
</tr>
<tr>
<td>Media Quality</td>
<td>53.2</td>
<td>25.6</td>
<td>21.1</td>
</tr>
<tr>
<td>Communication climate</td>
<td>50.3</td>
<td>26.1</td>
<td>23.5</td>
</tr>
<tr>
<td>Relation with employees</td>
<td>57.9</td>
<td>25.6</td>
<td>16.5</td>
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Turnover intention & burnout

**Turnover intention**

- 59.9% low (811/1355)
- 33.3% moderate (451/1355)
- 6.9% high (93/1355)

**Burnout**

- 41/1454 (2.9%) nurses have Maslach Burnout Inventory scores indicative for burnout
- 21.9% have low scores for ‘Personal accomplishment’
- Emotional exhaustion (12.4%) and cynism (10.7%)
Associations

- All dimensions of communication satisfaction ~ job satisfaction
- All dimensions of communication satisfaction ~ turnover intention (except Relation with employees)
- All dimensions of communication satisfaction ~ burnout (except Relation with employees)

<table>
<thead>
<tr>
<th></th>
<th>GOP</th>
<th>OI</th>
<th>PF</th>
<th>RSup</th>
<th>HIC</th>
<th>MQ</th>
<th>CC</th>
<th>REmp</th>
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<td>Correlations</td>
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<td>0.426</td>
<td>0.435</td>
<td>0.442</td>
<td>0.456</td>
<td>0.396</td>
<td>0.454</td>
<td>0.210</td>
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Recommendations
Educational factors

- Implement simulation training of interprofessional teams as a first step in establishing improved communication skills within practicing clinical teams.

- Pay particular attention to situations that are especially vulnerable for or prone to communication breakdown, such as handoffs and transfers in care. These can be dealt with through trigger- or check-list structured protocolized approaches.

- Embed standardized tools and behaviors into the care process, such as the SBAR method (situation, background, assessment and recommendation), in order to improve safety.
Psychological factors

- Underline the importance of the psychosocial work environment and the relationship between burnout, role conflict, job satisfaction and psychosomatic health.

- Acknowledge that cultural change is at the heart of this quest: from the culture of the individual expert physician to a truly collaborative team environment. The complexity of the care system necessitates a change towards a culture of open communication and collaboration and is essential for safeguarding clinical outcomes.

- Improve work motivation by creating proper work environments that enhance autonomy and enable nurses to work as specialists. Work motivation can be increased by showing appreciation for work performed well.
Organizational factors (1)

- Acknowledge that improvements in this field should be a priority. The implementation of interventions which focus on the intrinsic values of nurses’ can help to prevent job burnout, increase job satisfaction and reduce turnover. Information on the psychosocial work climate is necessary to provide a basis for such interventions.

- Create and maintain a work environment in which participative management thrives. This can be achieved by increasing empowerment, while reaffirming and strengthening the role as well as the skills of nurse leaders.
Organizational factors (2)

- Aim to identify the factors involved within the particular organization and explore their relation with job satisfaction in order to support the development of management interventions.

- It is imperative that hospital management acknowledge the relevance of enhancing job and communication satisfaction to clinical practice and organizational integrity. Management must provide positive leadership and understand the local issues that affect nurses in order to enhance nurse retention, reduce intention to leave and avoid nurse shortage.
COMMUNICATION IN HEALTHCARE
Thanks to all my colleagues

dr. Sophie Degroote
Prof. dr. Dominique Vandijck
Prof. dr. Rik Verhaeghe
Prof. Dr. Renaat Peleman
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