

## Relationship between quality of work life and work motivation among operating room nurses in Mansoura University Hospitals

Wafaa Fathi Sleem<sup>(1)</sup> & Abeer Mohamed Zakaria<sup>(2)</sup>

<sup>(1,2)</sup> Assist. Prof. of Nursing Administration Department- Faculty of Nursing- Mansoura University

### Abstract:

**Background:** Quality of work life is the condition and characteristics of work that contribute to motivation, performance, and job satisfaction. **Aim of the study:** The aim of this study was to identify the relationship between quality of work life and work motivation among operating room nurses in Mansoura University Hospitals. **Subjects & methods: Research design:** A descriptive correlational design was utilized. **Setting:** Study was conducted in main Mansoura University Hospital at operating rooms. **Subjects:** All available nurses working in the previous mentioned setting were constituted as the study sample n=46. **Tools of data collection:** Data for the present study was collected through: Quality of work life questionnaire and the work extrinsic and intrinsic motivation scale. **Results:** The result revealed that a positive correlation was found between quality of work life among operating room nurses with their degree of work motivation. **Conclusion:** The findings of the study indicated that Job characteristics such as Autonomy in decision making, team work and psychological environment were most important for their Quality of work life. Majority of Nurses working in operating room had highest motivation with regard to integrated regulation. Quality of work life and degree of motivation were significant with their age group. Their salaries, incentives and recognitions influence their quality of work life. **Recommendations:** From the finding, it can be recommended that quality of work life is such a critical concept that might be improved to motivate nurses. However, the hospitals can focus on their employee's welfare by providing them a better and attractive compensation policy, optimum work load and a superior work environment.

**Keywords:** Quality of work life; Operating room nurses; Work motivation; Self-Determination Theory (SDT).

### Introduction:

The holistic and eco-systemic conception views the world as an open, living system and emphasizes the interaction and interdependence of all phenomena, which implies that the individual organism always interacts with its physical and social environment. In a study of quality of work life, one could adopt an eco-systemic approach and try to list all possible variables, catalysts and influences with which someone could interact and which could contribute to his/her general state of being.<sup>(1)</sup>

Nursing profession is high demand career. Nurses usually are exposed to situations that affect their quality of working life (QOWL). An element of importance to the health care system is the quality of work life of nurses. Links have been made between patient outcomes, health care costs, and the quality of work life of nurses.<sup>(2)</sup>

The quality of nursing work life is the degree to which registered nurses

are able to satisfy important personal needs through their experiences in their work organization while achieving the organizations goals.<sup>(3)</sup>

Numerous factors influence the quality of work life of nurses are, lack of work life balance, rotating schedules were found to negatively affect their lives so they were unable to balance work and family need.<sup>(4)</sup>

Additionally heavy work load, pay and financial benefits, the work context, including management practices, relationship with coworkers, professional development opportunities and the work environment, teamwork, locus of control, organizational culture change, multiskilled workers, organizational structure, leadership, collaborative decision-making, also influence the work life of nurses and organizational learning.<sup>(5)</sup>

A healthy healthcare workplace is a work setting that takes a strategic

and comprehensive approach in providing the physical, cultural, psychosocial and work/job design conditions, that maximizes the health and well-being of health providers, quality of patient/client outcomes and organizational and system performance. Health human resources should be viewed and treated as core assets of the health system. Quality of worklife is also important for the delivery of effective, efficient and safe patient/client care.<sup>(6)</sup>

The workforce in the health sector has specific features that cannot be ignored and motivation can play an integral role in many of the compelling challenges facing healthcare today.<sup>(7)</sup> A motivated workforce represents both a competitive advantage and a critical strategic asset in any work environment.<sup>(8)</sup>

Self-Determination Theory (SDT) focuses on the “nature” of motivation, that is, the “why of behavior.” The underlying assumption is that “human beings are active, growth-oriented organisms who are naturally inclined to- ward integration of their psychic elements into a unified sense of self and integration of themselves into larger social structures”.<sup>(9)</sup>

Central to SDT is the distinction between autonomous motivation and controlled motivation .Autonomy involves acting with a sense of volition and having the experience of choice. (e.g., I work because it is fun). In contrast, being controlled involves acting with a sense of pressure, a sense of having to engage in the actions. The use of extrinsic rewards in the early experiments was found to induce controlled motivation.<sup>(10)</sup> Amotivation is in which individuals either lack the intention to act or act passively.<sup>(11)</sup>

The external regulation, namely, doing an activity only to obtain a reward and introjected regulation, namely the regulation of behavior through self-worth contingencies (e.g., self-esteem, guilt). There is identified regulation, which refers to doing an activity because one identifies with its

value or meaning, and accepts it as one’s own. Finally, there is integrated regulation, which refers to identifying with the value of an activity to the point that it becomes part of the individual’s sense of self .SDT proposes that autonomous motivation and intrinsic goals are better predictors of effective performance.<sup>(12)</sup>

Nurses' working environment can be improved to meet increasing health care demands and with the ultimate goal of providing high-quality patient care. In the study the most important predictors of better nurse and patient outcomes are managerial support at the unit level, adequate staffing and good nurse-doctor working relationships. It is suggested that job motivation, independent nursing practice, high educational background and supportive working environment of nurses may contribute to their quality of working life and the quality of care they give their patients.<sup>(13)</sup>

Work motivation is an enigmatic topic in work and organizational science.<sup>(14)</sup> Given today’s economy, a motivated workforce represents both a competitive advantage and a critical strategic asset in any work environment.<sup>(8)</sup>

Work motivation is defined as “a set of energetic forces that originates both within as well as beyond an individual’s being, to initiate work-related behavior, and to determine its form, direction, intensity and duration”. Motivation is manifested by attention, effort, and persistence.<sup>(15)</sup> The ability to measure factors that energize, channel, and sustain work behavior over time is essential for capturing employee motivation and for developing interventions aimed at enhancing motivation, and in turn, job satisfaction and performance.<sup>(16)</sup> To date, most research on the influence of individual factors in work motivation has investigated differences that can be captured through self-report measures of personality, affect, interests, and values.<sup>(14)</sup>

Within the organizational psychology literature, there are four

major measurement systems used to assess work motivation. These include projective, objective, implicit/explicit, and subjective measures. The hallmark of a projective assessment is presenting the individual with an ambiguous stimulus and eliciting a fairly unstructured response. The workforce in the health sector has specific features that cannot be ignored and motivation can play an integral role in many of the compelling challenges facing healthcare today.<sup>(7)</sup>

### **Significance of the Study:**

Changes in organizational structure, job requirements and work redesign are creating turmoil in the workplace. Standards of practice and care delivery are concern shared by health care providers. The effect of these changes on the quality of work life and work motivation of operating room nurses is of interest and concern. Happy and productive workers contribute to a pleasant and efficient work environment.<sup>(2)</sup> This study is significant as it will provide insights into the important factors influencing the quality of work life and work motivation of operating room nurses. Since staff retention is related to job satisfaction, it follows that nurses who are satisfied with their work environment will be more apt to stay in their employing facility. Retaining highly qualified professional nurses in an area as critical as the operating room will contribute in a positive way to patient care outcomes.

### **Aim of the study:**

To identify the relationship between quality of work life and work motivation among operating room nurses in Mansoura University Hospitals.

### **Research questions:**

1. What is the quality of work life (QWL) among operating rooms nurses?
2. What is the degree of work motivation present among operating rooms nurses?

3. Is there any relation between quality of work life and work motivation among operating rooms nurses?

### **Operational Definitions:**

**Quality of work life:** is the degree to which registered nurses are able to satisfy important personal needs through their experiences in their work organization while achieving the organizations goals.

**Nurses:** All Nurses working in Operating room at Mansoura University Hospital.

**Work Motivation:** a set of energetic forces that originates both within as well as beyond an individual's being, to initiate work-related behavior, and to determine its form, direction, intensity and duration. Include both intrinsic and extrinsic motivation.

### **Subjects and methods:**

#### **Research design:**

A descriptive correlational design was used in the present study.

#### **Study Setting:**

The study was conducted at operating rooms at main Mansoura University Hospital, which provides care for Delta region and is affiliated to teaching University Hospital. The main Mansoura University Hospital has the bed capacity of 1860.

#### **Study Subjects:**

The subjects of the study were Operating room nurses working at Mansoura University Hospital. Convenient sampling technique was used and the sample size was 46. This sample after excluded those with long leaves, worked less than one year in her position, or those who refused to participate in the study.

#### **Tools of data collection:**

Data collected through using two tools:

- **Tool (1): Quality of work life (QWL) questionnaire:** It was used to assess the QWL at work place. The development of the tool was guided by the National Institute for occupational safety and health

which Includes 36 items categorized into 6 domains, namely as follows: Psychological work environment included 6 items, Job characteristics included 6 items, Salaries and incentives included 6 items, Team work included 6 items, supervisor leadership style included 6 items and participation in decision making included 6 items.<sup>(17)</sup>

- **Tool (2): The work extrinsic and intrinsic motivation scale:** This scale aimed to measure work motivation which includes 18 items categorized into 6 domains namely as follows: Intrinsic motivation (3 items), Integrated regulation (3 items), Identified regulation (3 items), Introjected regulation (3 items), external regulation (3 items) and Amotivation (3 items)<sup>(11)</sup>

#### **Scoring System:**

**Tool (1): QWL Questionnaire was the Likart scale:** The responses for the items were on 5 point ranging from strongly agree to strongly disagree. These were scored respectively from 5 to 1.

**Tool (2): The work extrinsic and intrinsic motivation scale:** The Participants were asked to indicate their level of agreement with each of the 18 items, using a Likert-type scale ranging from 1 (*does not correspond at all*) to 7 (*corresponds exactly*). According to scale n.1, 2 consider low degree of motivation. 3,4,5 scale consider moderate degree of motivation. 6, 7 consider high degree of motivation.

#### **Validity and Reliability:**

The tools reviewed for its content and face validity by five jury group from academic staff at Nursing administration department at faculty of nursing- Mansoura University. Reliability of these tools were assessed by Cronbach's alpha test in SPSS v16

#### **Administrative and ethical Considerations:**

A permission to conduct the study was obtained from the Hospital administrators under study as well as Nursing administrators. The aim of the

study was explained to all nurses and verbal consent was obtained.

#### **Pilot Study:**

Pilot study was conducted on 5 staff nurses, after the development of the tools and before starting data collection to determine the applicability and clarity of the designed tool. It helped in identifying potential obstacles and problems that may encountered during period of data collection. It also served to estimate needed time to fill the questionnaire. The questionnaire format was completed within 20 to 30 minutes by every staff nurse. Nurses included in pilot study were excluded from the main study sample. Data obtained from pilot study were analyzed.

#### **Field work:**

The data was collected from 46 samples after obtaining formal permission from administrative people and participants. The questionnaire was used and took about 30 minutes to complete. The study time taken about three months starting from June 2014.

#### **Statistical analysis:**

Data was organized, computerized, tabulated, and analyzed using quantitative and qualitative analysis. Factor analysis for measuring the frequency distributions and focused on the central tendency (mean) and dispersion (standard deviation). Correlation between variables was evaluated using Pearson's correlation coefficient. The threshold of significance was fixed at the 5% level for interpretation of results of tests of significance.

#### **Results:**

**Table (1):** Describes personal data of studied nurses, from the table the highest percent of study nurses (47.8%) were aged from 30-40 years with Mean score of (31.69 ±8.14). While 39.1% Nurses had 4 to 10 years of experience whereas only 23.9% had 20 to 24 years of experience .Majority of them (73.9%) were technical nurses.

**Table (2):** Shows agreement of

the studied nurses working in operating room regarding their quality of work life. It is clear from the table that study nurses had the highest mean score regarding job characteristics and psychological work environment respectively ( $16.91 \pm 6.39$ ,  $16.04 \pm 5.66$ ).

**Table (3):** displays mean scores of motivation items among study nurses. The results in the above table revealed that majority of study nurses (60.9%) had low degree of motivation in relation to identified regulation. Whereas 41.3% had high degree of motivation in integrated regulation with mean score of  $13.54 \pm 5.74$ .

**Table (4):** Indicates that there is no statistical significant correlation between agreement about quality of work life and degree of motivation among operating room nurses  $r = 0.029$ ,  $p = 0.850$ .

**Table (5):** findings depicts that there was significant association between quality of work life and motivation among operating room nurses with their age group ( $p = 0.010$ ,  $< 0.05$ ), whereas no significant was found with years of experience and their qualification.

### Discussion:

Quality of work life is a critical concept with having lots of importance in nurses' life. Quality of work life indicates a proper balance both in work and personal life which also ensure organizational productivity and employee's job satisfaction.<sup>(18)</sup>

The concept of quality of work life exhibits positive emotional reactions and attitudes as an individual nurse towards her job. It has been conceptualized as a general attitude toward the job. Motivation is the willingness to work at a certain level of effort and drives employees to action. Motivation emerges out of needs, values, goals, intentions and expectations. QWL influences work motivation in general and other workplace behaviors such as turnover and absenteeism. Satisfied employees are more likely to experience high

internal work motivation and to have lower absenteeism and turnover rates than their disappointed counterparts.<sup>(19)</sup>

In the present study related to quality of work life, it was observed that the job characteristics was the highest quality of work item as perceived by nurses working in operating room. This result may be due to nurses feel that their job assignment are important, she is accountable of all what she do, has the skills necessary to perform her job, feel free in deciding at work, and her work load is acceptable. This study findings were supported by A cross-sectional survey of hospital nurses in Estonia was conducted aiming at determining their perceptions of workplace characteristics, working conditions, work motivation and patient safety, and at exploring the relationship between these, that there is a lack of empirical knowledge about nurses' perceptions of their workplace characteristics and conditions, such as level of autonomy and decision authority, work climate, teamwork, skill exploitation and learning opportunities, and their work motivation in relation to practice outputs such as patient safety. Such knowledge is needed particularly in countries, such as Estonia, where hospital systems for preventing errors and improving patient safety are in the early stages of development. He suggested that perceptions of personal control over their work can affect nurses' motivation, and that perceptions of work satisfaction might be relevant to patient safety improvement work.<sup>(20)</sup>

Also there are several job characteristics that give a comprehensive look at job quality indicators likely to influence employees' perceptions of what defines a workplace of choice.<sup>(21)</sup> It has been observed that for both employees and employers the ideal workplace: supports healthy and balanced lives among employees; has opportunities for learning and skill

development; positive workplace relations; high trust and commitment; and provides challenging, interesting and autonomous work. <sup>(22)</sup>

The job characteristics, role states, group and organization characteristics and leader relations are generally considered to be antecedents of high quality of work life. <sup>(23)</sup>

On the other hand, the present study found that the salaries and incentives were the lowest quality of work item as perceived by nurses working in operating room. This result may be due to nurses feel that their salaries not depend on their efforts at work, feel sad with their job revenues, and not understand the system of incentives at work; the current salary system is problematic for nurses. The salary of nurses should be increased commensurate with the tasks performed. Nurses also should be provided with fair financial benefits such as allowances for dealing with infectious disease. This finding was supported by another study which concludes that Measures of Quality of Work Life are: adequate pay and benefits, job security, safe health working condition, meaningful job and autonomy in the job. <sup>(24)</sup>

Supported by one more study found that more than three-fourth of respondents were dissatisfied with appropriateness of salary composition for their employment 196 (81.0%), while only 26 (10.7%) respondents answered with their satisfaction. Comparably most of respondents were dissatisfied with the level of employee benefits in organization and pay in relation to cost in their living area 180 (74.4%) and 183 (75.6%), respectively. <sup>(25)</sup>

With regard to work motivation, nurses working in operating room perceived the integrated regulation was the highest motivation item. The explanation of that may be due to the fact that nurses feel that their jobs are parts of their life, the nurses feel that their job are part of the way in which they have chosen to live their lives,

and feel that their job have become a fundamental part of who they are. This findings supported by another study stated that the ideal form of extrinsic motivation with the most autonomy is integrated regulation. "I do this because it reflects who I am" form of motivation. "The motivation is characterized not by the person being interested in the activity but rather by the activity being instrumentally important for personal goals" whereas, the present study found that the identified regulation were the lowest motivation item as perceived by nurses working in operating room. This result may be due to nurses feel that this is the type of work they chose to do to attain a certain lifestyle, to attain their career goals, and to attain certain important objectives. <sup>(26)</sup>

In another study found that identified regulation was an autonomous or self-determined type of extrinsic motivation. Primarily, it was when an individual identified with the personal meaning or significance of a behavior. <sup>(27)</sup> This is corresponding to the other study which mentioned that the self-determination continuum is useful for predicting "optimal functioning." Optimal functioning in organizations includes employee engagement, job performance subjective wellbeing, and retention. <sup>(11)</sup>

The intrinsic motivation leads to the most positive consequences, followed by integrated and identified regulations. Introjected and external regulations lead to negative outcomes. <sup>(28)</sup> Amotivation results in the most negative consequences. <sup>(29)</sup>

In addition, its concluded that Nurses' individual achievements, autonomy and training are key factors which influence their motivation to work. <sup>(20)</sup> Also Found in the study the motivation of Estonian nurses in hospitals, and how individual and organizational background factors influence their motivation to work. Both extrinsic and intrinsic motivations were noted among hospital nurses. Nurses were moderately externally motivated (3.63±0.89) and intrinsically strongly

motivated ( $4.98 \pm 1.03$ ).<sup>(30)</sup>

The results of the present study related to relationship between quality of work life and degree of motivation revealed that there was a correlation coefficient relationship between agreement about quality of work life of the studied nurses working in operating room and their degree of motivation. In this respect it is stated that It is important to recognize that individuals have unique motives for working and quite often it is complex to know what motivates employees. QWL involves a focus on all aspects of working life that might conceivably be relevant to worker satisfaction and motivation, and that QWL is related to the well-being of employees.<sup>(31)</sup>

Although the present study show that there were significant relation between study nurses quality of work life and their age in this respect, another study states that nurses' age and the duration of service were positively correlated with one particular area of extrinsic work motivation, namely introjected regulation ( $p < 0.001$ ).<sup>(30)</sup> Nurses who had professional training over 7 days per year had both a higher extrinsic motivation ( $p = 0.016$ ) and intrinsic work motivation ( $p = 0.004$ ). In addition stated that age, tenure in employment, gender, education and income were identified to correlate with the level of QWL among employees.<sup>(32,33)</sup> Also there is correlation results found which indicate that a significant relationship exists between salary and gender, education and experience.<sup>(34)</sup> In addition, other study found that there are significant differences according to age, gender, marital status and QWL among nurses in Saudi Arabia.<sup>(5)</sup>

### Conclusion:

It is concluded that there was correlation coefficient relationship between Quality of work life and work motivation among operating room nurses at Mansoura University Teaching Hospital. The study findings indicated that Job characteristics such as Autonomy in decision making, team

work and psychological environment were most important for their Quality of work life. Majority of Nurses working in operating room had highest motivation with regard to integrated regulation. Quality of work life and degree of motivation were significant with their age group. Their salaries, incentives and recognitions influence their quality of work life. Measures can be taken to enhance the Quality of work life and degree of motivation by improving their working environment.

### Recommendations:

Findings of the current study recommend that:

- Quality of work life is a critical concept that might be improved to motivate nurses. However, the hospitals can focus on nurses welfare by providing them a better and attractive compensation policy; optimum work load and a superior work environment. Challenging work can make them feel good. Similarly, opportunities for career progression and using their abilities can contribute in improving quality of work life.
- A similar study can be conducted among all Nurses working in Hospital to identify the relationship between Quality of Life and Work motivation and its influence on patient outcome. An experimental study can be conducted to assess the Effectiveness of short training programs (art of management, leadership and communication skill approaches) and their work life, performance and recognition among Nurses.
- The hospitals should follow certain procedures and practices to ensure that the nursing staff have better understanding on the work related issues and handle the work in an appropriate manner. Practices such as job descriptions, job orientation, shift systems, break during the shifts, work load management and job rotation. To create a more motivating working environment

and set aside time for professional development and training

**Table (1): personal data of the studied sample working in operating room (n=46)**

Variables	The studied nurses (n=46)	
	N	%
<b>Age (years):</b>		
▪ 20 - 30	19	41.3
▪ 30- 40	22	47.8
▪ 40-47	5	10.9
Range	21-47	
Mean±SD	31.69±8.14	
<b>Experience (years):</b>		
▪ 4- 10	18	39.1
▪ 10- 20	17	37.0
▪ 20-24	11	23.9
Range	4-24	
Mean±SD	13.48±7.03	
<b>Qualification:</b>		
▪ Bachelor	12	26.1
▪ Technical	34	73.9

**Table (2): Agreement of the studied sample working in operating room about main items of quality of work life (n=46)**

Quality of work life main items	Strongly disagree		Disagree		Neutral		Agree		Strongly agree		Range Mean±SD
	n	%	n	%	n	%	n	%	n	%	
▪ Psychological work environment	15	32.6	7	15.2	6	13.0	14	30.4	4	8.7	6-27 16.04±5.66
▪ Job characteristics	15	32.6	7	15.2	4	8.7	12	26.1	8	17.4	6-25 16.91±6.39
▪ Salaries and incentives	25	54.3	11	23.9	5	10.9	3	6.5	2	4.3	6-22 10.78±4.52
▪ Team work	20	43.5	5	10.9	5	10.9	13	28.3	3	6.5	6-24 14.59±5.90
▪ Supervisor leadership style	25	54.3	5	10.9	5	10.9	10	21.7	1	2.2	6-24 12.30±6.72
▪ Participation in decision making	21	45.6	5	10.9	6	13.0	11	23.9	3	6.5	6-26 14.04±6.73
<b>Total</b>	<b>20</b>	<b>43.5</b>	<b>7</b>	<b>15.2</b>	<b>5</b>	<b>10.9</b>	<b>10</b>	<b>21.7</b>	<b>4</b>	<b>8.7</b>	<b>36-140</b> <b>84.67±29.03</b>

**Table (3): Mean scores of main motivation items among the studied nurses working in operating room (n=46)**

Motivation main items	Degree of motivation among the studied nurses in operating room (n=46)						Range Mean±SD
	Low		Moderate		High		
	n	%	n	%	n	%	
▪ Identified regulation	28	60.9	16	34.8	2	4.3	3-15 7.78±3.18
▪ External regulation	11	23.9	20	43.5	15	32.6	5-21 12.43±4.85
▪ Amotivation	10	21.7	20	43.5	16	34.8	6-21 13.17±4.84
▪ Intrinsic motivation	12	26.1	18	39.1	16	34.8	6-21 12.30±5.03
▪ Integrated regulation	5	10.9	22	47.8	19	41.3	5-21 13.54±5.74
▪ Intorjected regulation	7	15.2	22	47.8	17	37.0	6-21 12.17±3.99
<b>Total</b>	<b>14</b>	<b>30.4</b>	<b>20</b>	<b>43.5</b>	<b>12</b>	<b>26.1</b>	<b>35-118</b> <b>71.41±21.32</b>

**Table (4): Relationship between agreement about quality of work life of the studied nurses working in operating room and their degree of motivation (n=46)**

Degree of motivation	Agreement of the studied nurses (n=46)										χ <sup>2</sup> P
	Strongly disagree (n=20)		Disagree (n=7)		Neutral (n=5)		Agree (n=10)		Strongly agree (n=4)		
	n	%	n	%	n	%	N	%	n	%	
▪ Low	5	25.0	1	14.3	2	40.0	4	40.0	2	50.0	8.109 0.423
▪ Moderate	11	55.0	3	42.9	3	60.0	3	30.0	0	0	
▪ High	4	20.0	3	42.9	0	0	3	30.0	2	50.0	
<i>r</i>	<b>0.029</b>										
<i>P</i>	<b>0.850</b>										

*r=Correlation Coefficient***Table (5): Correlation between total scores of both quality of work life and motivation of the studied nurses working in operating room and their age and experience years (n=46)**

Variables	Agreement of the studied nurses (n=46)			
	Total quality of work life scores		Total motivation scores	
	<i>r</i>	<i>P</i>	<i>r</i>	<i>P</i>
▪ Age	0.063	0.679	0.375	0.010*
▪ Experience years	0.237	0.112	0.161	0.285
▪ Total motivation scores	0.029	0.850	-	-

\*Significant ( $P<0.05$ )

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## العلاقة بين جودة حياة العمل والتحفيز للعمل بين ممرضات غرفة العمليات في مستشفيات جامعة المنصورة

وفاء فتحى سليم<sup>(١)</sup>، عبير محمد زكريا<sup>(٢)</sup>

<sup>(٢٠١)</sup> أستاذ مساعد إدارة التمريض ، قسم إدارة التمريض - كلية التمريض- جامعة المنصورة

### مقدمة :

ينبغي النظر إلى الموارد البشرية الصحية والتعامل معها على أنها الأصول الأساسية للنظام الصحي فيجب الاهتمام بتوفير بيئة عمل صحية تتبع نهج استراتيجي شامل في توفير الظروف المادية والثقافية والنفسية ، التي تزيد من الصحة والرفاهية لمقدمي الخدمات الصحية مما ينعكس على جودة الرعاية الصحية ورضا العميل

### الهدف من الدراسة:

استهدفت الدراسة الحالية إلي تحري مدى العلاقة بين جودة حياة العمل والتحفيز للعمل بين ممرضات غرفة العمليات في مستشفيات جامعة المنصورة

### التصميم البحثي:

تم استخدام تصميم ارتباطي وصفي.

### مكان الدراسة:

أجريت الدراسة في غرف العمليات في مستشفى المنصورة الجامعي الرئيسي والتابعة لمستشفيات جامعة المنصورة والتي تقدم الرعاية لمنطقة الدلتا وتتضمن ١٨٦٩ سرير.

### عينة الدراسة:

اشتملت الدراسة على جميع الممرضات اللاتي تعملن في غرف العمليات بمستشفى جامعة المنصورة وكان عددهن ٤٦ ممرضة .

### أدوات جمع البيانات :

تم جمع البيانات الدراسة الحالية من خلال استخدام أداتين:

#### ١. مقياس جودة حياة العمل (QWL) : وتهدف

الأداة لتقييم جودة حياة العمل لدى الممرضات من قبل المعهد الوطني للسلامة والصحة المهنية (٢٠٠٢) ويتضمن ٣٦ بند تغطي ٦ مجالات تؤثر على جودة حياة العمل ، وهي على النحو التالي ( بيئة العمل النفسية ٦ بنود- خصائص الوظيفة ٦ بنود- الرواتب والحوافز ٦ بنود - فريق العمل ٦ بنود - أسلوب القيادة ٦ بنود - المشاركة في صنع القرار ٦ بنود).

#### ٢. مقياس الدافعية للعمل : من قبل تريمبلاي

( ٢٠٠٩ ) و يهدف إلى قياس الدافعية للعمل الذي يتضمن ١٨ بند مقسمين إلى ٦ مجالات وهي على النحو التالي: (التنظيم المتكاملة ٣ بنود-التحفيز الخارجي ٣ بنود - التحفيز المحدد ٣ بنود - الدافع الذاتي ٣ بنود - التحفيز الداخلي ٣ بنود اللادافع ٣ بنود).

### النتائج:

كانت النتائج الرئيسية للدراسة كالاتي:

- بصفة عامة هناك ارتباط ايجابي ذو دلالة إحصائية بين جودة حياة العمل والتحفيز لدي الممرضات.
- حصول خصائص العمل وبيئة العمل النفسية على التوالي علي اعلي متوسط لاتفاق الممرضات علي جودة بيئة العمل
- أن الغالبية العظمى من الممرضات لديهن انخفاض في درجة التحفيز فيما يتعلق بالتنظيم المحدد بينما حصلت الممرضات علي درجة عالية من التحفيز فيما يتعلق بالتنظيم المتكامل.
- وجود علاقة إيجابية ذات دلالة إحصائية بين اتفاق الممرضات حول جودة حياة العمل ودرجة التحفيز.
- وجود ارتباط كبير بين نوعية حياة العمل والتحفيز لدي ممرضات غرف العمليات مع فئتهم العمرية.
- عدم وجود ارتباط بين نوعية حياة العمل والتحفيز لدي ممرضات غرف العمليات مع سنوات الخبرة وموهلاتهن.

### الخلاصة:

تستخلص من الدراسة أن هناك علاقة بين جودة حياة العمل والتحفيز للعمل بين ممرضات غرفة العمليات في مستشفى جامعة المنصورة. وأشارت نتائج الدراسة إلي أن خصائص الوظيفة مثل الحكم الذاتي في صنع القرار، والعمل الجماعي والبيئة النفسية كانت أهم العناصر لجودة حياتهم للعمل. وقد حصلت غالبية الممرضات العاملات في غرفة العمليات علي أعلى دافعية فيما يتعلق بالتنظيم المتكامل. كان هناك علاقة إيجابية بين جودة حياة العمل ودرجة التحفيز مع فئتهم العمرية. ولوحظ تأثير الرواتب والحوافز والجوائز على جودة حياة العمل.

### التوصيات:

- تعتبر جودة حياة العمل مفهوم بالغ الأهمية ويجب تحسينها لتحفيز الممرضات من خلال:
- تزويد الممرضات بأفضل السياسات التنظيمية مع الالتزام بعبء العمل الأمثل وخلق بيئة عمل أفضل مع تخصيص وقت للتطوير المهني والتدريب.

- اتباع المستشفى لبعض الإجراءات والممارسات لضمان أن الممرضات لديها فهم أفضل للقضايا المتعلقة بالعمل للعمل بطريقة أفضل. علي سبيل المثال ممارسات حول الوصف الوظيفي، التوجه الوظيفية، ، إدارة عبء العمل والتناوب الوظيفي.
- إجراء دراسة مماثلة بين جميع الممرضين العاملين في المستشفى للتعرف على العلاقة بين جودة حياة العمل والتحفيز وتأثيرها على جودة الرعاية التمريضية.