

A COMPARISON OF REPORTED JOB SATISFACTION

LEVELS OF NURSES: FLEXTIME

VS TRADITIONAL

By

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TABLE OF CONTENTS

Chapter	Page
I. INTRODUCTION.	1
Statement of the Problem	2
Purpose.	2
Identification of Variables.	3
Limitations.	3
Assumptions.	4
Definition of Terms.	4
II. REVIEW OF RELATED LITERATURE.	6
Flextime in Industry	6
Employee Attributes.	7
Employee Alienation Determinants	8
Flextime in Health Care.	8
Satisfaction vs. Absenteeism	9
Employee Satisfaction Specifications	10
Summary.	11
III. METHODOLOGY	13
Population	13
Data Gathering Instrument.	14
Collection of Data	15
Analysis of Data	15
IV. RESULTS AND DISCUSSION.	17
Descriptive Statistics	17
Statistical Results.	22
V. SUMMARY, CONCLUSIONS, AND RECOMMENDATIONS	23
Summary.	23
Conclusions.	24
Recommendations.	25
BIBLIOGRAPHY	27

Chapter	Page
APPENDIXES.	29
APPENDIX A - SURVEY QUESTIONNAIRE.	30
APPENDIX B - CORRESPONDENCE.	35
APPENDIX C - SCORING INFORMATION AND RELIABILITY SCALE	38
APPENDIX D - SCORES AND MEANS OF RESPONDENTS	41
APPENDIX E - POOLED VARIANCE t-TEST.	43

LIST OF TABLES

Table	Page
I. Group Characteristics.	19
II. Professional Experience Level of Respondents by Group.	19
III. Educational Level of Respondents by Group.	20
IV. Age Distribution of Respondents by Group	20
V. Respondents' Rating of Job Factors by Group.	21

CHAPTER I

INTRODUCTION

Flexitime is an alternative to the standard work week which requires workers to be on the job from eight to five. Considerable attention has been given to flexitime since its first documented use at the Messerschmidt-Bolkow-Blohn Aerospace firm in Germany in 1968 (Bernstein, 1977). Following several decades of stability in full-time work schedules, flexitime started gaining prominence in the United States in the mid-1970s. The initiative came primarily from managers looking for improvement in worker morale and input. It is now estimated that approximately 400,000 American workers are using some form of flexitime. It is predominately used in government organizations and service organizations (Winett and Neal, 1980).

The needs of today's workers are vastly different than those of the past. Flexitime is seen as a means of meeting the changing needs of today's workforce. It seeks to fulfill a compromise between the personal needs of the employee, the social and recreational constraints which are endured in a growing society, and the goals of the organization. Inherent as a probable asset of flexitime's scheduling is job satisfaction. Study results indicate that workers report greater satisfaction with their jobs when able to chose within flexitime scheduling (Winett and Neal, 1980).

Research reports demonstrate an inverse relationship between job

satisfaction and absenteeism and/or turnover (Vroom, 1964; Porter and Steers, 1973). It has been found that if the rewards in a job are sufficient enough to offset the disadvantages, employees are more apt to keep their positions (Herzberg, 1966). Herzberg's dual-factor theory was supported by McClosky's (1974) study of the influence of rewards and incentives on staff nurse turnover. Brief (1976) noted that turnover is positively related to lack of job satisfaction, not job dissatisfaction.

Statement of the Problem

The purpose of this study was to determine whether nurses who work flextime shifts report a greater degree of job satisfaction than do those who work traditional shifts.

Purpose

The purpose of this study was to determine the degree of job satisfaction of Registered Nurses on flextime schedules. An empirical investigation was conducted to answer the following question: Do Registered Nurses working flextime schedules report higher ratings of job satisfaction than those who work traditional shifts? The research model for this study used an experimental design to determine if there was a statistically significant difference in reported job satisfaction between persons on flextime schedules and persons working traditional eight hour shifts. In order to test for the difference implied in this question, the following null hypothesis was tested: There is no statistically significant difference in job satisfaction as reported by Registered Nurses working flextime and Registered Nurses working

traditional shifts.

Identification of Variables

The independent variable was the shift worked, traditional versus flextime. Two groups were included in the study; Registered Nurses who worked traditional eight hour shifts and Registered Nurses who work flextime shifts. The dependent variable was the level of job satisfaction. The level of job satisfaction was tested to determine if a significant difference existed between the scores of the group working flextime shifts and the scores of the group working the traditional shifts.

Flextime was determined to be preferred if those nurses working flextime shifts reported a higher degree of job satisfaction than those on traditional shifts, according to the instrument administered.

Limitations

This study was conducted with the following limitations:

1. The results of this study are limited to the population of Registered Nurses employed at an acute care hospital, thus the data can not be generalized for other types of working populations.
2. Results of this study are generalizable to this institution and other similar institutions of comparable type and environment.
3. Flextime used in this study refers to a structured shift that deviates from the common conception of flextime.

Assumptions

For the purpose of this study, the following assumptions were accepted by their researcher.

1. Hospital administrators have a genuine interest in the happiness and contentment of their employees and feel that these are vital as a determinant in job satisfaction.
2. Each respondent answered his/her questionnaire honestly.
3. The sample gathered in this study is representative of other critical care units.
4. The hospital from which the data used in this study is representative of other acute care hospitals.
5. Factors other than shift worked remained constant for both sample groups.
6. The difference in overall satisfaction of the two groups reporting in the study is assumed to be directly related to the type of shift assigned.

Definition of Terms

For the purpose of this study the following definitions are:

Acute Care Hospital - Health care facility existing for the purpose of caring for the ill, wounded, and/or surgically incapacitated patient.

A.D. - Associate degree, an accredited two-year nursing program.

Baccalaureate Degree - An extensive four-year university level nursing degree. A Bachelor of Science in Nursing.

Critical Care Unit - An area in a hospital designed to accommodate the seriously ill or wounded. Usually associated with the life or death situations.

Diploma Degree - A three-year concentrated nursing program.

Equalitarian Treatment - Equal treatment with respect to social, political, and economic rights and privileges.

Flextime Scheduling - Any shift that deviates from the traditional shifts, e.g., in the institution studied, the flex shifts vary in hours and days, but each nurse has a specific beginning and ending time. Each shift is scheduled ahead of time.

Job Satisfaction - The degree of contentment an employee reports with his employment.

Patient Care Supervisor - The manager of a hospital nursing unit. Serves as the liaison between nursing personnel and administrators.

Registered Nurse - A health care provider who has successfully completed an accredited course of study and passed the corresponding state board exams.

Shift - The portion of time worked during one 24-hour period.

Total Caregiver - A nurse who provides all regular medical care needed by a patient.

Traditional Scheduling - Standard eight-hour shifts based on a 40-hour workweek.

Whole Task System - Walton's theory in which the nurses provide total patient care as opposed to the traditional methods which include several levels of nursing personnel.

CHAPTER II

REVIEW OF RELATED LITERATURE

Chapter II provides a review of related research studies in the implementation of flextime scheduling and the degrees of job satisfaction resulting. It deals with the effectiveness of flextime in the American workforce. Chapter II also concerns the evaluation of job satisfaction and components thereof.

Flextime in Industry

Flextime is a design of flexibility in work schedules which may help to improve outcomes for the individual and the organization. This is accomplished by improving the relationship between individual needs and job characteristics. Flextime has the potential to influence the degree of autonomy experienced by the employee through increased participation in decision-making. Group cohesiveness and orientation towards the organization's objectivity will also be enhanced as the employees find it necessary to interact in a cooperative mode to maintain work processes.

Economic conditions are creating time constraints and conflicts with many individual's regular activities. Many of these regular activities and comforts become necessities. Studies have identified the following as necessities.

1. A person's physical and mental well being;

2. One's relationship with other people, including family and close friends;
3. Participation in social, community and civic organizations;
4. Personal development and fulfillment in forms of learning;
5. Active participation in recreational and physical activities (Elbring, 1975, p. 40).

"It has been shown that these factors are continuously violated, individuals will tend to become less coherent, which may lead to a decrease in productivity" (Winett and Neal, 1980, p. 49).

Employee Attributes

In comparison to earlier decades, the work force of the 1980's will be younger, more mobile, and better educated. It will contain a larger porportion of women; and, in comparison to earlier years, more of these women will be single parents. The changes in the social values of today's work force are leading fewer employees to view economic rewards as the sole motivation for employment with a company. Today's employees are showing a willingness to trade extrinsic work rewards for intrinsic work rewards (Holley, Armznakis, and Field, 1976). Many employees today are seeking autonomy and control over their work lives. The result of seeking control is a difference between the expectations and values of the employees and the rewards they receive from the organization (Walton, 1980). Walton describes employee needs as:

1. Challenge and personal growth,
2. Egalitarian treatment,
3. Commitment to an organization is increasingly influenced by the intrinsic value of the work itself,
4. More emphasis on the emotional aspect of organizational life (p. 30).

Employee Alienation Determinants

An employee may also experience alienation if he does not have sufficient control over his job (Bernstein, 1977). Flexitime has been evidenced as an arbitrator in similar situations. More specific symptoms of job alienation found by Bernstein include an employee's feeling of

1. Powerlessness; exists when the individual does not have control over his work or job process;
2. Meaninglessness; refers to his perception of his contribution to a final product;
3. Social estrangement; refers to his perception of his work as instrumental in obtaining extrinsic rewards (Bernstein, 1977, p. 64).

A survey of workers' reactions to 19 labor standards report that almost 10 percent of respondents had problems with inconvenient schedules. An increase in the divorce rate, in dual job-holding families, in changing values, and in the continuing shift of persons from the manufacturing to service sectors all contribute to the need for different work schedules at different times in peoples' lives. Despite insufficient evidence that job satisfaction positively affects performance reports related to positive correlation between the two.

Flexitime in Health Care

Often employee needs are met sufficiently by time away from the place of employment in order to meet and fulfill personal goals. Continuing education, family errands, personal business, school activities of children, and time spent with loved ones are reasons employees favor flex-scheduling. The implementation of flexible work schedules allows previously inactive nurses to return to full-time

status. Hospital flextime scheduling is becoming common because it is demanded by nursing personnel and the ease with which a hospital leads itself to flexible work scheduling. Through this type of scheduling, nurses will be satisfied with their lives away from the hospital, thereby attaining sufficient compensation in both professional and personal areas.

Satisfaction becomes the balance between what one expects or wants and what one receives. Usually, we expect satisfaction to result from a balance (Hall et al., 1981, p. 30). For some, this exchange involves time away from the working setting. Flextime is seen as a medium that includes satisfaction for both employee and employer.

Satisfaction vs. Absenteeism

Research has consistently demonstrated an inverse relationship between job satisfaction and absenteeism and/or turnover (Vroom, 1964; Porter and Steers, 1973). Studies specific to job satisfaction and absenteeism/turnover in nursing are numerous (Fournet, 1966; McCloskey, 1974; Seybolt et al., 1978; Wandelt et al., 1981). If the rewards in a job are sufficient enough to compensate for the disadvantages, the employee is more apt to keep his position. Herzberg's (1966) dual factor theory of motivation was supported by McCloskey's (1974) study of the influence of rewards and incentives on staff nurse turnover. Nurses who left for reasons associated with pay, transportation problems, or fringe benefits would have remained in their jobs for increased psychological rewards and incentives. Brief (1976) noted that turnover is positively related to lack of job satisfaction, not just job dissatisfaction.

Studies of satisfaction-performance relationships (Solcum et al., 1972; Vroom, 1964) have offered no conclusive evidence supporting the proposition that the level of job satisfaction identified by an employee determines the worker's performance. Slocum et al. (1972) found job performance to be significantly correlated with fulfillment of self-actualization need of the professional employees. Despite the lack of empirical evidence, the positive relationship between job and work performance has continued to be a widely held contention (Bragg, 1982; Edwards and Powers, 1982; Timmreck and Randall, 1981). Timmreck and Randall (1981, p. 28) stated: "When there is compatibility between a person's needs and the characteristics of the job, the person is satisfied and will be motivated to perform at a higher level."

Employee Satisfaction Specifications

Slavitt et al. (1978) identified six components of job satisfaction as the most relevant to occupations within the health care setting:

1. Pay; Dollar remuneration and fringe benefits received for work done;
2. Autonomy; Amount of job-related independence, initiative, and freedom either permitted or required in daily work activities;
3. Task Requirements; Tasks that must be done as a regular part of the job;
4. Organizational Requirements; Constraints or limits imposed on job activities by the administrative organization;
5. Interaction; Opportunities and requirements presented for both formal and informal social contact during working hours;
6. Job Prestige/Status; Overall importance or significance felt about the job at the personal level and to the organization (p. 115).

Slavitt's measurement instrument was used to test three groups and the subjects consistently ranked autonomy as the primary factor

in job satisfaction.

Nursing 77 conducted a study to determine factors influencing job satisfaction of nurses practicing in hospitals (Godfrey, 1978). The most important satisfaction factor mentioned was the opportunity for professional growth.

Using a questionnaire listing 18 aspects of the work environment, Everly and Falcione (1976) asked 144 staff nurses to indicate the degree of importance of each item in determining their job satisfaction. Analysis of the data revealed four independent factors relative to job satisfaction (rank ordered):

1. Interpersonal relations,
2. Internal work rewards (enjoyment of work, opportunity for growth),
3. External work rewards (pay, benefits),
4. Administrative policies.

The author concluded that nurses' perception of job satisfaction are more complex than the intrinsic/extrinsic dichotomy. However, considering the rating of Internal Work Rewards (IWR) as an important factor in job satisfaction, the Solcum (1972, p. 338) results support the suggestion that "nurses represent a professional group assumed to be motivated by internalized values."

Summary

Flexitime is a design of flexibility in work schedules, which may help to improve outcomes for the individual and the organization. This is accomplished by improving the correlation between individual needs and job characteristics. Flexitime has the potential to influence

the degree of autonomy experienced by the employee through increased participation in decision-making. Group cohesiveness and orientation towards the organization's objectivity should also be enhanced as the employees find it necessary to interact in a cooperative mode to maintain work processes.

The study reports indicate a correlation between flextime scheduling job satisfaction with various workers. A group of workers who have typically worked a traditional eight hour shift and are now being called upon to be more flexible due to a shortage of staff are nurses practicing in hospitals. This nursing staff shortage is seen especially in critical care areas of acute care hospitals. Critical care areas need a higher nurse patient ratio than do other areas of patient care. The type of care delivered to critical care patients lends itself more to flexible staffing as one nurse may spend many hours at one time with one patient. Having one nurse for an extended period of time is conducive to a better quality of care. When the quality of patient care is enhanced, the nurse will experience greater satisfaction in the job. This study will measure the degree of job satisfaction with critical care, Registered Nurses working on flexible shifts and determine if there is a difference in job satisfaction between those working flex shifts and those working traditional eight hour shifts.

CHAPTER III

METHODOLOGY

The search of the literature revealed reports on job satisfaction and flextime but none were found measuring the job satisfaction level of flextime workers. The reported results from related studies indicated that workers involved in flexible scheduling are more satisfied with their jobs than are those on traditional schedules. Study reports have indicated this by marked reduction in absenteeism and tardiness and also an increase in production (Vroom, 1964).

This chapter details the procedures for collecting data relevant to surveying nurses working on critical care units. Included are: (1) the selection of the subjects, (2) data gathering instrument, (3) collection of the data, and (4) the procedures selected for analyzing the data.

This study was conducted in a 935 bed, acute care hospital in Tulsa, Oklahoma, which maintains over an 80 percent occupancy rate on an annual basis. The Department of Nursing Service consists of 35 separate nursing units and accounts for over 50 percent of the total employees.

Population

Criteria were established for the selection of the subjects for this study. The study population included all Registered Nurses

working on critical care units, 24 nurses work flex shifts and 24 work traditional 6:45 a.m. to 3:15 p.m. schedules. The entire population of critical care nurses was used for this study because it was found that an equal number of nurses worked the traditional and flextime shifts within each unit.

Data Gathering Instrument

A questionnaire was adopted for use in this study. The questionnaire provided demographic data about the nurses, including age, sex, educational background, and health care related work experiences. The instrument was the Staff Satisfaction Scale designed by Hall et al., in 1981. The Staff Satisfaction Scale consisted of 41 items, 24 were adapted from the Index of Work Satisfaction, six were from the SRA Survey of Job Satisfaction, and 11 were developed by Hall (see Appendix A). The scale was divided into six relevant categories: pay, autonomy, task requirements, organizational requirements, interaction and job prestige/status. Items in each of these categories were arranged randomly throughout this section of the questionnaire so that the respondent would not become aware of the specific component being examined. The response mode was a five-point Likert-type scale with a neutral midpoint. The Staff Satisfaction Scale was found to have sufficient validity and reliability for measuring job satisfaction among nursing staff in a hospital setting (Hall, 1981). See Appendix B for a letter granting permission to utilize the Staff Satisfaction Scale in this study. Scoring information and reliability scales for grading the instrument were provided by the author of the instrument (see Appendix C).

Collection of Data

The nurses were classified into two groups. Group I was comprised of those nurses who worked a flextime shift with work times varying between 6:00 a.m. and 6:00 p.m. Group II involved nurses who worked traditional eight-hour day shifts from 6:45 a.m. to 3:15 p.m. All of the subjects worked as total care givers or as a part of the "whole task system" (Kramer, 1974).

An overview of this study was presented to the first line nursing managers after the first line nursing manager's orientation. They assisted with the distribution and administration of the instrument to the nurses on their individual units.

The data was collected during the month of January, 1983. Time involved for each respondent to complete the questionnaire was between 20 and 30 minutes. In addition to the questionnaire the following demographic data were collected:

1. Age,
2. Sex,
3. Educational preparation (B.S.N, A.D., Diploma).

Since the nurses were not required to identify their specific nursing units and since the instructions were given to return the instrument directly to the researcher with no identifying numbers, anonymity was provided to encourage high rates of data collection.

Analysis of Data

To analyze the data, the questionnaires were first checked for completeness and the responses were then compiled in the following

manner. The demographic data were coded for further reference. Mean scores were calculated for each group. A pooled variance t-model was selected to test the data. The formula for a pooled variance t-test follows.

$$t = \frac{\bar{X}_1 - \bar{X}_2}{\frac{(n_1-1)s_1^2 + (n_2-1)s_2^2}{n_1 + n_2 - 2}} \sqrt{\frac{1}{n_1} + \frac{1}{n_2}}$$

The data collected describe the level of job satisfaction of each group of workers. Decreases or increases in satisfaction with specific aspects of their jobs as well as total job satisfaction are demonstrated. The difference in overall satisfaction of the two groups reported is assumed to be directly related to the type of shift assigned. It is also assumed that other job related factors are constant for both groups.

CHAPTER IV

RESULTS AND DISCUSSION

This study was conducted to determine if job satisfaction is a factor in flextime scheduling. Two groups of Registered Nurses were involved. One group worked traditional eight hour shifts and the other group worked flextime shifts. The independent variable was the shift worked. The dependent variable was the level of job satisfaction as computed from the scores reported by each respondent. The level of job satisfaction was tested to determine if a significant difference existed between the means of the score for the group working flextime shifts and the group working traditional shifts.

Descriptive Statistics

Forty-eight subjects participated in the study. The 24 nurses in the control group worked the traditional eight hour day shift on critical care units. The 24 nurses in the treatment group worked the flextime day shift. The level of job satisfaction of each group was measured, assuming other factors had little impact on levels of job satisfaction.

In addition to completing the questionnaire all respondents completed the questions containing demographic information. Respondents were reported between the ages 23 and 28 in Group I

while 18 subjects in Group II fell in the same bracket. All respondents in Group I except one were female, while in Group II all but four were female. The data in Table I presents Group I reporting eight diploma degrees and Group II reporting one diploma degree.

The level of work experience of the two groups was similar. The highest number (N=11) of respondents had been employed by the hospital for more than two years and presently work traditional day shifts. The lowest percentage (21 percent) of nurses were those employed between one and two years and presently work traditional day shifts. Both groups followed the same pattern of escalation when examining professional experience by years. The pattern is presented in Table II.

The highest percentage of respondents (54 percent) in a single group possess a baccalaureate degree in nursing and work the traditional day shifts. The smallest number in a category, (N=1), included the nurses who hold a degree from a diploma program and work traditional day shifts. The educational level of the flextime respondents were more evenly distributed than the educational level of the traditional respondents. The largest percentage of flextime workers (38 percent) hold associate degrees while 29 percent held baccalaureate degrees. The distribution of education levels is presented in Table III.

As demonstrated in Table IV, the majority of the respondents are between the ages of 25 and over 39 years of age. Of the flextime nurses responding four percent reported under 25 years and 12 percent reported over 39 years. A similar curve of age exist among traditional shift workers. Eight percent are under 25 and 17 percent are over 39 years of age.

The information listed in Table V represents the percentage of

TABLE I
GROUP CHARACTERISTICS

Group	Group I (N=24)	Group II (N=24)
<u>Age</u>		
20 - 22	1	2
23 - 25	10	8
26 - 28	10	10
over 28	3	4
<u>Sex</u>		
male	1	4
female	23	20
<u>Education</u>		
A.D.	9	10
Diploma	8	1
BSN	7	13
N=48		

TABLE II
PROFESSIONAL EXPERIENCE LEVEL OF RESPONDENTS BY GROUP

Group	Less than One Year		One to Two Years		Over Two Years	
	%	N	%	N	%	N
Flexitime N=24	33	8	25	6	42	10
Traditional N=24	33	8	21	5	46	11

TABLE III
EDUCATIONAL LEVEL OF RESPONDENTS BY GROUP

Group	Diploma Degree		Associate Degree		Baccalaureate Degree	
	%	N	%	N	%	N
Flexitime N=24	33	8	38	9	29	7
Traditional N=24	4	1	42	10	54	13

TABLE IV
AGE DISTRIBUTION OF RESPONDENTS BY GROUP

Group	Under 25 Years		Between 25-39		Over 39 Years	
	%	N	%	N	%	N
Flexitime N=24	4	1	84	20	12	3
Traditional N=24	8	2	75	18	17	4

TABLE V
RESPONDENTS' RATING OF JOB FACTORS BY GROUP

Job Factors	Group I		Group II	
	Rank	%	Rank	%
Task Requirements	4	55	5	54
Interaction	3	59	3	65
Pay	6	39	6	44
Autonomy	2	69	2	70
Job Prestige	1	70	1	78
Organizational Requirements	5	54	4	57

scores for each group according to the job factors emphasized in the instrument used. Both groups indicated that job prestige is most important to them in reference to job satisfaction. Both groups placed pay as least important to their overall job satisfaction. When rank ordered, both groups placed emphasis on job factors similiarly, with the only exception being the fourth and fifth rankings.

According to Von Endt's total Satisfaction Score, both groups scored above the median (Appendix C). The given median is 84 with a range of 0-168. The Registered Nurses working flextime shifts reported an overall mean of 103. While those nurses working traditional shifts rated an average of 108 (Appendix D).

Statistical Results

A satisfaction score for each respondent was calculated and the scores for the number of each group were summed and a mean was calculated.

The data were statistically analyzed using Fisher's t-test. There was no statistically significant difference between the means of the two groups. Therefore, reported levels of job satisfaction between Registered Nurses working flextime and those working traditional day shifts do not differ.

The calculated t-value was compared to the table t value in this study with degree of freedom 46 was less than the table value of 2.04. The null hypothesis was found to be tenable at 0.05 level of significance which indicates there was no statistically significant difference in job satisfaction between the two groups (Appendix E).

CHAPTER V

SUMMARY, CONCLUSIONS, AND RECOMMENDATIONS

The purpose of this study was to investigate the level of reported job satisfaction of Registered Nurses working traditional eight hour day shifts and those working flextime shifts. The goal was to determine if those working flextime shifts would report greater job satisfaction than those on traditional shifts.

Summary

The subjects in this study were Registered Nurses currently on full-time status assigned to critical care units throughout a 900-bed acute care hospital in Oklahoma. Research has indicated that workers involved in flexible scheduling are more satisfied with their jobs than those on traditional schedules (Holley, 1976). The results of these previous studies, plus the importance of uninterrupted time the critical care nurses must spend with their patients and their contribution in health care, led this researcher to hypothesize that Registered Nurses on flextime will report greater job satisfaction than Registered Nurses working traditional shifts.

A self-administered questionnaire was distributed to 48 study subjects to measure job satisfaction levels. In addition to the questionnaire, demographic data were collected. The instrument was

a Staff Satisfaction Scale (SSS), contained 41 items. A Likert-type scale was used for rating the items. The data collected described the level of job satisfaction of both groups of workers. Decreases or increases in satisfaction with specific aspects of their jobs as well as total job satisfaction were recorded. The difference in overall satisfaction of the two groups reported was assumed to be directly related to the shift worked. It was also assumed that other job-related factors were constant for both groups.

Conclusions

The data obtained from testing the hypothesis demonstrate no direct correlation between job satisfaction of Registered Nurses working traditional hours and those working flexible shifts on critical care units. These data are limited to health care personnel. Many respondents work their shifts by personal choice. Also day shifts and flex shifts maybe considered the most desirable and are usually assigned on a seniority basis therefore most employees involved in the research were working their choice shift.

Reasons for job satisfaction cannot be credited to any single factor. The shift worked by respondents had little bearing on the degree of job satisfaction they reported. Most respondents, representative of both shifts, indicated a high rate of satisfaction regarding their jobs. Many elements of one's personal life could have an impact on his/her view of his/her job situation. Aspects that affect contentment outside the job setting could have had a major impact on how each nurse answered the questionnaire.

Working a shift similiar to a spouse's shift, acceptable child care facilities available, the opportunity to return to school, time to participate in leisure time hobbies in the home environment are all possible reasons for employee satisfaction. The shift pay differential offered by the employees could have been a mode of satisfaction among some respondents. Research provides evidence that happy employees will be more productive.

Another avenue could possibly be that most workers responding to this researcher's questionnaire were satisfied with other variables no matter what shift they worked. Some possible variables could be: the organization for which they worked, the environment in which they worked, the tasks assigned them, and their co-workers.

Registered Nurses are not the only group involved in flextime work scheduling. It could possibly provide different results if other groups of workers were studied or a larger sample of nurses. Research continues to imply that if the nurse (worker) is working the shift of his/her choice, flextime or traditional, the nurse will be more satisfied than if he/she is forced to work one that is in direct conflict with his/her personal life. Therefore, perhaps a more objective way to study job satisfaction would be to randomly assign a shift to each of the two groups regardless of personal preference. After a uniform length of time, administer the satisfaction instrument. Results would perhaps more objectively measure job satisfaction.

Recommendations

Because the results of the present study do not support the

findings reported in the other studies, more extensive research involving a number of health care institutions should be conducted. Studies of this type could also be helpful to those in business and industry. Results of past studies strongly suggest that those who are happy will produce more than those who are not. By pleasing workers on a shift that better accommodates their personal lives, previous research shows they will be absent less often and be more productive while on the job.

An extension of this type of study might produce findings which would provide additional information relevant to increased satisfaction reported by workers on flexible hours.

It is hoped that the conclusions of this study will provide a framework for further research. A successful flextime program in a health care setting could be highly productive for employers, beneficial to patients, and desirable to employees.

The present study provides a resource from which additional research can be drawn. Further research will add to these study results, as well as the existing body of knowledge in this related fields.

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APPENDIXES

APPENDIX A

SURVEY QUESTIONNAIRE

GENERAL INFORMATION

AGE: 20 - 22 ()

23 - 25 ()

26 - 28 ()

Over 28 ()

SEX: Male () Female ()

NURSING EDUCATION: Diploma ()

Associate Degree ()

Baccalaureate Degree ()

Part IV

For each of the statements below, please check (✓) the answer you feel is most like your opinions as to how well your job expectations are presently met.

	Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree	
1. The people I work with are friendly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1.
2. My nursing unit provides an atmosphere of independence in daily work activities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2.
3. There is no doubt that this hospital cares a great deal about the welfare of the nursing personnel.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3.
4. I could deliver much better care if I had more time with each patient.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4.
5. My supervisor gives praise, credit, and recognition by letting me know about work I do well.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5.
6. I perceive my occupational status as high in the Nursing Department.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6.
7. I am not satisfied with the way nursing work is organized and gets done.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7.
8. I have the freedom in my work to make important decisions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8.
9. I am really doing something worthwhile in my job.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	9.
10. I feel I am supervised more closely than I need to be.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	10.
11. The Nursing Department does its best to provide good benefits and working conditions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	11.
12. My particular job doesn't require much skill or know-how.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	12.
13. There is ample opportunity for nursing staff to participate in policy and procedure planning.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	13.

	Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree	
14. I feel I have too many people who give me directions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	14.
15. A lot of what I do each day could just as well be done by someone with less skill and training.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	15.
16. The present rate in pay for Nursing Service personnel at this hospital is satisfactory.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	16.
17. What I do in my job doesn't add up to anything significant.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	17.
18. There are not many opportunities for advancement of nursing personnel at this hospital.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18.
19. My job doesn't provide satisfying opportunities to develop formal and informal social contact.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	19.
20. The amount of time I spend on clerical and paperwork required of nursing personnel here is reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	20.
21. My supervisor does not plan activities to get maximum utilization out of our facilities, equipment, and people.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	21.
22. I have little opportunity to use my abilities on my job.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	22.
23. The nursing personnel on my unit do not help one another when things get in a rush.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	23.
24. My present salary is not satisfactory.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	24.
25. I spend as much time as I'd like taking care of patients directly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	25.
26. There is a good deal of teamwork and cooperation between various levels of nursing personnel on my service.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	26.
27. I have little control over my own work. Other people decide things for me in my job.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	27.

	Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree	
28. They expect too much work from us around here.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	24.
29. The nursing personnel on my service are not as outgoing and friendly as I would like.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	25.
30. It makes me proud to talk to other people about what I do on my job.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	30.
31. From what I hear from and about Nursing Service personnel at other hospitals, we at this hospital are not being satisfactorily paid.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	31.
32. Nursing management effectively communicates goals and priorities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	32.
33. It is my general impression that most of the nursing staff likes the way work is organized and done here.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	33.
34. I can't help but feel that others don't really appreciate my job and what I have to do.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
35. In my opinion, this nursing department is not organized with the needs of the patient given top priority.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	35.
36. My supervisor gets employees to work together as a team.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	36.
37. I feel free to discuss complaints and issues with those I report to.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	37.
38. I can't think of many other jobs I'm capable of doing that are more important to people than being a patient care provider.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	38.
39. This type of questionnaire will help nursing management to evaluate job satisfaction.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	39.
40. Quality patient care and treatment are important to the Department of Nursing.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	40.
41. This hospital supports a philosophy of promoting "quality patient care".	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	41.

APPENDIX B

CORRESPONDENCE

PROVIDENCE
MEDICAL CENTER

500 17th AVENUE • C-34008
SEATTLE, WASHINGTON 98124
PHONE: (206) 326-5555



SERVING IN THE WEST SINCE 1856

September 21, 1982

Dear Ms. Quinn,

I am in receipt of your letter requesting a copy of the "Staff Satisfaction Scale" as described in the December 1981 Nursing Leadership.

Enclosed is a copy of the scale, sample demographic face sheet, cover letter and categorization of questions. It is recommended that the demographic face sheet and cover letter be adapted to fit your particular organization and needs.

Suggestions for utilization of the tool are outlined in the article. Due to our continued interest in this area, we would request that you provide to us summarized results of your research.

We extend best wishes to you in your research endeavors.

Sincerely,

Lorelei Von Endt
Lorelei Von Endt, R.N., M.N.
Psychiatric Clinical Specialist

LV:yb
Enclosure

MEMBERS OF THE SISTERS OF PROVIDENCE CORPORATION - ALASKA: PROVIDENCE HOSPITAL, ANCHORAGE - WASHINGTON: PROVIDENCE MEDICAL CENTER, SEATTLE - THE DEPAUL MEMORIAL HOSPITAL AND MOUNT SAINT VINCENT MEDICAL CENTER, SEATTLE - PROVIDENCE HOSPITAL, EVERETT - ST. PETER HOSPITAL, OLYMPIA - ST. ELIZABETH HOSPITAL, YAKIMA - GRIFFIN PROVIDENCE HOSPITAL, BELLEVUE - PROVIDENCE MEDICAL CENTER, PORTLAND - PROVIDENCE HOSPITAL, PORTLAND - ST. VINCENT HOSPITAL AND MEDICAL CENTER, PORTLAND - CALIFORNIA: PROVIDENCE HOSPITAL, OAKLAND - PROVIDENCE HIGH SCHOOL, BURBANK - SAINT JOSEPH MEDICAL CENTER, BURBANK

September 10, 1982

Lorelei Von Endt, R.N., M.N.
Psychiatric Clinical Specialist
Providence Medical Center
500 17th Avenue
Seattle, WA 98124

Dear Ms. Von Endt:

Please send a copy of the Staff Satisfaction Scale as described in "A Framework for Measuring Satisfaction of Nursing Staff" in December, 1981, Nursing Leadership.

I am interested in using the scale for measuring job satisfaction of graduate nurses in the intensive care unit.

Thank you.

Sincerely,

Camille M. Quinn
Oklahoma State University
Graduate Student

APPENDIX C
SCORING INFORMATION AND
RELIABILITY SCALE

SCORING INFORMATION

Categorization of Questions

Task Requirements: 4, 15, 20, 29

Interaction: 1, 5, 19, 23, 27, 30, 33

Pay: 16, 24, 25, 32

Autonomy: 2, 8, 10, 14, 28, 38

Job Prestige: 6, 9, 12, 17, 22, 31, 35, 39

Organization Requirements: 3, 7, 11, 13, 18, 21, 34, 36, 37, 40, 41

Scoring

Positive Statements:

Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree
4	3	2	1	0

Negative Statements:

Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree
0	1	2	3	4

Scoring Ranges and Medians

Components:	<u>Range</u>	<u>Median</u>
Task Requirements	0-20	10
Interaction	0-28	14
Pay	0-16	8
Autonomy	0-24	12
Job Prestige	0-32	16
Organizational Requirements	0-48	24
Total Satisfaction Score	0-168	84

Scale Reliability Using

Cronbach's Alpha

(N=285)

<u>SCALE</u>	<u>ALPHA</u>
Task Requirement	0.6421
Autonomy	0.7880
Pay	0.7976
Organizational Requirements	0.8530
Job Prestige	0.7250
Interaction	0.7090
Total Scale	0.9133

Reliability: The SSS was sent by its author to 497 staff members in a hospital setting; 285 responded. Reliability for the total scale was 0.9133 as measured by Cronbach's Alpha. Reliability for six subscales to somewhat lower due to alpha size being somewhat dependent upon having a large number of items.

APPENDIX D

SCORES AND MEANS OF RESPONDENTS

Group 1			
Subject	Score	Subject	Score
1	109	13	128
2	94	14	91
3	107	15	94
4	76	16	108
5	111	17	110
6	116	18	91
7	103	19	84
8	109	20	128
9	110	21	104
10	111	22	88
11	102	23	99
12	87	24	120
TOTAL = 2480			
$\bar{X} = 103$			

Group 2			
Subject	Score	Subject	Score
1	103	13	114
2	115	14	81
3	104	15	99
4	109	16	136
5	78	17	138
6	69	18	97
7	106	19	137
8	115	20	114
9	114	21	108
10	111	22	118
11	92	23	116
12	116	24	105
TOTAL = 2595			
$\bar{X} = 108$			

APPENDIX E

POOLED VARIANCE t -TEST

$$t = \frac{\bar{X}_1 - \bar{X}_2}{\sqrt{\frac{(n_1 - 1)s_1^2 + (n_2 - 1)s_2^2}{n_1 + n_2 - 2} \left(\frac{1}{n_1} + \frac{1}{n_2} \right)}}$$

$$t = \frac{103 - 108}{\sqrt{\frac{(23)s_1^2 + (23)s_2^2}{24 + 24 - 2} \times \left(\frac{1}{24} + \frac{1}{24} \right)}} = 1.14$$

VITA

Camille Marie Quinn

Candidate for the Degree of

Master of Science

Thesis: A COMPARISON OF REPORTED JOB SATISFACTION LEVELS OF NURSES:
FLEXTIME VS TRADITIONAL

Major Field: Occupational and Adult Education

Biographical:

Personal Data: Born in Tulsa, Oklahoma, April 19, 1957 the daughter of Terry and Dr. Juanita Quinn.

Education: Graduated from Bishop Kelley High School, Tulsa Oklahoma; received a Bachelor of Science degree in Psychology from Oklahoma State University in May, 1979; completed requirements for Master of Science degree in Occupational and Adult Education at Oklahoma State University, in May, 1983.

Professional Experience: Broken Arrow High School History Teacher, 1980 - Present; Department of Human Services Social Worker, 1980; St. Francis Hospital Education Department, 1975 - 1982.