

**FACTORS INFLUENCING JOB SATISFACTION AMONG PUBLIC HEALTHCARE
EMPLOYEES AT ELIM HOSPITAL, LIMPOPO PROVINCE**

MAGUGA SOLOMON GIFTY

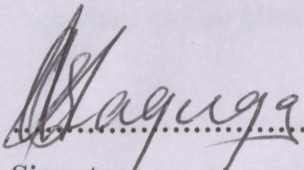
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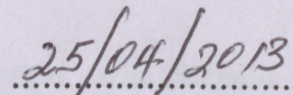
**A Mini Dissertation Submitted at School of Management Sciences of the University of
Venda in Partial Fulfillment of the Requirements for the Degree of the Master of Public
Management**

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DECLARATION

I MAGUGA SOLOMON GIFTY hereby declare that the dissertation for the degree Master of Public Management work on which this dissertation is based, hereby submitted to the University of Venda, for the degree of Master of Public Management, has not previously been submitted by me for a degree at this or any other university, that it is my work in design and execution, and that all materials contained herein has been duly acknowledged.


.....
Signature


.....
Date

ACKNOWLEDGEMENT

I would like to express my sincere gratitude, first and foremost to the Almighty for giving me courage and patience to complete this challenging piece of work. I would also like to convey special thanks to my supervisor, Prof Khwashaba M.P who has performed a sterling work in steering me through every step of this challenging work. I appreciate the occasion he has given me to launch this research. I want to thank him very much.

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This acknowledgement would not be complete if I don't acknowledge the part played by my former CEO (ELIM HOSPITAL) Elbie Vosloo for making sure that I get enough time to visit the library, acquire needed and relevant data within Elim Hospital to complete my studies.

To my friends particularly Mr Avhatakali Marole and all my colleagues at Elim Hospital, your co-operation and support has been noted. I thank you so much.

Finally, to all my children Tumelo, Rhulani and Vutlhari, this work belongs to you.

DEDICATION

This dissertation is dedicated to my beloved late mother, Josephina Busiwana Maguga and my lovely children Reineth Tumelo, Rhulani Clinton and Vutlhari Meshack Matome. This belongs to you and I hope you follow suit.

ABSTRACT

This study investigates **factors influencing job satisfaction among public healthcare employees at Elim Hospital, Limpopo Province**. Relationships have been reported between job satisfaction, productivity, absenteeism and turnover among healthcare employees and as such it affects employees' organizational commitment and the quality of healthcare services. The aim of the study was to determine the factors influencing job satisfaction among healthcare professionals at Elim Hospital. Variables such as opportunity to develop, responsibility, patient care and staff relations were found to be significantly influencing job satisfaction and there was a significant positive association between job satisfaction and opportunity to develop, responsibility, patient care and staff relations for both clinical and clinical support staff.

In this study, both quantitative and qualitative research methods were used to gather information through the utilization of a questionnaire. The study was conducted mainly to confirm the results obtained. The results of the study have assisted to reflect factors that could be influencing the health workers to leave Elim Hospital. One hundred and twenty (120) questionnaires were issued to the health professionals.

Major findings of the study are the following:

- The study found a low level of job satisfaction among the healthcare workers surveyed. Almost 80% were dissatisfied or highly dissatisfied with their job.
- Factors found to be significantly associated with job satisfaction were, opportunity to develop, responsibility, patient care and staff relations.
- The study found a significant positive medium correlation between staff relations, patient care, and responsibility, opportunity to develop and job satisfaction.
- Almost three-quarters of participants (73.8%) did not think that their income was a reflection of the work they do.

Major recommendation were drawn from the study. These included:

- Encourage teamwork by rewarding teams: Allowing managers to facilitate and promote team-building exercises to enhance communication, productivity and job satisfaction. Team incentives should be addressed by rewarding teamwork.
- Ensuring job satisfaction by respecting, rewarding, nurturing and upholding these skilled and trained employees fairly is also recommended the authorities should: Recognise individual growth and fairly reward good ideas. Respect experience and qualifications above legislative requirements in order to ensure that the most suitably qualified people are placed in specialised positions.
- The human resource practitioners in the public service should be knowledgeable and supportive of the health profession, vacancies should be filled quickly and the recruitment process should be speeded up. In-service training should be provided to ensure the competencies of the health workers are of high standard at all times.

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LIST OF ABBREVIATIONS

BEE	Black Economic Empowerment
DoH	Department of Health
HR	Human Resource
IT	Information Technology
IPF	International Pharmaceutical Federation
MDG	Millennium Development Goals
ROI	Return on Investment
SAHRHP	South African Human Resource Health Plan
SDF	Skills Development Facilitator
SETA	Education Training Authorities
SOE's	State Owned Enterprises
WHO	World Health Organisation

CHAPTER 1: ORIENTATION OF THE STUDY

1.1 Background of the study

According to Meyer (1999:66), most South African employees experience a lack of job satisfaction resulting in low levels of employee commitment which, in turn, impacts on performance and the achievement of organisational goals. These problems result in low productivity, high absenteeism, labour unrest, industrial action and high labour turnover. The current situation in the public sector in South Africa is not dissimilar. Public sector employees are faced with a multitude of factors that impact on effective and efficient service delivery.

South African organizations operate in a drastically changed environment, where political, social, economic challenges and technological forces demand a totally new business approach. Resistances to change will likely lead to unnecessary conflict, reduced managerial and non - managerial performance and lost opportunities. According to Ivancevich and Matteson (1999:7), failing to cope and deal with these forces can result in job dissatisfaction, poor morale, reduced commitment, lower work quality, burnout, and poor judgment. Managers are responsible for the effectiveness of individuals, groups of individuals and organisations.

The ultimate criterion of organizational effectiveness is whether the organisation survives in its environment. To survive organisations must adapt to environmental changes (Ivancevich and Matteson, 1999:26). A number of short-run indicators of long-run survival have been indicated. These include measurement of efficiency, productivity, accidents, turnover, absenteeism, quality, rate of return, morale and employee satisfaction (Ivancevich and Matteson, 1999:26). Job satisfaction is an individual's general attitude about his or her job (Robbins, 1998:142). This attitude results from a subjective evaluation of how his or her job meets his or her needs (Ivancevich and Matteson, 1999:123). Attitudes are important because they affect individuals' behaviour. As top managers rely on first-line supervisors and middle-level managers to implement their strategies, it is important to understand the attitudes of these subordinates. To operate effectively and successfully under the challenges presented by their environment, first-

line supervisors and middle-level managers require the necessary competency and correct attitude. In fact, when companies are confronted by these challenges, the first-line supervisors and middle-level managers are expected to act as change agents (Human, 1999:11).

Ting (1997:99) states that empirical evidence consistently indicates that job characteristics such as pay satisfaction, opportunities for promotion, task clarity and relationships with co-workers and supervisors have significant effects on job satisfaction of government employees. In support, a study conducted by Ellickson and Logsdon (2002:90) reflected that job satisfaction of public sector employees was significantly influenced by perceptions of employee satisfaction in terms of pay, promotional opportunities, relationships with supervisors, employees performance management systems and fringe benefits.

1.2 Statement of the problem

Since South Africa became a democratic government in 1994, new laws have been introduced. The South African government introduced the South African Qualifications Authority Act of 1995, Skills Development Act 97 of 1998, the Skills Development Levies Act 9 of 1999, to address the shortage of training and development of the majority of citizens. This has brought further challenges for employers to manage the training and development of employees in South African organisations. Factors contributing to high levels of employee satisfaction have been identified as, supportive colleagues conducive working conditions, and equitable rewards.

Despite the provision of the legislations above, Elim Hospital is less successful in job satisfaction of health workers. High employee turnover rates, absenteeism and number of grievances lodged are factors that indicate whether job satisfaction exists within organisations and in this case, in Elim Hospital. In this regard, similarly, information disseminated from the Elim healthcare Center annual report (2011/2012) highlights some of the major problems experienced within the Department as being:

- Employee turnover rates;
- Major reasons why employees are leaving the department;

- Costs incurred due to sick leave taken;
- Types of misconduct addressed at disciplinary hearings and
- Grievances and disputes lodged.

1.3 Research Aim

The overall aim of the study is to investigate factors influencing job satisfaction among public healthcare employees at Elim Hospital, Limpopo Province.

1.4 Specific Objectives

- To determine the level of job satisfaction among healthcare workers at Elim Hospital.
- To determine the factors influencing job satisfaction among healthcare workers at Elim Hospital.
- To determine the relationship between general satisfaction and the opportunity to develop, responsibility, patient care, time pressure and staff relations among healthcare workers.
- To determine the problem of job satisfaction of staff at Elim Hospital of Vhembe district

1.5 Research questions

- What is the level of job satisfaction among healthcare workers at Elim Hospital?
- What are the factors influencing job satisfaction among healthcare workers at Elim Hospital?
- How to determine the relationship between general satisfaction and the opportunity to develop, responsibility, patient care, time pressure and staff relations among healthcare workers?
- What is the problem affecting job satisfaction of staff at Elim Hospital of Vhembe district?

1.6 Significance of the study

The results of this study could lead to job satisfaction strategies that would not only apply to the public sectors of Vhembe District, but also to other companies that employ key personnel and/or professional workers. The information obtained will hopefully assist in identifying factors influencing job satisfaction among healthcare professionals in a hospital setting. Given the critical role that health care workers play in determining the efficiency, effectiveness and sustainability of health care systems, it is paramount to understand what motivates them and to what extent they are satisfied by the organization and other contextual variables. Job satisfaction is also an essential part of ensuring quality care, as dissatisfied healthcare providers are likely to give poor quality and less efficient care.

1.7 Limitations of study

Important limitations are inherent in a survey of this kind. Funds were a limiting factor as the study required a lot of funds for travelling, typing, binding and photocopying. Due to the sensitivity of the topic, some people felt uncomfortable to answer research questions because they are not sure where the information will be taken to. In addition, because the survey instrument used was a self-reporting measure, the information presented by participants is based upon their subjective perceptions hence although participants were assured of confidentiality, it is therefore possible that they either over- or under-reported their level of satisfaction.

1.8 Delimitation of the study

The study consists of civil servants employed within the health organisation in the Vhembe district. Generalisability of the results of the study may be problematic as the study is conducted in only one public health institution in the Vhembe district. Another contributing factor which may impact on generalisability is the fact that only the occupational classes of pharmacist, pharmacist assistant, auxiliary service officer, administration clerk, director, personnel officer, administrative officer, and state accountant and personnel practitioner were targeted in the study.

1.9 Definition of key concepts:

Job Satisfaction- Job satisfaction can be defined as an attitude people have about their jobs, which results from a subjective evaluation of how their jobs meet their needs (Ivancevich and Matteson, 1999:123).

Remuneration (Pay)- Heery and Noon (2001, p. 306) define remuneration as “payment for work, which can assume a number of different forms, including a basic wage or salary, supplementary cash payments, such as shift pay and overtime pay, and benefits in kind.” According to Erasmus, van Wyk and Schenk (2001, p. 526), remuneration is defined as “the financial and non-financial extrinsic rewards provided by an employer for the time, skills and effort made available by the employee for fulfilling job requirements aimed at achieving organisational objectives.” Concepts such as pay, wage or salary are occasionally used as more or less having the same meaning as remuneration (Erasmus et al., 2001).

Promotion- Heery and Noon (2001, p. 286) define promotion as “the act of moving an employee up the organisation hierarchy, usually leading to an increase in responsibility and status and a better remuneration package.” Grobler et al. (2002, p. 237) define promotion as “the reassigning of an employee to a higher-level job.” Graham (1986, p. 156) defines promotion as “a move of an employee to a job within the company which has greater importance and, usually higher pay.” According to Schleger (1985, p. 50), a promotion is “when one person moves into a position of greater responsibility.”

Supervisor- According to Evans (1993, p. 112), a supervisor is defined as “a member of the most junior level of management in the organization.” According to Heery and Noon (2001, p. 355), a supervisor is defined as “a front-line manager who is responsible for the supervision of employees.” Nel et al. (2004, p. 453) consider supervisors to be those employees that “control the activities of lower-level employees.”

Retention strategies- to encourage valuable staff members to remain, the remuneration system must provide sufficient rewards for these employees to feel satisfied when they compare their

rewards with those received by individuals performing similar jobs in other organisations (Swanepoel, Erasmus, van Wyk & Schenk, 2000:528). However, according to Holbeche (2002:187), seeking to use reward as the main means of motivating people is a waste of time

1.10 Organisation of the study

This study is organized into five chapters. In accordance with Mnyaka (2006:7) this section serves to indicate what the researcher intends to discuss in each chapter.

- **CHAPTER 1: ORIENTATION OF THE STUDY**

In this chapter, a brief overview of the research problem, aims of the research, definition of concepts, significance of the study, limitation of the study, delimitation of the study, brief summary of literature review and the whole research process is given.

- **CHAPTER 2 : LITERATURE REVIEW**

This chapter gives a review of literature studies on the role of staff management in effectively helping institutions implement strategies that encourage personnel to remain committed to their institutions and theoretical framework. As noted by De Vos et al. (2005:117) a literature review is a description of primary and secondary sources of research material. This chapter describes the strategies of staff retention that are employed by the public sectors

- **CHAPTER 3: RESEARCH DESIGN AND METHODOLOGY**

This is the critical part of the research study. Research design sets up the framework for the study and is the blueprint of the research. This chapter gives a brief explanation of the theory underpinning the methodology as well as how the researcher undertook the research.

• CHAPTER 4: DATA ANALYSIS AND INTERPRETATION

The research results are presented in this chapter, this includes a clear analysis of data collected realization of sample and discussion of results. Data was analysed and interpreted in this chapter.

• CHAPTER 5: FINDINGS, CONCLUSION AND RECOMMENDATIONS

Chapter 5 deals with the discussion of the results that were obtained. Conclusions are drawn based on the obtained results and the possible practical implications of the research findings are highlighted. In conclusion, recommendations for future research that may be of worth are put forth.

CHAPTER 2: LITERATURE REVIEW

2.1 Introduction

Job satisfaction is important in predicting systems stability, reduced turnover and worker motivation. If motivation is defined as the willingness to exert and maintain effort towards attaining organizational goals, then well-functioning systems should seek to boost factors such as morale and satisfaction, which predict motivation. A survey of ministries of health in 29 countries showed that low motivation was seen as the second most important health workforce problem after staff shortages (Mathauer et al, 2006:34).

Previous African studies have identified the most important human resources tools to manage job satisfaction, these include materials, salary, training, the working environment, supportive supervision and recognition (Mathauer et al, 2006:89). These findings are relatively consistent with those of the “Uganda Health Workforce Study”, where the effects of several job-related factors were evaluated to judge their relative importance in predicting job satisfaction. In order of importance, the following were the most significant contributors to overall satisfaction: job matched with workers’ skills and experience, satisfaction with salary, satisfaction with supervisor, manageable workload and job security (Uganda Ministry of Health, 2007:67, Kober et al, 2006:34). Against this background, it is imperative to look at the definition of job satisfaction as outlined by different authors.

Early theory in worker satisfaction and motivation identified compensation as a “hygiene” factor rather than a motivation factor. This means that basic salary satisfaction must be present to maintain ongoing job satisfaction, but this by itself will not provide satisfaction and increased amounts of salary will not contribute to an increasing level of job satisfaction. However some research done in Africa suggests that salary increases and other improvements in compensation, in the context of highly inadequate pay and benefits, may indeed contribute to workforce retention. This chapter covers areas relating to the management and level of job satisfaction of health workers in Limpopo Province, Republic of South Africa It will also explain the

significance of health workers in providing health services, as well as the challenges faced by the public service in retaining health professionals.

2.2 Factors influencing the level of Job Satisfaction at Elim Hospital

The theories of motivation, job satisfaction and organisational commitment have evolved over time, diverging in perspectives on the organisational environment and the positioning of the individual within that environment. As the world of work has changed, so too has the focus in behavioural scientists' theories applied to management. The general pattern that emerges in the literature reflects a shift in focus from motivation as a method of control, to motivation as a determinant of job satisfaction and more recently to a focus on organisational commitment (Taylor, 1991:9; Heald, 1995:14; Wickens, 1995:9) as quoted by Kinnear and Sutherland (2000: 106). The following factors influence job satisfaction thereby leading to the reasons that employees will seek to remain in organisations.

2.2.1 Money

Mullins (1999:412) says that for the vast majority of people, money is clearly important and a motivator at work but to what extent and how important depends upon their personal circumstances and the other satisfactions they derive from work. Deeprose (1994:3) says that an important realisation is that pay is not the only thing people work for. They are looking for a number of other returns to justify time, energy, mental and emotional effort that they devote to the organisation.

According to Professor Frank Horwitz (2004:9) a striking finding of a recent survey on retaining knowledge workers taken in South Africa and Singapore, is that South African companies did not view competitive pay packages as the most effective strategy to attract, motivate and retain knowledge workers. From this, it can be seen that remuneration is probably the first attraction point that a potential or existing employee will consider, but that there are a host of other important aspects that they will consider before applying for a job or remaining in that job.

2.2.2 Empowerment

Empowerment is recognised as one of the necessary conditions for an effective organisation. Unfortunately, because organisations do not recognise the core problems impeding empowerment, they do not employ simple, effective techniques to remove obstacles preventing empowerment (Mullins, 1999:669). Empowerment supplies people with power, strength and energy to tackle changes. Krietner et al., (2002:427), defines empowerment as sharing varying degrees of power with lower-level employees to better serve the customer. In modern organisations, people want to have greater say in the workplace.

Schultz et al., (2003:141), says that empowerment is the sharing of influence and control with employees. Leaders should allow employees to share in developing goals and strategies and the satisfaction derived from reaching those goals. Factors that retain knowledge workers are; creating an environment where employees are free to act independently, and giving access to leading edge technologies and work challenges (Kinnear & Sutherland, 2001:16).

Employees are encouraged to take control of their destiny in organisations, work hard and work smart. This can only come to fruition if an organisation allows its employees some flexibility and more say in planning profitability thereby reducing turnover rates. Patel (2003:8) says that many black economic empowerment (BEE) initiatives fail because the focus is on the top – making sure that senior management has the right profile – rather than enabling the lower levels to become empowered. Giving employees opportunities and allowing them to become shareholders results in an empowered workforce this will contribute to the organisations goals and sustainability.

2.2.3 Job enrichment

Job enrichment methods attempt to change the nature of the job by broadening responsibilities, giving more autonomy for decision making, creating client systems and direct feedback systems and generally enlarging the scope of jobs (Osland et al., 2001:89). According to Krietner et al. (2002:189), job enrichment entails modifying a job such that an employee has the opportunity to

experience achievement, recognition, stimulating work, responsibility and advancement. Job characteristics are objective aspects of the job design that can be changed to improve the critical psychological states (Hellrigel et al., 2001:271):

- Skill variety – is the degree to which the job involves many different work activities or requires several skills and talents.
- Task identity – is present when a job involves completing an identifiable piece of work (doing a job with a visible beginning and outcome).
- Task significance – is present when a job has a substantial impact on the goals or work of others in the company.
- Autonomy – is present when the job provides substantial freedom, independence and discretion to the individual in scheduling work and determining the procedures to be used in carrying out tasks.
- Feedback – is present when work results give the employee direct and clear information about his or her performance.

The five job characteristics above can improve workers critical psychological states, namely:

- Experienced meaningfulness – refers to whether employees perceive their work as valuable and worthwhile.
- Experienced responsibility - refers to whether employees feel personally responsible for the quantity and quality of their work.
- Knowledge of results – refers to the extent to which employees receive feedback about how well they are doing.

2.2.4 Performance appraisal

Performance appraisal is the process of systematically evaluating each employee's job-related strengths, developmental needs, progress toward achieving goals, and then determining ways to improve the employee's job performance (Hellriegel et al., 2001:252). An important part of the performance appraisal involves an assessment of each employee's progress toward achieving his

or her goals. For these goals to be effective, they must be clear and specific so that employees know what is to be achieved. Mullins (1999:695) says that one way in which to review the performance and potential of staff is through a system of performance appraisal. It is important that members of the organisation know exactly what is expected of them and the yardsticks by which their performance and results are measured. Most importantly, an effective performance appraisal scheme can improve the future performance of staff by being linked to financial rewards or planned career progression.

Performance appraisal is seen by many to be a process owned and driven by human resources. The ideal performance appraisal should be a collaborative venture between subordinate and superior in which goals and objectives are agreed upon and development plans are put in place to ensure that the subordinate can achieve those goals and objectives (Schultz et al., 2003:77).

According to De Klerk (2001:100) performance management as an integrated system can effectively be used to improve performance, motivate staff, identify training and development needs, provide feedback, focus on career development and form a basis for reward or corrective action. Communication is probably one of the most important aspects of performance appraisal. The quality of communication during a performance appraisal meeting can support or defeat employees; it can increase commitment and motivation or make an employee defensive (Gordon, 2002:233). Managers should be very sensitive in the way that they communicate as this, if done positively, will contribute to the retention of skill and talent.

2.2.4 Benefits

2.2.5 Career development

A career is progress through life and is made up of different jobs. Flood (2002:35) says that a career means security, commitment, loyalty and performance, and is what many employees aspire to. Flood (2000:5) goes on to say that a survey carried out in 2001 on the reasons why employees change jobs, revealed that the number one reason was that there was no job satisfaction. One of the biggest contributions to job satisfaction is career security.

Poor career planning may cause confusion and stress at any stage across the lifespan of an employee. The platitudinal career, which is characterised by poor promotional prospects, is a specific workplace stressor. Unfulfilled career expectations may cause motivational problems in employees who lack status and autonomy (Schultz et al., 2003:210).

Corporate handholding up each rung of a well-defined career ladder has become a thing of the past. Employees are now told that they 'own their own employability' (Krietner et al., 2002:276). Having told people that they need to be 'career self-reliant' and having provided them with the necessary resources, the companies are then surprised when they face the very turnover that their programs have helped foster (Pfeffer, 1998:162). According to Osland et al. (2001:139), managers who sincerely try to help employees reach their career goals are usually rewarded with loyalty and commitment. It should therefore be an obligation of the organisation to recognize and support an employee's advancement in training and development and provide a career path or promotion so as to retain their valuable skills.

Leaner management hierarchies and flatter employee structures in modern organisations can focus attention on non-traditional career paths that provide alternatives to promotion such as lateral or rotational moves, dual-career ladders, downward moves, and early retirement (Osland et al., 2001:130). It is all about caring for and nurturing talent in an organisation, keeping employees informed, interested and fulfilled, to prevent high turnover rates.

2.2.6 Benefits

Employees always flock to companies who offer more benefits (Rampur, 2009:23). Benefits can demonstrate to employees that a company is supportive and fair, and there is evidence to suggest that stable benefits are at the top of the list of reasons why employees choose to stay with their employer or to join the company in the first place (Lockhead and Stephens, 2004:89) The introduction of flexibility in benefits packages can be a key ingredient in ensuring good retention, particularly since it affords greater responsiveness to the specific needs and circumstances of individuals (Lockhead and Stephens, 2004:12)

2.2.7 Training and development

An employee turnover rate may be affected by training. According to a study done by the ASTD in 2003, 41% of employees at companies with poor training planned on leaving within a year, as against 12% planned departures at companies with excellent training (Clouden, 2009:90). Different types of training can play an important role in creating and reinforcing high involvement work processes (Vandenberg, Richardson and Eastman, 1999). It is imperative for the organization to provide development opportunities for individual employees in order to enhance their skills and improve their chances of getting higher posts. A lack of training, development and career opportunities are some of the major reasons for voluntary turnover (Phillips, 1990:23).

2.2.8 Performance management

It is imperative for any organization to manage the performance of its employees effectively so as to keep employees who are making meaningful contribution to the company. In a research conducted by Sherman, Alper and Wolfson (2001:67), the results have shown that more than half of the employees surveyed said they believe their companies routinely tolerate poor performance and managers often underestimate how vehemently employees resent the presence of underperformers within their group, which may help to explain why good people are walking out of the door. This suggests that there is a need for organizations to deal with low performers in order to reduce the chances of losing high performing employees. Employees whose performance is recognized for the purpose of incentives are encouraged to continue making a valuable contribution to the organization. Skilled employees should be remunerated accordingly.

For example, Griffeth and Hom (2001:89) refers to the significance of payments based on employee performance, whereby employees receive pay raises for increasing depth of knowledge in a professional or technical area, or for expanding their breadth of knowledge of multiple jobs (corresponding to several stages in a continuous process technology or manufacturing assembly). The introduction of an Occupational Specific Dispensation in the public service seems to be one

of the attempts to take cognisance of performance, knowledge and career pathing (Griffeth and Hom; 2001:89)

Employees who do not perform, may choose between improving their performance in order to be rewarded or leave the organization, and in the process create an opportunity for the organization to recruit new employees who will perform. However, performing employees may leave the organization if they are treated equally with non-performing employees when it comes to the distribution of rewards and incentives. Managers may push performing employees away if they are not communicating clear expectations and fail to share their picture of what constitute success of the employee in the expected deliverables and the performance of their job (Heathfield, 2009:45). Providing ongoing performance management, through networking within the organization, in order to share the best practices could assist in building relationships among employees.

2.2.9 Working environment and conditions

A poor work environment may cause discomfort to some employees who may end up being attracted to other organizations with better working conditions. In a study conducted by Pillay (2009:78), public sector nurses felt employment security, workplace organization and the working environment were the most important factors, whereas the private sector nurses rated workplace organization, employment security and professional practice as being the most important. It should be realized that, working conditions in an organization, have a role to play in deciding whether to stay or leave. These are the gaps that may be explored. Good working conditions may serve as a motivating factor to employees, in order to stay in an organization. This, therefore, means that the impact of service benefits in staff retention cannot be ignored.

Various employee service benefits are regulated by legislation in South Africa; leave, working time, employment remuneration, termination of employment, and others are some of the benefits that they are entitled to. It is evident that public and private sector employment have to comply with the Basic Conditions of Employment Act at a minimum level; working conditions should be continuously improved. However, if the organization wants to retain its valued employees,

service conditions should be attractive. Therefore, employers must demonstrate commitment and responsibility so as to ensure that all workers, irrespective of specialist field, are treated fairly (Pillay; 2009:78).

The Basic Conditions of Employment Act can be utilized to ensure that basic working conditions are maintained and improved. However, it has to be acknowledged that some organizations provide more favourable benefits above the minimum and therefore, employees will always have a choice to move from one organization to another. The Basic Conditions of Employment Act (BCEA) if used correctly is one of the tools that are used to motivate and retain employees in various fields of work, but as previously mentioned, the issues enshrined in the BCEA are part of the keys to motivate all employees.

2.2.10 Working processes

The problem of turnover can be addressed through a variety of pro-active retention strategies: workplace policies and practices which increase employee commitment and loyalty (Lockhead and Stephens, 2004:11). One of the studies conducted by Vandenberg, Richardson and Eastman (1999:33) demonstrate that substantial practical benefits can be achieved when organizations are using a participative approach to management as the morale of the workforce is much stronger, in the sense that they are more psychologically attached to the organization and possess greater satisfaction from work and in turn, they are less likely to state an intention of leaving the organization in the near future, and appear to behave consistently with that intention. Organizations should continuously improve their systems, procedures and policies in an attempt to look after its employees.

If employees are given authority and participate in the decision making processes of the organization, they may identify themselves with that organization and it may be difficult for them to leave. Furthermore, this may be shared with other people outside the organization whereby a desire to work for the organization may be generated (Lockhead and Stephens, 2004:121).

2.3 Job satisfaction theories

We now look at different theories of job satisfaction, to determine how they can be utilized to improve and increase job satisfaction.

2.3.1 Content theories of job satisfaction

The content theory of job satisfaction rests on identifying the needs and motives that drive people. The theory emphasizes the inner needs that drive people to act in a particular way in the work environment. These theories therefore suggest that management can determine and predict the needs of employees by observing their behaviour.

2.3.2 Maslow's hierarchy of needs

According to Maslow's theory (1970:9), people's needs range from a basic to a high level. These needs are present within every human being in a hierarchy, namely physiological, safety and security, social, status and self-actualization needs. Failure to satisfy one need may have an impact on the next level of need. Low order needs takes priority before the higher order needs are activated, so that needs are satisfied in sequence. According to this theory, people who are struggling to survive are less concerned about needs on the higher levels than people who have time and energy to be aware of higher level needs (Lockhead and Stephens, 2004:11).

2.3.3 Herzberg's two-factor theory

In the late 1950s Frederick Herzberg developed a theory that there are two dimensions to job satisfaction, "motivation" and "hygiene". The work characteristics associated with dissatisfaction (hygiene factors) vary from those pertaining to satisfaction (motivators) in that motivators lead to satisfaction, although their absence may not lead to dissatisfaction. The motivators include achievement, recognition and intrinsic interest in the work itself. The continuing relevance of Herzberg is that there must be some direct link between performance and reward, whether extrinsic as in recognition or intrinsic as in naturally enjoyable work, to motivate employees to

perform and improve their job satisfaction. The current study will be based upon this theory (Lockhead and Stephens, 2004:12).

2.3.4 Hygiene factors

Hygiene factors are features of the job such as policies and practices, remuneration, benefits and working conditions, corresponding to Maslow's lower order of needs. Improving these factors may decrease job dissatisfaction and thus increasing of motivators. Inadequate hygiene factors may lead to dissatisfaction, but at the same time adequate hygiene factors do not necessarily lead to job satisfaction. Hygiene factors need to be tackled first, and the motivators can follow. Organizations cannot afford to ignore hygiene factors as employees will be generally unhappy and thus likely to seek other opportunities, while mediocre employees might stay on, and compromise the organization's success (Lockhead and Stephens, 2004:100).

2.3.5 Motivators

According to Herzberg, motivators include job content such as responsibility, self-esteem, growth and autonomy. These satisfy high order needs and can result in job satisfaction. Granting employees more responsibility and creativity in their jobs is an example of a motivator which may encourage them to exert more effort and perform better (Lockhead and Stephens, 2004:190).

2.3.6 Process theories of job satisfaction

Behaviour is a fundamental indication of an individual's perception and expectations about a situation and possible outcome of behaviour. Process theories define how and by which goals individuals are motivated. They are based on the assumption that people make conscious decisions regarding their behaviour. The most common process theories are the equity theory, the expectancy theory and the job characteristics model (Vroom; 1964:99).

2.3.7 Expectancy theory

This theory was developed by Vroom (1964:99) who asserts that job satisfaction is based on people's beliefs about the probability that their effort will lead to performance (expectancy) multiplied by the probability that performance leads to rewards (instrumentality) and the value of perceived rewards (valence). This theory is based on the belief that the amount of effort exerted on a job depends on the expected return and may result in increased pleasure or decreased displeasure, and that people may perform their job and be satisfied if they believe that their efforts will be rewarded. The fundamental principle of expectancy theory is the understanding of individuals' goals and the linkages between effort and performance, performance and rewards, and rewards and individual goal satisfaction. This theory recognizes that there is no universal principle that explains people's motivation and is regarded as a contingency model. Understanding what needs a person seeks to satisfy does not ensure that the individual perceives high performance as necessarily leading to the satisfaction of these needs.

2.3.8 Job characteristics model

Bergh and Theron (2000:23) describe this model as an interactive model that develops employees and the work environment to achieve maximum fit in the work environment. The model asserts that the job should be designed to possess characteristics to enable conditions for high motivation, satisfaction and performance. There are five core characteristics of the job that influence workers' behaviour and attitude, namely, skill variety, task identity, task significance, autonomy and feedback. The relationship between core job characteristics and work outcomes is moderated by employees' growth-need strength, knowledge, skill, and context satisfaction, therefore the relationship between core job characteristics and work outcomes may differ.

2.3.9 Equity theory

This theory emphasizes the comparison of existing conditions against some standard by using the relationship between two variables (inputs and outcomes). Inputs are what an individual contributes to an exchange, while outcomes represent what an individual obtains from an

exchange. Equity theory suggests that individuals assign weights to various inputs and outcomes according to their own perception of relative importance. According to Daft and Noel (2001; 99) equity theory is a process of job satisfaction that focuses on individuals perceptions of how fairly they are treated compared to others. This implies that, if people perceive their treatment as less favorable than that of others with whom they compare themselves, they are likely to be less motivated to perform better. This theory therefore purport that people compare the ratio of their outputs to inputs with the ratio of inputs of others.

2.4 Job design and the work environment

Job design can be seen as an important factor influencing how employees feel and react to their job, thus affecting their performing and job satisfaction. According to Wood et al (2004:90), job design can be described as the planning and specifications of job tasks and the designated work setting where they are to be accomplished. According to Smith (2002:9), people respond unfavorably to restrictive work environments, so it is imperative for organizations to create a working environment that gives employee freedom to think, engaging and motivating the workforce to reach a higher level of job satisfaction. Ayers (2005:33) suggests that the work environment should motivate employee to perform at their best and show commitment to the organization, enhancing work conditions to support the organization's mission and thus impacting on job satisfaction. The condition under which job are performed can have as much impact on people's effectiveness, comfort and safety as the intrinsic detail of the task itself.

2.5 Impact of job satisfaction on employee productivity

Numerous authors have highlighted that job satisfaction impacts on employee productivity, turnover, absenteeism, physical and psychological health (Johns, 1996; Luthans, 1989: 77; Mullins, 1996: 23).

2.5.1 Productivity

Research findings indicate that the relationship between satisfaction and productivity is positive, but very low and inconsistent (Johns, 1996:33). According to Luthans (1989:78), although a relationship between job satisfaction and productivity exists, the relationship between these variables is not strong. The author maintains that the most satisfied employee will not necessarily be the most productive employee. At an individual level the evidence is often inconsistent in terms of the relationship between satisfaction and productivity, but at an organisational level a strong relationship exists between satisfaction and productivity (Robbins et al., 2003:90).

2.5.2 Physical and psychological health

Spector (1997:22) states that individuals who dislike their jobs could experience negative health effects that are either psychological or physical. On the other hand, Luthans (2002:22) mentions that employees with high levels of job satisfaction tend to experience better mental and physical health.

2.5.3 Turnover

A number of studies strongly support the view that turnover is inversely related to job satisfaction (Griffon, Hand, Meglino & Mobley (1979:11) and Price (1977:33) cited in Robbins et al., 2003:45). According to French (2003), a high employee turnover rate is often prevalent in an environment where employees are highly dissatisfied. Greenberg and Baron (1995) contend that employees lacking job satisfaction often tend to withdraw from situations and environments as a means of dealing with their dissatisfaction.

A major form of employee withdrawal is voluntary turnover. By not reporting for duty, or by resigning to seek new job prospects, individuals might be expressing their dissatisfaction with their jobs or attempting to escape from the unpleasant aspects they may be experiencing. Phillips, Stone and Phillips (2001:56) concur that employee turnover is the most critical withdrawal variable. A study conducted by Steel and Ovalle (1984:55) established a moderately strong

relationship between job satisfaction and turnover, indicating that less satisfied workers are more likely to quit their jobs.

According to Lee and Mowday (1987:99) cited in Luthans (1989:78), a moderate relationship exists between satisfaction and turnover. The researchers posit that high job satisfaction will not necessarily contribute to a low turnover rate, but will inadvertently assist in maintaining a low turnover rate.

2.5.4 Absenteeism

Research indicates that job satisfaction levels are related to absenteeism (Hellriegel, Slocum & Woodman, 1989:23). Nel et al. (2004:548) maintain that “absenteeism is regarded as withdrawal behaviour when it is used as a way to escape an undesirable working environment.” According to Luthans (1989:89), various studies conducted on the relationship between satisfaction and absenteeism indicate an inverse relationship between the two variables. Thus, when satisfaction is high, absenteeism tends to be low.

The converse indicates that when satisfaction is low, absenteeism tends to be high. Contrary to this, the findings of a study undertaken by Johns (1996:89) found the association between job satisfaction and absenteeism to be moderate. Robbins (1993:23) supports the view of a moderate relationship existing between satisfaction and absenteeism. According to Robbins et al. (2003:90), the moderate relationship between these variables could be attributed to factors such as liberal sick leave, whereby employees are encouraged to take time off. The afore-mentioned could ultimately reduce the correlation coefficient between satisfaction and absenteeism.

2.6 The role of human resources in level of Job satisfaction

Renton and Vicente (2007:31), point out that business leaders perceive HR to be more focused on transactional activities such as benefits and performance evaluations rather than high-level strategic people issues, such as leadership development. When enhancing skills development

plans, HR must drive strategic initiatives around top priority issues such as leadership, talent management, creating a high-performance culture, training and development.

Labour laws

Overall, HR strategies must help attract and retain talent, by creating “people friendly” training initiatives which encourage people to feel that they belong, that they are appreciated and that their opinions are valued. This supports the statements made earlier by McComb (2004:45) that leadership, communication, mutual trust and respect for the four key focus areas that make an employer an employer of choice.

How an employer achieves an improved state of joint governance, according to Swanepoel, et al. (2003:181) is by empowering people and seeing them as an asset to the organisation, and collaborating with them through high level bargaining forums using recognition and negotiation. A higher level approach to addressing for example, hospitals long term dilemma of employee motivation and retention strategies would be to look at how the organisation truly views its employees, as opposed to relying solely on questionnaire results. One option would be to consider to what extent the organisation promotes individualism and collectivism in its relationship with its employees as a grand strategy option to human resource management.

2.7 Determinants of job satisfaction

According to Robbins, 1998:152; Kreitner and Kinicki, 1999:198; Ivancevich and Matteson, 1998:152 there are five factors that influence job satisfaction, namely:

- Mentally challenging work
- Equitable rewards
- Supportive working conditions
- Supportive colleagues and
- Supervision

In a dynamic environment the following factors contribute to job satisfaction levels:

- Labour laws
- The introduction of teams and
- Job security.

Robbins (1998:152) and Kreitner, Kinicki and Bluens (1999:198) also mention that genetics and the personality job fit also play a role in job satisfaction levels. A discussion of all these factors is done in the following subsections.

2.7.1 Emotionally challenging work

A job is mentally challenging when it gives the employee an opportunity to use his or her skills and abilities, and offers a variety of tasks, freedom and feedback on how well the person is doing (Robbins, 1998:152). Mentally challenging work has been mentioned in the Herzberg motivation-hygiene theory as one of the factors affecting job satisfaction and staff motivation. Jobs with too little challenge create boredom while those that have too much challenge create frustration and feelings of failure.

Moderately challenging jobs result in job satisfaction (Ivancevich and Matteson, 1999:128). First-line supervisors and middle-level managers face challenges resulting from the dynamic nature of their environment. These challenges might have an impact on their job satisfaction levels depending on their levels of self-efficacy. Self-efficacy refers to an individual's perception of his or her ability to cope with challenges facing him or her on a daily basis (Mullins, 1993:489). Individuals with high self-efficacy levels firmly believe in their performance abilities, while the opposite is true for those with low self-efficacy levels (Ivancevich and Matteson, 1999:128).

Managers attempt to meet employees' personal and social needs through implementing job design, a process concerning the relationship between employees and the nature and content of jobs, and their task functions (Mullins, 1993:489). According to Kreitner et al (1999:191),

implementing a method of job design, called job enrichment presents a practical application of Herzberg's theory. Job enrichment involves building achievement, recognition, stimulating work responsibility and advancement into a job (Kreitner et al 1999:191).

In Kreitner et al (1999:192) a warning is issued to managers that, to motivate employees, they should not just offer good pay and working conditions, but must ensure that the employees' jobs are enriched. The link between job characteristics and satisfaction can be illustrated by the Job Characteristic Model, which was developed by Richard Hackman and Greg Oldham to increase employee motivation and satisfaction (Kreitner et al, 1999:196). In the model, motivation is determined by three psychological states, which are:

- Experienced meaningfulness, this is an employee's perception that his or her work is worthwhile or important.
- Experienced responsibility; this represents the belief by an employee that he or she is personally accountable for the outcome of his efforts.

2.7.2 Equitable Rewards

Equitable rewards include monetary rewards and promotion practices and policies. The way employees perceive the rewards plays an important role in their job satisfaction levels. According to Ivancevich and Matteson (1999:123), if employees perceive fairness in their rewards, they are likely to experience job satisfaction, and if they perceive unfairness, they will not be satisfied in their jobs. The subject of equitable rewards can further be explained in terms of the Adam's Equity Theory. This is an approach to motivation that is concerned with individuals' beliefs about how fairly they are treated compared with their peers, based on their relative levels of inputs and outcomes (Hellriegel et al, 1999:475).

According to Kreitner et al (1999:211), the basis of the equity theory is the Cognitive Dissonance Theory, which stipulates that people are motivated to maintain consistency between their cognitive beliefs and their behaviour. In other words, when employees perceive inconsistencies, the result is cognitive dissonance, which in turn motivates corrective action. Corrective action

can vary from a slight change in attitude or behaviour to an extreme case of hurting other people. The Expectancy Theory of Motivation also provides more insight into the subject of equitable rewards. The basic expectancy theory is the view that people tend to choose behaviours that they believe will help them achieve desired outcomes, for example, a promotion or job security. Furthermore, people tend to avoid behaviours that they believe will lead to undesirable outcomes such as demotion or criticism (Hellriegel et al, 1999:482).

The Porter and Lawler's expectancy theory was an extension of the theory developed by Victor Vroom (Kreitner et al, 1999:216). In the model developed by Porter and Lawler it is indicated that satisfaction and performance are two different but related phenomena. In this model satisfaction is not viewed as a cause of high performance. Instead, it suggests that employees who perform well feel more satisfied, assuming that performance is rewarded appropriately (Hellriegel et al, 1999:487). Employees' perceptions of whether their rewards are equitable include their evaluations of both extrinsic and intrinsic rewards. It can be seen in this conception that besides the employee efforts, other variables like ability or competency, individual personality characteristics, called traits, and role perceptions influence performance.

2.7.3 Supportive working conditions

According to Robbins (1998:152), supportive working conditions involve the extent to which the employees' work environment provides for personal comfort and successful job execution. The conditions that have been mentioned by employees as important to them are the following:

- Working closer to home, in clean, relatively modern facilities with adequate tools and equipment;
- Working in physical environments that are safe. For example, temperature, light, and noise should not be at extreme levels.

2.7.4 Supportive colleagues

According to Robbins (1998:152), for most employees, work also fills a need for social interaction. Therefore, having supportive and friendly co-workers leads to elevated job satisfaction levels. Globalisation and the implementation of government laws, such as the Employment Equity Act of 1998, lead to organisations with a diverse workforce. First-line supervisors and middle-level managers therefore face the possibilities of having colleagues from different cultural backgrounds. The extent to which they are friendly and supportive of each other is an influencing factor to their job satisfaction levels.

2.7.5 The personality job fit

An individual's personality is a relatively stable set of feelings and behaviours formed by genetic and environmental factors (Ivancevich and Matteson, 1999:125). According to Ivancevich and Matteson (1999:127), personality is interrelated with perception, attitudes, learning and motivation and although the managers have very little control over the personality of an individual, it is an important variable in the understanding of employee behaviour. Robbins (1998:152) argues that a high agreement between an employee's personality and occupation results in a more satisfied employee. He also stated that people with personality types congruent with their chosen vocations have the right talents and abilities to meet the demands of their jobs. They are therefore more successful in their jobs and this presents a greater potential for increased job satisfaction level.

2.7.6 The genetic makeup of individuals

An individual's disposition towards life is established by his genetic makeup, and it is carried over into his or her disposition towards work (Robbins, 1998:153). The implication for managers is that employee selection is important because once a person is hired there is not much that can be done to influence his satisfaction at work. Manipulating all the above mentioned factors that affect job satisfaction will only have little effect.

2.7.7 Job security

According to Ivancevich and Matteson (1999:123), to be satisfied in their jobs, employees require the assurance that their positions are secure and to them, continued employment with the organisation is a reasonable expectation. From the discussions about the economic challenges facing organisations, it can be seen that it is difficult for organisations to always meet this expectation. The reality of the situation is that in order to survive the economic challenges, organisations are forced to downsize, restructure and redesign jobs.

This state of affairs gives rise to first-line supervisors and middle-level managers who are insecure and therefore not satisfied in their jobs. According to Hellriegel et al, (1999:30), the middle-level managers are usually the ones who lose their jobs, leaving increased workload for those managers who survived the downsizing, and for the first-line supervisors.

These managers and first-line supervisors might then end up dissatisfied in their jobs if they perceive unfairness or cannot cope with the increase in workload. Those who have survived downsizing suffer from what is called the “survivor syndrome”. They feel guilty to have managed to keep their jobs and at the same time lose loyalty towards the employers, as they live in fear of losing their jobs should another downsizing occur. The knowledge that their jobs are insecure results in decreased job satisfaction (Barrows and Wesson, 2001:45).

In South Africa, the majority of the managers are white; therefore they have to confront the impact of affirmative action as an additional factor contributing to their job insecurity. Affirmative action will be discussed in more detail in the following subsection. However, in an article by Hofmeyr (1998:18), a study of management development and satisfaction revealed that despite affirmative action, some white managers believe they could still advance in their jobs.

2.7.8 Labour legislation

Since South Africa became a democratic government in 1994, new laws have been introduced. The implementation of the Affirmative action, the EEA and the LRA can have a major impact on

the roles of first-line supervisors and middle level managers, resulting in changed job satisfaction levels of these managers.

2.7.9 Introduction of self-managed teams

Some companies have switched over to grouping employees into work teams as a way of increasing productivity. According to Hellriegel et al (1999: 577), the two most common reasons for increasing the use of work teams are that they result in increased innovation and delivery speed, thereby achieving greater customer satisfaction. According to Robbins (1998:289), self-managed teams are groups of employees who take on the responsibilities of their supervisors, resulting in the supervisory positions being eliminated.

Often, self-managing teams are multidisciplinary and are capable of performing various managerial tasks namely, planning, scheduling, monitoring and staffing (Hellriegel et al, 1999:582) and (Kreitner et al 1999:391). According to Kreitner et al (1999:391) introduction of self-managed teams removes the traditional clear-cut distinction between manager and the managed as non-managerial staff are empowered, that is, delegated greater authority and granted increased autonomy. For some managers, accepting the idea of empowerment is difficult, and the possibility of introducing these teams in the workplace results in job insecurity (Hellriegel et al, 1999:598).

The job insecurity of the managers is due to the fact that, as these teams become more experienced, the roles of the managers change. The result has been downsizing by the companies, with mostly the middle-level managers being eliminated (Hellriegel et al, 1999:582). As already discussed in this chapter, the existence of job insecurity in first-line supervisors and middle-level managers can lead to decreased job satisfaction on their part. According to Sayles and Strauss (1966:74), managers derive satisfaction from power, decision making and control. When teams take these responsibilities over, managers are likely to experience decreased job satisfaction.

2.7.10 Managerial Supervision

According to Siegel and Lane (1987:424), leadership characteristics and considerations are related to job satisfaction levels of subordinates. As employees, first-line supervisors and middle-level managers are subjected to their superiors' supervision methods and this can have an impact on their job satisfaction levels. In general, employees prefer to work with considerate supervisors, who are supportive, warm and employee-centred rather than those who are hostile, apathetic and job-centred. Regarding the supervisors task orientation, some employees seem to prefer task supervisors whereas others seem to prefer less intensive supervisors.

2.8 Improving employee job satisfaction

In view of the negative consequences of job satisfaction discussed above, it is in the interest of employers to consider ways of raising job satisfaction. In an attempt to improve job satisfaction with levels of employees, it is suggested in Siegel and Lane (1987: 437) that two approaches, namely, the passive one and the active one, are usually followed by organisations. It is however more beneficial to use the latter.

The passive approach involves ignoring the issue entirely, waiting for employee grievances to be filed, seeing turnover rise to unacceptable levels or watching unions develop before the consequences of low job satisfaction are addressed. On the other hand, an active approach involves the organisation deciding to pursue employee job satisfaction as a goal (Siegel and Lane, 1987:47). When an active approach is adopted, the following techniques can be used:

2.8.1 Realistic job preview

A realistic job preview involves an organisation giving its prospective employees as accurate an appraisal of their job as possible, before they are hired. Therefore, people are prevented from applying or accepting jobs for which they are not well suited because of their genetic makeup or perhaps, personality. This lowers unrealistic job expectations and future job dissatisfaction can be avoided (Siegel and Lane, 1987:437).

2.8.2 Attitude surveys

Human resources departments of organisations usually conduct job satisfaction surveys to analyse employee attitude on important topics (Carrel et al, 1995:765). According to Siegel and Lane (1987:437), if attitude surveys are properly designed and effectively implemented, they should serve as a demonstration to the organisation that the organisation cares about them. Attitude surveys have the following characteristics:

- They require anonymity and confidentiality and are therefore for identifying problems in groups.
- When problems are identified, action plans can then be formulated to remedy the deficiencies.

The factors contributing to job satisfaction have already been discussed in this review. It can therefore be expected that the action plans adopted to remedy the situation must involve these factors. For example, the following action plans can be suggested:

- Job redesign – to offer a more challenging job
- Offering equitable rewards- Organisations must always know how their pay systems are perceived by employees and try to bridge the gap between what the employees perceive as equitable and what is offered by the organisation (Greenberg and Baron, 1997:188).

2.8.3 Personal approach

Managers can have a discussion session with each employee and discuss what can reasonably be done to improve that employee's job satisfaction levels. This must be done in such a way that the employee's concerns about such issues as job security are put to rest so that the employee can open up. It takes a well-meaning and a well-trained supervisor to be able to conduct this type of session effectively (Siegel and Lane, 1987:438).

2.9 Conclusion

The chapter introduced the concept of job satisfaction and highlighted the different motivational theories relating to job satisfaction. Furthermore, it sought to provide an overview of the literature pertaining to job satisfaction antecedents, whereby personal determinants and organizational factors impacting on job satisfaction were discussed. In terms of job satisfaction antecedents and job satisfaction consequences, various areas where research has been conducted have been referred to. From the literature review it is evident that job satisfaction is a phenomenon that has been extensively researched and is of significant importance to employees and managers alike. In this regard, the literature concludes with the relevance of job satisfaction on the physical and psychological health of employees and the effect it has on productivity, turnover and absenteeism.

Satisfaction with one's profession can affect not only motivation at work but also career decisions, personal health and how one relates with others. The literature shows that what contributes to job satisfaction or dissatisfaction is not only the nature of the job but also the expectation of what an individual perceives the job should provide. Health workers are at great risk of job dissatisfaction generally compared to professionals in other types of organizations. Low job satisfaction impacts on staff turnover and absenteeism, which could reduce the efficiency of health services.

Factors influencing job satisfaction vary in nature as there are personal factors and expectations involved, which tend to generate exceptions, therefore generalizations are risky. The future of the healthcare work environment poses significant challenges for employers and employees. The implication for managers is that if healthcare facilities desire to attract and retain healthcare professionals, they will need to find ways to cater for intrinsic job satisfaction factors as well as additional benefits. The appropriate methods and techniques of collecting relevant data will be discussed in chapter three

3.4 Research Methodology

CHAPTER 3: RESEARCH DESIGN AND METHODOLOGY

According to Haysman (1998:20) research methodology is the creation and development of techniques and strategies to collect, check, analyse the researcher used both the qualitative and

at data analysis. In any study, research methodology involves a selection of appropriate research approaches, research methods, sampling procedures, respondents and

3.1 Introduction

This chapter deals with the method that was used to conduct the study, as well as the preparation involved. It begins with brief descriptions of the study design, followed by descriptions of the population, study setting and sampling. Next, the direct study is described, followed by the methods of data collection, and method of data analysis. The ethical considerations are described in the last part of the chapter.

3.2. The Study Area

Statistics, according to Leady (1993:249) are a very simple matter but are a powerful tool in the hands of a researcher who is able to draw their nature and interrelationships more understandable. Through statistics, therefore, the researcher is able to conceptualize what

The study was conducted at Elim Hospital in the south of Vhembe district, Limpopo Province, South Africa. Elim Hospital is a district hospital with 326 beds which plays a pivotal role in supporting primary healthcare and is also a gateway to more specialist care. Because it is a relatively small hospital, it provides level 1 (generalized) services to in-patient and out-patients ideally on a referral from community health centers and clinics. The hospital is situated in Makhado municipality thus enabling easy access to patients from Elim catchment area.

3.3 The Research Design

Quantitative research is used to arrive at specific findings. Data collection in quantitative research is done through the use of structured instruments such as scales, tests, surveys, questionnaires

The concept research design implies the overall plan of a research study (Hopkins & Antes, 1990: 456). A similar reference of this concept is that of Kerlinger (1986:27) who defined research design as a plan and structure of investigation. Bless and Smith (1995:63) views a research design as the planning of any scientific research from the first to the last step. These views are also endorsed by other researchers such as Babbie (1998:89) and Bogdan & Biklen (1992:58). Mouton (2001:55) also described a research design as a plan or blueprint of how one intends to conduct research.

using this kind of strategy even in research of human phenomenon is justified by Best and Kahn (1993:204), Kerlinger (1986:481) and De Swart (1996:32). These writers maintain that in some

3.4 Research Methodology

According to Huysamen (1995:163) research methodology is the creation and development of techniques and strategies to collect data. In this study the researcher used both the qualitative and quantitative methods of data analysis. In this study, research methodology involves a selection of appropriate research approaches, research methods, sampling procedures, respondents and instruments for collecting and analyzing data.

3.4.1 Quantitative research method

Quantitative research methods include the implementation of statistics to measure data. Statistics, according to Leedy (1993:244), are a very simple matter but are a powerful tool in the hands of the researcher who is able to view their nature and interrelationships more understandably. Through statistics, therefore the researcher is able to conceptualize what otherwise might be incomprehensible (Leedy, 1993:244), hence the advantages of this study. The facts gathered from questionnaires were translated into tabular form. This was done so that the facts (statistics) would speak more clearly.

Quantitative research tends to be associated with measuring (Barnes, 1992:108). According to Good (1993:279) as well as Denzin and Lincoln (1994:4), quantitative studies emphasized the use of numerical measures to arrive at specific findings. Data collection in quantitative research is accumulated by means of inanimate instruments such as scales, tests, surveys, questionnaires and computers (Storbeck, 1994:73). Creswell (1994:4) is of the opinion that because quantitative research is impersonal and experimental it is not suitable to study human phenomenon. Contrary to Creswell's view (1994:4), a quantitative questionnaire has been regarded a suitable technique to gather some of the information from respondents in this study.

However, testing instruments such as scales, psychometric testing and other detailed statistical analysis will not be applied. A limited amount of quantitative analysis will be done. The idea of using this kind of strategy even in research of human phenomenon is justified by Best and Kahn (1993:204), Kerlinger (1986:481) and De Swardt (1998:32). These writers maintain that in some

quantitative research (Human phenomena) a limited quantification is included viz, counting the *number of occurrences of an event*. According to Kerlinger (1986:481), all materials are potentially quantifiable and it will be implemented in this study. The number of occurrences in each theme or category identified will be counted. The categories with high frequency occurrences will be regarded as fairly significant to the problem investigated and will reflect the major problem with regard to the management and level of job satisfaction of the health worker in Limpopo Province, Republic of South Africa in reference to Elim hospital.

3.4.2 Qualitative research methods

Shaughnessy and Zechmeister (1997: 22) locate the main difference between quantitative and qualitative researches in the procedure rather than quality. In qualitative research, findings are not arrived at by statistical methods or other methods of quantification. Qualitative research is mostly characterised by masses of data, much of which may be irrelevant to the study whereas quantitative research is usually associated with numbers which possess specific characteristics which make them very useful for analytical purposes. Ghauri and Gronghaug (2005: 204) view quantitative research as an efficient way to represent information and meanings.

Rubin (2005: 145) notes that qualitative research allows for in-depth, more open and detailed study of selected issues while quantitative research is more generalised. Follow-up questions can be asked during interviews or focus groups in qualitative research whereas quantitative research does not provide respondents with such an option. In quantitative research, Ghauri and Gronhaug (2005: 204) further note that analyses are conducted through the use of diagrams and statistics unlike in qualitative research which uses conceptualisation. The choice of a quantitative research design for this study was informed by its primary strengths because, according to Blanche et al. (2006: 132) “the findings are generaliseable and the data are objective”. Ghauri and Gronhaug (2005: 109) also assert that a quantitative research design is more scientific than a qualitative research design.

3.5 Population of the Study

Mouton (2002: 134) points out that a population is a collection of objects, events or individuals having some common characteristics that the researcher is interested in studying. More specifically, it is known as a target population. A portion of the target population to which the researcher has reasonable access is known as the, accessible population (Mouton 2002: 134).

The study population consisted of all health care professionals at Elim Hospital from all departments and wards at the time the study was conducted. Most participants were females. The study population was multicultural, with mainly black and a few white people. Among the black participants, there were people from different ethnic groups. Most participants lived in Vhembe District. The population targeted in this study included all health care, permanent and contract employees (N = 700) at Elim Hospital

3.5 Sampling Size

3.6 Sample

The sample was grouped into two categories: clinical staff = 246 (doctors and all categories of nurses), and clinical support staff = 38 (pharmacists, physiotherapists, occupational therapists, speech therapists, radiographers, oral and dental hygienists, and social workers including assistants). For the purposes of sample size calculations, the power of the study was 90% and the level of job satisfaction, being unknown, was at the expected frequency of 50% and worst acceptable results of 45% to obtain the power of 90 at 95% level of confidence.

The sample (n = 120) comprised of males and females, permanent and contract employees members on salary levels 2 to 13, extending across the following occupational classes: Pharmacist, Pharmacist Assistant, Auxiliary Service Officer, Administrative Clerk, Director, Personnel Officer, Administrative Officer, State Accountant and Personnel Practitioner.

3.7 Sampling Methods

McMillan and Schumacher (2001:174) indicate that non-probability sampling is the most common type in educational research. It does not include any type of random sampling, rather

the researcher uses subjects who happen to be accessible or who may have certain types of characteristics.

The period of data collection was 12 weeks, between 22 June and 7 September 2011. Over the 12 weeks, the researcher collected questionnaires from day staff and two hours for night staff. The target was an average of 10 questionnaires per day. According to Leedy and Ormrod (2001:218), in non-probability sampling, the researcher has no way of forecasting or guaranteeing that each element of the population will be presented in the sample. Furthermore, some members of the population have little or no chance of being sampled. The selected type for this research was therefore the purposive or purposeful sampling since it was appropriate for the research problem for this study. The rationale for using this sampling method was due to the respondents being easily accessible, as well as it being less time consuming and inexpensive to gather the research information.

3.8 Sampling Size

Wimmer and Dominick (1983:60) conclude by stating that, generally speaking, the larger the sample used the better. However, a large un-representative sample is as meaningless as a small un-representative sample.

Table 3.1: Sampling size of the study

TARGET	STUDY POPULATION	STUDY SAMPLE
Health Workers	500	105
Health Professional	100	5
Human Resource Officers	5	5
UNION	5	5
Total	610	120

3.9 Research Instruments

The period of data collection was 12 weeks, between 22 June and 7 September 2011. Over the 12 week period, a purposive sample of 120 participants was drawn from the hospital. The researcher was personally responsible for the distribution and collection of all questionnaires. Due to the nature of shift work in a hospital setting, the researcher allocated four hours every week to collecting questionnaires from day staff and two hours for night staff. The target was an average of 14 questionnaires every week over the twelve week period.

As noted by Mouton (2002:156), data collection subsists in the use of a variety of methods and techniques of data collection in a single study. Schulze (2002b: 14) maintains that data should meet the requirements of a qualitative or quantitative research design or a design consisting of a combination of these approaches. The data collection methods in this study combined these two approaches. In an effort to acquire different facets of the same problem (symbolic reality) of the participants (Berg 1995:4) and obtain more valid results in the research, the following two methods were used to collect data: document analysis, questionnaires and interview

3.9.1 Questionnaires

A structured self-administered questionnaire was used to collect data from the participants. It consisted of two sections. Section A comprised the socio-demographic characteristics consisting of six items, while Section B was adapted from an MSc Psychology thesis by Basson (1994). It consisted of 27 job satisfaction statements measured on a five-point Likert scale ('strongly agree' to 'strongly disagree'). The value of two was given to the highest level of job satisfaction (strongly agree) and the value of minus two to the lowest level of job satisfaction (strongly disagree). The values were then recoded as follows: 'strongly agree' and 'agree' were given the value of one, while 'strongly disagree' and 'disagree' were given the value of minus one. Data was then further coded as follows.

For many good reasons, the questionnaire is the most widely used technique for obtaining information from subjects (McMillan and Schumacher 2001: 257). Furthermore, McMillan and

Schumacher (2001: 257) note that a questionnaire is relatively economical, has the same questions for all subjects and can ensure anonymity. The questions for questionnaires consisted of close-ended questions such as scale questions, where: The health workers had to mark their responses in the appropriate blocks, e. g.

3.19 Data of Analysis

- A = Strongly Agree
- B = Agree
- C= Neutral
- D = Disagree
- E = Strongly Disagree

The instrument's items, format and procedures were taken from Noveno (2003); however, some modifications were made by the researcher to fit the current study. The first part of the instrument contained a statement of purpose and directions, and was designed to collect biographical or personal data that include gender, age, and civil status, educational attainment and years of work experience.

In this study, all the one hundred and twenty (120) personnel of health workers were given a questionnaire to complete prior to the onset of the individual. The questions contained close-ended questions addressing various aspects of education and how improvement could be made to the present system on job satisfaction implemented at Elim Hospital. The questions ranged from working conditions, incentives, job satisfaction and mentoring, to staff development.

3.9.2 Open ended Interviews

Schamacher et al (1993:32) defines interviews as alternative methods of collecting survey data from respondents, rather than asking respondents to read the questionnaire and enter their own answers. Researchers can send interviewers to ask the questions orally and record respondents, answers.

Interviews were implemented in this research to serve the purpose of collecting data from different respondents such as health workers, union members, and officers of the Department of Health.

3.10 Data of Analysis

Quantitative data from the returned questionnaires were coded and entered into a Microsoft Excel spreadsheet (Microsoft Office, 2003). The statistical software SPSS version 17.0 was used to analyze the generated data. Descriptive and inferential statistical analyses were employed. Data were also summarized using graphic presentations for the interpretation of findings. Statistics were based on percentages and frequencies. Association between socio-demographic characteristics and job satisfaction, as well as comparison of the level of job satisfaction between categories of health care professionals, was assessed for statistical information.

The researcher made notes during the interviews and transcribed the respondents' answers. The researcher read repeatedly through the data in order to familiarize myself with it and during this process the researcher underlined some key words and sentences.

3.11 Ethical consideration

Paul and Jeanne (2010:101) say most ethical issues in research fall into one of four categories which 'I' as the researcher considered while conducting my research which were as follows:

3.11.1 Protection from harm

A researcher should not expose research participants to unnecessary physical or psychological harm. Participants should not risk losing life or limb, nor should they be subjected to unusual stress, embarrassment, or loss of self-esteem. In cases where the nature of study involves creating a small amount of psychological discomfort, participants should know this ahead of time, and any necessary debriefing or counseling should follow immediately after the in participation.

3.11.2 Informed consent

According to Paul and Jeanne (2010:101) when people are intentionally recruited for participation in a research study, they should be told the nature of the study to be conducted and given the choice of either participating or not participating. Furthermore, they should be told that, if they agree to participate, they still have the right to withdraw from the study at any time. Any participation in a study should be strictly voluntary.

3.11.3 Right to privacy

Paul and Jeanne (2010:102) further say that any research study involving human beings should respect participants' right to privacy. Under no circumstances should a research report, either oral or written, be presented in such a way that others become aware of how a particular participant has responded or behaved. Generally, a researcher must keep the nature and quality of participants' performance strictly confidential.

3.11.4 Honesty with professional colleagues

Researchers must report their findings in a complete and honest fashion, without misrepresenting what they have done or intentionally misleading others about the nature of their findings. And under no circumstances should a researcher fabricate data to support a particular conclusion, no matter how seemingly "noble" that conclusion may be.

In this study, respondents were assured of anonymity and the information provided by the participants was regarded as confidential unless agreed upon by the participant and the researcher.

3.12 Conclusion DATA PRESENTATION, INTERPRETATION AND ANALYSIS

This chapter has covered all issues concerning the overall research methodology adopted, population identification, sampling procedures and units of analysis, the means of access to study sites and methods for data collection and analysis. The issue of how data were collected and analysed were also dealt with in this chapter. The next chapter deals with the interpretation and analysis of the collected data.

The second part comprises the inferential statistics calculated. An overview of the results obtained in the study are presented and discussed in this chapter. The chapter also outlines the demographic information depicted in graphic format. The descriptive and inferential statistics are presented thereafter.

4.2 Demographic information in terms of the sample

The chapter commences with an analyses of the biographical data gathered from the research sample ($n = 120$). The data analysed are presented in the form of a table. This is followed by a description of the most salient sample characteristics by means of frequencies and percentages.

Table 4.1: Race of the respondents

	Frequency	Percentage
African	96	80
Coloured	6	5
Asian	6	5
White	12	10
Total	120	100

As depicted in Table 4.1, the racial composition of the sample comprises of 5% ($n = 6$) Coloured respondents, 10% ($n = 12$) White respondents and 80% ($n = 96$) African respondents. The least represented group ($n = 5\%$) is the Asian group. The high response rate in terms of the African group is indicative of the demographics of the Limpopo Province, where the majority of the workers employed in the public sector are African people.

CHAPTER 4: DATA PRESENTATION, INTERPRETATION AND ANALYSIS

4.1 Introduction

The results are presented in two parts: the first part describes the overall findings of the study in descriptive statistics, while the second part comprises the inferential statistics calculated. An overview of the results obtained in the study are presented and discussed in this chapter. The chapter also outlines the demographic information depicted in graphic format. The descriptive and inferential statistics are presented thereafter.

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Table 4.2: Gender

	Frequency	Percentage
Male	72	60
Female	48	40
Total	120	100

Table 4.2 presents the gender distribution of the sample. The sample was representative of a larger number of male respondents to that of female respondents. Male respondents comprised 60% (n = 72) compared to 40% (n = 48) female respondents. The high response rate with regards to the male respondents is attributed to the fact that the Elim Medical Depot (i.e. pharmaceutical distributions), which is a component residing under the Directorate Supply Chain Management, has 60 African males on its payroll. The large number of males in this division is due to the nature of the work where employees are expected to lift heavy boxes on a continuous basis.

Table 4.3: Educational level

	Frequency	Percentage
Up to STD 9	30	25
STD 10	48	40
Degree/Diploma	30	25
Post Graduate	12	10
Total	120	100

Table 4.3 illustrates the education level of the sample. The graph depicts that the majority of the respondents, 40% (n = 48) has an educational level of Std. 10, whilst 25% (n = 30) possess an educational level up to Std. 9. Thirty respondents (25%) has a 3 year degree/diploma and 10% (n = 12) possess a post graduate qualification. It can therefore be concluded that the Directorates where the study was conducted mostly employs individuals with an educational level of Std. 10.

Table 4.4: Length of service

	Frequency	Percentage
< 2 Years	18	15
3-10 Years	24	20
11-20 Years	60	50
21-30 Years	12	10
>30 Years	6	5
Total	120	100

It can be viewed in Table 4.4 that the majority of the respondents ($n = 60$ or 50%) fall in the 11-20 years' service group and 24 respondents (20%) fall in the 3-10 years' service group. Twelve respondents (10%) fall in the 21-30 years' service group while 18 respondents (15%) fall in the less than 2 years' service group. The smallest number of respondents ($n = 6$ or 5%) fall in the less than 30 years' service group.

Table 4.5: Age in years

	Frequency	Percentage
22-29 Years	24	20
30-39 Years	54	45
40-49 Years	30	25
>50	12	10
Total	120	100

The age distribution of the sample is presented in Table 4.5. The majority of the respondents ($n = 54$ or 45%) fall in the age category 30-39 years. This is followed by 30 (25%) of the respondents in the age category 40-49 years. The age category 22-29 years old, constitutes 20% ($n = 24$) of the sample. A minority of the respondents ($n = 12$ or 10%) fall in the age category of 50 years and older. From the ensuing results it can therefore be concluded that the majority of the workforce participating in the study is fairly young, ranging between the ages 30-39 years old.

Table 4.6: Marital status

	Frequency	Percentage
Single	42	35
Married	72	60
Divorced	6	5
Total	120	100

Table 4.6 illustrates that of the 120 respondents who participated, 72 (60%) of the respondents are married, forty two (35%) are single, and six (5%) are divorced.

Table 4.7: Income distribution

	Frequency	Percentage
<5000	37	31
R5001-R10 000	44	37
R10 001-R15 000	29	24
Over 15 000	10	8
Total	120	100

Table 4.7 displays the graphic presentation of the monthly income distribution of the sample. The majority of the respondents (n =44 or 37%) earn between R 5 001 to R 10 000 per month. 37 respondents (31%) earn less than R 5 000 per month, whilst 29 of the respondents (24%) earn between R 10 001 to R 15 000 per month. Only 10 of the respondents (8%) earn more than R 15 000 per month.

Table 4.8: Job status

	Frequency	Percentage
Permanent	104	87
Contract	16	13
Total	120	100

In Table 4.8 the job status of the sample is depicted. The graphic presentation illustrates that the majority of the respondents ($n = 104$ or 87%) are permanently employed. The contract employees comprise 16 (13%) respondents.

4.3 Analysis of data collection through a questionnaire

Table 4.9: If I could choose the career again I, would make the same decision.

	Frequency	Percentage
Strongly Agree	41	34
Agree	27	22.3
Unsure	14	11.7
Strongly Disagree	23	19.4
Disagree	15	12.6
Total	120	100

Table 4.9 clearly indicates that 68 respondents which constituting 56.3 percent of the total sample was agreed with the statement. The results indicated that 11.7% of participants are unsure that if they had to choose a career again, they would choose the same career. And the Table reveals that 38 of participants strongly disagree that if they had to choose a career again, they would choose the same career. The study found a very low level of job satisfaction and generally low levels of any kind of job-related satisfaction in Elim Hospital healthcare workers.

Table 4.10: My job has more advantages than disadvantages.

	Frequency	Percentage
Strongly Agree	32	26.2
Agree	45	37.9
Unsure	12	9.7
Strongly Disagree	23	19.4
Disagree	8	6.8
Total	120	100

Table 4.10 revealed that 77 respondents which constituting 64.1% of the total sample strongly agreed with the statement that their jobs had more advantages than disadvantages in Elim hospital. Almost 31 participants constituting 26.2% of the total sample disagreed that their job had more advantages than disadvantages. And 12 respondents which constituting 9.7% of the total sampled was unsure with the statement whether their job had more advantages than disadvantages

Table 4.11: My income is a reflection of the work I do.

	Frequency	Percentage
Strongly Agree	10	8.7
Agree	14	11.7
Unsure	7	5.8
Strongly Disagree	47	38.8
Disagree	42	35.0
Total	120	100

The Table above indicates that 24 of participants which constituting 20.4% of the total sample was strongly agreed that their income was a reflection of the job they do. Almost 89 of respondents which constituting 73.8% of the total sample thought that their income was the reflection of the job they do. While 7 of respondent's were unsure with the statement that their income was a reflection of the work they do. The study found a very low level of job satisfaction and a generally low level of any kind of job-related satisfaction in Elim Hospital healthcare workers.

Table 4.12: There is no personal growth in my work.

	Frequency	Percentage
Strongly Agree	10	8.7
Agree	33	27.2
Unsure	17	14.6
Strongly Disagree	29	24.3
Disagree	31	26.2
Total	120	100

Table 4.12 reveals that 43 respondents which constituting 35.9% of the total sample strongly agreed that there was personal growth in their work at Elim Hospital. While a total of 14.6% of the respondents were unsure that there was personal growth in their work. Over 60 respondents which constitute 50.5% of the total sampled did not experience any personal growth. These results revealed that there was very low level of job satisfaction and a generally low level of any kind of job-related satisfaction in Elim Hospital healthcare workers.

Table 4.13: I would like to change my career.

	Frequency	Percentage
Strongly Agree	18	14.6
Agree	26	21.4
Unsure	16	13.6
Strongly Disagree	29	24.3
Disagree	31	26.2
Total	120	100

The results in the table 4.13 reveal that 44 respondents which constituting 36% of the total sample strongly agreed with the intention of changing their career. Whereas 16 respondents which constituting 13.6% of the total sampled was unsure with the statement on their intention of changing their career. The study showed that just over half of respondents (24.3+26.2) had no intention of changing their career. These results revealed that there was very low level of job

satisfaction and a generally low level of any kind of job-related satisfaction in Elim Hospital healthcare workers.

Table 4.14: I really enjoy my work.

	Frequency	Percentage
Strongly Agree	47	38.8
Agree	41	34.0
Unsure	13	10.7
Strongly Disagree	15	12.6
Disagree	4	3.9
Total	120	100

The Table indicates that 88 respondents which constituting 72.8% of the total sampled almost strongly agreed that they enjoyed their work, while another 10.7% said they unsure they were enjoyed their work. Table 4.14 revealed that 19 respondents which constituting 16.5% of the total sampled strongly disagreed that they did not enjoy their work at Elim because of their level of the job satisfaction.

Table 4.15: In general I am satisfied with my work.

	Frequency	Percentage
Strongly Agree	31	26.2
Agree	42	34.0
Unsure	16	13.6
Strongly Disagree	24	20.4
Disagree	7	5.8
Total	120	100

The above Table revealed that 73 respondents which constituting 60.2% of the total sampled strongly agreed that in general they were satisfied with their jobs. While 16 respondents were unsure in general whether they were satisfied with their jobs. The Table also indicated that 31

respondents which constituting 26.2% of the total sample was strongly disagreed that they were not satisfied with their jobs, in general.

Table 4.16: I have sufficient opportunity to develop in my work.

	Frequency	Percentage
Strongly Agree	26	21.4
Agree	41	34.0
Unsure	8	6.8
Strongly Disagree	38	32.0
Disagree	7	5.8
Total	120	100

It can be seen in Table 4.16 that more than half the respondents (a total of 55.4%) agreed or strongly agreed that there were sufficient opportunities for self-development, while 6.8% of the total sampled were unsure with the statement. And the result in Table 4.16 indicates that 45 respondents which constituting 37.8% of the total sampled was strongly disagreed that they were not satisfied with the variation within their work.

Table 4.17: I experience frustration in my work due to limited resources

	Frequency	Percentage
Strongly Agree	55	45.6
Agree	45	37.9
Unsure	7	5.8
Strongly Disagree	8	6.8
Disagree	5	3.9
Total	120	100

Table 4.17 indicates that 100 respondents which constituting 83.5% of the total sample strongly agreed that they experienced frustration in their work due to limited resources. While 7 respondents which constituting 5.8% of the total sampled was unsure with the statement whether

they experience frustration in work due to limited resources. Table indicates also that 13 respondents which constituting 10.7% of the total sampled was strongly disagreed that they experienced frustration in their work due to limited resources.

Table 4.18: I find my work routine not stimulating.

	Frequency	Percentage
Strongly Agree	15	12.6
Agree	35	29.1
Unsure	22	18.4
Strongly Disagree	38	31.1
Disagree	10	8.7
Total	120	100

Table indicates that 50 respondents which constituting 41.7% of the total sample agreed that too much was expected from them at work. The proportions agreeing and disagreeing about lack of stimulation were about the same. However, the Table clearly indicates that 48 respondents which constituting 39.8% of the total sample disagreed that too much were expected from them at work. While 22 respondents which constituting 18.4% of the total sampled was unsure about the statement.

Table 4.19: The patients appreciate what I do for them.

	Frequency	Percentage
Strongly Agree	51	42.7
Agree	40	33.0
Unsure	8	6.8
Strongly Disagree	12	9.7
Disagree	9	7.8
Total	120	100

Table 4.19 indicates that almost forty-three per cent of participants (42.7%) strongly agreed that the patients do appreciate what they do for them, and a further third (33.0%) agreed. While 8 respondents which constituting 6.8% of the total sampled was unsure with the statement. The result suggests that the ability of an organization to support and deliver quality patient care is important to healthcare professionals' job satisfaction. Organizational factors such as autonomy, teamwork, management support, workload and staffing levels have a great influence on job satisfaction because they impact on the delivery of quality patient care. And the Table indicates 21 respondents which constituting 17% of the total sampled strongly disagreed that the patients do appreciate what they do for them.

Table 4.20: I have sufficient time for each patient.

	Frequency	Percentage
Strongly Agree	24	20.4
Agree	29	23.3
Unsure	16	13.6
Strongly Disagree	37	31.1
Disagree	14	11.7
Total	120	100

Table 4.20 reveals that nearly a third of the respondents (31.1%) indicated that they do not have sufficient time for each patient, but overall, if those who "agreed" and "strongly agreed" are combined, and "disagree" and "strongly disagree" are combined, opinions on this issue are fairly evenly divided. Opinions on patient co-operation were also fairly evenly spread. Table indicates that Job satisfaction is an important factor in patient care, and there is also evidence to suggest that a high level of job satisfaction results in good patient outcomes and health systems outcomes.

Table 4.21: My patients co-operate because they understand my working conditions.

	Frequency	Percentage
Strongly Agree	14	11.7
Agree	33	27.2
Unsure	29	24.3
Strongly Disagree	26	21.4
Disagree	19	15.5
Total	120	100

These results suggest that working conditions at Elim Hospital do not meet the values and aspirations of healthcare professionals. Table 4.21 indicated that 47 respondents which constituting 38.9% of the total sampled agreed that patients co-operate because they understand the working conditions, while 29 respondents were unsure with the statement. The results indicated that people respond unfavorably to restrictive work environments therefore it is imperative for organizations to create working environment that enable the employees freedom to think, and engage and motivate the workforce to reach a higher levels of job satisfaction.

Table 4.22: There are many non-clinical tasks that I have to do.

	Frequency	Percentage
Strongly Agree	28	23.3
Agree	40	33.0
Unsure	20	17.0
Strongly Disagree	29	24.3
Disagree	2	1.9
Total	120	100

In total well over half the participants agreed or strongly agreed that they have to perform many non-clinical tasks (33.0% + 23.3%). While 20 respondents which constituting 17.05 of the total sampled was unsure with the statement. The above Table indicates that 31 respondents which constituting 26.3% of the total sampled strongly disagree that they have to perform many non-

clinical tasks. The conditions under which jobs are performed can have as much impact on people's effectiveness, comfort and safety as the intrinsic details of the task itself.

Table 4.23: I spend more time doing what could be done by others with less experience & training.

	Frequency	Percentage
Strongly Agree	24	20.4
Agree	36	30.1
Unsure	20	16.5
Strongly Disagree	35	29.1
Disagree	5	3.9
Total	120	100

Views about freedom to decide how they do their work were fairly evenly spread. Just over half of all participants agreed or strongly agreed (30.1% + 20.4%) that they spend time doing tasks that could be done by lower cadres. The Table indicates that 40 respondents which constituting 33% of the total sampled strongly disagreed that they spend more time doing what could be done by others with less experience & training. The result in Table 4.23 shows that perceived time pressure is associated with low job satisfaction among healthcare professionals. Dissatisfaction about time pressure expressed by healthcare professionals may indicate concerns about autonomy.

Table 4.24: I have a good working relationship with my colleagues.

	Frequency	Percentage
Strongly Agree	57	47.6
Agree	45	37.9
Unsure	12	9.7
Strongly Disagree	6	4.9
Disagree	0	0
Total	120	100

The results show that a good majority (47.6% + 37.9%) reported having a good working relationship with their colleagues. While 12 respondents which constituting 9.7% of the total sampled were unsure about good working relationship with their colleagues. The Table reveals that employee participation can afford individuals an opportunity to make key managerial decisions that have an impact on other employees, thus increasing job satisfaction and performance.

Table 4.25: There is a clear channel of communication at my workplace.

	Frequency	Percentage
Strongly Agree	22	18.4
Agree	42	35.0
Unsure	20	16.5
Strongly Disagree	28	23.3
Disagree	8	6.8
Total	120	100

The Table indicates that 64 respondents, which constituting 53.4% of the total sampled strongly agreed that there is a clear channels of communication and similar proportions (30.1%) indicated that there is no clear channels of communication. Specifically within healthcare, there has been a growing need to improve teamwork. The results in the Table indicate that introducing team-building activities had resulted in stronger interpersonal, relationships, improved staff communication, understanding and clarity of roles as well as greater job satisfaction.

Table 4.26: Management does involve staff in decision making.

	Frequency	Percentage
Strongly Agree	14	11.7
Agree	34	28.2
Unsure	20	16.5
Strongly Disagree	35	29.1
Disagree	17	14.6
Total	120	100

However fewer (39.9%) agreed or strongly agreed that their managers are concerned about their well-being, while the proportions who believed that management involves staff in decision-making were lower than those who said they did not involve them. Nearly (43.7% taken together) agreed or strongly agreed that they can depend on their colleagues for support, but opinions on management style were more evenly spread. Table 4.26 indicates that 20 respondents which constituting 16.5% of the total sample were unsure whether with management involvement in staff decisions.

4.4 Interpretation and presentation of interviews data

In this section, the format of analysis was based on categorization of the main themes. General categories or themes, and subcategories or sub-themes were identified. A general sense of pattern was identified, as a sense of what the data meant (Leedy & Ormrod, 2001:161). This study was based on qualitative approach, using various instruments to collect the data as was described in Chapter 3 of this research.

4.4.1 Work environment

Flexible working hours, a challenging job, a sense of purpose and minimal grievances between staff and employees should provide a favourable work environment at Elim Hospital. Respondents also believed that:

An institution should help employees maintain a balance between personal and work life. In some institutions, practices such as making childcare facilities available on the premises and flexitime can make the difference between keeping and losing an employee.

Participants 1 also revealed that “... *Flexible work practices will never happen in this place ...*”; “... *if I want to go to other institution, I don't need to fill in a request form for such a small trip ...*” *The psychological environment, which provides support for handling stress, and physical support infrastructures such as a psychologist or a nurse, etc. on site provide a sense of security to employees.*

Often statements about the environment, caring attitude towards workers, appear in the official statements of the organisations, but are not often practised in most work. Institutional policies and human resources practices such as performance management systems are again linked to line management functions. If badly and subjectively managed, they can negatively affect employee morale. Employees are motivated to put more effort into their work when activities follow rewards, but basing remuneration increases on performance ratings that are often subjective can demotivate employees.

4.4.2 Staff development and promotion

Opportunities for promotion, training and development are among the most important reasons why employees stay, especially young and enthusiastic ones. Institutions spend millions in hiring, training and developing their employees. Respondent 2 indicates that:

Most employees, however, leave upon completion of their developmental objectives. A similar study conducted amongst 13 British universities found that over a quarter of academics were in the top of their academic scale, which meant no promotion or progression beyond annual “cost of living”

The respondent 3 also indicate that:

... I went to a couple of courses but nothing ever gave back into what I was doing, no promotion or salary incremental ...". Employees who feel that they have outgrown their portfolios and that further training does not enhance their career moves within the Department or opt to leave. "... it appeared to me that my opportunities for self-development were very much limited and I do not intend to stay in the same position for the coming ten years ...".

4.4.3 Management and governance

Management's role in governance of the institution is revealed to be a critical area of institutional performance. Most managers and supervisors think that they can keep good employees 'with money'. Research suggests that 89% of managers truly believe it is largely about money. These managers put the responsibility for keeping key people squarely in the hands of their finance departments.

The participant 2 revealed that:

"... this is where managerialism is at its disadvantage and I think we are often over-managed and demotivated ..."; "... people's focus when they come to work should be to work and not all other things like performance management, leave, salaries, etc ..."; "... they don't even know what their staff needs...if we want to exist for the next 20 years, we must look after our staff ...".

While line managers often shift responsibilities to either HR or top management, participant 3 indicate that during interview: *if you are a manager at any level, a front-line supervisor or project leader, you actually have more power than anyone else and perceived indecisiveness may be of concern to your employees.*

4.4.4 Level of Job satisfaction

The results show that although personnel were generally satisfied with their jobs, they were however, not satisfied with other aspects of their jobs such as poor salaries; lack of parental and community support; lack of time management or stress from time constraints; insufficient funding for resources, supplies and materials; and lack of staff input in decision-making; and too little real-time working.

4.4.5 Incentives

Participants discussed a variety of incentives that would enhance personnel retention. They mentioned salary and benefits, professional development, involvement in decision making, bonuses, recognition and respect. Increased salary and better fringe benefits were frequently mentioned in the interview. The respondents pointed out that a hospital that cannot offer competitive salaries is likely to be at a serious disadvantage when it comes to retaining health workers. Participating personnel tied a competitive salary to respect afforded them by the community in general.

One participant 1 noted:

“I think receiving bonuses would be a great idea. Staff starting out is usually struggling financially. A bonus would help them to get off to a good start instead of playing catching up the first year. I also think experienced staff should get bonuses periodically to help them to feel more appreciated”.

Participant 2 noted that: *“I think bonuses for retaining health worker is an acceptable, ethical practice, if there is uniformity and the practice does not diminish the regular salary package of the future salary allotment”.*

These bonuses help attract health worker, but the effect of these bonuses on the job satisfaction of the health workers beyond a negotiated period would remain elusive at Public sectors due to its un-sustainability.

The participant 3 revealed that:

The use of financial incentives, such as cash bonuses or placement on a higher step of the salary scale as a retention strategy remains questionable.

The aspect of bonuses came out strongly because in most cases employees relied on salary advance which meant that their salaries were not enough even to support their further education.

The researcher found that 53.4% of workers in this survey were not satisfied with remuneration. This finding is supported by the present study which indicates that there was little monetary support given to employees in terms of furthering one's education.

The respondent 4 indicate that: *the implication of improving workers incentives leads to the retention of the best employer in the profession.*

4.4.6 Staff Development

The general feeling about the Hospital requirement of staff development was that, the process of appointing personnel to undertake various trainings was not clear and this has brought a lot of frustrations.

There is reason to believe that good professional development may improve public worker practice thus increasing the likelihood of their retention. There is an aspect of having an increase in salary apart from enhancing leadership skills through lifelong learning. It was observed by the respondents that since few people are given chance for trainings, promotion is slow and some end up leaving for greener pastures abroad as was a common trend in the Elim Hospital.

Promotion gives a sense of growth; and the desire for promotion originates from the need for status, respect, security in form of higher income, esteem and recognition in society. In addition, the need for responsive professional development opportunities for health workers, suggest that they must be directed toward professional nurturing, be systematic, and change over time as professionals need change.

4.4.7 Poor work environment

Without improving the work environment of employees current health worker will continue to experience frustration and burn-out, thus leading to resignation from the field. The respondent 1 revealed that:

Propose that managers could directly retain employee by giving special attention to the employee's physical comfort and other related matters.

4.4.8 Job security

Respondents 2 revealed that: *to be satisfied in their jobs, employees require the assurance that their positions are secure and to them, continued employment with the organisation is a reasonable expectation.*

From the interview with participants about the economic challenges facing organisations it can be seen that it is difficult for organisations to always meet this expectation. The reality of the situation is that in order to survive the economic challenges, organisations are forced to downsize, restructure and redesign jobs. These managers and first-line supervisors might then end up dissatisfied in their jobs if they perceive unfairness or cannot cope with the increase in workload.

The respondent 3 indicate that:

the majority of the managers are white; therefore they have to confront the impact of affirmative action as an additional factor contributing to their job insecurity.

However, the respondent 4 revealed that: *despite affirmative action, some white managers believed they could still advance in their jobs*

4.5 Conclusion

The chapter presented the research results in tabular form. Statistically significant mean differences between biographical data and job satisfaction were identified and discussed in detail. The data gathered from the Job Descriptive Index (JDI) were statistically analysed by means of the Statistical Package for the Social Sciences (SPSS). When considering the positive factors that could make workers stay or resign from their job, very noteworthy trends were observed. Most respondents felt they would leave the public service because of the compensation packages, shortage of staff which in turn leads to excessive workload and lastly the organizational human resource management rules that are perceived to be unfair. These respondents also mentioned that they enjoy the working hours in the public service, the relationship that exists with patients and colleagues, and also the opportunity to do clinical work in the form of ward rounds or specialty health professions such as radiology and HIV management clinics.

The work-life conflict was reported by some of the respondents saying they would like to work sessions or flexible hours so that they have enough time with their families. Also with work stress, the respondents indicated that they get very tired at the end of the day that they cannot give attention to their families when they get home. These variables are important as work stress can have health implications on the employees. Chapter five will discuss the results obtained and will also highlight other research conducted in the field with reference to the findings that became apparent from the research study. Finally, conclusions are drawn and recommendations are made.

CHAPTER 5: FINDINGS, CONCLUSION AND RECOMMENDATION

5.1 Introduction

This chapter discusses the prominent findings of the study and makes reference to relevant research to support the findings of the current study. The discussion include demographic information about the sample, results obtained from the descriptive statistics for the dimensions of job satisfaction, correlations between the dimensions of job satisfaction, Multiple regression analysis and significant statistical differences between biographical variables. Conclusions are drawn based on the obtained results and recommendations for future research that may be of worth are put forth.

5.2 Main findings

- The study found a low level of job satisfaction among the healthcare workers surveyed. Almost 80% were dissatisfied or highly dissatisfied with their job.
- Factors found to be significantly associated with job satisfaction were, opportunity to develop, responsibility, patient care and staff relations.
- The study found a significant positive medium correlation between staff relations, patient care, and responsibility, opportunity to develop and job satisfaction.
- Almost three-quarters of participants (73.8%) did not think that their income was a reflection of the work they do.
- Over four-fifths of respondents (83.5%) experienced frustration at work due to limited resources.
- Well over half the participants reported that they have to perform many non-clinical tasks (56.3%).
- Just over half the participants (50.4%) reported that they spend time doing tasks that could be done by lower cadres.

- A total of 85.5% reported good working relationships with colleagues, but there were mixed responses to the issues of management style and being involved in decision-making.
- Overall, general satisfaction and all dimensions of job satisfaction had a positive medium relationship with each other at a low to medium level. General satisfaction had a significant positive medium association with staff relations, responsibility, patient care and opportunity to develop.
- There was no mean difference for all dimensions of job satisfaction between clinical and clinical support staff at Elim Hospital.

The research findings reported in this study make a valuable contribution to the awareness of the concept of job satisfaction and the effect the underlying variables, work, supervision, co-workers, promotion and pay have on job satisfaction. However, additional research is needed to further investigate the potential relationship and effect these variables and other extraneous variables, such as role ambiguity, job level, contingent rewards and working conditions have on job satisfaction.

5.3 Conclusion

Satisfaction with one's job can affect not only motivation at work but also career decisions, relationships with others and personal health. Those who work in a profession that is extremely demanding and sometimes unpredictable can be susceptible to feelings of uncertainty and reduced job satisfaction. Job satisfaction of healthcare workers is also an essential part of ensuring high quality care. Dissatisfied healthcare providers not only give poor quality, less efficient care out there is also evidence of a positive correlation between job satisfaction and patient satisfaction (Tzeng, 2002:99). Given the pivotal role that healthcare professionals play in determining the effectiveness, efficiency and sustainability of health care systems, it is imperative to understand what motivates them and the extent to which contextual variables and the organization satisfy them.

The aim of this study was to determine the factors influencing job satisfaction among healthcare professionals at Elim Hospital. By employing a cross-sectional descriptive approach, the level of satisfaction, factors influencing job satisfaction and the relationship between the different dimensions of job satisfaction of twenty healthcare professionals were surveyed using a self-administered questionnaire. Both descriptive and inferential statistical methods were used in analyzing the data.

The findings of this study showed a low level of job satisfaction among the healthcare professionals surveyed. However factors found to influence job satisfaction were the opportunity to develop, responsibility, patient care and staff relations. No association was found between socio-demographic characteristics and job satisfaction. The study also found that there was a positive medium association between job satisfaction and opportunity to develop, patient care, responsibility and staff relations among both clinical and clinical-support staff.

5.4 Recommendations

Although the results of a single survey cannot in themselves be considered as a solid foundation for making decisions in health planning, the results of this study suggest that interventions should be carried out to increase levels of job satisfaction among healthcare professionals at Elim Hospital. Since job satisfaction has a strong correlation with job performance, it is imperative to reinforce relevant human resources policies, improving working conditions and compensation.

Priority should be given to improving relationships between management and staff and increasing decision-making latitude among staff members. Developing staff and empowering them to make decisions about their work is necessary to achieve quality outcomes. It is recommended that employees' job be redesigned to have a scope of enrichment and be of interest.

Continuous service evaluations and monitoring of job satisfaction can be useful to determine aspects of the services that need improvement. Involving staff in a cooperative, team approach will allow for consideration of ways to improve aspects relating to job satisfaction. Improving

the work environment so that it provides a context in line with the aspirations of healthcare professionals is likely to increase job satisfaction and consequently have a positive effect on individual, organizational and quality of health care services.

Empirical findings of this study suggest that the occupational classes of administrative clerks and pharmacists were the least satisfied. From the literature surveyed it is evident that the public sector is experiencing an exodus of professional skilled employees to other sectors and countries. It is recommended that executive management accord significant attention to future studies of this nature as to identify those variables having a major impact on job satisfaction in an attempt to retain high quality skills, in particular scarce skills, that is in line with the human resource development strategy of the Department of Labour. According to Marx (1995:88), offering competitive salaries and opportunity for upward mobility enhances the chances of employee retention. Meyer, Mabaso and Lancaster (2002:99) maintain that it is imperative to secure the supply of scarce skills in order to meet with societal needs.

Encourage teamwork by rewarding teams: Allowing managers to facilitate and promote team-building exercises to enhance communication, productivity and job satisfaction. Team incentives should be addressed by rewarding teamwork.

Ensuring job satisfaction by respecting, rewarding, nurturing and upholding these skilled and trained employees fairly is also recommended. Recognise individual growth and fairly reward good ideas. Respect experience and qualifications above legislative requirements in order to ensure that the most suitably qualified people are placed in specialised positions.

The human resource practitioners in the public service should be knowledgeable and supportive of the health profession, vacancies should be filled quickly and the recruitment process should be speeded up. In-service training should be provided to ensure the competencies of the health workers are of high standard at all times.

The promotion policy should be made known to all employees, and it should be fair so as to enhance employee morale and improve job satisfaction. Recognition of performance in the form of performance appraisal should be part of the process of recognition of good performance.

A recommendation in this regard is to ensure that basic management training is included in the undergraduate health curriculum at universities. In addition to this, once health workers are faced with the task of becoming departmental managers, they need to be sent for specific courses in management. As several studies have shown, including the study by Wolpert and Yoshida (1992:56) and the study by Turner (2001:66), which were referred to earlier, professional recognition and authority are some of the factors that lead to the retention of health professionals, and by formally training those who are interested in becoming managers they are given an added level of responsibility and heightened professional status which may indeed serve as an incentive for them to stay.

Finally, future research of this nature may assist personnel managers and operational managers on all levels to be aware of the status of job satisfaction and allow them to pro-actively put mechanisms in place to enhance job satisfaction of employees and ultimately, improve service delivery. Schneider and Vaught (1993:88) contend that being aware of the job satisfaction of employees afford personnel managers the opportunity to be proactive and decide on interventions that will ensure commitment and involvement from employees.

Hellriegel, D., Jackson, S.E. and Slocum, J.W. 1997. *Management*. 8th Edition. Boston: South Western College Publishing.

Jenskinson, L. 1999. 'Problems and Pitfalls Attached To The Implementation Of Employment Equity Act', *People Dynamics* [online]. July 1999 edition.

Ivancovich, J.M. and Matzock, M.T. 1998. *Organizational Behavior and Management*. 5th ed. Boston: McGraw Hill.

Johnson, G. and Scholes, E. 1995. *Managing Corporate Strategy*. 5th Edition. London: Prentice Hall.

REFERENCES

BOOKS

- Armstrong, M. 1998. **A Handbook of Personnel Management Practice**. 6th ed. London: Kogan Page. pp 433-436
- Carrel, M.R. , Elbert, N.F. and Hatfeld, R.D. 1995. **Human Resource Management**. 5th ed. London: Prentice Hall.
- Clarke, B. 1995. **Global Pressures force Change**. Financial Mail, August 25, 1995. S.A.A.N Ltd. Johannesburg.
- De Beer, J.1998. **Development Paradigms: From Partenalism to Managing Diversity**. Randburg: Knowledge Resources.
- Greenberg, J. and Baron, R. 1997. **Behaviour In Organizations: Understanding and Managing The Human Side of Work**. 6th ed. New Jersey: Prentice Hall.
- Griffin, R.W. 1987. **Management**.2nd ed. Boston: Houghton Mifflin Co.
- Hellriegel, D., Jackson, S.E. and Slocum, J.W. 1999. **Management**. 8th Edition. Boston: South Western College Publishing.
- Israelstom, I. 1999. **'Problems and Pitfalls Attached To The Implementation Of Employment Equity Act'**, People Dynamics [online], July 1999 edition.
- Ivancevich, J.M. and Mateson,M.T. 1999. **Organisational Behavior and Management**. 5th ed. Boston: McGraw Hill.
- Johnson , G. and Scholes, K. 1999. **Exploring Corporate Strategy**. 5th Edition. London: Prentice Hall

- Robbins, S.P. and De Cenzo, D.A. 1988. *Supervision Today*. 2nd Edition. New Jersey: Prentice Hall.
- Kotler, P. 1997. **Marketing Management.9th Edition**. New Jersey: Prentice Hall.
- Kreitner, R. , Kinicki, A. and Buelens, M. 1999. **Organisational Behaviour**. London. Mc Graw Hill.
- Leedy, P.D. 1997. **Practical Research.6th Edition**. New Jersey: Prentice Hall.
- Luthans, F. 1981. **Organizational Behavior**. 3rd Edition. New York: McGraw Hill.
- Luthans, F. 1992. **Organisational Behavior**. 6th Edition. New York: McGraw Hill.
- Minzberg, H. 1980. **The Nature of Managerial Work**. New Jersey: Prentice Hall.
- Mullins, L.J. 1993. **Management and Organisational Behaviour**. 3rd Edition. London: Pitman.
- Pelliesier, R. 2000. *Management Today*, June 2000: **The aftermath of reengineering**. Johannesburg: Richard Havenga Associates.
- Plunkett, W.R. 1996. **Supervision. Diversity and Teams in the Workplace**. 8th Edition. New Jersey: Prentice Hall.
- Pycraft, M. Singh, H. Phihlela, K. Slack, N. Chambers,S. Harland, C. Harrison, A. and Johnston, R.1997. **Operations Management. South African Edition**. London: Pitman Publishing.
- Robbins, S.P.1982. Personnel. **The Management of Human Resources**. 2nd Edition. New Jersey: Prentice Hall.
- Robbins, S.P. 1998. **Organizational Behavior: Concepts, Controversies and applications**.8th Edition. New Jersey: Prentice Hall.

Robbins, S.P. and De Cenzo, D.A. 1998. **Supervision Today**. 2nd Edition. New Jersey: Prentice Hall. [www.doh.gov.za/docs/legislation-f.html (accessed on 21 December 2008)]

Riggio, R E. 2003. **Introduction to Industrial/Organisational Psychology**. 4th edition. New Jersey: Prentice-Hall, Pearson Education Inc. Pages 1- 556. [Accessed 13 June 2007].

Sayles,L.R. and Strauss, G. 1966. **Behavior in Organisations**. New Jersey: Prentice Hall.

Siegel, L. and Lane, M. 1987. **Personnel and Organisational Psychology**. 2nd edition. Illinois: Homewood. [Acute Exacerbation Chronic Bronchitis, Acta Med Scandinavica, vol. 175, pp175-719]

Treece, E.W. and Treece Jr, J.W. 1982. **Elements of Research in Nursing**. 3rd Edition. Toronto: The C.V.Mosby company

Human, L. 1997/ *Educating and Developing Managers for a Changing South Africa- selected*

Van der Merwe, S. 1976. **The Environment of South African Business**. Cape Town: Maskew Miller.

Human, L. 1999. *Managing Race and Class Conflict in South Africa: The Promises and Pitfalls*

Weber, R.W. and Van Gilder, G. 1982. **Behavioural Insights for Supervision**.2nd Edition. London: Prentice Hall.

IT REFERENCES

LEGISLATION AND OTHER GOVERNMENT DOCUMENT

Barrows, D. and Wesson, T. 2001. *The Innovation Journal: A Comparative Analysis of Job*

Department of Health and Human Services, United States of America. 2000. Report to Congress: **The Pharmacist Workforce: A Study Of the Supply And Demand of Pharmacists**. USA: Health Resources and Services Administration. Pages 1 – 22.

Carri, R. and Berry, W. 1998. *Employment Works: Update On The Labour Relations Act* [Online]. Available: <http://www.mhlab.co.za/employment.htm> [Accessed 07 May 2008]

Department of Labour, South Africa. 2007. **National Scarce Skills List**. Pretoria: **Department of Labour**. Available online at <http://labour.gov.za> [accessed on 15/06/2008]

Republic of South Africa. 2000. **Pharmacy Amendment Act, 1999**. Available online at <http://www.doh.gov.za/docs/legislation-f.html> [accessed on 21 December 2008]

Republic of South Africa. 2003. **National Health Act (Act 61 of 2003)**. Available online at <http://www.info.gov.za/gazette/acts/2003/a61-03.pdf> [Accessed 13 June 2007].

JOURNAL ARTICLES

Anthonisen, P., Riis, P., Sogaard-Andersen, T. 1964. The Value of Lung Physiotherapy in the Treatment of Acute Exacerbation Chronic Bronchitis. **Acta Med Scandinavia**, vol. 175. pp175-719

Hofmeyr, K. 1998. 'The South African Managers Need to be more positive', *People Dynamics*

Human, L. 1991. **Educating and Developing Managers for a Changing South Africa- selected Essays**. Cape Town: Juta and Co. Ltd.

Human, L. 1999. Managing Race and Class Conflict in South Africa: The Promises and Pitfalls Of Employment Equity Act. **Sietar International Journal**. Sietar. Europa.

IT REFERENCES

Barrows, D. and Wesson, T. 2001. **The Innovation Journal. A Comparative Analysis of Job Satisfaction Among Public and Private Sector Professionals** [Online]. Available: http://www.innovation.cc/rev_arts/job_satisfaction2.htm.

Carr, R. and Berry, W. 1998. **Employment Werks. Update On The Labour Relations Act** [Online]. Available: <http://www.mbendi.co.za/werkmns/wkemp01.htm>. [Accessed 07 May 2012].

De Beer, A., Roussouw, D. , Moolman, B, Le Roux, B and Labuschagne, M. 1998. **Focus on Supervision in General Management** . Cape Town: Juta. Economy [Online],2000. Available: <http://www.gov.za/yearbook/economy.htm> [Accessed: 02 April 2012].

Forbes, B. 1999. **Purdue News Service- Emotions, events dictate job satisfaction** [Online],1999. Available:<http://news.uns.purdue.edu/html4ever/9907.Weiss.mood.html> [Accessed 03 April 2012].

Human, L. ,Bluen, S. and Davies, R. 1999. **Baking a new cake: How to succeed at Employment Equity**. Knowledge Resources. Randburg. Increasing Job Satisfaction and Preventing Burnout [Online], 1999.

Investing In Your Employees. **How To Make the Most of Your Assets** [online], Available: <http://www.refresh.com/!abphinvesting.html> [accessed 13 october 2003].


Table 4.3: Educational level

Up to STD 9	
STD 10	
Degree/Diploma	
Post Graduate	

Table 4.4: Length of service

<2 Years	
3-10 Years	
11-20 Years	
21-31 Years	
>30 Years	

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APPENDIX A: QUESTIONNAIRE

SECTION A: DEMOGRAPHIC INFORMATION

Table 4.1: Race of the respondents

African	
Coloured	
Asian	
White	

Table 4.2: Gender

Male	
Female	

Table 4.3: Educational level

Up to STD 9	
STD 10	
Degree/Diploma	
Post Graduate	

Table 4.4: Length of service

< 2 Years	
3-10 Years	
11-20 Years	
21-31 Years	
>30 Years	

Table 4.5: Age in years

22-29 Years	
30-39 Years	
40-49 Years	
>50	

Table 4.6: Marital status

Single	
Married	
Divorced	

Table 4.7: Income distribution

<5000	
R5001-R10 000	
R10 001-R15 000	
Over 15 000	

Table 4.8: Job status

Permanent	
Contract	

SECTION B: JOB SATISFICATION

Please complete all questions Mark with an "x" Mark from Strongly Agree to Strongly Disagree

	Strongly Agree	Agree	Unsure	Disagree	Strongly Disagree
If I could choose a career again I would make the same decision.					
My job has more advantages than disadvantage.					
My income is a reflection of the work I do.					
There is no personal growth in my work.					
I would like to change my career.					
I really enjoy my work.					
In general, I am satisfied with my work.					
I have sufficient opportunity to develop in my work.					
I experience frustration in my work due to limited resources.					
I find my work routine not stimulating.					
The patients appreciate what I do for them.					
I have sufficient time for each					

patient.					
My patients co-operate because they understand my working conditions.					
There are many non-clinical tasks that I have to do.					
I spend more time doing what could be done by others with less experience & training.					
have a good working relationship with my colleagues.					
There is a clear channel of communication at my workplace.					
Management does involve staff in decision-making.					

5. What do you think are the reasons why some personnel left Health Department? Do you consider their reasons as barriers to job satisfaction?

THANK YOU FOR YOUR CONTRIBUTION

APPENDIX B: INTERVIEW

1. What conditions exist in health institution that influences your choice to stay and work as health worker, staff?

.....
.....
.....

2. What health workers job satisfaction, have you known, are implemented institution?

.....
.....
.....

3. What are your suggestions to enhance level of Job satisfaction?

.....
.....
.....

4. Of the suggestions in (3) above, which do you feel are considered most important in increasing level of Job satisfaction for rural school to give focus and attention?

.....
.....
.....

5. What do you think are the reasons why some personnel left Health Department? Do you consider their reasons as barriers to job satisfaction?

.....
.....
.....

THANK YOU FOR YOUR CONTRIBUTION