

**THE RELATIONSHIP BETWEEN JOB SATISFACTION OF
HEALTHCARE WORKERS AND THE PATIENTS' SATISFACTION
WITH THE QUALITY OF HEALTH SERVICES
A FIELD STUDY IN ARMED FORCES HOSPITAL IN JAZAN**

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ABSTRACT

Background: Every healthcare business today is focused on reaching and maintaining the highest levels of patient satisfaction. Job satisfaction is critical for enhancing staff efficiency and motivation among healthcare employees. The level of satisfaction gives an accurate assessment of the services supplied in relation to the patient's expectations and objectives. As a result, patient satisfaction is one of the most significant aspects of healthcare quality.

Aim: The current study aimed to examine the relationship between healthcare workers' job satisfaction and patients' satisfaction with the quality of healthcare services at Armed Forces Hospital in Jazan, Saudi Arabia.

Methods: Following the quantitative research design's approach, two validated questionnaires were used and distributed among 247 healthcare workers and 382 patients.

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Results: The findings of the current study revealed that the job satisfaction of healthcare staff was 71.2%, and for all patients was 75.8%. Also, the degree of satisfaction of patients (3.79 ± 0.823) was higher than that of healthcare workers (3.56 ± 0.657). The results also indicated that male healthcare workers had a higher level of satisfaction than females, and no statistically significant difference was found in the satisfaction across participants with different years of experience. In addition, patients who were highly pleased with nursing care during their stay, followed by the workers' courtesy during their admission to the hospital or discharge. Patients were less satisfied with diagnosis and therapy services.

Conclusion: Based on these results, there are some recommendations that might help increase the quality of service including: Saudi hospitals should do additional efforts to improve the healthcare workers' satisfaction as much as possible to ensure high-quality healthcare services that lead to patient satisfaction.

Keywords: Job satisfaction, healthcare workers, patient's satisfaction, Jazan

مستخلص الدراسة:

تركز كل أعمال الرعاية الصحية اليوم على الوصول إلى أعلى مستويات رضا المرضى والحفاظ عليها. الرضا الوظيفي أمر بالغ الأهمية لتعزيز كفاءة الموظفين وتحفيزهم بين موظفي الرعاية الصحية. يعطي مستوى الرضا تقييماً دقيقاً للخدمات المقدمة فيما يتعلق بتوقعات المريض وأهدافه. ونتيجة لذلك، فإن رضا المرضى هو واحد من أهم جوانب جودة الرعاية الصحية.

هدفت الدراسة الحالية إلى فحص العلاقة بين الرضا الوظيفي للعاملين في مجال الرعاية الصحية ورضا المرضى عن جودة خدمات الرعاية الصحية في مستشفى القوات المسلحة في جازان بالمملكة العربية السعودية. وفقاً لنهج تصميم البحث الكمي، تم استخدام استبيانين تم التحقق من صحتها وتوزيعهما على 247 من العاملين في مجال الرعاية الصحية و382 مريضاً.

كشفت نتائج الدراسة الحالية أن الرضا الوظيفي لموظفي الرعاية الصحية بلغ 71.2%، ولجميع المرضى 75.8%. أيضاً. كانت درجة رضا المرضى (0.823 ± 3.79) أعلى من درجة العاملين في مجال الرعاية الصحية (0.657 ± 3.56) . كما أشارت النتائج إلى أن العاملين الذكور في مجال الرعاية الصحية لديهم مستوى أعلى من الرضا عن الإناء، ولم يتم العثور على فرق ذو دلالة إحصائية في الرضا بين المشاركين الذين لديهم سنوات مختلفة من الخبرة. بالإضافة إلى ذلك، كان المرضى سعداء للغاية بالرعاية التمريضية أثناء إقامتهم، تليها مجاملة العمال أثناء دخولهم إلى المستشفى أو خروجهم من المستشفى. كان المرضى أقل رضا عن خدمات التشخيص والعلاج.

وفيما يتعلق بهذه النتائج، هناك بعض التوصيات التي تساعد على زيادة جودة الخدمة بما في ذلك: يجب على المستشفيات السعودية بذل جهود إضافية لتحسين رضا العاملين في مجال الرعاية الصحية قدر الإمكان لضمان خدمات رعاية صحية عالية الجودة تؤدي إلى رضا المرضى. يجب على إدارة المستشفيات ضمان كفاية المعدات داخل المستشفيات لضمان تقديم خدمات الرعاية الصحية بسلاسة. وينبغي بذل جهود إضافية لتوفير التدريب للعاملين في مجال الرعاية الصحية لتحسين مهاراتهم المهنية. كلمات مفتاحية: الرضا الوظيفي، الممارسين الصحيين، رضا المريض، جيزان



CHAPTER 1: INTRODUCTION

1.1 Preface:

Hospitals can boost job satisfaction among healthcare workers by addressing their needs. The satisfaction of healthcare employees is influenced not only by the specific tools of human resources management but also by the feedback from patients. A high level of job satisfaction among healthcare employees is crucial for increasing staff efficiency and motivation. This is supported by the fact that higher levels of job satisfaction are associated with improved patient satisfaction and employee performance (Mowday, 1984; Androniceanu, A., Sabie, O. M., & Pegulescu, A., 2020).

Retaining professional staff is often linked to job satisfaction. Yet health care leaders may be failing to recognize the importance of investing in employees' job satisfaction, which ultimately affects the service delivery of quality healthcare services. Moreover, researchers have focused on the need to recruit and retain qualified healthcare workers in health care organizations. Recruiting and retaining managed healthcare workers is essential for organizations' growth, profitability, and expansion. Schweitzer, Chianello, and Kothari (2013) recognized the challenges of job satisfaction and discussed how high staff turnover rates among healthcare workers are related to job dissatisfaction. In countless health care settings, managed healthcare workers have noticed an intensive increase in their work responsibilities, which has resulted in a decrease in job satisfaction. Health care administrators are seeing a decrease in the quality of healthcare workers' patient care. The eventual triumph of healthcare organizations job satisfaction may be associated with reducing the reoccurrences of high staff turnover.

However managed healthcare is related to the way that control cost while maintaining the quality of patients' services (Hooper, T. L., 2016).

In most low- and middle-income countries, shortage of health workers is a substantial barrier to successful health care delivery. This deficiency is frequently linked to system's workforce distribution, the number of available health professionals, or the quality of available employees (Faye et al., 2013; Lehmann et al., 2008).

Employee satisfaction is also recognized as a vital determinant of workers' perspectives. Job satisfaction is defined as the level of satisfaction or dissatisfaction an employee experiences in their job. Positive job satisfaction has been shown to boost employee morale and enthusiasm, ultimately benefiting the entire organization's work quality and job performance (Lu et al., 2016).

The level of job satisfaction among healthcare workers has a significant impact on staff productivity, the quality of healthcare provided, and its cost in the healthcare system. This impact has the potential to create a range of issues for healthcare personnel, from work overload to job stress, all of which contribute to the poor quality of healthcare and services provided to patients. Therefore, the concept of job satisfaction is multidimensional, including the worker and the organization (Halawani, Halawani, and Beyari, 2021).

Healthcare workers' satisfaction is a critical factor that affects the quality of services provided by workers and their productivity. Several factors can influence this satisfaction, including socio-demographic factors such as years of work experience and the work field, freedom of expression, promotion opportunities, salary, and actual working hours. Healthcare workers may also experience burnout and complex working hour shifts, which can negatively

impact job satisfaction. Additionally, workers' job satisfaction is influenced by the tension between their personal and professional lives and the relationship between patients and physicians (Maissiat et al., 2015).

Another part of job satisfaction is employees' comfort with their employment. An example of that when they favor this job for certain aspects or concerns, such as type of care or task. Behavioral, and cognitive factors are all included in this category. affective satisfaction is known as while cognitive satisfaction is defined as the level at which they measure feelings about the job or the work's perceptions (Assiri, Shehata, and Assiri, 2020).

Currently, hospitals must deal with the dynamic forces of market regulations as well as the issue of healthcare service quality. Patients have a higher expectation of professional healthcare and frequently want a better service. Health sector realizes that patient satisfaction is a commonly used aspect for identifying the service quality in healthcare. This means that the satisfaction level provides an ideal evaluation of the services provided concerning patient's expectations and aspirations. As a result, among the most important characteristics in the field of healthcare quality is patient satisfaction, which must be included in the discussion process (Janicijevic et al., 2013).

The main objective of this study is to explore the correlation between job satisfaction among healthcare workers and patient satisfaction with the quality of healthcare services provided at the Armed Forces Hospital in Jazan, Saudi Arabia.

1.2 Research Questions:

What is the relationship between healthcare workers' job satisfaction and the satisfaction of patients with the quality of healthcare services at the Armed Forces Hospital in Jazan, Saudi Arabia?

Regarding the main question, the research can exclude the following sub-questions:

1. What is the impact of the healthcare workers satisfaction on patient satisfaction at the Armed Forces Hospital in Jazan?
2. What are the factors affecting the satisfaction level of healthcare workers and patients at the Armed Forces Hospital in Jazan?

1.3 Research Aim and Objectives:

The objective of this study is to investigate the association between job satisfaction among healthcare workers and the satisfaction of patients with the quality of healthcare services delivered at the Armed Forces Hospital in Jazan, Saudi Arabia. The main objective was supported by other sub-objectives:

- I. Assess the satisfaction level of healthcare workers and patients at the Armed Forces Hospital in Jazan.
- II. Assess the satisfaction level of healthcare workers and its impact on patient satisfaction at the Armed Forces Hospital in Jazan.
- III. Identify the factors affecting the satisfaction level of healthcare workers and patients at the Armed Forces Hospital in Jazan.
- IV. Providing recommendations that help to increase the satisfaction level of healthcare workers and patients at the Armed Forces Hospital in Jazan.

1.4 Research Variables:

The research seeks to reach its objectives through the following variables:

- **Independent Variable:** the healthcare workers satisfaction.
- **Dependent Variable:** the patient satisfaction with the quality of healthcare services

1.5 Significance of the Study:

Enhancing staff productivity and motivation among healthcare employees depends on job satisfaction. On the other side, job dissatisfaction exacerbates the current shortage and aids in ongoing understaffing in healthcare facilities. Successful healthcare delivery is severely hampered by a dearth of health professionals, particularly in underdeveloped nations. The significance of investing in employee job satisfaction in the healthcare industry might be undervalued by leaders, which can significantly affect the provision of high-quality medical services. Health care administrators suggest that the quality of patient care provided by healthcare providers is deteriorating. A lower rate of high employee turnover in healthcare organizations could be associated with the long-term success of job satisfaction

The success of the health sector is highly dependent on the motivation of healthcare professionals. Job satisfaction plays a vital role in enhancing the overall attitude and enthusiasm of the organization, thereby improving the quality of work and increasing job achievement. The healthcare industry is under increasing pressure to meet the rising expectations of patients, who demand higher levels of service and professionalism. Recognizing the importance of patient satisfaction in determining service quality, the industry has identified it as a key factor in assessing the effectiveness of healthcare services. Patient satisfaction provides an accurate measure of how well the services provided meet patients' expectations and goals, making it one of the most crucial elements of healthcare quality.

The Healthcare system becomes responsible to offer high levels of quality along with the healthcare process. The results of this study hold great importance for healthcare authorities in Saudi Arabia as they seek to enhance the quality of healthcare services and increase the satisfaction level of their healthcare workers. This can be achieved by improving their working conditions and environments. The study's significance lies in its attempt to establish the relationship between job satisfaction of healthcare employees and the quality of services provided. Additionally, the findings of this study will help identify the key factors that influence the satisfaction of healthcare employees as well as the quality of healthcare services provided. Ultimately, this will lead to an improvement in patient satisfaction and the overall quality of healthcare.

1.6 Methodology:

The study utilized a quantitative approach with a cross-sectional design deemed appropriate for the investigation. Data was collected using a survey questionnaire as the primary tool. The questionnaire used was validated and based on Janicijevic et al.'s (2013) work.

1.6.1 Research design:

The researcher followed a cross-sectional quantitative research design to conduct this investigation. The data for this study was gathered through questionnaires. No experimentation was conducted to comply with the concept of quantitative research, which includes cross-sectional, non-experimental design.

1.6.2 Research Limits:

1. **Locational Limits:** This research will cover the Armed Forces Hospital in Jazan in Saudi Arabia.
2. **Time Limits:** This research will address the period between the beginning of 12/2021 and the end of 12/2022.
3. **Objective Limits:** This research will be limited to knowing the impact of the healthcare workers satisfaction on patient satisfaction at the Armed Forces Hospital in Jazan.

1.6.3 Source of Data:

In this research the researcher will gather the data depending on two main sources as following:

1. **Secondary Data:** It's the data acquired from optional sources like magazines, books, documents, journals, reports, web, research papers and previous studies.
2. **Primary Data:** It's the data particularly customized to the analysis's requirements. It's collected from the field throughout the designed questionnaire distributed to a sample of the research investigating the research's variables. The researcher realized that the questionnaire is the best tool to collect the data due to the sample size, the nature of the study and the required data.

1.7 Population and Sample:

The population of the study covered all healthcare workers with a number of 269 nursing staff and physicians, and 3003 patients at the Armed Forces Hospital in Jazan, Saudi Arabia. Additionally, the sample included two groups and they were based on the open epi website which arrived at sample size of 159 healthcare workers, and the second group included the patients

who are receiving the healthcare services with a sample size of 341 patients at the hospital, but the response rate of this study was higher than the sample size. The confidence level for each group is 95%.

1.7.1 Sampling technique:

The study employed a simple random sampling method to gather data from both patients and staff at the hospital. Patients admitted to inpatient departments were randomly selected, while nursing staff and physicians working in different departments were also chosen at random.

1.8 Data Collection:

Data collection methods are important and necessary, because how the information collected is used and what explanations it can generate are determined by the methodology and analytical approach applied by the researcher, [Paradis](#) et al. (2016).

1.8.1 Data collection tool:

The data collection included two main components: the first one included secondary data collected from previous studies, journals, published reports, and other online sources. while the second one included the primary data directly gathered from healthcare workers (staff) and patients using the questionnaires. The questionnaire was developed by Janicijevic et al. (2013). The questionnaire is divided into two parts: The first part is directed to Healthcare Workers, which contains 8 items about demographic characteristics, and 7 questions investigating the satisfaction level of healthcare workers at the hospital. This part of questionnaire covered the workers' satisfaction levels with the efficiency of the medical equipment and supplies provided and used at the hospital. In addition, the part of

questionnaire investigates workers' satisfaction regarding their opportunities for professional's enhancements in their work environment.

The second part is specialized for patients It contains 6 items on demographic characteristics, and 5 questions that investigated patients' satisfaction with the quality of health services during their accommodation time at the hospital. Also, this part of the questionnaire investigated patients satisfaction with the nursing care services during that and the results of their medical treatment at the hospital.

An in-depth investigation was carried out to identify previous relevant research. Since some researchers had conducted comparable studies in the past, the instruments that they utilized were properly prepared and peer reviewed. As a result, the researcher opted to employ one of these surveys. The instruments were developed based on questionnaires presented by the WHO.

1.8.2 Data collection Process:

A simple random sampling method was used to obtain the responses. For healthcare workers, an online questionnaire (Google Form was sent by mobile) was used as a data collection technique. For patients, a physical questionnaire was used as a data collection technique. So, the researcher met patients for 3 months (March - April - May of the year 2022) face to face to collect data from them.

1.8.3 Data Analysis:

The data were prepared before being analyzed, and then they were statistically analyzed using SPSS version 28 for both descriptive and inferential statistics approaches. The frequency distributions, correlations,

and percentages were calculated to be used in data interpretation and analysis.

1.9 Statistical Analysis Tools:

The questionnaire will be analyzed by SPSS, and the following statistical tools will be employed:

- 1. Frequency and Descriptive Analysis:** To determine the measures of central tendency which are mean, mode, and median. These measures help the researcher to evaluate the results.
- 2. Cronbach's Alpha for Reliability Statistics:** To measure the reliability of the questionnaire to ensure it measures well what it should be designed for.
- 3. Pearson Correlation Coefficient for Validity:** To measure the correlation between variables.
- 4. One-sample T-Test:** To compare the sample mean with a predefined value. It requires a random sample, independent data, and normally distributed data.
- 5. Independent Samples T-test:** To determine the differences between two groups of data when the population mean is unknown and with two independent samples.
- 6. Analysis of Variance (ANOVA):** To compare the means of several variables to determine the differences among them. It helps to find out whether to reject or accept the null hypothesis.

1.10 Terminologies:

- **The healthcare workers satisfaction:** The degree to which management helps an employee feel engaged and offers them the support and resources necessary to provide quality patient care (Jennifer, 2012).
- **The patient satisfaction:** The degree to which patients properly assess the services offered, which contributes to the overall development of a quality health care supply by assisting the responsible authorities in identifying system flaws (Saadoon et al, 2008).

1.11 Research Organization:

The study includes six chapters. The first contains research aims and objectives, as well as the research significance. Chapter two is related to the review of the field's literature where the researcher reviews the previous studies that discussed the same issue of the research. The third chapter discusses the implemented methodology, which consists of the approach and the design of the study. It also includes data gathering, sampling, ethical consideration, data analysis, and data security. The fourth chapter discusses the results of the analyzed data. Chapter five is dedicated to discussing of the study results and comparing them to previous studies. In chapter six, the researcher offers the principal findings of the research along with recommendations and limitations.

1.12 Chapter Summary:

In this chapter, the researcher provided an introduction to the topic of job satisfaction and dissatisfaction among healthcare workers. The researcher also gave a brief overview of the meaning of job satisfaction and the factors

that can influence it in healthcare organizations. The chapter provided additional information to help readers better understand the relationship between healthcare workers' job satisfaction and patient satisfaction. The researcher stated a clear research aim and outlined the main objectives of the study. Additionally, the chapter highlighted the significance and importance of the research findings for improving the quality of healthcare services and the satisfaction levels of healthcare workers in Saudi Arabia.



CHAPTER 2: LITERATURE REVIEW

2.1 Introduction:

This chapter is considered the main part of any research study. In this chapter, the researcher highlights some previous related studies about job satisfaction among healthcare professionals. It also pinpoints some gaps in research. This chapter covers all aspects of the discussed issue and gathers previous studies from different parts with different conditions. This chapter represents the authors' point of view regarding the discussed topic.

2.2 Literature Review:

The healthcare industry is heavily influenced by three major factors: healthcare quality, job satisfaction, and patient satisfaction. Governments of developed countries have been investing a significant amount of money in recent years to improve the quality of healthcare systems with the goal of increasing patient satisfaction. Patient satisfaction is a complex concept that involves comparing the expectations of patients to the services they receive. This can be difficult to measure, but it is important to study as patient satisfaction is linked to better clinical outcomes and improved healthcare service quality. Access to healthcare is a key factor in shaping patients' perceptions of the quality of healthcare services. Santos-Jaén, Valls Martínez, Palacios-Manzano, and Grasso (2022) suggest that patient experience with accessing healthcare is a major determinant of their perception of healthcare quality.

In fact, the term "satisfaction" refers to the mental state that occurs as a result of the confirmation or refutation of certain ideas (Farman et al.,2017).

Patients' satisfaction levels are determined by their expectations of the healthcare services provided by the organization compared to the actual services provided by the healthcare personnel (Kvist et al., 2014).

Levels of satisfaction among healthcare staff and patients differ from one person to another. This is determined by a patient's educational background, prior experience, and overall perceptions of the healthcare system. Patients' satisfaction is determined by the balance between the treatment they expect from healthcare staff and the care they receive throughout their hospital stay (Hamid et al., 2014).

Healthcare personnel must provide the greatest degree of quality care to their patients. In connection to this, it should be understood that keeping personnel satisfied in their jobs is a crucial aspect that influences the type of services and care they provide. Work satisfaction, which covers numerous factors such as stress, working environment, staff scheduling, and providing compensation, has an impact on the type of care (Burhans and Alligood, 2010).

Work-related stress is a vital factor to job satisfaction. When functioning as a motivator, work-related stress results in creativity and satisfaction and consequently removes boredom and mundanity. Stress leads to aggression and low-level of job satisfaction when it functions as a negative factor. Job satisfaction may protect workers from stressors. Satisfaction is a regulating factor for stress (Hoboubi, Choobineh, Ghanavati, Keshavarzi, & Hosseini, 2017).

Leebov, Jean, & Ersoz (2003, p.4) believe that healthcare quality is ethical and adequate. They argue that quality of healthcare means “doing the right things right and making continuous developments, obtaining the best possible

clinical finding and outcome, satisfying all customers, retaining talented staff and maintaining sound financial performance”.

When the employees of healthcare provide their patients with the desired level of care, it impacts the economy (Kvist et al., 2014).

Studying the dimensions of job satisfaction for both healthcare workers and patients affects healthcare organizations' positively, as this, in turn, will improve patients' experience with medical (Harvey et al., 2018).

2.3 Job Satisfaction of Health Workers:

2.3.1 Job Satisfaction Concept:

Many definitions of job satisfaction focus on a good attitude or affection toward a job. The former is defined as a "positive or pleasant state of emotion caused from an evaluation of an individual's job or job experiences. It is also the collection of feelings and beliefs that people have about their current job". The attitudinal approach to work satisfaction is predicated on the necessity to presume that the variables involved are defined by the measuring activities. As a result, job satisfaction is a state of mind about one's work. It is also the level to which employees like (satisfied with) or dislike (dissatisfied with) their work. In other words, it is the employees' positive or the negative assessment regarding their work environment or employment (Ravari et al., 2012; Aziri, 2011).

A chronology of job satisfaction history demonstrates that the notion was first comprehended from a single point of view, then from various points of view. From the 1930s to the late 1970s, job satisfaction was mostly seen via a single perspective, one that was based on affection and viewed as a consequence of a non-regulatory mood tendency. Since the 1980s, work satisfaction has been studied from a variety of angles, including affection or

cognition; the integration of affective and cognitive dimensions into an attitude approach; and the integration of affect, cognition, attitude, and evaluations (Hulin and Judge, 2003).

Despite these differences, the majority of these definitions have certain similar ideas. They expect a largely positive relations between employee job satisfaction and job performance. People are assumed to labor to develop, maintain, and enhance their job satisfaction. Because group feelings and professional identities impact the individual dimension, they reject any assumption of a passive perspective of job pleasure, which occurs arbitrarily (automatically). The most crucial components of job satisfaction are attempting and preparing to obtain it, which may be accomplished via critical thinking and smart planning (Ravari et al., 2012).

Job satisfaction, according to Schermerhorn, is the level to which people are happy or unhappy with their work. It's an emotional reaction or mindset to an individual's tasks and to the social and physical environment at work. This aspect motivates staff, results in better performance levels and strong working relationships (Schermerhorn, 2000).

The term, according to Locke and Hanne, might be "the happy emotional condition that results from an individual fulfilling his or her values (motives) in the task". This highlights another aspect of job satisfaction, which relates to individuals' emotions and perceptions towards their work and its various aspects. It is an expression of how content or discontent employees are with their jobs. Job satisfaction is considered an attitude and is measured through various assessments, as described by Spector (1997).

Employment satisfaction may also be understood as the feeling for an individual's work or a collection of attitudes toward specific components of

an individual's job. To acquire a full view of employee work satisfaction, both the global and facet approaches can be applied. Job satisfaction, according to Werner, includes five elements that used to calculate a Job Description Index (JDI):

- The work itself –interest, accountability, and advancement.
- Technical assistance and social support are both important aspects of supervision.
- Coworker relationships – social harmony and respect Possibilities for advancement - possibilities for progress
- Compensation – adequacy of pay and perceived fairness in comparison to others (Werner, 2001).

The features of work are usually divided into two categories: extrinsic factors and intrinsic variables. Herzberg and colleagues distinguished between intrinsic and extrinsic employment incentives in 1957. The affective reactions of people to certain aspects important to the job itself are referred to as intrinsic factors in a job. Extrinsic work factors are concerned with difficulties that are not directly related to the job, such as compensation. Many academics continue to find that the separation between intrinsic and extrinsic work aspects, incentives, motives, requirements, and so on to be a significant tool in their study (Chaudhury and Banerjee, 2004).

2.3.2 Factors Affecting Job Satisfaction:

Job satisfaction among healthcare workers is influenced by a variety of factors, including both intrinsic and extrinsic factors, as well as occupational and non-occupational variables. These factors can have a significant impact on the level of satisfaction experienced by healthcare workers in their jobs, and can ultimately affect the quality of care they provide to patients. Job

satisfaction, in its most basic form, refers to the way individuals feel about many aspects of their jobs and how much they enjoy (satisfaction) or dislike (dissatisfaction) them. The relevance of examining work satisfaction among healthcare professionals is related to the necessity of enhancing individual employee motivation. This is important as it influences organizational culture and morale, organizational efficiency, and, most importantly, patient care and satisfaction (Bhatnagar and Srivastava, 2012).

Job satisfaction among healthcare workers is influenced by various factors, including intrinsic and extrinsic factors, as well as occupational and non-occupational variables. Five essential aspects of job satisfaction are the job itself, quality of supervision, interaction with coworkers, advancement chances, and remuneration. Intrinsic factors such as engagement in meaningful work, the sense of competence and quality performance, the sense of agency, power or shared decision-making, and a continuous sense of development and accountability are also crucial in determining job satisfaction among healthcare workers. In addition, extrinsic factors such as compensation and benefits, praise and validation, access to management, and a caring and supportive work environment or organizational culture are equally important in influencing job satisfaction among healthcare workers (Werner, 2001).

Factors that determine job satisfaction are Organizational factors (job content, occupational level, promotion and pay opportunities, considerate leadership, conditions for workers, respect from coworkers, correlation with superior officers, the opportunity for advancement, the volume of work and stress level, and financial benefits), and personal factors (personality job fit,

work itself, educational level, role perception, gender, and career development) (Nafei, 2013).

2.3.3 Importance of Job Satisfaction in Health Care Institutions:

If the fundamental needs of hospital personnel are not satisfied, they will definitely have difficulty serving the needs of their patients. As a result, hospital administrators are accountable to both personnel and patients (KIVIMÄKI, KALIMO, and LINDSTROM, 1994).

Job satisfaction in healthcare environment is directly related to several variables including the ability to actively participate in the decision-making process, optimal work arrangements, the ability to freely express an opinion, and effective communication among supervisors and staff. Employee satisfaction is also influenced by collective issue resolutions and managerial attitudes (Love, 1977).

Job satisfaction may be raised by focusing on motivators such as the demanding of more initiative, excitement, planning, and creativity. This is particularly important when financial restrictions limit compensation and benefit raises (Herzberg, Mausner, and Snyderman, 1963).

Management must recognize the relevance of elements impacting employees' well-being. As a result, they are more likely to get better results from diverse groups of hospital workers. It is critical to get employees' feedback and include them in problem-solving and decision-making processes (Dowell, Hamilton, and McLeod, 2000).

Healthcare organizations strive to provide the best possible healthcare services to a large number of people, given the limitations of their available resources, including material, social, human, and financial resources. In order to achieve this objective, healthcare institutions must have committed and

competent staff. As human resource management has a significant impact on the quality of healthcare services and is increasingly included in official quality systems, it is imperative that healthcare facilities consider human resource quality at the outset of constructing a quality system.

Taking care of employees' work satisfaction is thus an important aspect of human resource quality. Employees' morale has a significant impact on organization's efficiency. According to behavioral and social science studies, job performance and work satisfaction are interrelated. Work morale and satisfaction among healthcare professionals are hot topics across the world. Increased physician turnover is a result of low-level work satisfaction, which has a negative impact on medical care job satisfaction. As a result, a healthcare manager may generate motivated, productive, and satisfied staff by building an atmosphere that fosters job satisfaction. As a result, higher-quality patient care and satisfaction can be achieved (Huby, 2002) (Reed, 2006).

2.4 Patients Satisfaction with Health Services:

Patient reports regarding their healthcare experiences are being more often employed as a measure of healthcare quality. Payers, employers, and providers have discovered that patient evaluations of services differ across healthcare settings. It is also found that patients would switch providers based on these evaluations. Patient satisfaction has been proven to be linked to both patient and physician attributes. According to previous related research, a physician's age, gender, and training can all influence a patient's sense of care. It has been proposed that the relationship between patient's and a physician's values, encounter expectations, attitudes, and experience may

influence patient-physician communication and decision-making, and hence satisfaction. Several observations imply that a physician's professional satisfaction may have a significant impact on patient satisfaction (Laschinger et al., 2005).

Patient satisfaction is strongly linked to physician satisfaction, indicating that organizational elements of the practice environment may impact both patients and healthcare providers. However, this link may or may not persist after adjusting for patient and physician factors. Physician satisfaction with their work life can affect patient satisfaction, as happy physicians are likely to be more productive. With the increasing adoption of managed care, physicians express concerns about the impact on their professional satisfaction, autonomy, and quality of care. Work-life satisfaction is a growing concern in healthcare. Patient satisfaction has long been considered a critical factor in measuring healthcare quality and outcomes, both in developed and developing regions worldwide. It is an essential indicator of healthcare quality in these regions (Park, 2009).

According to studies, satisfied patients are more likely to have a favorable connection with the healthcare environment. This increases in their compliance, care continuity, and, eventually, a better outcome of health. A patient-centered method of healthcare starts with the examination of patients' needs and an evaluation of the offered health services. Therefore, patient satisfaction is a significant metric for evaluating healthcare services' quality. This is true as it has the power to predict both use and compliance (Park, 2009).

The goal of healthcare services is to enhance the health of the population; therefore, healthcare stakeholders should be aware of the necessity for

reforms in the healthcare structure to improve patient satisfaction with healthcare services around the world. As a result, the restructuring of healthcare systems around the world has focused on ways to improve patient satisfaction (Kavitha, 2014).

With a greater understanding of the aspects that affect client satisfaction, custom-made programs tailored to the needs of patients, as viewed by patients and service providers, might be implemented. Patients are seen the finest judges because they properly assess the services offered. Patients' contributions aid in the overall development of quality health care supply by assisting the responsible authorities in identifying system flaws. Consumer satisfaction is becoming increasingly crucial in the development of care quality and healthcare delivery generally in both Europe and the United States. The lack of commonly acknowledged criteria or metrics, however, makes customer satisfaction research difficult. In all but five European Union nations, overall satisfaction with health care found to be good; more than half of respondents said they were "very satisfied" or "somewhat satisfied" with the services they received. Although the quality of treatment was not sufficient, Fomba et al discovered a high degree of satisfaction in community health care clinics in the district of Bamako (Saadoon et al, 2008).

In research done in Thi-Qar, Iraq, over half of the respondents were displeased with the healthcare services and a high proportion of dissatisfaction was linked to poor education, unemployment, male gender, and single status. In the Gulf, a survey of primary health care clinics in Qatar revealed that overall satisfaction was poor (Al Emadi et al, 2009).

The Ministry of Health (MOH) of Saudi Arabia provides basic, secondary, and tertiary health care. Promotive, preventative, and curative primary care

services are provided through PHC facilities. Cases requiring more developed care are sent to secondary care or public hospitals, while those require more complex services are transferred to specialty or central hospitals. The (MOH) supervises hundreds of hospitals and Primary Health Care (PHC) clinics. These services account for the majority of all healthcare services in the Kingdom (Ministry of Health, 2011).

Despite the fact that patient satisfaction is a fundamental element of healthcare quality, few studies on patient satisfaction have been conducted in Saudi Arabia in recent years. Patients' satisfaction with PHC services was found to be somewhat poor in a research conducted in Riyadh, Kingdom of Saudi Arabia. The results revealed areas in which quality improvement is needed, primarily accessibility and continuity of treatment (Al-Sakkak et al, 2008).

Respondents to surveys done in Saudi Arabia's Hail and Riyadh expressed great levels of satisfaction with the services offered by physicians and employees. They were generally satisfied with the care provided (Alshammari, 2014).

2.5 Effects of Health Workers' Satisfaction on Patients' Satisfaction:

Every healthcare business today is focused on reaching and maintaining the highest levels of patient satisfaction. Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) started public reporting in 2008. However, the importance of this knowledge has grown only since then. A Forum Group report titled "The Relationship Between Employee Satisfaction and Hospital Patient Experiences" by Andy Dahl, Frank Mulhern, and Jimmy Peltier found in a review of literature that efforts to establish higher satisfaction of employees have a desirable result on patients

These results include improved the satisfaction of the patients, increased patient loyalty, and improved quality of care. According to the paper, "seeing employees as internal customers" is an efficient strategy to address the demands of staff with the objective of eventually satisfying patients. Quality leadership, according to the research, is known as the driving force behind establishing "empowering cultures of work" that are more possibly to result in engaged employees; therefore, enhanced care of their patients (Jennifer, 2012).

According to the report, a primary determining factor of an employee's satisfaction and loyalty is the relationship with their direct supervisor. "When management helps an employee to feel engaged and offers them the support and resources necessary to provide the good quality of patient care, employees are not only more satisfied with their leader or employer but also remain more loyal," the authors wrote. And that, in turn, can reduce costly turnover and improve the retention (Jennifer, 2012).

2.6 Previous Studies:

The research conducted by Santos-Jaén et al. aimed to examine the impact of government investments in the Spanish healthcare system on patient satisfaction, particularly in terms of waiting times for consultations and operations, and whether there were any differences based on gender. Through the use of partial least squares structural equation modelling (PLS-SEM) and analysis of key indicators, the study found that public spending has a positive effect on patient satisfaction by reducing waiting times. The results also showed that there were no gender-based differences in the relationship between public spending, waiting times, and patient satisfaction. These

findings have practical implications for policymakers in developing strategies to improve patient satisfaction in healthcare systems.

The study aimed to investigate the relationship between nurses' job satisfaction, perceived organizational support, and the quality of healthcare services provided in Saudi Arabian governmental hospitals. The data was collected from 355 nurses through an online questionnaire during March and April 2020. Among the participants, 216 (60.8%) were female and their ages ranged from 25 to 55 years old. The majority of nurses (75.2%) reported liking the type of work they do and 69% reported having satisfactory equipment to carry out their tasks. The study found a significant positive relationship between perceived organizational support and job satisfaction, which in turn positively affected the quality of care provided. Therefore, organizational support is an important factor in improving job satisfaction and the quality of healthcare services provided by nurses in Saudi Arabian governmental hospitals (Assiri et al., 2020).

The study aimed to investigate the impact of healthcare worker satisfaction on patient satisfaction, as well as identify which aspects of healthcare worker satisfaction affect the quality of healthcare services and patient satisfaction. The data were collected through surveys using questionnaires from 18,642 healthcare workers and 9,283 patients in 50 secondary healthcare institutions in Serbia. Data analysis was carried out using descriptive statistics, correlations, and the 12-distance method. While there is a general belief that healthcare worker satisfaction has a significant effect on patient satisfaction, the research results indicate a relatively low correlation factor between these two variables. However, the obtained value of correlation cannot be ignored, as it confirms that healthcare worker satisfaction does have an impact on

patient satisfaction. The study findings reveal that healthcare staff satisfaction with the time allocated to accomplish their assigned tasks has the most significant effect on patient satisfaction. By recognizing the importance of specific aspects of healthcare worker satisfaction and their effects on patient satisfaction, decision-makers can identify the factors that need to be improved to increase patient satisfaction. These results have important implications for healthcare institutions' management and responsible state institutions, which create policies and strategies to improve the quality of healthcare services (Janicijevic et al., 2013).

2.6.1 Gap in Literature:

Regarding previous studies, it is possible to draw a comment on these studies as follows:

- **Depending on goal:** goals of previous studies are similar to the goal of this study which focuses on the satisfaction of healthcare workers and patients. One of them Janicijevic et al. (2013) has been applied in Serbia, is like to this study, because this study is trying to apply it in another place which is Saudi Arabia.
- **Depending on sample:** the average of sample size for previous studies is different for each other, two of them have less than 400 participants, Janicijevic et al. (2013) study has 18,642 healthcare workers and 9,283 patients, and this study has 629 participants. The places of study for previous studies were the health sector in Spain, Serbia, and Saudi Arabia. So, this study is like to two previous studies.
- **Depending on methodology:** previous studies and this study utilized a quantitative approach that followed a cross-sectional

survey. The main tool for data collection was a survey questionnaire. The survey questionnaire was used previously in Janicijevic et al. (2013) study investigating the same topic.

As a summary, this research obtained the necessary permissions to use Janicijevic et al. (2013) questionnaire in order to apply this research in another place which is Saudi Arabia and in the same health sector with a different sample size.

2.7 Chapter Summary:

The two key aspects that affects the healthcare system are the quality of care and job satisfaction. Job satisfaction is an emotional reaction or a mindset to one's work as well as the social and physical environment of that work. Satisfaction motivates employees at their jobs, resulting in firm working connections and improved levels of job performance.

Variables that determine satisfaction are classified as personal and organizational factors. In healthcare organizations, job satisfaction is connected to several variables, including the ability to actively participate in the decision-making process, optimal work arrangements, and effective communication among supervisors and staff. Satisfied patients often have a favorable connection with the healthcare structure, which makes them comply more. This may lead to care continuity, and, eventually, a better outcome.

CHAPTER 3: RESEARCH METHODOLOGY

3.1 Introduction:

This chapter introduces the methodology followed to achieve the purposes of the study. In this chapter, the researcher describes the approach and the design followed to frame the research. Moreover, the researcher explains the data collection instrument and the process of data collection. This study is based mainly on samples. The researcher will explain the sampling method followed, and the sample number chosen.

3.2 Research approach:

Two broad research roads are accessible, depending on the sort of data to be collected. These include qualitative and quantitative research, each having a unique set of characteristics, benefits, and advantages tailored to a certain purpose, as explained below. Qualitative research entails the collection and analysis of non-numerical, narrative data that provides insight into particular events (Mohajan, 2018). Additionally, qualitative research may be exploratory due to the fact that it aids in determining the broad nature of an issue and its related factors (Johnson, Adkins, and Chauvin, 2020).

Exploratory research, on the other hand, can be quantitative. On the other hand, quantitative research focuses on the analysis of numerical data. To distinguish between these two types, qualitative research is related to a thing's what, how, when, and where, as well as its essence and ambiance. Thus, qualitative research focuses on the concepts, meanings, properties, definitions, symbols, metaphors, and object descriptions.

In comparison, quantitative research is concerned with the counts and measurements of objects (Aspers and Corte, 2019). It is more effective when

a big number of people's opinions are required. Thus, the quantitative approach is seen more appropriate for the current study.

3.3 Research design:

The current study used a cross-sectional design since it was intended to be conducted at a particular moment in time. The researcher followed a cross-sectional quantitative research design to conduct this investigation. The data for this study was gathered through questionnaires. No experimentation was conducted to comply with the concept of quantitative research, which includes cross-sectional, non-experimental design.

3.4 Data Collection:

Data collection methods are important and necessary, because how the information collected is used and what explanations it can generate are determined by the methodology and analytical approach applied by the researcher, [Paradis](#) et al. (2016).

3.4.1 Data collection tool:

The data collection included two main components: the first one included secondary data collected from previous studies, journals, published reports, and other online sources. while the second one included the primary data directly gathered from healthcare workers (staff) and patients using the questionnaires. The questionnaire was developed by Janicijevic et al. (2013). The questionnaire is divided into two parts: The first part is directed to Healthcare Workers, which contains 8 items about demographic characteristics, and 7 questions investigating the satisfaction level of healthcare workers at the hospital. This part of questionnaire covered the workers' satisfaction levels with the efficiency of the medical equipment and supplies provided and used at the hospital. In addition, the part of

questionnaire investigates workers' satisfaction regarding their opportunities for professional's enhancements in their work environment.

The second part is specialized for patients It contains 6 items on demographic characteristics, and 5 questions that investigated patients' satisfaction with healthcare workers during their accommodation time at the hospital. Also, this part of the questionnaire investigated healthcare workers satisfaction with the nursing care services during that and the results of their medical treatment at the hospital. The questionnaire attached in Appendix IV

An in-depth investigation was carried out to identify previous relevant research. Since some researchers had conducted comparable studies in the past, the instruments that they utilized were properly prepared and peer reviewed. As a result, the researcher opted to employ one of these surveys. The instruments were developed based on questionnaires presented by the WHO.

3.4.2 Data collection Process:

The researcher used a simple random sampling method to obtain responses from both healthcare workers and patients. For healthcare workers, an online questionnaire was created using Google Form and randomly sent via mobile and email. On the other hand, for patients, a physical questionnaire was used and the researcher randomly selected patients at the Armed Forces Hospital in Jazan for a period of 3 months (March - April - May of the year 2022) face to face to collect data from them.

3.4.3 Validity and Reliability:

Reliability is the level to which an instrument calculates the same approach every time it is used under the exact circumstances with the exact subjects. Many ways are used in which it can be calculated to achieve reliability

extent. In this method, Cronbach's Alpha has been implemented to identify the reliability of the gathered data through the questionnaire, and there was a good degree of internal consistency as the value of Cronbach's alpha was 0.863 for the questionnaire of healthcare workers satisfaction and 0.914 for the questionnaire of patients, These findings show the presence of high levels of data reliability

3.5 Sampling:

3.5.1 Sample size and selection of sample:

The population of the study covered all healthcare workers with a number of 269 nursing staff and physicians, and 3003 patients at the Armed Forces Hospital in Jazan, Saudi Arabia. Additionally, the sample included two groups and they were based on the open epi website which arrived at sample size of 159 healthcare workers, and the second group included the patients who are receiving the healthcare services with a sample size of 341 patients at the hospital, but the response rate of this study was higher than the sample size. The confidence level for each group is 95%.

3.5.2 Sampling technique:

The study used a simple random method to collect data from patients and staff in the hospital. Patients in the inpatient departments were chosen randomly. The nursing staff and physicians working in the hospital were randomly selected from a number of departments.

3.6 Data Analysis:

The data were prepared before being analyzed, and then they were statistically analyzed using SPSS version 28 for both descriptive and inferential statistics approaches. The frequency distributions, correlations,

and percentages were calculated to be used in data interpretation and analysis.

3.7 Ethical Considerations:

All study participants were informed of the objectives and the questions of this study and were free to participate. The study procedure was reviewed with each participant before confirming his or her written consent (attached in Appendix V). Participants were reassured that their names and responses were confidential if they liked. Participants were pointed out that withdrawal from participation could occur at any point. The ethical approvals were obtained from the Armed Forces Hospital in Jazan and the General Administration for health services Research Ethics Committee in the Ministry of Defense No.430011000740 dated 02/07/1443. The ethical approval (attached in Appendix I, II).

3.8 Data Security:

For data security, the researcher gave it a high priority. No one had the right to access the collected data except the researcher. The collected data was stored electronically on flash memory and were protected by a high-level password. The hard copies of the data were kept in a safe place in the researcher's house and were kept out of reach of others.

3.9 Chapter Summary:

This chapter represents the methodology followed by the researcher. The researcher gave a detailed rationale behind using these particular approach and design for the research. The researcher also mentioned the sample and the sampling method followed in this research. ethical consideration, and data security were explained

CHAPTER 4: RESULTS

4.1 Introduction:

In this chapter, the findings from the collected data are presented, along with their relevance to the research questions and objectives. Additionally, the statistical methods employed to analyze the data are described by the researcher.

4.2 Statistical Analysis Plan:

Descriptive statistics are presented in the form of percentages and numbers for the categorical factors. Standard and mean deviations are reported for the total satisfaction level and each satisfaction item. The satisfaction level for each individual was calculated by summation of the score of individual items and transforming it into a percentage. One-way ANOVA and independent samples t-test were implemented to compare the satisfaction level of different groups of patients and staff. IBM SPSS 28 software was implemented for the examination and a P-value < 0.05 has been shown to be statistically significant.

4.3 Internal Consistency:

Correlation coefficients were determined between the degree of every paragraph and the questionnaire's score. The findings indicate internal data's validity consistency in the study where correlation coefficient's values ranged for all degrees 0.607 to 0.892. These numbers were also significant at 5%; as tables (1) and (2) show that.

Table 1: Internal consistency for Items of the questionnaire: healthcare staff satisfaction

No.	Items	r	Sig.
1	The adequacy of the equipment needed for work in the department	.746**	.000
2	Interpersonal relations	.746**	.000
3	The opportunities for professional improvement at your current place of work	.830**	.000
4	Time available for accomplishment of your tasks	.732**	.000
5	Your salary	.607**	.000
6	Opportunities for continuous professional education at your work	.786**	.000
7	The clarity of the instructions you receive regarding the expectations you need to meet at your workplace	.783**	.000

Hint: r= Pearson Correlation Coefficient, **Significant at the 0.01 level.

Table 2: Internal consistency for Items of the questionnaire: patients' satisfaction

No.	Items	r	Sig.
1	The courtesy of healthcare workers during admission to or discharge from the hospital	.845**	.000
2	Your nursing care during your stay in the hospital	.878**	.000
3	The results of your medical treatment during your stay in the hospital	.852**	.000
4	The services provided by physicians during your stay in the hospital	.892**	.000
5	Diagnosis and therapy services during your stay in the hospital	.857**	.000

Hint: r= Pearson Correlation Coefficient, **Significant at the 0.01 level.

4.4 Results:

4.4.1 Characteristics of Healthcare Staff:

A total of 247 healthcare staff participated in this study and 53.8% of them are females. Participants' characteristics have presented in table 3. 68.8% of the participants are non-Saudis, and 80.6% of them are married. 58.3% are in the age group 22-35, while 29.6% are between 36-45, while 12.1% are in the age group 46-55. 52.2% of the participants have bachelor's degrees. 67.2% of the participants are nurses, and 28.3% are doctors. 66.4% of the participants have 5-15 years of experience. As for the income level, the monthly income is less than 5,000 SR for 13.8%, between 5,000 – 10,000 SR for 32.8%, between 10,000 – 15,000 SR for 23.5% and more than 15,000 SR of 30% of the participants.

Table 3: Characteristics of 247 healthcare staff

Characteristics	Number	Percentage
Gender		
Male	114	46.2
Female	133	53.8
Nationality		
Saudi	77	31.2
Non-Saudi	170	68.8
Age		
22-35	144	58.3
36-45	73	29.6
46-55	30	12.1
Social status		
Single	47	19.0
Married	199	80.6
Divorced	1	0.4
Education Level		
High school	1	0.4
Diploma	67	27.13
Bachelor degree	129	52.23
Master's degree	28	11.34
PHD	22	8.91
Occupation		
Doctor	70	28.34

Characteristics	Number	Percentage
Nurse	166	67.21
Paramedical	3	1.21
Other	8	3.24
Years of Experience		
Less than 5 years	41	16.6
5-15 years	164	66.4
More than 15 years	42	17.0
Financial Level		
Less than 5,000 SR Monthly	34	13.77
Between 5,000 – 10,000 SR Monthly	81	32.79
Between 10,000 – 15,000 SR Monthly	58	23.48
More than 15,000 SR Monthly	74	29.96
Total	247	100

4.4.2 Characteristics of the Patients:

A total of 382 patients participated in this study and 67.3% of them are males. Participants' characteristics are presented in Table 4. 99% of the participants are Saudis, and 31.75 are in the age group 22-35, 30.4% in the age group 36-45, while 22.8% are in the age group 46-55. 59.4% are married, 26.4% are divorced and 9.2% are single. The highest percentage of participants, 55.5% holds a bachelor's degree. As for their income level, the monthly income is less than 5,000 SR of 14.9%, between 5,000 – 10,000 SR of 37.4%, between 10,000 – 15,000 SR of 40.8% and more than 15,000 SR of 6.8% of the participants.

Table 4: Characteristics of 382 patients

Characteristics	Number	Percentage
Gender		
Male	257	67.3
Female	125	32.7
Nationality		
Saudi	378	99.0
Non-Saudi	4	1.0
Age		
22-35	121	31.68
36-45	116	30.37
46-55	87	22.77
56-65	31	8.12
Over 66 years	27	7.07
Social status		
Single	35	9.16
Married	227	59.42
Divorced	101	26.44
Widower	19	4.97
Education		
Illiterate	17	4.5
Primary education	9	2.4
Intermediate education	28	7.3
Secondary education	104	27.2
Bachelor degree	212	55.5

Characteristics	Number	Percentage
postgraduate	12	3.1
Financial status		
Less than 5,000 SR Monthly	57	14.92
Between 5,000 – 10,000 SR Monthly	143	37.43
Between 10,000 – 15,000 SR Monthly	156	40.84
More than 15,000 SR Monthly	26	6.81
Total	382	100

4.4.3 Healthcare Staff Job Satisfaction:

The details of healthcare workers' satisfaction with different items are presented in Table 5 in the form of numbers and percentages for each category. The mean satisfaction score is calculated for each item with a higher score indicating higher satisfaction. The item with the highest satisfaction was 'interpersonal relations', followed by the 'time available for accomplishment of the tasks'. The item with the least satisfaction is 'opportunities for continuous professional education at work'.

The satisfaction score for each participant was calculated and transformed into a satisfaction percentage. For all participants, the mean satisfaction level was 71.2%.

Table 5: Details of healthcare staff job satisfaction

To what extent are you satisfied with:	M	SD	RII	t	P-value
The adequacy of the equipment needed for work in the department	3.45	0.94	69.0 %	7.418	0.000
Interpersonal relations	3.87	0.76	77.4 %	18.019	0.000
The opportunities for professional improvement at your current place of work	3.55	0.90	71.0 %	9.545	0.000
Time available for accomplishment of your tasks	3.77	0.75	75.4 %	16.034	0.000
Your salary	3.44	0.99	68.8 %	6.917	0.000
Opportunities for continuous professional education at your work	3.32	0.99	66.4 %	5.010	0.000
The clarity of the instructions you receive regarding the expectations you need to meet at your workplace	3.56	0.83	71.2 %	10.597	0.000
Overall satisfaction percentage	3.56	0.67	71.2 %	13.48	0.000

Hint: M=Mean of answers, RII=Relative Importance Index ((Mean/5) *100%), SD=Standard

Deviation

4.4.4 Patients' Satisfaction with the quality of service:

The details of patients' satisfaction with different items are presented in Table 6 in the form of numbers and percentages for each category. The mean satisfaction score is calculated for each item with a higher score indicating higher satisfaction. The item with the highest satisfaction was the 'nursing care during the stay in the hospital', followed by the 'courtesy of healthcare workers during admission to or discharge from the hospital'. The item with the least satisfaction is 'diagnosis and therapy services'.

The satisfaction score for each patient was calculated and transformed into a satisfaction percentage. For all patients, the mean satisfaction level was 75.8%.

Table 6: Details of patients' satisfaction with healthcare services

To what extent are you satisfied with:	M	SD	RII	t	P-value
The courtesy of healthcare workers during admission to or discharge from the hospital	3.85	0.94	77.0 %	17.62	0.000
Your nursing care during your stay in the hospital	3.93	0.91	78.6 %	19.97	0.000
The results of your medical treatment during your stay in the hospital	3.71	0.93	74.2 %	14.67	0.000
The services provided by physicians during your stay in the hospital	3.80	1.024	76.0 %	14.34	0.000

To what extent are you satisfied with:	M	SD	RII	t	P-value
Diagnosis and therapy services during your stay in the hospital	3.67	1.127	73.4%	9.853	0.000
Overall satisfaction percentage	3.79	0.844	75.8%	17.61	0.000

Hint: M=Mean of answers, RII=Relative Importance Index ((Mean/5) *100%), SD=Standard Deviation

4.4.5 Comparison of the Degree of Satisfaction of Patients and Staff:

This comparison was conducted with the sample t-test. The comparison found a statistically significant difference. The degree of satisfaction of patients (3.79 ± 0.844) was higher than the healthcare workers (3.56 ± 0.657), p-value = 0.000.

Table 7: Comparison of the degree of satisfaction of patients and staff

	Number	Mean	Percentage	Standard Deviation	t	P-value
Staff satisfaction	247	3.56	71.2%	0.657	13.48	0.000
Patients' Satisfaction	382	3.79	75.8%	0.844	17.61	

4.4.6 Comparison of the level of satisfaction across different groups of staff:

This comparison was also conducted using an independent sample t-test or one-way ANOVA. Males had a higher mean satisfaction score (3.69 ± 0.70) as compared to females (3.45 ± 0.598). Regarding nationality, Saudi staff had a higher mean satisfaction score (3.69 ± 0.663) as compared to non-Saudis (3.51 ± 0.648). Depending on age, 46-55 participants had higher satisfaction (3.62 ± 0.685) as compared to other ages. Married staff had higher satisfaction (3.64 ± 0.657) as compared to single or divorced participants. As for the educational level of the participants, those with master's degrees had higher satisfaction (3.78 ± 0.712) as compared to those who have bachelor's degrees (3.46 ± 0.625). Doctors had higher satisfaction levels (3.75 ± 0.643) as compared to nurses (3.46 ± 0.633). As for participants' monthly income, those who earned more than 15,000 SR had a higher satisfaction level (3.76 ± 0.665) as compared to those who earn less than 5,000 SR (3.39 ± 0.640).

No statistically significant difference was found in satisfaction between participants across different years of experience.

Table 8: Comparison of the level of satisfaction across different groups of the staff

		Number	Mean	Standard Deviation	F	P-value
Gender	Male	114	3.69	.700	8.33	0.004
	Female	133	3.45	.598		
Nationality	Saudi	77	3.69	.663	4.10	0.044
	Non-Saudi	170	3.51	.648		
Age	22-35	144	3.56	0.649	0.215	0.806
	36-45	73	3.56	0.667		
	46-55	30	3.62	0.685		
Social status	Single or divorced	47	3.25	.560	6.13	0.000
	Married	200	3.64	.657		
Educational level	Diploma	67	3.60	.669	2.496	0.044
	Bachelor degree	129	3.46	.625		
	Master's degree	28	3.78	.712		
	PHD	22	3.73	.642		
Occupation	Doctor	70	3.75	.643	4.639	0.001
	Nurse	166	3.46	.633		
	Paramedic or others	11	3.91	.778		
Years of	Less than 5	41	3.70	.686	2.038	0.132

experience	years					
	5-15 years	164	3.50	.631		
	More than 15 years	42	3.66	.709		
Income	Less than 5,000 SR Monthly	34	3.39	.640	3.503	0.016
	Between 5,000 – 10,000 SR Monthly	81	3.50	.636		
	Between 10,000 – 15,000 SR Monthly	58	3.50	.643		
	More than 15,000 SR Monthly	74	3.76	.665		

4.4.7 Comparison of the level of satisfaction across different groups of patients:

Comparison of the level of satisfaction across different groups of patients was done using the independent sample t-test or one-way ANOVA. Female patients had higher satisfaction levels (3.93 ± 0.814) than males (3.72 ± 0.820). Although there are only 4 non-Saudi participants, their level of satisfaction is higher than the average satisfaction of the Saudi patients. For age,

participants in the age group 22-35 and the age group 36-45 had higher satisfaction levels than those in the age group 46-55 and 56-65. As for the patients' income level, patients with a monthly income of less than 5,000 SR had higher satisfaction levels in comparison to patients in all other income categories.

No statistically significant difference was found in satisfaction between patients of different social statuses or different levels of education.

Table 9: Comparison of the level of satisfaction across different groups of patients

		Number	mean	Standard Deviation	F	P-value
Gender	Male	257	3.72	.820	5.463	0.020
	Female	125	3.93	.814		
Nationality	Saudi	378	3.78	.818	8.912	0.004
	Non-Saudi	4	5.00	.000		
Age	22-35	121	4.00	.774	8.516	0.000
	36-45	116	3.92	.819		
	46-55	87	3.55	.834		
	56-65	31	3.33	.780		
	Over 66 years	27	3.58	.655		
Social status	Single	35	3.90	.796	0.954	0.257
	Married	227	3.84	.845		
	Divorced	101	3.66	.788		

		Number	mean	Standard Deviation	F	P-value
	Widower	19	3.68	.755		
Education	Less than a university degree	158	3.81	.865	0.015	0.710
	With a university degree or higher	224	3.78	.794		
Financial Status	Less than 5,000 SR Monthly	57	4.27	.714	10.627	0.000
	Between 5,000 – 10,000 SR Monthly	143	3.76	.825		
	Between 10,000 – 15,000 SR Monthly	156	3.72	.832		
	More	26	3.31	.480		

		Number	mean	Standard Deviation	F	P-value
	than 15,000 SR Monthly					

4.5 Chapter Summary:

This chapter represents the statistical analysis plan which shows all of tools used in this research like One-way ANOVA and independent samples t-test. Also, show the internal consistency for items of the two questionnaire. Results show characteristics of healthcare staff and patients and their degree of satisfactions

CHAPTER 5: DISCUSSIONS

According to Kaarna (2007), job satisfaction among healthcare workers is a crucial factor in determining the quality of treatment provided and the overall effectiveness of the healthcare system. Therefore, it is considered to be a key contributor to patient satisfaction. This study was conducted among Healthcare Workers and Patients in the Kingdom of Saudi Arabia to determine the relationship between patient satisfaction and job satisfaction in healthcare. It also aimed to identify the most significant factors that influence job satisfaction among healthcare workers and patient satisfaction in Saudi Arabia and the relationship between them. The results revealed that gender, nationality, social status, educational level, occupation, and income do not contribute to the satisfaction of healthcare workers, except for age, which was significantly correlated. More than half of the healthcare staff participants were between 22 and 35 years old, which had a significant impact on their job satisfaction. Female healthcare workers accounted for 53.8% of the participants, and 80.6% of them were married, both of which had a significant impact on their job satisfaction. Based on Gedif et al.'s (2018) findings, it was believed that married couples tended to support each other on various fronts, including economic, social, and psychological, which could contribute to their job satisfaction.

Al-Muallem and Al-Surimi (2019) confirmed the current findings, reporting that while the majority of pharmacists were satisfied with their job, nearly two-thirds planned to leave. Factors influencing their intentions included job satisfaction and work commitment, while demographic characteristics did not play a significant role. Demographic characteristics,

occupation, educational background, years of service, and income were found to have a statistically significant influence on the job satisfaction of healthcare workers based on the preceding findings. Parveen (2015) also reported a similar outcome, highlighting the substantial impact of unique demographic features, such as gender, spouse/family staying, nationality, ethnic group, language barrier, and cultural barrier, on work satisfaction levels in the Saudi healthcare sector. However, Bahnassy's (2014) study, which analyzed nurses from various nationalities, cultures, and societies in a tertiary medical care center in Riyadh, Saudi Arabia, found no association between socio-demographic data, including gender, nationality, last educational degree, occupation, and marital status, and nurses' satisfaction with their employment. This could be attributed to the diverse backgrounds and cultures of nurses working in Saudi Arabia.

The current study found that doctors and nurses had higher job satisfaction levels than paramedics, but there was no significant difference between the two groups. The study also showed that individuals with higher educational degrees were more satisfied with their jobs. This may be due to the greater respect and positive reputation that higher-positioned healthcare staff receive from the general public, as suggested by Al-Modeer et al. (2015). Similarly, Abdullah et al. (2009) found that physicians in higher positions were more satisfied with their jobs than other healthcare staff in lower positions.

The study's results suggest that healthcare workers' job satisfaction is significantly affected by interpersonal relationships and the availability of time. Negative impacts on employees' psychological and physical health resulting from workplace management practices may explain this finding. Increased work stress resulting from these negative impacts can adversely

affect job satisfaction. This finding is consistent with Siqueira and Kurciant's (2012) findings that interpersonal communication is a critical factor in healthcare workers' job satisfaction. Dissatisfied doctors or nurses may not provide holistic care, become distracted from their patients, and deliver poor quality care, leading to patient dissatisfaction (Mrayyan, 2006). According to Kvist et al. (2014), nurses' job satisfaction is linked to patients' perception of the quality of care and treatment they receive.

On average, patient satisfaction received a percentage score of 75.8%. Interestingly, patients reported higher levels of satisfaction with nursing care and the courteousness of healthcare workers, while their satisfaction with the diagnosis and therapy services was lower than the average. The study conducted by Vuković et al. (2012) found that the courtesy of doctors and nurses significantly impacted patient satisfaction with healthcare services. The study included 1,314 adult patients of both genders who received healthcare services at the Valjevo Health Centre in Serbia. These findings are consistent with previous research studies that have also demonstrated the importance of healthcare worker behavior in patient satisfaction levels. The results of the study conducted by Janicijevic et al. (2013) found that the courtesy of doctors and nurses was a critical element in influencing patient satisfaction. Specifically, the study investigated the factors that impact customer satisfaction in healthcare, including the civility demonstrated by healthcare workers. Additionally, other research studies have shown that healthcare worker behavior plays a significant role in shaping patients' experiences and overall satisfaction levels. For instance, the amount of time spent with the nurse or doctor in a close context was identified as one of the most critical characteristics that influence patient satisfaction with healthcare

services. Overall, the study suggests that healthcare workers' behavior and interactions with patients have a significant impact on patient satisfaction levels. This influential aspect implies that the doctor finished all needed work for the patient within the timeframe of the visit; allowing the patient to express concerns and ask questions. In an effort to increase patient satisfaction, it is critical that this component of care gets thorough consideration. According to the results of a study on the link between hospital stay and staffing, a statistically significant negative association was found between length of stay and staffing; showing that early examination and treatment of potential negative events causes earlier discharges (Voepel-Lewis et al., 2013).

The study findings provide further evidence of the importance of teamwork in delivering high-quality healthcare services and achieving patient satisfaction. Specifically, patients reported higher levels of satisfaction when doctors and nurses worked collaboratively, communicated effectively, and provided accurate diagnoses and treatment. Additionally, patients were more satisfied with their overall hospital experience when healthcare workers worked together as a team to provide comprehensive care. These findings highlight the critical role that teamwork plays in providing high-quality healthcare services and meeting patients' needs and expectations.

The current study findings confirmed that patient satisfaction is closely linked to the job satisfaction of healthcare workers. Specifically, when healthcare workers are highly satisfied with their jobs, patients tend to report higher levels of satisfaction with the quality of medical services provided. Conversely, when healthcare workers experience low job satisfaction, patient satisfaction with medical services tends to decrease. These findings highlight

the importance of addressing healthcare workers' job satisfaction to ensure high levels of patient satisfaction and overall quality of healthcare services provided in the hospital setting. According to (Park, 2009) Patient satisfaction is strongly linked to physician satisfaction, indicating that organizational elements of the practice environment may impact both patients and healthcare providers. However, this link may or may not persist after adjusting for patient and physician factors. Physician satisfaction with their work life can affect patient satisfaction, as happy physicians are likely to be more productive. With the increasing adoption of managed care, physicians express concerns about the impact on their professional satisfaction, autonomy, and quality of care. Work-life satisfaction is a growing concern in healthcare. Patient satisfaction has long been considered a critical factor in measuring healthcare quality and outcomes, both in developed and developing regions worldwide. It is an essential indicator of healthcare quality in these regions

CHAPTER 6: CONCLUSIONS AND RECOMMENDATIONS

6.1 Introduction:

In this chapter, the researcher outlines the main findings and results of the study, and provides recommendations for policymakers to improve healthcare services based on these findings. The chapter also addresses the limitations of the study, which may affect the generalizability of the results.

6.2 Principal Findings:

The study's principal findings can be outlined as the following:

- For healthcare workers, the mean satisfaction level was 71.2%.
- For all patients, the mean satisfaction level was 75.8%.
- The degree of satisfaction of patients (3.79 ± 0.823) was higher than that of healthcare workers (3.56 ± 0.657), $p\text{-value} = 0.000$.
- Male healthcare workers had a higher degree of satisfaction than females.
- No statistically significant difference was found in the satisfaction across participants with different years of experience.
- Patients were highly pleased with nursing care during their stay, followed by the workers' courtesy during their admission to the hospital or discharge.
- Patients were less satisfied with diagnosis and therapy services.
- Based on the financial status of the participants, patients with a monthly income of less than 5,000 SR had higher satisfaction levels in comparison to patients in all other income categories.
- No statistically significant difference was found in satisfaction between patients of different social statuses or different levels of education.

6.3 Research Contributions:

The research will contribute to delivering a high-quality healthcare service by measuring the level of patient satisfaction. It will also contribute to achieving a high level of healthcare workers' job satisfaction. This can be done through promoting the policies that support healthcare professionals. Moreover, it will spot light the level of healthcare quality at Armed Forces Hospital in Jazan City.

6.4 Strengths and Limitations of the Study:

The research has some strength as it investigates the level of healthcare workers' job satisfaction and the factors that affect it. To provide high-quality medical care, health professionals should feel satisfied with their jobs regarding payment, training opportunities, and workload. Identifying the level of job satisfaction can help policy makers to strengthen the weak points and support the strengths points. Moreover, the importance of this study lies in the identification of the level of patients' satisfaction with the quality of the provided healthcare services. The level of satisfaction for patients is very essential to promote the delivered healthcare services.

On the other hand, the research has some limitations. The research is limited to the Armed Forces Hospital in Jazan, Saudi Arabia. Other hospitals might face specific issues due to their size and impact on the community. The questionnaire design was also another limitation of the research. It didn't investigate the quality of healthcare services in depth. It should have themes regarding the hospital, the physicians, the nursing staff, and the quality of the provided services in more detailed statements.

6.5 Implications and Recommendations:

Following the research findings, the study recommends the following:

- Saudi hospitals should do additional efforts to improve the healthcare workers' satisfaction as much as possible and ensure high-quality healthcare services that lead to patient satisfaction.
- The hospitals' management should ensure the adequacy of the equipment within hospitals to ensure smooth delivery of healthcare services.
- Additional efforts should be made to provide training for healthcare workers to improve their professional skills.
- The hospitals' management should ensure that instructions provided for the doctors and nurses are clear.

6.6 Direction for Further Research:

The researcher recommends future studies to explore the correlation between the quality of healthcare and patient satisfaction. Further research is also necessary to identify additional factors that affect healthcare workers' satisfaction and their relationship to healthcare quality in various hospitals across the Kingdom, including public, private, and military hospitals. The researcher proposes that additional studies be conducted at other hospitals in the Kingdom to investigate the association between healthcare workers' job satisfaction and patient satisfaction with healthcare service quality. This study needs to be conducted thoroughly throughout the Kingdom. Moreover, the researcher suggests conducting interviews with experts to examine job satisfaction, patient satisfaction, and healthcare services in Jazan and the Kingdom as a whole.

6.7 Closing Remarks:

The findings of the study revealed that there was no significant difference between the satisfaction levels of doctors and nurses compared to paramedics, however, doctors and nurses were generally more satisfied with their jobs. The study also highlighted that the availability of time and interpersonal relationships were important factors affecting healthcare worker satisfaction. In terms of patient satisfaction, the study found that the overall satisfaction rate was 75.8%, with patients reporting satisfaction with nursing care and the courtesy of healthcare workers. However, patient satisfaction with diagnosis and therapy services was below average. The study results also indicate that patient satisfaction with healthcare services is strongly influenced by the behavior and politeness of doctors and nurses



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Appendix IV: Questionnaire

The relationship between job satisfaction of healthcare workers and patient satisfaction with the quality of health services
A Field Study in Armed Forces Hospital in Jazan.

Hello, my name is [*Kholood Moafa*], a Master student at [*King Abdul-Aziz University*], Health Services and Hospitals Management. I am implementing research about Assessment of the relationship between job satisfaction of healthcare workers and patient satisfaction with health services.

I would kindly ask you to participate in this survey to contribute to this research.

This survey requires only **5-10** minutes of your time.

All data provided will be kept in the strictest confidentiality and will be treated in a completely anonymous way.

If you are interested in the results of the research, at the end of the survey you can provide your e-mail. If you do so, I will send you the outcome of the survey that can give you interesting insights regarding Assessment of the relationship between job satisfaction of healthcare workers and patient satisfaction with health services.

Thank You

For Healthcare Workers**1- The questions used to determine healthcare worker satisfaction:****Demographic Characteristics:***Please check (✓) the appropriate box for each item.*

1. **Gender**
 - Male
 - Female
2. **Nationality :**
 - Saudi
 - Non Saudi
3. **Age :**
 - 23-35
 - 36-45
 - 46-55
 - 56-65
 - Over 66 years
4. **Education**
 - Diploma
 - Bachelor degree
 - Master Degree
 - PHD
5. **Social Status :**
 - Married
 - Single
 - Divorced
 - Widower
6. **Years of experience**
 - Less than 5 year
 - 5-15 years
 - More than 15 years
7. **Position**
 - Doctor
 - Nurse
 - Paramedic
 - Other
8. **Financial status :**
 - Less than 5,000 SR Monthly
 - Between 5,000 – 10,000 SR Monthly
 - Between 10,000 – 15,000 SR Monthly
 - More than 15,000 SR Monthly

1- The questions used to determine healthcare worker satisfaction :

	highly satisfied	satisfied	Neutral	dissatisfied	highly dissatisfied
1. To what extent are you satisfied with the adequacy of the equipment needed for work in the department?					
2. To what extent are you satisfied with interpersonal relations?					
3. To what extent are you satisfied with the opportunities for professional improvement at your current place of work?					
4. To what extent are you satisfied with the time available for accomplishment of your tasks?					
5. To what extent are you satisfied with your salary?					
6. To what extent are you satisfied with opportunities for continuous professional education?					
7. To what extent are you satisfied with the clarity of the instructions you receive regarding the expectations you need to meet at your workplace?					

For Patients**Demographic Characteristics:**

Please check (✓) the appropriate box for each item.

1. Gender

- Male
 Female

2. Nationality

- Saudi
 Non Saudi

- 22-35
 36-45
 46-55
 56-65
 Over 66 years

4. Social Status :

- Married
 Single
 Divorced
 Widower

5. Education

- Illiterate
 Primary education
 Intermediate education
 Secondary education
 Bachelor degree
 Postgraduate

6. Financial status :

- Less than 5,000 SR Monthly
 Between 5,000 – 10,000 SR Monthly
 Between 10,000 – 15,000 SR Monthly
 More than 15,000 SR Monthly

2- The questions used to determine Patients satisfaction :

	highly satisfied	satisfied	Neutral	dissatisfied	highly dissatisfied
1. To what extent are you satisfied with the courtesy of healthcare workers during admission to or discharge from hospital?					
2. To what extent are you satisfied with your nursing care during your stay in hospital?					
3. To what extent are you satisfied with the results of your medical treatment during your stay in hospital?					
4. To what extent are you satisfied with the services provided by physicians during your stay in hospital?					
5. To what extent are you satisfied with diagnosis and therapy services during your stay in hospital?					