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An Investigation into the Level of Job Satisfaction among Employees at Madadeni Regional Hospital in KwaZulu-Natal

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An Investigation into the Level of Job Satisfaction among Employees at Madadeni Regional Hospital in KwaZulu-Natal

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Declaration

I, Mhlongo-Manthata Debora Thembeka Busiswa, do hereby declare that this dissertation is the result of my investigation and research and that this has not been submitted in part or full for any degree or for any other degree to any other University.

11/03/2021

D.T.B. Mhlongo-Manthata Date

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Abstract

Background: A shortage of professional personnel in the hospital sector as a result of turnover and poor retention is a major concern in KwaZulu-Natal. Additionally, lack of job satisfaction is one the concern that needs to be addressed in the health sector. The aim of this study was to determine the level of job satisfaction among employees working at Madadeni Regional Hospital.

Method: A quantitative exploratory descriptive design was applied in this study. A structured questionnaire was used to collect data from 100 participants, who were selected using a stratified probability sampling strategy.

Results: The results of the study indicated that only 38% of the respondents were satisfied with their current employer and work environment. Recommendations included an urgent need for the improvement of the working conditions for the employees.

Conclusion: Job satisfaction affects employee's performance and working behaviour, which in turn may affect patient care. Management needs to take appropriate action to improve job satisfaction levels of employees, as failure to do so will affect healthcare delivery and therefore jeopardise efforts made towards universal health coverage.

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List of Acronyms

AIDS	Acquired Immunodeficiency Syndrome
DoH	Department of Health
EAP	Employee Assistance Programme
HIV	Human Immunodeficiency Virus
HR	Human Resources
IT	Information Technology
KZN	KwaZulu-Natal
MANCOSA	Management College of Southern Africa
NCS	National Core Standards
SA	South Africa
SAA	Sub-Saharan Africa
UHERB	UMgungundlovu Health Ethics Review Board
UN	United Nations
UNAIDS	United Nations Programme on HIV and AIDS
WHO	World health Organisation
WISN	Workload Indicator of Staffing Need

CHAPTER ONE

1.1 Introduction

This study submits that for an organisation to attain high levels of performance, managers have to consistently guarantee that employee satisfaction is their number one priority as it results in meeting organisational goals. There is a scholarship that holds the view that satisfied workers perform more optimally than dissatisfied workers. Employee job satisfaction is positively linked to customer satisfaction and quality of care. Employee dissatisfaction affects employee turnover, retention, and service delivery. It should therefore be every executive's responsibility to generate satisfaction and loyalty among employees to meet sustainability challenges. In light of the above notions, the researcher aims to explore the level of job satisfaction among employees at Madadeni Regional Hospital in KwaZulu-Natal (KZN). As part of the study requirements, an overview of the research context is made, coupled with the background of the study as well as the aims and objectives of the study. Other crucial aspects of the study such as the literature review and methodology are also presented herein.

1.2 Research Context: Background

The employees at Madadeni Regional Hospital have expressed their dissatisfaction and unhappiness at various platforms and forums. This job dissatisfaction and unhappiness emanate from factors such as increased workload, resulting in a pressure of work and burn out syndrome. Nakamura and Matsuki (2019:03) note that factors such as the absence of cafeterias or refreshment outlets, lack of childcare facilities within the institution, as well as lack of training and development opportunities contribute to job dissatisfaction. As a result of the above factors, there is absenteeism, resignations among employees, which impact job performance and achievement of organisations' strategic objectives and customer satisfaction.

Nakamura and Matsuki (2019:03) allude that recent surveys on job satisfaction, indicate that close to 4 percent of employees are dissatisfied with their employment.

Several research studies have been conducted on this topic and the common variables causing dissatisfaction among healthcare workers include excessive

workload resulting from a severe shortage of healthcare professionals, increase in demand for care associated with burnout and intention of healthcare professionals to leave the public hospitals (Noe *et al.,* 2017:436). Job dissatisfaction among health care professionals is also associated with reduced productivity, absenteeism, and a high turnover rate which affect employees' organisational commitment and quality of healthcare. More importantly, there is very little information on job satisfaction in regional hospitals like Madadeni Regional Hospital which is located in KZN. These gaps mean sufficient research has not yet been devoted to the public health sector in South Africa (SA).

1.3 Research Problem

Based on the literature available, which is also supported by the Department of Health (DoH) Human Resource Strategy and Planning Component (2009:06), the Department experiences an increase in the attrition rate of front-line healthcare workers, due to several reasons. These reasons include resignation, death, perceived poor working conditions, perceived poor salary packages and heavy workloads. The aforementioned challenges lead to lack of job satisfaction, migration to the private sector and other countries as well as low morale.

The DoH has committed itself to co-designing strategies to retain the required number of skilled personnel. The goal is to attract, train, develop, and retain the right number of employees with skills. Therefore, job satisfaction and motivation have become possible solutions for public healthcare institutions like Madadeni Regional Hospital, to retain their employees. No scientific evidence was available about job satisfaction in the context of Madadeni Regional Hospital before the current study was conducted. Hence, this study aims to explore different variables influencing the retention strategy for employees at Madadeni Regional Hospital.

1.4 Aim of the Study

The study aimed to investigate the level of job satisfaction among employees at the Madadeni Regional Hospital, KwaZulu-Natal, South Africa.

1.4.1 Research Objectives

The objectives of the study were:

• To determine the current level of job satisfaction among employees at Madadeni Regional Hospital, KwaZulu-Natal

• To identify variables that promote job satisfaction among employees at Madadeni Regional Hospital

• To identify variables that hinder job satisfaction of employees at Madadeni Regional Hospital and

• To make recommendations to KwaZulu-Natal Madadeni Regional Hospital management on issues that contribute significantly to employee morale and motivation to improve job satisfaction.

1.5 Research Questions

• What is the current level of job satisfaction among employees at Madadeni Regional Hospital?

• What are the variables that promote job satisfaction among Madadeni Regional Hospital employees?

• What are the variables that hinder job satisfaction among Madadeni Regional Hospital employees?

• What suitable recommendations can be provided for improved job satisfaction?

1.6 Significance of the Study

For an organisation to remain effective and competitive, it requires not only an active workforce but also satisfied employees. The role of employees is integral to the functioning of an organisation. Hence, like in any other sector, job satisfaction is central to healthcare delivery, because if doctors, nurses, clinical support staff, and all other employees at the hospital are satisfied, the delivery of healthcare will be effective

and of good quality. Job satisfaction can increase employee productivity, as worker productivity is higher in organisations with more satisfied workers. Satisfied employees have fewer avoidable absences and are less likely to quit. Satisfied employees increase customer satisfaction and are more willing to engage in behaviours that go beyond the normal expectations of their job. This, therefore, raises the need for hospitals such as Madadeni Regional Hospital in Newcastle, KZN to ensure that the level of job satisfaction among employees yields positive results that will bring about good outcomes for the hospital. The significance of this study is that it can recommend certain aspects that can lead to the improvement of the current level of job satisfaction at Madadeni Regional Hospital. Additionally, other similar organisations can also benefit from the findings of this study. Possible solutions will also be recommended, thus playing an elemental role in the ultimate strategy for promoting employees' job satisfaction among health care professionals. In turn that could lead to employees' retention in SA which can be done through effective hospital management and improved working conditions.

It is therefore, paramount that variables that hinder job satisfaction in healthcare are investigated and mitigated to promote sustainability of health care services. Job satisfaction is an integral part of healthcare systems because it affects service delivery. Several studies have been conducted across the globe on job satisfaction, however, there is little evidence of similar studies conducted at Madadeni Regional Hospital. This creates a gap of information that this study hopes to fill. The study aims to explore the leading causes of job dissatisfaction among healthcare professionals and to contribute to the literature available on this subject which can help improve the quality of services provided. In addition, findings from this study will benefit the researcher, participants, the government of the Republic of South Africa (RSA) as recommendations made will include suggestions of how healthcare employees may be retained. Lastly, findings from this study will add to the minimal knowledge of job satisfaction, not only in SA, but in Africa since this subject remains understudied.

1.7 Theoretical Framework

Maslow's Hierarchy of Needs Theory was applied as a conceptual framework in the study because it provided a broad overview of job satisfaction in the workplace.

Questionnaires were constructed around each level of the Hierarchy of Needs. The model proposes that human behaviour is determined in response to a hierarchy of needs (Reukauf, 2018:15). Through the application of Maslow's Hierarchy of Needs Theory, job satisfaction of employees at Madadeni Regional Hospital was determined. Herzberg's Two Factor Theory was also applied in this study as it explains that certain factors in the workplace cause job satisfaction and job dissatisfaction.

1.8 Chapter Summary

The DoH KZN Province experiences an increase in the attrition rate of frontline healthcare workers and the RSA is no exception. Job satisfaction is alleged to be the main causative factor towards the high attrition rate.

This chapter provided the background and rationale for conducting the study on job satisfaction in South Africa, KZN, Madadeni Regional Hospital. The problem statement, aims, objectives, and significance of the study were discussed.

Chapter two provides an extensive discussion of literature related to variables that both hinder and promote job satisfaction.

Chapter three provides an in-depth discussion of the research methodology applied in this study which includes the research design, study setting, population and sampling, data collection instrument, data collection process, pilot study, validity, reliability, and data analysis.

Chapter four discusses the study results.

Chapter five focuses on the strengths and weaknesses or limitations of the study. It also looked at the contribution of the study and its relevance to clinical practice, the implication of findings and recommendations towards clinical practice as a whole, focusing especially at Madadeni Regional Hospital management and the DoH.

The last paragraph covered the conclusion of this chapter.

1.9 Conclusion

A high attrition rate of frontline employees within the DoH is linked to job satisfaction, therefore, executives at all levels should strive to invest in peoples' management.

CHAPTER TWO: LITERATURE REVIEW

2.1 Introduction

The literature review section provides various scholarly opinions on the subject of job satisfaction while bringing out theoretical underpinnings on the same issue. It also offers various definitions of terms as they are used in this study. The subject under study will be critically appraised from the vantage point of different seasoned scholars. This will be stressed by models that seek to expand on the matter while shedding more light on the key aspects of the study. The literature review comprises of, job satisfaction, internal and external job satisfaction, factors affecting job satisfaction and the importance of job satisfaction. Furthermore, this chapter discusses the theoretical models that are used to either predict, explain and/or understand job satisfaction.

2.2 Job Satisfaction

Job satisfaction is described as the degree to which people are fulfilled by their job, the topic of job satisfaction is very complex and is regarded as a subject of interest in labour relations (Sailaja & Nak, 2016:02). Bhattacherjee *et al*. (2016) described job satisfaction as the extent to which there is compatibility between a person's expectations of their job and the benefits attached to it. Furthermore, job satisfaction is also described as a feeling, favourable or unfavourable, with which employees assess their job. Having employees is essential for the success of the organisations, however, for organisations to be successful, the employees need to be happy and satisfied with their work. It is stated that an individual has job satisfaction if influences at their workplace such as work environment, type of supervision and support they are receiving from the management, type of training, the benefits, the workload and the salary give them a feeling of satisfaction (Alshmemri *et al*., 2017:03).

Noe *et al*. (2017:437) viewed job satisfaction as a pleasurable feeling that results from the perception that one's job fulfils or allows for the fulfilment of one's important job values. It can, therefore, be said, that job satisfaction cannot be effectively separated from employee motivation as it contributes in one way or the other to the achievement of overall human resources goals. Additionally, Smit *et al*. (2016) is of the view that researchers in this area have given great attention to the aspect of job satisfaction. Noe *et al*. (2017:438) asserted that job satisfaction is more of an attitude, an internal

state. It could, for example, be associated with a personal feeling of achievement, either quantitative or qualitative. Nonetheless, job satisfaction is a complex concept and difficult to measure objectively (Noe *et al*., 2017:438). In broad view of Edem *et al*. (2017:02), the level of job satisfaction is affected by a wide range of variables relating to individual, social, cultural, organisational and environmental factors. All these aforementioned variables can be used to assess their influence on job satisfaction. That is because the motivation of employees will be assessed based on variables that influence job satisfaction (Smit *et al*., 2016:20).

Sahito and Vaisanen (2017:96) defined job satisfaction as describing how content an individual is with his or her job. Ali (2016) posited that job satisfaction is how an employee feels joy in his or her career. Hence, the happier people are within their job, the more satisfied they are said to be.

Furthermore, Almusam (2016:69) argued that job satisfaction refers to how positively and comfortably employees relate to their jobs. Numerous aspects impact the job satisfaction of employees. These comprise of, working conditions, pay, benefits, recognition, colleagues, level of skills, career safety and security, personal relationships, supervision, flexibility in the working environment and other hereditary elements (Almusam, 2016:69).

Maulabakhsh and Raziq (2015) stated that as an attitude, job satisfaction contains three components namely:

1. It may be understood as an element that generates feelings of pleasure that are associable with one's nature of working conditions.
2. It has also been understood as a cognitive aspect of human behaviour that stems from individual beliefs, perceptions and expectations with regards to a job.
3. One could say it also refers to an employee's behaviour and intention as a result of conditions at a given work setting.

Andersen (2018:21) postulated that job satisfaction may be described as an evaluative aspect of an employee when he/she considers the working conditions he/she is being exposed to. This is the general satisfaction that an employee might have.

2.3 Internal and External Job satisfaction

According to Andersen (2018), there are many different components related to job satisfaction and they can either be intrinsic or extrinsic. This is supported by Elizabeth and Zakkariya (2015) who maintained that job satisfaction has both intrinsic and extrinsic facets. Intrinsic satisfaction is associated with the substance of an individual's expectations from the organisation based on the skills they bring with them to the company. Whilst the extrinsic satisfaction is associable with the employee's environment which includes but is not limited to the working environment. Extrinsic factors according to Beyene and Gituma (2017:611), tend to include safety, working hours and bonuses. According to Bhattacherjee *et al*. (2016), intrinsic motivation relates to the responsibility that one has of their job, whereas extrinsic motivation is related to factors such as salary, job security and working conditions. It is further stated that the presence or absence of extrinsic factors can alleviate satisfaction or dissatisfaction respectively.

2.4 Importance of Job Satisfaction

Smit *et al*. (2016) posited that the concept of job satisfaction is closely related to the idea of commitment which is another key aspect of human resources. That is to say, in the absence of job satisfaction, workers may lose their commitment to the job and end up failing to deliver optimally. Furthermore, Noe *et al*. (2016:437) stated that when there is no job satisfaction it is often difficult to retain the more skilled workers, as they tend to leave for greener pastures. It is vital for the employer to appreciate that there is a definitive relationship between job satisfaction and better turnovers, as well as employee retention. Noe *et al.* (2016:437) highlighted that where there is no job satisfaction, workers tend to be affected by feelings of anxiety, poor correspondence, defiant prospects of growth and a notable atmosphere of misery.

Noe *et al*. (2016:437) postulated that being aware of how staff stay happy and devoted to their institution and the extent to which different aspects of the job enhance levels of commitment, depends on the institution. The authors further asserted that employers need to be aware of the things that keep employees as that has the potential to increase employees' morale. It is therefore evident that organisational success is mainly dependant on the overall satisfaction of employees because a

productive workforce helps the organisation to get close to its goals (Noe *et al.*, 2016:16).

It is important that strategies are developed to improve job satisfaction among healthcare workers to ensure effective quality healthcare delivery. The satisfaction of healthcare workers is an essential element in healthcare delivery, patient safety and patient care. This is a very important issue to address because not only does it impact the patient, but also the healthcare workers themselves. For instance, doctors who are not satisfied with their work are more prone to suffer mental and physical illness (Bhattacherjee *et al*., 2016:596). Furthermore, dissatisfied doctors are more likely to negatively influence some individuals against pursuing a career in medicine (Bhattacherjee *et al*., 2016:596; Ali *et al*., 2019:206).

2.5 Factors that hinder job satisfaction

Employees spend most of the time in organisations, therefore, several factors in organisations determine the job satisfaction of the employees. Organisations can increase job satisfaction by organising and managing organisational factors that may hinder job satisfaction (Wilson, 2015:291). These variables include compensation; supervisor support; working environment; and job security. Notably, in addition to work-related factors, job satisfaction among employees can also be affected by personal triggers, which can then affect how an employee feels about their work. These triggers include changes in life stages, personal circumstances, rank or tenure, institution, et cetera. These changes can have implications on a person's mood, attitude and perception, which then affects their level of satisfaction with their job (Osabiya, 2015:65).

It is noted that these triggers can be alleviated by mediators such as motivators, hygiene's and environmental conditions as they form an important element in examining job satisfaction. Hygiene's and motivators have a crucial role in job satisfaction theories. Motivators and hygiene's play opposite roles in job satisfaction, hygiene's results in demotivation, hence job dissatisfaction, whilst motivators on the other hand results in motivation hence associated with increased job satisfaction. Both the motivators and hygiene factors are explained in detail in Section 2.6.2: Herzberg's Two Factor Theory (Osabiya, 2015:65).

Money is a big aspect of job satisfaction, as a result, compensation is a key aspect of job satisfaction in any given organisation (Osabiya 2015:67). A survey conducted by Gerdeman (2019) revealed that money ranked the highest as a motivator and a satisfier of employees to an extent where they were prepared to work in some very harsh conditions as long as they could still get good salaries. It was also observed in that survey that low salaries conversely discouraged workers and created an environment that demotivated workers. Another important variable is supervisor support which is characterised as the degree to which leaders care about their employees' welfare and worth their contributions. This is because when a supervisor offers coaching, that influences the protégés skill development and intentions to stay with the organisation (Osabiya, 2015:92). Also playing a critical role in job satisfaction is the working environment. According to Sahito *et al*. (2017:70), a sound healthy workplace or environment lies on three viewpoints, the ethics and value foundation whereupon the organisation rests, the policies that take those standards and changes over them into everyday activities and the human condition wherein individuals work. Lastly, security is one other important variable in job satisfaction. According to Thiagaraj and Thangaswamy (2017:46), job security is the chance that a person or an employee will keep his or her job. A person with the job would have a little possibility of becoming unemployed if his/her job has an elevated level of job security. The authors further argued that job security tends to be better with an employee who is satisfied with his/her job than the one who is not. Thus, extrinsic factors such as job security are fundamentally critical for an employee to perform well on the job. According to Noe *et al*. (2016:295), both job content and job security are found to affect the overall job satisfaction of employees.

A study by AlAzzam *et al*. (2017) revealed that the relationship between work-family conflict contributes to dissatisfaction in jobs. Work-family conflict is described as the inter-role conflict between a person’s work and family roles. The study reports that female nurses for example, due to parental and family obligations tend to be dissatisfied with their jobs. This is because already their jobs demand high levels of emotional, mental and physical energy from them. The study further suggests that the implementation of strategies such as providing child and elderly care services for nurses in hospitals can contribute to job satisfaction. According to Bhattacherjee *et al*. (2016:600), studies done in developing and developed countries have shown a

difference in job satisfaction. Healthcare workers and doctors, specifically from developed countries are more satisfied than those from developing countries. This may be due to the perks and privileges attached to the job, mainly salary and job security in the developed countries (Bhattacherjee *et al*., 2016:600). A study examining change, fatigue and resilience among hospital nurses found that fatigue negatively influences job satisfaction among nurses, this is more common in larger hospitals than smaller ones (Brown *et al.*, 2018:307). This is because change and fatigue are associated with personal stress, leading to increased nurse turnover and decreased job satisfaction. This is detrimental to the healthcare system because increased nurse turnover negatively affects the quality of care and patient safety (Brown *et al*., 2018:307).

A study by Singh *et al.* (2019) found that in the private sector, healthcare workers were more satisfied because of factors such as supervision, communication, benefits and the nature of the work were better compared to those in the public health sector. On the other hand, in the public healthcare sector, most healthcare staff are dissatisfied due to non-competitive pay, long working hours, and inadequate staffing.

Various dimensions predict job satisfaction, they include age, gender, length of service, specialities and postgraduate qualification (Bhattacherjee *et al.*, 2016). It has been reported that age is associated with higher levels of job satisfaction, which can be because as people grow, they are more accepting and are at the position where they have made peace with how things are and have adapted (Osabiya, 2015:92). This is also supported by Bhattacherjee *et al*. (2016:600) who confirms that that increasing age is found to be associated with higher levels of satisfaction. This may be attributed to the fact that as age increases, expectations decrease and are replaced by the gradual acceptance of the situation and adaptation. In contrast, younger age is associated with restlessness and increased expectations from the job, which if not met may result in dissatisfaction. When it comes to gender, a study conducted in India revealed that female doctors are more satisfied than male doctors, mainly because females are more likely to accept being in a more subservient position and are more likely to have lower expectations than males (Hersch & Xiao, 2016:01). Males on the other hand tend to have expectations that are more difficult to achieve (Bhattacherjee *et al*., 2016:600). Length of service is reportedly another important predictor of job satisfaction, wherein individuals who have been practising for many years tend to be

more satisfied and are less likely to leave as the years of service increases (Bhattacherjee *et al*, 2016:600). With regards to specialities, it is reported that specialist doctors are more likely to be less satisfied than their colleagues due to factors such as uncontrollable lifestyle and irregular working hours (Bhattacherjee *et al*., 2016:600). Doctors with post-graduate qualifications were found to be less satisfied than their less qualified colleagues.

Studies among nursing personnel showed that a higher level of education qualification has an invasive relationship with job satisfaction. The reason for this may be that highly qualified individuals have greater expectations from their job, the limited opportunities of which may lead to dissatisfaction (Bhattacherjee *et al*., 2016:600). Another dimension contributing to job satisfaction is race. However, there is very little work that investigates racial or ethnic differences in job satisfaction (Hersch & Xiao, 2016:02). There is also little evidence on whether non-white workers likewise experience a job satisfaction differential relative to white workers. Hersch & Xiao (2016:02) further clarified that the reason that job satisfaction may differ by gender is discriminatory treatment and differences in expectations and values or labour force participation may also pertain to race or ethnicity.

2.6 Job Satisfaction Theories

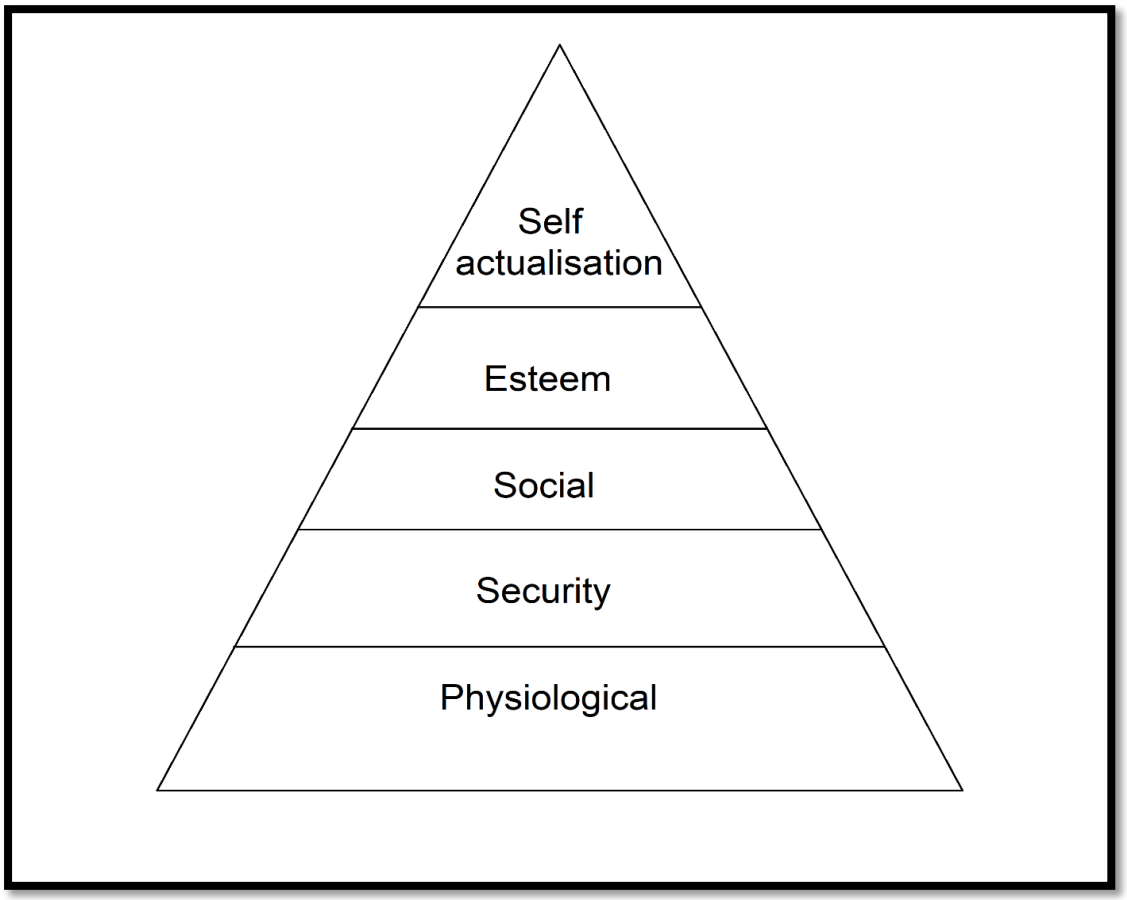
Different authors such as Thiagaraj and Thangaswamy (2017:78) and Khan *et al*. (2016:49) attested that there are many different ways in which job satisfaction has been studied and that researchers have come up with different theories of motivation which are also viewed as theories of job satisfaction. For instance, Thiagaraj and Thangaswamy (2017:78) asserted that motivation depends on the needs and wants of the individual employee, however, modern theories indicate that the employee's character and personality have a significant role in motivation. The theories emphasise the central needs that encourage people to act in a particular way in the workplace. According to these theories, the management of the institution can get an understanding of the needs of its employees just by observing them and being aware of their needs (Khan *et al*., 2016:49). Khan *et al*. (2016:49) further maintained that content theories indicate that job satisfaction happens when the employee's need for self-actualisation and growth are met. The most recognised content theories are

Hertzberg's Two-factor Model, Maslow's Hierarchy of Needs theory, McClelland's Acquired Need Theory, and Locke's Value Theory (Khan *et al*., 2016:49).

2.6.1 Maslow's Hierarchy of Needs

Maslow, who is one of the first researchers to define motivation, defined it as personal needs which organise themselves in pyramids of pre-potency (Reukauf, 2018:12). The model postulated that human behaviour is determined in response to a hierarchy of needs. The theory stated that people are satisfied only if they get what they want and become dissatisfied if they do not get what they want (Reukauf, 2018:15). This implies that employees will be motivated should a specific need be met. Should the needs not be met, they will experience dissatisfaction (Xu, 2015:13).

Figure 2.1: Maslow's Hierarchy of Needs



Source: Mishra, 2013:46

Maslow noted that at any one time, there are embedded needs that affect people's choices and they are organised into hierarchies. The hierarchy Maslow presents herein is based on these five key needs, self-actualisation, esteem, love and affiliation as well as physiological needs as illustrated in the diagram above. The theory has provided this research with the theoretical backing it requires to investigate the issues of employee dissatisfaction at Madadeni Regional Hospital. It is because satisfaction and dissatisfaction are closely linked to needs, whether they are being met or not. Inuwa (2016) stated that the hierarchy of needs comes in handy when one needs to evaluate motivation which is closely linked to satisfaction.

2.6.2 Herzberg's Two Factor Theory

Herzberg's theory is regarded as one of the main theories in the field of employee satisfaction (Reukauf, 2018:12). The theory is termed "two-factor" because Herzberg held the notion that both factors of dissatisfaction and satisfaction are distinct. The Herzberg's Theory identified 14 job-related factors that are associated with job satisfaction and dissatisfaction; the factors are growth possibility, salary, technical supervision, recognition, responsibility, achievement, relations with superiors, advancement possibility, quality of relations with fellow employees, a company with policies and administration, job security, working conditions and personal life factors. This theory argues that dissatisfaction or satisfaction can be understood after at least two factors have been exposed to an investigation. According to Alshmemri *et al.* (2016:14), there are simply two factors that affect job satisfaction, they are, motivation and hygiene factors. Motivating factors have a great role to play in ensuring that employees are satisfied which in turn guarantees that they put in extra effort to achieve organisational goals. This is supported by Reukauf (2018:13) who argued that motivation comes in any one of the following ways, recognition, achievement, challenging work, responsibility, growth and development. Herzberg's Theory states that if the level of achievement and recognition is matched with the intensity of the work it can lead to job satisfaction, but dissatisfaction if it's the opposite. In contrast, hygiene factors are more related to the type of job, opportunities for growth and amount of responsibility associated with the job. Additionally, hygiene factors are the working conditions that play a role in making employees feel dissatisfied with their jobs. Herzberg (1975) as cited in Köse & Köse (2017:54) argued that hygiene factors are important at the workplace because if missing, the likelihood of employees being

dissatisfied will rise. Xu (2015:14) stated that organisations with better hygiene factors are more likely to have employees who are satisfied with their jobs. It is stated that workers whose hygiene factors' needs are met tend to exhibit a "neutral" state of satisfaction (Xu, 2015:14). This, in turn, will result in good service provision, because satisfied workers are more likely to be more motivated hence meeting their motivational needs. All in all, ensuring that hygienic factors are improved in organisations is important, because that can help employees to exhibit a neutral state of satisfaction, which will then lead to motivation and a state of satisfaction.

2.6.3 McClelland's Acquired Need Theory

Another theory that has been developed in the aspect of job satisfaction is the McClelland's Acquired Need Theory. It is one of the most pragmatic and ubiquitous in personality and organisational scholarship to Andersen (2018:70). According to Andersen (2018:70), this theory contended that three basic drivers motivate individuals, namely, achievement, affiliation and power. Each of these drivers affects the level of accountability one feels for both himself/herself and others (Andersen, 2018:70). The need for power is an individuals' desires to be influential. This can include making attempts to make others behave in a manner that they might not have otherwise (Inuwa, 2016:56). The affiliation needs, on the other hand, reflect the desire to have close and friendly relationships with others (Andersen, 2018:71). Those high in this dimension tend to spend considerable time seeking interactions with others (Inuwa, 2016:56). High levels of affiliation motivate individuals to be both sympathetic and accommodating toward others (Inuwa, 2016:57).

2.6.4 Vroom Expectancy Theory

According to the expectancy theory, motivation relies on the perceived association between performance and outcomes and individuals upon modifying their behaviour in anticipation of their desired outcomes (Nimri *et al*., 2015:71). Therefore, the expectant theory explains why an individual performs at a certain level. Additionally, it has a practical and positive potential in improving motivation and has been used and still used by leaders to create motivational programs in the workplaces (De Simone, 2015:25). Furthermore, the theory provides the idea that an individual's motivation is dependent on them believing that they will be rewarded. Notably, the theory is not regarded as "all-inclusive" of individual motivation factors, however, it provides leaders

with a foundation on which to build a better understanding of ways to motivate subordinates (De Simone, 2015:25). The theory is therefore classified as a process theory of motivation, which emphasises individual perceptions of the environment and subsequent interactions arising as a consequence of personal expectations (Nimri *et al*., 2015:71).

2.6.5 Equity Theory

In workplaces, promoting mutual benefits is based on the theory of equality (Almusam, 2016:542). Almusam (2016:542) stated that feelings of inequity at the workplace such as unequal pay can lead employees to feel less motivated and unsatisfied with their work. This can also lead to less work output as employees will adjust how they work. However, employees can negotiate their salary and benefits with the employer in order to match work output with reward, or as a last resort leave employment altogether. Notably, Almusam (2016:542) noticed that many organisational superiors don't have a clue on how to communicate with their employees resulting in employees having feelings of inequity in their workplace (Almusam, 2016:542). Equity theory considers reward in comparison to others (Gashgari, 2016:519). In organisations, a reward may refer to recognition and support, career opportunities, or remuneration. Furthermore, an inequity feeling causes unpleasant tension which motivates the person to remove or reduce the level of tension and perceived inequity (Osabiya, 2015:68).

2.7 Job satisfaction among healthcare workers in South Africa

This study focuses on healthcare and its allied workers. The World Health Organisation (WHO) and its member state recognise the importance of having adequate healthcare workers and support staff, which will be enough to meet the growing global populations' demands. Adequate healthcare staff is an essential element in any healthcare system. Countries like South Africa have a low number of nurses and doctors due to several factors such as a low number of students who enrolled for those qualifications, brain drain and high turnover of healthcare workers. One of the contributing factors to brain drain and high turnover among healthcare workers is lack of satisfaction. It is reported that Africa, along with South East Asia have the greatest shortfall of skilled healthcare workers (Chang *et al*., 2017:263). This

suggests that taking measures to ensure and prioritise job satisfaction among healthcare workers is crucial to overcome the low retention and recruitment of skilled healthcare workers in South Africa. Satisfied healthcare workers are crucial in the healthcare system. Prioritising job satisfaction is vital, especially since South Africa seeks to achieve universal health coverage and ensure that all its citizens have access to equity healthcare. Hence, measuring job satisfaction is essential in strengthening the healthcare system as it can help develop new models to improve job satisfaction and thus, patient care and the health system. Chang *et al.* (2017:263) argued that even though a lot of research has been done on job satisfaction among healthcare workers, many of them focused on nurses and doctors but excludes allied staff such as lay-health workers, medical assistance and social workers. Hence there is a need to study job satisfaction in multi-disciplinary teams among the healthcare workforce. As said before, in KZN, the topic of job satisfaction remains understudied. Understanding factors contributing to job satisfaction and dissatisfaction among healthcare workers can help design a model for intervention to improve job satisfaction and thus retention and enrolment of healthcare workers in KZN.

2.8 Chapter summary

This chapter provided background information on job satisfaction. Additionally, the concepts of motivation and job satisfaction were placed into perspective. The theories underpinning the current study were discussed in relation to the study itself. The definitions, theories, models and measurement of both motivation and job satisfaction were also discussed. It was reported that job satisfaction is based on the subjective understanding of skills, identifying one's job and finding the tasks significant, as well as experiencing freedom in one's job. For these reasons the factors affecting job satisfaction were emphasised. The consequences of job satisfaction were also included so that management can address potential problems that may arise due to job satisfaction-related issues. The literature indicates that a satisfied workforce is a necessity for the success of the company.

Chapter Three: Research Methodology

3.1 Introduction

This chapter describes the research methodology used in the current study, including research philosophy, research strategies, target population and sampling. A quantitative descriptive and exploratory research design was used to investigate the level of job satisfaction among employees at Madadeni Regional Hospital in KwaZulu-Natal. This chapter further elaborates on the research instrument, questionnaire construction, pilot study and the administration of the questionnaires. Data analysis, limitations of the study, validity and reliability were further discussed in this chapter. Lastly, the study indicates how it eliminates any bias and how it will comply with research ethics.

3.2 Study Setting

The study setting refers to the location where the study is conducted (Iphofen & Tolich, 2018). This study was conducted in its natural setting at Madadeni Regional Hospital, Kwa-Zulu Natal, South Africa.

3.3 The Research Design

Wisniewski and Stead (2016) described a research design as a blueprint used in gathering and analysing data as the researcher aims to answer key research questions. Additionally, Zikmund *et al.* (2016), asserted that the research design is used to satisfy the objectives of the study while linking it to its theoretical aspects, questions and research generalisations as well as presentation goals.

3.3.1 Types of research designs

Saunders *et al.* (2016:174) identified five types of research designs, namely: explanatory research, correlation research, casual-comparative research, exploratory research and descriptive research. Each type of research design will be briefly discussed below.

- **Explanatory research**

  The explanatory research method places weight on investigating the problem to find whether a relationship exists between variables. In addition, explanatory research also attempts to examine the situation in which the research variables are exposed (Wisniewski & Stead, 2016:62). This study, however, tries to establish the cause-and-effect relationship therefore and explanatory method will not be deemed suitable.

- **Co-relational research**

  The co-relational research method aims to examine the co-variation of two variables being considered. According to Saunders *et al*. (2016:173), the co-relational research method results in the establishment of the type of relationship that exists between variables as well as finding out about the strength of the relationship.

- **Casual-comparative research**

  The casual-comparative research is much like the co-relational research method, except that it is descriptive. Casual-comparative research further aims to identify the causes of a problem and the reason for any difference in the variables under study (Saunders *et al*., 2016:173).

- **Exploratory studies**

  According to Saunders *et al*. (2016:175), the exploratory research method is a valuable means to ask open questions so as to discover what is happening and gain insights into the topic of interest. It is utilised within a research context to assess the current status quo and find new methods of developing a solution to the current state. Although this method is normally conducted through consulting or interviewing a focus group, this method was also deemed not suitable as it lacks a detailed description of variables and attributes under study.

- **Descriptive research**

  According to Zikmund *et al*. (2016), a descriptive research design is the statistical description of the features of the study based on the data gathered from samples. The design aims to unveil the relationships between variables through statistical significance. Saunders *et al.* (2016:175) posited that the data collected from descriptive research is usually quantitative in form of frequency distribution and summary statistics.

The research design chosen for this study is that of descriptive research. Structured questionnaires were used and were completed by the participants. Descriptive methods help understand the way things are (Saunders *et al*., 2016:175).

The purpose of the study was described to the respondents in a letter together with a questionnaire packet. The letter which described the purpose of the study, as well as the questionnaire, were personally delivered to and after completion, collected from each staff member by the researcher. Thereafter the researcher administered the questionnaires. The structured questionnaires also helped to determine areas of improvement in terms of job satisfaction.

Therefore, a descriptive study was conducted to establish the level of job satisfaction among employees at Madadeni Regional Hospital in KwaZulu-Natal. Saunders *et al.* (2016:175) further indicated that a descriptive study is important to clarify the understanding of issues, problem or phenomenon if there is the uncertainty of its precise nature.

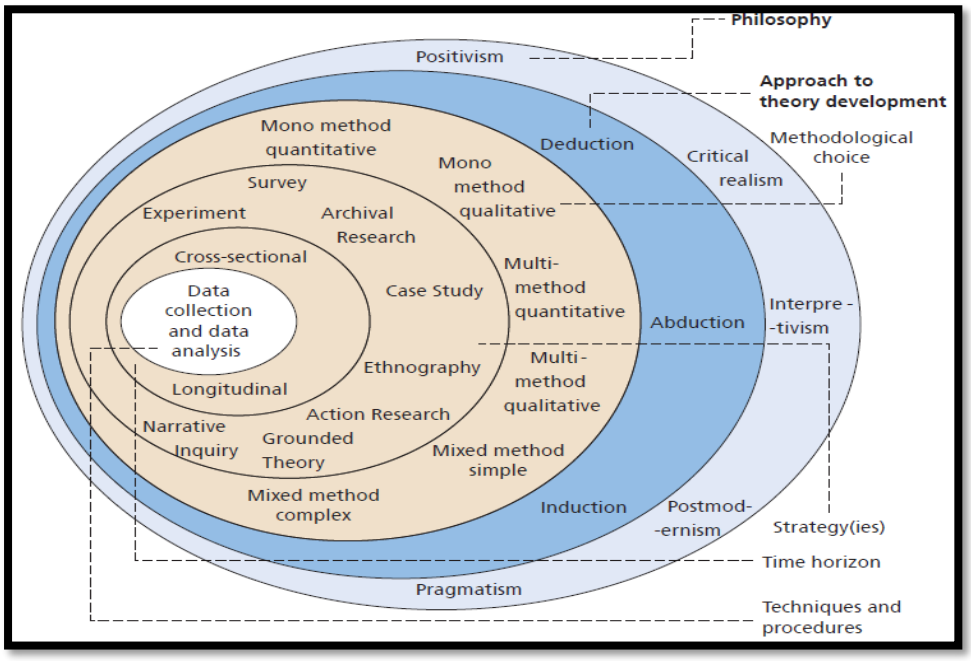
3.4 The Research Philosophy

Research philosophy deals with the source, nature and development of knowledge. In simple terms, a research philosophy is a belief about how data about a phenomenon should be collected, analysed and used (Saunders *et al*., 2016:166).

Although the idea of knowledge creation may appear to be profound, the researcher is engaged in knowledge creation as part of completing the given study. The researcher collected both primary and secondary data. The researcher also engaged in data analysis to answer the research question and that answer marks the creation of new knowledge.

Addressing research philosophy in a dissertation involves being aware and formulating beliefs and assumptions. As it is illustrated in Figure 3.1 below, the identification of the research philosophy is positioned at the outer layer of the ‘research onion’, accordingly it is the first topic to be clarified in the research methodology chapter of the dissertation.

Figure 3.1: The Research Onion



Source: Saunders *et al*., 2016:124

Each stage of the research process is based on assumptions about the sources and the nature of knowledge. The research philosophy reflects the author's important assumptions and these assumptions serve as a base for the research strategy. Generally, research philosophy has many branches related to a wide range of disciplines. Within the scope of business studies there are four main research philosophies (Saunders *et al*., 2016:135):

1. **Pragmatism:** Pragmatism asserts that concepts are only relevant where they support action. It strives to reconcile objectivism and subjectivism, facts and values, accurate and rigorous knowledge and different contextualised experiences. Reality matters to pragmatics as practical effects of ideas and knowledge is valued for enabling actions to be carried out successfully (Saunders *et al*., 2016:143).
2. **Positivism:** Positivism relates to the philosophical stance of the natural scientist and entails working with an observable social reality to produce law-like generalisations. It promises unambiguous and accurate knowledge (Saunders *et al*., 2016:135).
3. **Critical Realism:** For realists, reality is the most important philosophical consideration, a structured and layered ontology being crucial (Saunders *et al*.,

2016:138). Critical realism focuses on explaining what we see and experience in terms of the underlying structures that shape the observable events. Critical realists see reality as external and independent, but not directly accessible through our observation and knowledge of it. Rather, what they experience is 'the empirical', in other words, sensations, which are some of the manifestations of the things in the real world, rather than the actual things.

4. **Interpretivism (Interpretivist):** The purpose of interpretive research is to create new, richer understandings and interpretations of social worlds and contexts. For business and management researchers, this means looking at organisations from the perspectives of different groups of people (Saunders *et al*., 2016:140).

3.4.1 The Choice of Research Philosophy

With reference to Figure 3.1 above, the different research philosophies used in this study are presented in the form of an onion that exfoliates and reveals various methods as they are used inter alia. Saunders *et al*. (2016:125) argued that in a single study, different approaches, research strategies and time horizons can be used to collect data. The current study adopted a positivist philosophy.

As indicated above, a positivist research methodology incorporates the use of numerical measures to investigate and understand social occurrences. Quantitative research is therefore viewed as being objective since it relies on a non-personal collection of data. It pays attention to counting and classifying features as well as using statistical models to arrive at conclusions. Therefore, the findings of positivist research are presented through tables, graphs and statistical formats which allow the reader or examiner to follow through the progress made with results that are replicable and reliable (Saunders *et al*., 2016:166).

3.5 Research Strategies

A research strategy can be defined as an overall plan used for conducting a research study (Saunders *et al*., 2016:177). A research strategy may therefore be defined as a plan of how a researcher will go about answering his or her research question (Saunders *et al*., 2016:177). It, therefore, guides research planning, execution and

monitoring of the study. Research methods tell the researcher how to collect and analyse data, for example through interviews, questionnaires or statistical tools.

The third layer of the research onion in Figure 3.1 is concerned with how a researcher plans to collect data for the dissertation in question. Such data collection methods include experiment, survey, case study, action research, grounded theory, ethnography and archival research. Thus, an academic researcher can choose any one of the above-mentioned options to collect data. These research strategies are further explained below.

3.5.1 Positivist Research Strategies

- **Experiment** – Experiments are scientific and rigid in structure. Saunders *et al*. (2016:178) added that experimental designs are meant to test the causal effects of phenomena on a group. The data collected using this method could also be statistically analysed (Saunders *et al*., 2016:178).
- **Survey** – According to Verma and Verma (2016), survey design often results from a deductive approach and can collect large volumes of data for statistical analysis. The collected data helps answer the research question or hypothesis in a cost-effective way (Verma & Verma, 2016).

3.5.2 Phenomenological research strategies

- **Case study** – Wisniewski and Stead (2015) stated that a case study research design provides unique examples of real people or cases in real situations. The number of such case studies is often restricted for drawing clear conclusions from the data (Wisniewski & Stead, 2015).
- **Action research** – **Action research** is primarily designed to deal with a specific problem in a specific situation. The process of action research begins by setting up a clear objective. Thereafter, the problem is fully diagnosed and subsequently, a list of solutions is prepared and presented as recommendations to solve the issue (Wisniewski & Stead, 2015).
- **Grounded Theory** – This strategy takes the approach of collecting data to build theory rather than to test or refine one. The researcher using grounded theory strategy often begins with a research question or qualitative data collection. Thereafter, the data collected through observation is reviewed by the researcher

and the repeated ideas are then coded/grouped into categories that, in turn, create the basis for a new theory (Verma & Verma, 2016).

- **Ethnography** – This strategy studies people in natural surroundings to develop a theory around behaviour and culture. This is rather a daunting and time-consuming research design wherein the researcher becomes part of the community being investigated to produce details about long-term changes in opinions and actions (Saunders *et al*., 2016:188).
- **Archival Research** – This strategy derives information from existing data and archive documents. A study using this research strategy could face a roadblock going forward as the accuracy and the amount of available information could present issues. Hence, the researcher is encouraged not to rely solely on this kind of secondary data for the dissertation (Verma & Verma, 2016).

3.5.3 Combined Research strategies

Mixed methods research is a methodology for conducting research that involves collecting, analysing and integrating quantitative (for example, experiments, surveys) and qualitative (for example, focus groups, interviews) research (Flick, 2015:12). This research approach is used when this integration provides a better understanding of the research problem than either of each alone (Saunders *et al*., 2016:170).

By mixing both quantitative and qualitative research and data, the researcher further gains an in-depth understanding and corroboration, while offsetting the weaknesses inherent to using each approach by itself. One of the most advantageous characteristics of conducting mixed methods research, is the possibility of triangulation, that is, the use of several means (methods, data sources and researchers) to examine the same phenomenon (Saunders *et al*., 2016:173). Triangulation allows one to identify aspects of a phenomenon more accurately by approaching it from different vantage points using different methods and techniques. This method however also requires an extensive period to complete and therefore cannot be used by the researcher for this particular investigation (Saunders *et al*., 2016:174).

3.5.4 Research strategy chosen

Survey research, involving a questionnaire, was adopted for the current study with a purpose to assess the job satisfaction of employees at Madadeni Regional Hospital in

KwaZulu-Natal**.** Survey research is especially appropriate for making exploratory and descriptive studies of large populations (Saunders *et al*., 2016:177), hence its appropriateness for the current study. According to the findings and a comparison between quantitative and qualitative research, quantitative research was found to be the most suitable method for accomplishing the research objectives of the current study.

The following reasons for the choice were advanced:

- Firstly, quantitative research was associated with the deductive approach which was appropriate for the research;
- Secondly, the study made use of data to test the theory; and
- Finally, the study concerned the relationship between two variables that would be measured numerically and analysed using various statistical techniques (Saunders *et al*., 2016:170).

3.6 Target Population

Population is generally a large collection of individuals or objects focused on or who form the focus of a scientific query (Saunders *et al*., 2016:275). Whilst a target population is defined by Wegner (2017) as the total group of individuals from which the sample is drawn. This study population included doctors, nurses as well as clinical support staff who were full-time employees working at Madadeni Regional Hospital. The exact number of this population was obtained from the Human Resources (HR) Department and amounted to (N=1000). The reason for selecting this group of employees was that they belonged to a scarce skills occupational class.

The sample size is defined as the representation of the target population (Saunders *et al*., 2016:301). For this research, the sample size was (N=100) participants which is (10%) of the target population.

- **Inclusion criteria**

According to Wegner (2017), an inclusion criterion refers to all the characteristics needed in the sample. The inclusion characteristic, therefore, included nurses (33) (All

categories), doctors (34) and clinical support staff (33) working at Madadeni Regional Hospital as full-time employees, provided they had more than one year of working experience.

- **Exclusion criteria**

Saunders *et al.* (2016) defined an exclusion criterion as characteristics, which participants may possess, that could adversely affect the accuracy of the results. In this study, employees who were not nurses, doctors and clinical support staff were excluded in the study. Employees working in the Eye department supervised by the researcher were excluded from the study to prevent bias. The other employees excluded are those who work in clinics outside the hospital, contracted staff members, student nurses, as well as NHLS staff as they have parastatals.

3.6.1 Sampling

According to Saunders *et al*. (2016:274), a sample can be defined as a subset of the population. From the target population, a sample was selected in keeping with study requirements and the availability of resources. There are various sampling strategy measures that are used when conducting research work. A sampling strategy is employed to select the sample from the available population (Saunders *et al*., 2016:275).

3.6.2 Kinds of sampling

Saunders *et al*. (2016:276) indicated that there are two types of sampling methods that are included in a study, namely, probability and non-probability sampling which are explained below as follows;

3.6.2.1 Probability

According to Saunders *et al*. (2016:276), a probability technique is defined as a sampling procedure in which the sample is designated based on well-defined mathematical guidelines whereby every member of the universe has an equal chance of being selected. The different types of probabilistic sampling techniques are briefly discussed below:

- **Simple Random Sampling:** One of the most outstanding features of this method is that each member of the population has an equal chance of being selected (Saunders *et al*., 2016:284). The simple random sampling operates in two ways, it is either the replacement of the subject after being selected or non-replacement of the subject after selection.
- **Stratified Sampling** involves dividing the population into homogeneous non-overlapping groups (namely, strata), selecting a sample from each group, and conducting a simple random sample in each stratum (Saunders *et al*., 2016:290). Based on information available from a frame, units are allocated to strata by placing within the same stratum, those units which are more-or-less similar concerning the characteristics being measured.
- **Cluster Sampling:** The smallest units into which a population can be divided are called the elements of the population and groups of elements of the clusters (Saunders *et al*., 2016:291). The problem with random sampling methods when sampling a population that is distributed across a wide geographic region lies in covering a lot of ground geographically to get to each of the units sampled.
- **Systematic sampling:** Systematic sampling is where every “nth” case after a random start is selected. For example, if surveying a sample of consumers, every fifth consumer may be selected from your sample. The advantage of this sampling technique is its simplicity (Saunders *et al*., 2016:286).

Advantages of probability sampling technique are:

a) It reduces the chance of systematic errors.
b) It minimizes the chance of sampling biases. Sampling bias occurs when the sampling frame and the population are not consonants (meaning, not the same). This could happen if we were unable to obtain permission to get access to the list of the population we are interested in, which is a common occurrence (Saunders *et al*., 2016:286).
c) It produces a better representative sample. For example, systematic sampling creates samples that are highly representative of the population, without the need for a random number generator (Saunders *et al*., 2016:286).

Disadvantages of probability sampling technique are:

a) The techniques need a lot of effort. In simple random sampling, the selection of a sample becomes impossible if the units or items are widely dispersed.
b) A lot of time is consumed. For example, simple random sampling and stratified random sampling are tedious and time-consuming, especially when creating larger samples.

3.6.2.2 Non-Probability

The non-probability technique, on the other hand, is a sampling procedure that does not follow any mathematical guideline, and as such the members of the population do not have an equal chance of being selected (Saunders *et al*., 2016:295). This method is based on the principle of availability, not on a prescribed formula or guidelines. The different types of non-probabilistic sampling techniques are listed below as follows:

- **Purposive Sampling:** In purposive sampling, sampling is done with a purpose in mind. Purposive sampling can be very useful for situations where one needs to reach a targeted sample quickly and where sampling for proportionality is not the primary concern (Saunders *et al*., 2016:296). With a purposive sample, it is likely to get the opinions of one's target population, but one is also likely to overlook subgroups in ones' population that are more readily accessible.
- **Quota Sampling:** In quota sampling, the researcher selects research participants non-randomly according to some fixed quota. There are two types of quota sampling, those are, proportional and non-proportional.
- **Heterogeneity Sampling:** Heterogeneity is a sample wherein the researcher wants to include all opinions or views and is not necessarily concerned about representing these views proportionately (Saunders *et al*., 2016:296). Another term for this is sampling for diversity.
- **Snowball Sampling:** In snowball sampling, the researcher begins by identifying an individual who meets the criteria for inclusion in his/her study (Saunders *et al*., 2016:298). The researcher then asks the individual to recommend other individuals whom he/she may know and meet the set criteria.
- **Convenience Sampling:** Convenience sampling deals with selecting participants based on their availability and accessibility. Characteristically, convenience sampling tends to be a preferred sampling technique among users (researchers and students) as it is less expensive, and an easy option compared to the above

sampling techniques (Saunders *et al*., 2016:298). Convenience sampling, therefore, overcomes many of the limitations associated with research.

Advantages of non-probability sampling technique:

a) A non-probability technique requires less effort, as it is much quicker and easier to carry out as it does not require a sampling frame and the strict use of random sampling techniques (namely, probability sampling techniques) (Saunders *et al*., 2016:299).
b) These techniques are quicker to complete (Saunders *et al*., 2016:299).

Disadvantages of non-probability sampling technique:

a) The sampling techniques are prone to encounter systematic errors and sampling biases. The sample size determination becomes very hard since there are no formulas like in the case of random sampling methods. Moreover, the interviewer interviews people who are easily available and accessible. So, the possibility of collecting valuable data is affected by quota sampling.
b) The sample cannot be claimed to be a good representative of the population. Difficulties in selecting a truly representative sample produce reliable and accurate results only when they are representative of the whole group. Selection of a truly representative sample is difficult when the phenomena under study are complex. Selecting good samples is difficult (Saunders *et al*., 2016).
c) Inferences drawn from the sample are not generalisable to the population. There is a potential for selection bias, which can result in a sample that is unrepresentative of the population.

The study adopted a probability sampling as it used a quantitative approach. The targeted population of 1000 participants from Madadeni Hospital was divided using a stratified random sampling technique. The participants were selected randomly in a number proportional to the stratum's size when compared to the population. These subsets of the strata were then pooled to form a random sample.

3.7 The Research Instrument

Data collection is an integral part of any research effort. Just as important as it is to decide on a research design and strategy, the choice of specific data collection instruments in conducting the research is also important (Saunders *et al*., 2016:165). For data collection to be successful the goal of the data-collection operation needs to be established. Once the purpose of the data gathering is known and understood, it will be an indication of the format of the data-gathering operation and how the data should be analysed. In design research, the first task is to set clear goals of what aspects of artefacts are investigated. It is either the technical characteristics of an artefact that are researched or the usefulness and impact of an artefact in the topic of the research. Depending on the goal, artefact and the research questions under investigation, appropriate data-collecting strategies and instruments are selected and used.

Saunders *et al*. (2016:165) distinguished between quantitative and qualitative research and lists “intellectual” and “practical” goals for qualitative research. Intellectually, the researcher should understand the total meaning, context and process of the study, identify unforeseeable events and use these events to generate new ideas and explain conclusions. Practically, researchers can share results, experiences, collaborate and help to improve existing practices.

Quantitative data is data in the form of numbers or data that can be translated into numbers and is numerically or statistically evaluated. According to Flick (2015:9), the purpose of quantitative research is to seek statements of objective fact, prediction, law-like findings and generalisation in a controlled environment such as a laboratory. Quantitative research is more established and often used in the natural sciences. Findings, theories and outcomes are often named laws. Quantitative research is used to study general trends across a population and uses numerical methods to ascertain magnitude, amount or size (Flick, 2015:12). Survey-based research and experiments lend themselves to quantitative data collection and statistical analysis where the focus is on what can be counted and measured.

According to Saunders *et al*. (2016:166), qualitative data is data conveyed through words and text. The focus of qualitative data is not numerical but relates to text and

meaning (Flick, 2015:11). Data collection is focused on people in situations and is inductive, interactive and flexible. Qualitative research is used to study social and cultural phenomena in-depth (Flick, 2015:12). Goals, research questions, the conceptual framework of the researcher, research methods used, and validity of the research are components of a qualitative study that researchers attend to interactively throughout the research. Saunders *et al*. (2016:168) state that the focus of qualitative research is to study people in their natural environments and to report on feelings, social situations and experiences in real-world settings through the analysis of people's words, actions and motivations.

It is possible in designing research to exploit both quantitative and qualitative data depending on the goal and purpose of the research. The research methods used in a study are dependent on what the study entails, the specific context of the study and other components of the research design (Saunders *et al*., 2016:168). According to Saunders *et al*. (2016:169), experiments, simulation and testing can be performed to study structural and performance artefact such as usability. Quantitative surveys, qualitative interviews, observational case studies or field studies are possible instruments to apply when socio-technical aspects such as usefulness are investigated.

A distinction is made between primary data sources and secondary data sources, especially in the social sciences. Saunders *et al*. (2016:317) distinguished between primary and secondary data sources. Primary data is new data that has not been analysed or interpreted before, for example, original data collected from participants. Secondary data is data retrieved from existing sources, so it has been analysed and interpreted before (Section 4.6). Primary data collection also serves the purpose of added value and credibility to the research (Saunders *et al*., 2016:316).

Data in the current study was collected using primary data collection sources such as a structured questionnaire and secondary sources such as reports, journal articles, library textbooks, dissertations and theses. The prospective respondents were approached and requested to participate in the study. Detailed information about the study was given to the participants, using their home language before consent to participate in the study was obtained. Thereafter written consent was obtained before the participants filled out the questionnaire.

The structured questionnaire (N=100) was administered and given to each participant during tea and lunch breaks and after the end of the shift.

3.7.1 Questionnaire Construction

A questionnaire is defined by Wisniewski *et al*. (2015) as observational techniques that encompass a series of items presented to respondents in a written form, in which individuals are expected to respond in writing. The respondents are given a list of written items to which they respond by ticking one answer which they consider to be most appropriate.

A structured questionnaire was used as the data collection instrument (N=100). The questionnaire was selected because it enabled the researcher to be consistent in asking questions and the data yielded was easy to analyse with the help of a statistician and the use of the EPI Info 6 Version 3 computer program. Saunders *et al*. (2016:243) maintained that a questionnaire is the best method of collecting data.

This study used closed-ended questionnaires, which ensured that the questions asked were clear and concise. The questions were drawn with an aim to evaluate the level of job satisfaction among employees at the Madadeni Regional Hospital in KwaZulu-Natal. The questionnaire was divided into four sections. The demographic section of the questionnaire was left out because of ethical reasons as suggested by UHERB (UMgungundlovu Health Ethics Review Board) in order to promote the anonymity of the study respondents.

Section A sought to determine the current level of job satisfaction among employees at Madadeni Regional Hospital, KwaZulu-Natal.

Section B was aimed at finding out the variables that promote job satisfaction among employees at Madadeni Regional Hospital.

Section C elicited variables that hinder job satisfaction of employees at Madadeni Regional Hospital.

Section D sought to find recommendations from Employees to Kwa-Zulu Natal Madadeni Regional Hospital management on issues that contribute significantly to employee morale and motivation to improve job satisfaction (See Appendix B for examples of the questionnaire).

The Likert scale which is also known as Summated Rating Method developed by Rensis Likert was used in Section A, B and C. Respondents had to answer on how strongly they agree or disagree with the constructed statements in the questionnaire. In this questionnaire, respondents could choose from five alternatives namely from 1 = strongly disagree up to 5 = strongly agree.

The constructed statements were based on the job satisfaction measure (that is, the questionnaire). The questionnaire construction is discussed in full in Chapter four. The respondents had to select 'agree, disagree or uncertain' in response to each word or short phrase provided.

A 'agree' response was taken to mean that the adjective or phrase described the job situation, with a 'disagree' response being taken to mean that the adjective or phrase did not describe the job situation. The 'uncertain' response meant that the respondent could not decide either way (BGSU, 2009:03).

The information given above enabled the researcher to analyse the data and come up with findings and recommendations pertaining to the study, as is discussed in chapter five.

3.8 Pilot Study

According to Saunders *et al*. (2016:473), it is essential for the researcher to conduct a pilot study before embarking on a larger study or data-collection campaign. Saunders *et al*. (2016:473) further described a pilot study as a pre-test or a small-scale research project where data is collected from participants like those the researcher aims to use in the actual study. The results of this pre-test were preliminary and serve only to assist in the design of the intended study or data collection campaign. Saunders *et al*. (2016:473) stated that pilot studies are critical in refining survey questions and

reducing the risk of the full study from being fatally flawed. For the purpose of this study, the researcher conducted a pilot study with 10 respondents out of the total population. The respondents were asked to give their input regarding questionnaire layout, language, length and anonymity. The respondents reported that certain questions were ambiguous, therefore, the researcher had to rephrase them such that they became easier to comprehend. The respondents of the pilot study were excluded from the main study.

3.9 Administration of Questionnaires

Questionnaires are said to be self-administered when they are filled in by the respondents on their own and researcher-administered when administered by a researcher in the form of an interview (Ekinci, 2015). Over the decades, with the newly available technology, the methods of collecting the instruments' data have evolved. For this reason, the different administration methods that can be employed in a study are as follows;

- **Mail/self-administered:** Sending questionnaires by mail is an excellent way of sending the same instrument to many people, however, the response rate may be low as the researcher relies on people having the time and the motivation to fill the questionnaires in. In addition, the person administering the questionnaire depends on having identified all variables, therefore, this method is not the best way of handling data about a complex situation.
- **Group-administered questionnaire:** A group-administered questionnaire requires people to be in a group and handed the questionnaire in which they fill in. This allows for collection and administration at one point in time, but it needs to be set up systematically.
- **Personally administered, in the street, workplace or at home:** Personally administered questionnaires are given to people who are intercepted in the street, workplace or visited at home. This ensures a reasonable response rate, but the cost is high, and people are likely to walk quickly past if they are in a hurry. An advantage is the ease with which one can obtain a much quicker response as opposed to most methods mentioned.

- **Telephone administration:** The advantage of telephone administration is that these can be cheaper than personally administered questionnaires. However, one of the big drawbacks is that most people resent the interruption of being phoned up for a 'market research' questionnaire when having a meal, working, watching television, et cetera. Additionally, telemarketing has given telephone interviews a bad name. Furthermore, it can be difficult to take people through multiple response items over the phone as there is a danger that the first item may be forgotten by the time the last one is reached.
- **Online or email:** The use of online or email administered questionnaires has been growing over the past years, one reason being that they are very quick and cheap to deliver, particularly the online interactive forms. The drawbacks of using this method include computer glitches, hostile attitude to spam (arguably we are more likely to delete spam than we are to fail to open unsolicited mail), and (although with the huge growth in internet access, this is becoming less of one) one limits their population to those with internet and email access.

For the purpose of this study, the questionnaires were delivered by hand to each respondent who then completed them by themselves (self-completed) (Saunders *et al*., 2016:437).

3.9.1 Data Collection

According to Saunders *et al*. (2016:400), data collection can be carried out in a variety of ways, in different environments or settings and most importantly from different sources. The data can be collected using various techniques. The decision about which tool to use for data collection is guided by the research questions. Some methods of data collection are the following:

- **Interviews:** An interview is meant to record and analyse people’s opinions, experiences, beliefs and ideas on relevant topics. The respondents are required to present more detailed information. This gives a deeper insight into the social phenomena, as compared to the quantitative methods such as surveys and questionnaires.

- **Focus Groups:** A focus group refers to a group of people who have been purposefully assembled at a place to take part in a discussion on a topic of relevance. It is a method of collecting information by studying people's collective views, opinions, experiences and reactions, and also to understand the meanings implied by them (Saunders *et al*., 2016:416).

- **Questionnaire:** Questionnaires are devices used to collect data through a series of questions and other similar prompts from a group of respondents. Questionnaires are very easy to conduct and can be open-ended questions and close-ended questions. In open-ended questions, the respondent has greater freedom in giving his/her response. In close-ended questions, there is a limit of responses for a respondent to choose from.
- **Field Observation:** Observation is defined as "the systematic description of events, behaviours, and artefacts in the social setting chosen for study" (Saunders *et al*., 2016:403). Through the mode of observation, the researcher gets to describe situations as they exist, by making use of five senses, thus presenting a sketch of a situation under study (Saunders *et al*., 2016:403).
- **Case Study:** A case study is an in-depth investigation about a person, group, situation or occurrence. It involves the collection of data from various sources employing a mix of different methods, whichever appropriate. Case studies are used in research where a deep probe and understanding of the issue is required.
- **Ethnography:** Ethnography is the study of societies and cultures in a systematic way. It observes, records and analyses people belonging to a society in their natural 'environment settings' or 'fields'. The data is gathered by methods aimed to capture peoples' regular activities and social meanings related to them.

For this study, primary data was collected by using structured questionnaires and secondary data was obtained from journals, textbooks, newspaper, the Emerald and the Google/Google Scholar website.

After obtaining permission to conduct the research from different authorities, the researcher then pursued to collect data. The researcher first met with the HR Manager who was delegated by the CEO to present the research plan. The researcher briefed the unit managers and Clinical support managers about the study before proceeding

to the wards. During the distribution of questionnaires, the researcher maintained ethical principles. For instance, participants were informed of their rights. The questionnaire was delivered by hand in a sealed envelope to all eligible participants. The questionnaire was accompanied by the participant's information leaflet letter that encouraged the respondents to complete the questionnaire. The questionnaire had clear instructions on how it should be completed.

Participants who agreed to participate in the study were asked to sign a consent form before completing the questionnaire. Participants were asked to complete the questionnaire during their free time. Date and time was set for the collection of the completed questionnaires. Questionnaires were distributed during the first week of November 2020 from the 3rd up until the 9th of November 2020 during tea, lunch breaks and at the end of the researcher's shift. Questionnaires were collected from the 10th of November 2020 up until the 16th of November 2020.

One hundred (100) employees were given the questionnaires personally by the researcher. The researcher delivered the questionnaires to employees in the various departments at Madadeni Regional Hospital in KwaZulu-Natal over the period of one week and collected completed questionnaires over another period of one week.

One of the most widespread and popular questionnaires is the “Job Descriptive Index” (JDI), created by Smith *et al*. (1987), which supports the theory of Smith, Kendall, and Hulin (1969). Smith *et al*. in 1969 wanted to measure job satisfaction using words, mainly adjectives, to describe the employees’ feelings about their job, which consisted of closed-ended questions only. Thus, a JDI questionnaire is a research tool that is used to collect job satisfaction data from the research participants (Tasios & Giannouli, 2017:61). It consists of a shortlist of “phrases and adjectives that describe different facets of the job or the job overall.” Therefore, the collection of data for the study was done through the administration of the JDI Scale Measure (i.e., the JDI questionnaire is one of the most widespread and popular questionnaires).

The above-mentioned method was specially selected for the study, because of its established reliability, validity, relative ease of administration, user-friendliness, and extensive use by other researchers in the past (Tasios & Giannouli, 2017:61). The data collection for the study was conducted at the Madadeni Regional Hospital.

Regular follow-ups with the respondents were made telephonically and via emails, in an endeavour to enhance the response rate.

The list of the target population was obtained from the HR (Human Resources) Department with their allocation in various departments. A total of 34 doctors, 33 nurses and 33 clinical support staff were selected at random making a total of 100 participants which is (10%) of the target population.

3.10 Data Analysis

Saunders *et al.* (2016:505) explained the stages of analysing raw data as editing, coding and creating an electronic data file. Editing refers to the checking of data with the purpose of adjusting data for correctness, consistency and legibility. Coding is used to represent the meaning of data and can be used to simplify the analysis process (Saunders *et al*., 2016:532). Symbols are assigned to raw data, especially when computer data files are used in analysis or for classifying and interpreting data. Depending on the goal and the way the data will be analysed, data analysis in research is known to be either qualitative or quantitative.

Quantitative analysis focuses on the use of numerical methods such as mathematical or statistical procedures to ascertain magnitude, amount or size. On the other hand, the qualitative analysis focuses on the nature of a phenomenon and is represented by patterns, themes and stories (Saunders *et al*., 2016:529). In the current study, quantitative data analysis was chosen because of the reasons below. Saunders *et al*. (2016:523) distinguished between quantitative and qualitative data analysis:

- Quantitative data is based on numbers or meaning is derived from numbers and qualitative data is based on words or meanings expressed through words.
- Quantitative data collected is standardised and in a numerical format and qualitative data is not standardised and is classified into categories.
- In quantitative data analysis, diagrams and statistical outcomes are used and in qualitative data analysis conceptual methods.

For the purpose of this study, results or raw data from questionnaires were in the format of text. This data needed to be analysed and cleaned up, and categories were created out of responses and analysed subsets of the data for more specific results.

Data analysis of this quantitative or numerical data was performed by applying statistical techniques and methods. The analysis also included the use of tables, charts and graphs to see patterns or detect trends in data. The researcher's interpretation of the data also played a central role in the way the data analysis was performed and in the graphical methods chosen to present the data for better and easier understanding for the reader and examiner. A descriptive technique was used to analyse; for example, instrumental readings and data to prove the truth of certain occurrences or patterns (Saunders *et al*., 2016:527).

The statistical techniques employed also offered a more universal means and criteria for evaluating key points and making generalized conclusions based on evidence, providing examples of statistical measures, such as mean and standard deviation. For this research study, data was analysed by making use of descriptive statistics. According to Saunders *et al.* (2016:540), descriptive statistics enables the researcher to present collected data in a logical and organised form. The data that relates to the measuring instrument was summarized using graphical representations and tabulations.

3.11 Validity and Reliability

Validity is a measure of whether research findings present a true and trusted view of research events. Unlike objective numerical and statistical measurements used for validity checks and verification of quantitative data, qualitative data validation and verification rely on subjective interpretation. Whilst the reliability of a measure indicates the extent to which it is without bias, hence it ensures consistent measurement across various items in the instrument (Saunders *et al*., 2016:473).

3.11.1 Validity

According to Saunders *et al.* (2016:529), there are four specific types of validity, each of which were tested for this study:

- **Face Validity:** Face reliability is the subjective extent to which the test is seen to measure a variable. This was achieved by asking two random managers in the HR Department to review the questionnaire without any communication with the author on the purpose of the study (Saunders *et al*., 2016:473).

- **Content Validity:** Content validity is used to predict the efficacy of the tool to minimize or eliminate measurement errors that may arise when multiple measures are required (Masuwai *et al*., 2016:12). In this study, content validity was ensured by asking two random managers with a master qualification in the HR Department at Madadeni Regional Hospital in KwaZulu-Natal to test whether the questions being asked in the questionnaire would adequately address the objectives of the study.

- **Criterion Validity:** Criterion validity measures how well one set of variables will be able to predict an outcome. This is usually based on information from other variables. For example, scoring well in one test will reliably predict a candidate's success in a job portfolio (Saunders *et al*., 2016:474). The responses to the questions in each category of the questionnaire should be directly related to the behaviour of the participants in that setting. For example, if a participant lists the impact of maintenance in the manufacturing processes on performance within Madadeni Regional Hospital in KwaZulu-Natal, this is directly related to the effects of strategic change on organisational performance within Madadeni Regional Hospital in KwaZulu-Natal at a later stage.

- **Concurrent Validity:** Concurrent validity is a type of data test that can be elicited to prove that a test can be used to predict other outcomes. For example, an intelligence quotient test would be a good example of an established test that is regarded as having a high validity. The new test created was measured against this old standard. The questionnaire guide or surveys that were used, are a tried and tested method for conducting a quantitative research study (Saunders *et al*., 2016:475).

3.11.2 Reliability

According to Saunders *et al*. (2016:473), reliability is defined as the degree to which measures are free from error and therefore yield consistent results. Saunders *et al*. (2016:473) further explained that reliability is a necessary contributor to validity but it is not enough of a condition for validity. Thus, this was applied in this study to ensure consistency and repeatability of the responses received, this is further elaborated below as follows;

- **Inter-rater Reliability:** According to Heale and Twycross (2015:66), inter-rater reliability is a measure of the consistency from one rater to another. For this study, inter-rater reliability was ensured by an independent member of the staff who was asked to conduct a similar questionnaire to an employee at Toyota South Africa, who did not form part of the study sample. The data received matched the patterns that were found in the pilot study. The results were then placed together and analysed for inter-rater reliability. The data collected in both instances were very similar.
- **Parallel Reliability:** Heale and Twycross (2015:66) stated that in parallel reliability, different forms of the same test are given to the same group of participants. Thereafter two sets of scores are correlated with each other. Parallel reliability, therefore, helps assess the consistency of the results from the two tests that are constructed similarly from the same content domain. For this study, parallel testing was employed through internal incident document findings on Madadeni Regional Hospital in KwaZulu-Natal that were compared to the primary findings of this particular study.

- **Test-retest Reliability:** According to Heale and Twycross (2015:66), test-retest reliability measures the consistency of data measured at different times. The results of this type of exercise should be able to reveal whether the two sets of data collected are consistent or not (Heale & Twycross, 2015:66). This was tested by a repeat or follow up questionnaire administered to the pilot study to gauge if the data collected the second time around differed from the original pilot study conducted a week before.

3.12 Limitations of the Study

Denscombe (2014:51) stated that potential respondents have little or almost nothing to gain by answering and returning the questionnaire, for this very reason a majority of participants in a study chose not to respond. Even in cases when people are willing, their responses can also reflect their reading and writing skills and perhaps their misinterpretation of one or more questions (Denscombe, 2014:51). For this very reason, the researcher has to clarify the questionnaire to avoid misinterpretation. The limitations of the study were as follows:

- Demographic factors were eliminated from the study by the researcher as advised by UHERB to ensure anonymity thus protecting the study subjects, hence the analysis of the study could not be analysed in terms of demographic factors;

- The study was limited to the fact that it only focused on the level of job satisfaction among employees at Madadeni Regional Hospital in KwaZulu-Natal and left out other challenges faced by the Madadeni Regional Hospital in KwaZulu-Natal;

- Individual behaviour cannot be controlled and as a result, there was a felt resistance from some participants. However, the researcher still managed to distribute the questionnaires successfully;

- The researcher was also limited to research the participants' cooperation, as some participants were not cooperative in their willingness to give information, as most of them gave neutral responses which became an issue to the investigator as potential information could not be extracted to inform reliable findings;

- The researcher was also limited in selecting a much larger sample due to financial and time constraints. The questionnaire administration and the collection thereof involved a lot of costs. The research minimized the sample to 100 participants; and

- The researcher only included the employees who were nurses, doctors and clinical support staff and left out other groups of employees.

3.13 Elimination of Bias

The term bias refers to the researcher unfair involvement in the study which results in the impairment to the credibility of the study. According to Tmak and Smelik (2020:01), bias is any trend or deviation from the truth in data collection, data analysis, interpretation and publication which can cause false conclusions. To eliminate any bias within this study, the data collection phase ensured that anonymity was established to avoid upgrading or degrading the responses given by the participants.

In eliminating bias, the researcher included quantitative data interpretations and data obtained in the primary research study for anonymity to be established and to avoid the upgrading or degrading of responses by the research participants. The researcher also ensured that the wording in the questionnaire was understandable. Questions were raised with the sole reason for confirming the theory presented in the previous chapter (chapter two). Questions that discredit the participants were further avoided, and so were questions that could have been used by respondents to advance personal agenda.

3.14 Ethical Considerations

Saunders *et al.* (2016:241) defined ethics as “a code of behaviour considered correct.” It is therefore crucial that all research work and researchers are aware of ethics. Ethics relate to two groups of people, those conducting research, who should be aware of their obligations and responsibilities, and the “researched upon”, who have basic rights that should be protected. The study, therefore, had to be conducted with fairness and justice by eliminating all potential risks. It is important that the respondents are aware of their rights. Ethical issues observed in a study included informed consent, right to anonymity and confidentiality, right to privacy, justice, beneficence and ensuring that permission is obtained (Saunders *et al.,* 2016:243). In the current study, the ethical considerations were considered in the following manner:

3.14.1 Ensuring participants have given informed consent

Respect for persons is a basic human right. Respondents as autonomous individuals have the right to choose to either participate or not, in the research (Saunders *et al*., 2016:271). Collins English Dictionary (1991:286) defines choice as "the act or an instance of choosing or selecting; the opportunity or power of choosing". Thus, respondents could act independently by giving their informed consent to participate in the study. In this study, it was ensured that respondents gave informed consent to participate in the study. Prior to the respondents' giving consent, the purpose of the study was fully explained to them in the language they were well conversant with. Risks and benefits were also highlighted. The respondents were informed that participation was voluntary, and they were free to withdraw should they so wish. The respondents were assured that neither participation, withdrawal nor refusal to participate would affect their entitlement to health services. Before signing the consent, the participants were given an opportunity to ask questions that were done to ensure that the participants fully understood the explanations. At the end of the explanations, the respondents were asked to sign a written consent (See Appendix A for an example of the consent form).

3.14.2 Ensuring no harm comes to participants

Avoiding harm is another basic human right to be considered when conducting research on human beings. According to Saunders *et al*., (2016:271) risks that may be encountered in research include physical, psychological, emotional, and social ones. Privacy, confidentiality and anonymity during data collection prevented psychological harm.

3.14.3 Ensuring confidentiality and anonymity

Confidentiality is "a basic ethical principle while anonymity is one way in which confidentiality is maintained. To ensure anonymity, steps are taken to protect the identity of the individual by neither giving their name when presenting research results nor including identifying details which may reveal their identity such as the workplace, personal characteristics and occupation" (Saunders *et al*., 2016:271). In this study, anonymity was achieved by not putting the names of the respondents on the

questionnaire. It is important that the researcher should not be able to link any information to any respondent. Assurance was given to the participants that anonymity and confidentiality were to be strictly observed.

3.14.4 Ensuring that permission is obtained

Permission to conduct the study was obtained from the CEO of Madadeni Regional Hospital in KwaZulu-Natal as well as from the Provincial DoH after an ethical clearance certificate was issued by UHERB and MANCOSA (Management College of Southern Africa) (See Appendix C for a copy of the letter of permission).

3.15 Conclusion

The focus of this chapter was on the research design, research methodology, describing the research population and sample, and sampling techniques used in this study. The underlying philosophical paradigm and assumptions of the research, approach, research design and methodology followed in the research were discussed.

A detailed discussion of the study's results and its interpretation thereof will follow in the next chapter (chapter 4).

CHAPTER FOUR: RESULTS, DISCUSSION AND INTERPRETATION OF FINDINGS

4.1 Introduction

The purpose of this chapter is to present the results of the questionnaire responses, provide an analysis of these responses and draw conclusions about the level of job satisfaction among employees at Madadeni Regional Hospital, KZN. This chapter further illustrates data that has been processed and analysed to obtain the findings based on inference from the sampled population.

4.2 Data analysis

Data analysis and the methods of analysis were used to meet the research objectives. The analysis of the data was done by applying the SPSS version 25.0 for Windows with the help of a qualified statistician.

4.2.1 Reliability measurement - Cronbach Alpha

Cronbach Alpha coefficient was used to evaluate the reliability (consistency) of the constructs used in the survey. While factor analysis measures construct validity, Cronbach Alpha measured the internal consistency reliability. Field (2017) regards scores of 0.7 and higher as enough. Each factor solution (as grouped in Table 4.1 - 4.30) was subsequently identified and labelled, followed by the calculation of the internal consistency (reliability) using Cronbach Alpha, to reveal the following results as shown in Table below. Following the threshold of Cronbach Alpha, a score above 0.7 as being enough (Field, 2017) the score on Table 4.1 to 4.30 reveals strong reliability and consistency of the measuring scale used.

4.2.2 Descriptive statistics

Descriptive statistics helps the researcher organise the data in ways that give meaning and facilitate insight, such as frequency distributions and measures of central tendency (Saunders *et al*., 2016:527). Descriptive statistics illustrate the centre, spread and shape distributions which are useful in the primary instrument for data distribution (Saunders *et al*., 2016:527).

The data in this section is presented using tables, charts, graphs and descriptive statistics which are followed by narratives and comments. The study also presents frequency distribution tables, organised in a manner that shows the number of individuals located in each category on the scale of measurement (as explained below). The frequency distribution also presents an organized illustration where everyone is located relative to others in the distribution.

4.3 Statistical procedure

The statistical procedures are discussed as follows:

- Collected questionnaires were arranged to get the total number of each item in the following order:
- Strongly agree (SA) which = 5 points; agree (A) = 4 points; neutral (N) = 3 points; disagree (D) = 2 points; and strongly disagree (SD) = 1 point.
  Note that N.O. stands for ‘number of’ and n stands for ‘number’.

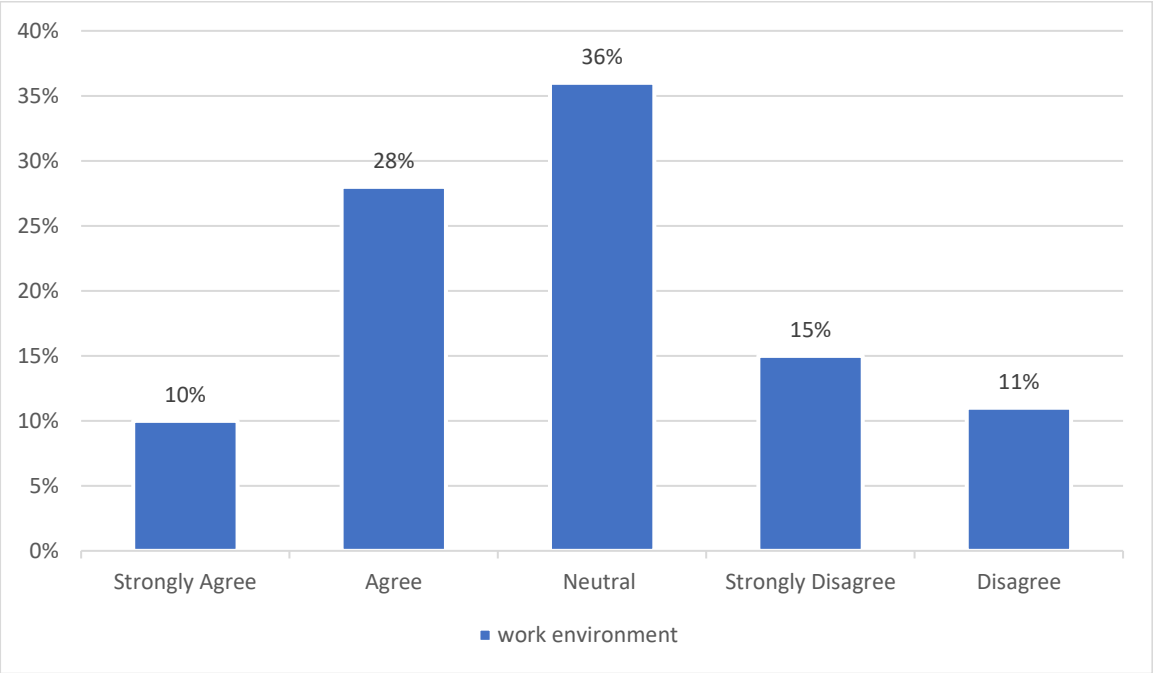
Section A: The current level of job satisfaction among employees of Madadeni Regional Hospital, KZN

Table 4.1: My current employer and work environment gives a feeling of satisfaction.

		Frequency	Valid Percent	Cumulative Percent	Cronbach's Alpha
Valid	**Strongly Agree**	9	10%	10%	.936
	Agree	25	28%	38%	
	Neutral	33	36%	74%	
	Strongly Disagree	14	15%	89%	
	Disagree	10	11%	100%	
	Total	**n=91**	**100%**	**100%**	

The factor work environment revealed a score of 0.936. This score is regarded enough for the analysis, which deems to reveal reliability and consistency between the constructs grouped in the factor analysis, as (source) regards the score between A and B to be accepted.

Figure 4.1: My current employer and work environment gives a feeling of satisfaction.

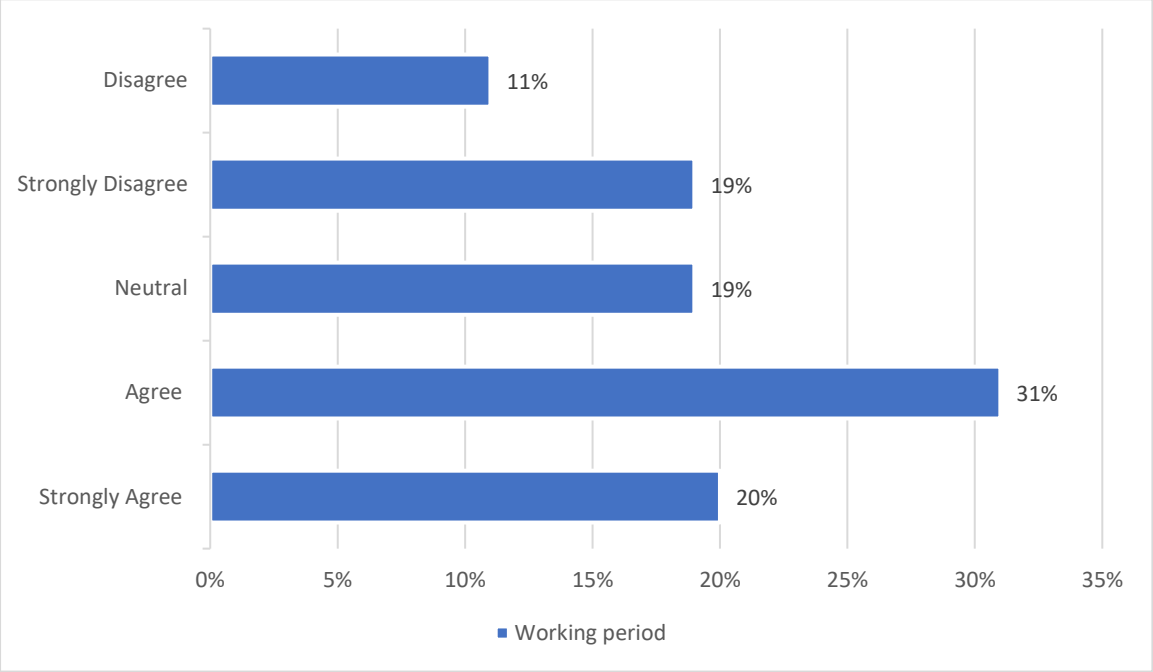


As per the data above, 10% of the study sample strongly agreed with the statement that indicated that their current employer and work environment gives a feeling of satisfaction. Whilst 28% of the respondents stated that they just agreed with the statement. Some of the sampled respondents 36% indicated neutrality to the above statement and only 15% strongly disagreed with the statement. The remaining 11% of the populace just disagreed. The factor work environment revealed a score of 0.936 this score is regarded enough for the analysis, which deems to reveal reliability and consistency between the constructs grouped.

Table 4.2: I will be working for the same organisation in the next 2 years.

		Frequency	Valid Percent	Cumulative Percent	Cronbach's Alpha
Valid	**Strongly Agree**	19	20%	20%	.891
	Agree	28	31%	51%	
	Neutral	17	19%	70%	
	Strongly Disagree	17	19%	89%	
	Disagree	10	11%	100%	
	Total	**n=91**	**100%**	**100%**	

Figure 4.2: I will be working for the same organisation in the next 2 years.

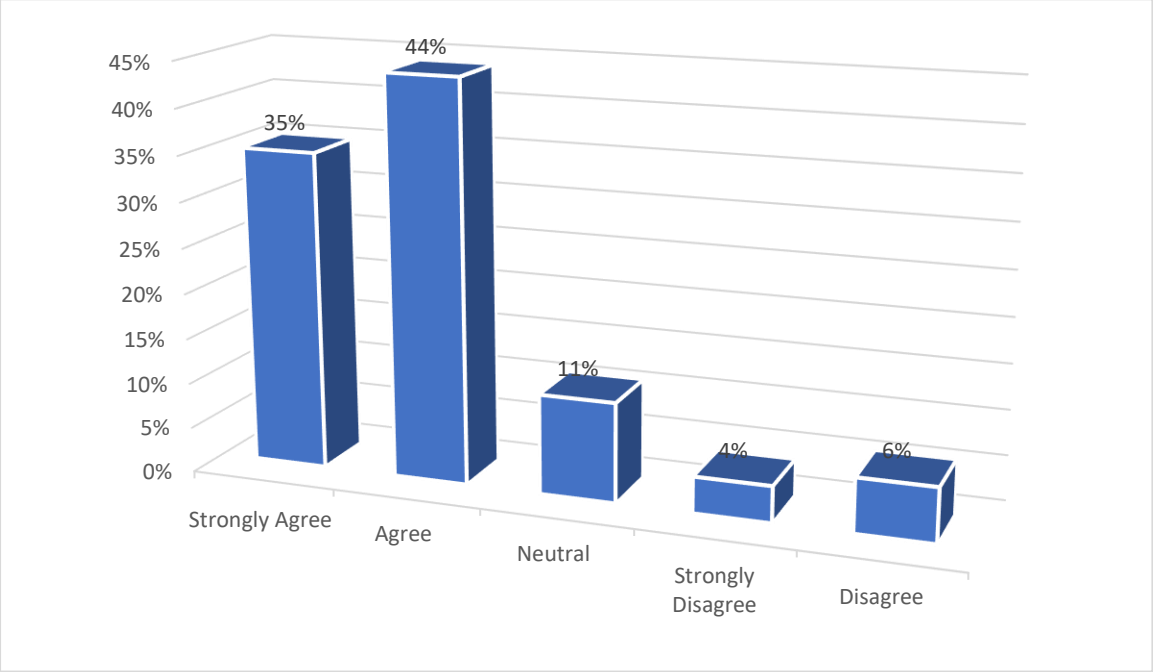


Overall, 20% of the sampled participants strongly agreed that they will be working for the same organisation in the next 2 years. Whilst 31% of the sampled respondents just agreed with the same statement. A total of 19% indicated that they would remain neutral to the statement above and only 19% indicated that they strongly disagreed. The remaining 11% indicated that they just disagreed. The responses had a high consistency score of 0.891.

Table 4.3: I have a well-defined/clear job description.

		Frequency	Valid Percent	Cumulative Percent	Cronbach's Alpha
Valid	**Strongly Agree**	32	35%	35%	.855
	Agree	40	44%	79%	
	Neutral	10	11%	90%	
	Strongly Disagree	4	4%	94%	
	Disagree	5	6%	100%	
	Total	**n=91**	**100%**	**100%**	

Figure 4.3: I have a well-defined/clear job description.

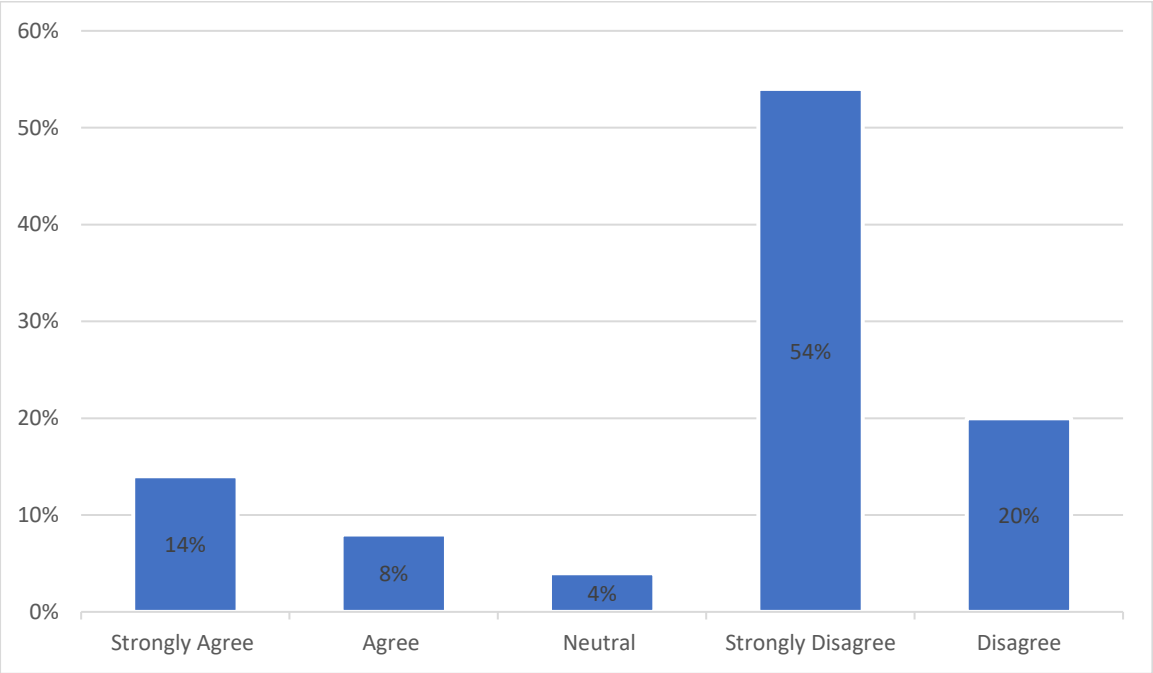


According to the information above, 35% of the total respondents indicated that they strongly agreed with the statement, whilst 44% of the respondents agreed with the statement. Only 11% felt neutral about the statement that says they have a well-defined/clear job description. However, 4% of them strongly disagreed, while 6% disagreed with the above statement. The responses had a high mean of (19.8), a standard deviation of (14.2899), mode (3.0, 10.0, 18.0, 27.0, and 33.0) and median at (18.0). The factor job description revealed a score of 0.855 this score is regarded enough for the analysis, which deems to reveal reliability and consistency between the constructs grouped in the factor analysis.

Table 4.4: More and more individuals are seen leaving the organisation regularly.

		Frequency	Valid Percent	Cumulative Percent	Cronbach's Alpha
Valid	**Strongly Agree**	7	14%	14%	.889
	Agree	4	8%	22%	
	Neutral	2	4%	26%	
	Strongly Disagree	27	54%	80%	
	Disagree	10	20%	100%	
	Total	**n=91**	**100%**	**100%**	

Figure 4.4: More and more individuals are seen leaving the organisation regularly.

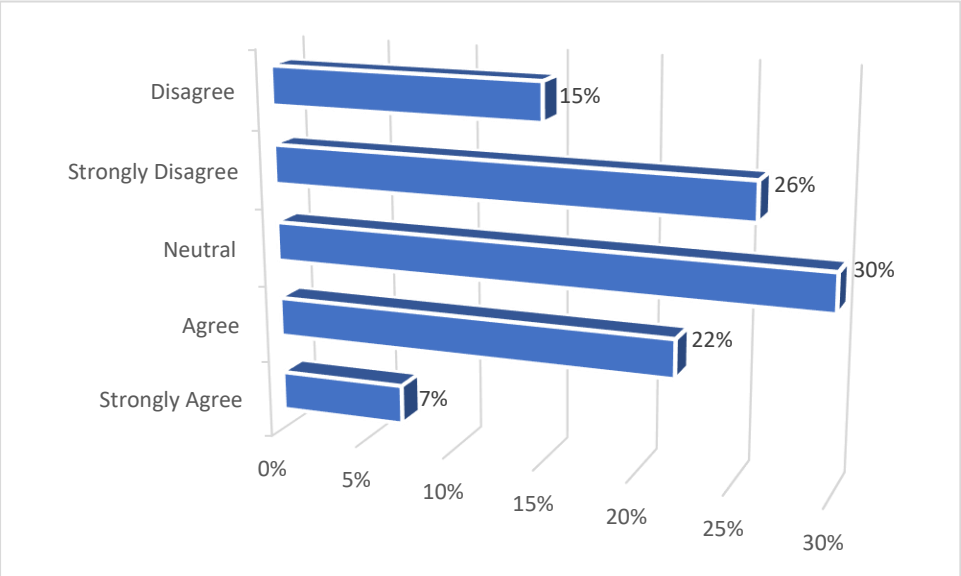


Referring to the above information, 14% of the 91 participants strongly agreed with the statement that more and more individuals are seen leaving the organisation regularly. Whilst a total of 8% stated that they only agreed with the above statement. While 4% of the respondents were neutral, while 54% strongly disagreed, and only 20% of the respondents stated that they disagreed. The factor leaving the organisation revealed a score of 0.889, this score is regarded enough for the analysis, which deems to reveal reliability and consistency between the constructs grouped in the factor analysis.

Table 4.5: My organisation has open communication/transparency/ information sharing culture.

		Frequency	Valid Percent	Cumulative Percent	Cronbach's Alpha
Valid	**Strongly Agree**	6	7%	7%	.893
	Agree	20	22%	29%	
	Neutral	27	30%	59%	
	Strongly Disagree	24	26%	85%	
	Disagree	14	15%	100%	
	Total	**n=91**	**100%**	**100%**	

Figure 4.5: My organisation has open communication/transparency/ information sharing culture.

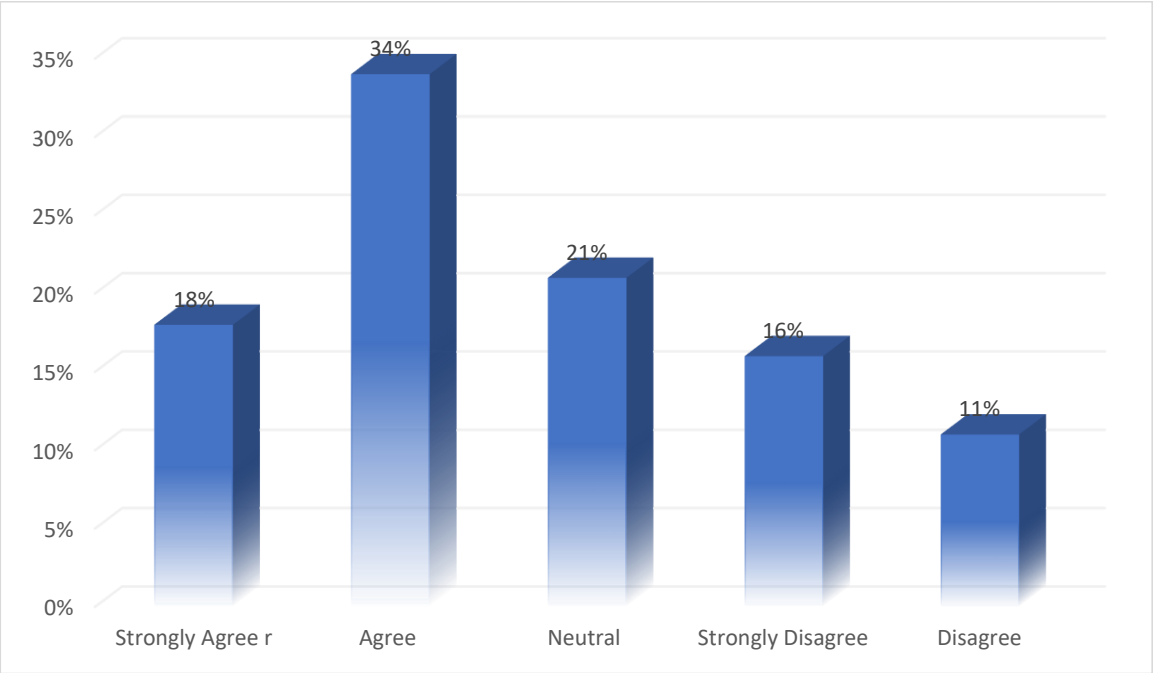


From the data above, the researcher concluded that while 7% of the respondents strongly agreed with the above statement, 22% agreed that the organisation has open communication/ transparency/ information sharing culture, while a large number of 30% chooses to remain neutral to the statement above. A total of 26% indicated that they strongly disagreed with the above statement and the remaining 15% stated that they just disagree. The transparency factor revealed a score of 0.893 this score is regarded enough for the analysis, which deems to reveal reliability and consistency between the constructs grouped in the factor analysis.

Table 4.6: My organisation has a well-structured Orientation and Induction programme for new employees.

		Frequency	Valid Percent	Cumulative Percent	Cronbach's Alpha
Valid	**Strongly Agree**	16	18%	18%	.769
	Agree	31	34%	52%	
	Neutral	19	21%	73%	
	Strongly Disagree	15	16%	89%	
	Disagree	10	11%	100%	
	Total	**n=91**	**100%**	**100%**	

Figure 4.6: My organisation has a well-structured Orientation and Induction programme for new employees.

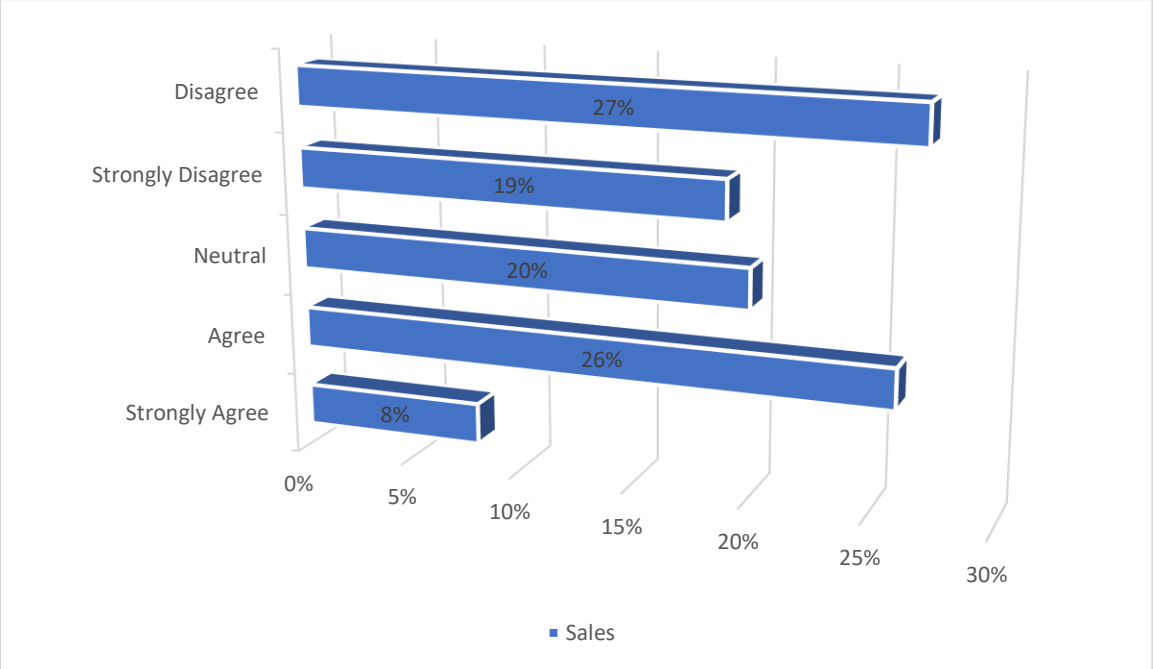


According to the above data, 18% of the respondents strongly agreed with the statement that their organisation has a well-structured orientation and induction programme for new employees; while most of the sample respondents at 34% agreed that their organisation has a well-structured orientation and induction programme for new employees. A total of 21% remained neutral on the above matter, whilst only 16% indicated that they strongly disagree. The remaining 11% stated that they just disagreed. The orientation and induction programme factor revealed a score of 0.769, this score is regarded enough for the analysis, which deems to reveal reliability and consistency between the constructs grouped in the factor analysis.

Table 4.7: My organisation offers staff development opportunities (short/long term courses, coaching, mentoring and supervision).

		Frequency	Valid Percent	Cumulative Percent	Cronbach's Alpha
Valid	**Strongly Agree**	7	8%	8%	
	Agree	24	26%	34%	.656
	Neutral	18	20%	54%	
	Strongly Disagree	17	19%	73%	
	Disagree	25	27%	100%	
	Total	**n=91**	**100%**	**100%**	

Figure 4.7: My organisation offers staff development opportunities (short/long term courses, coaching, mentoring and supervision).

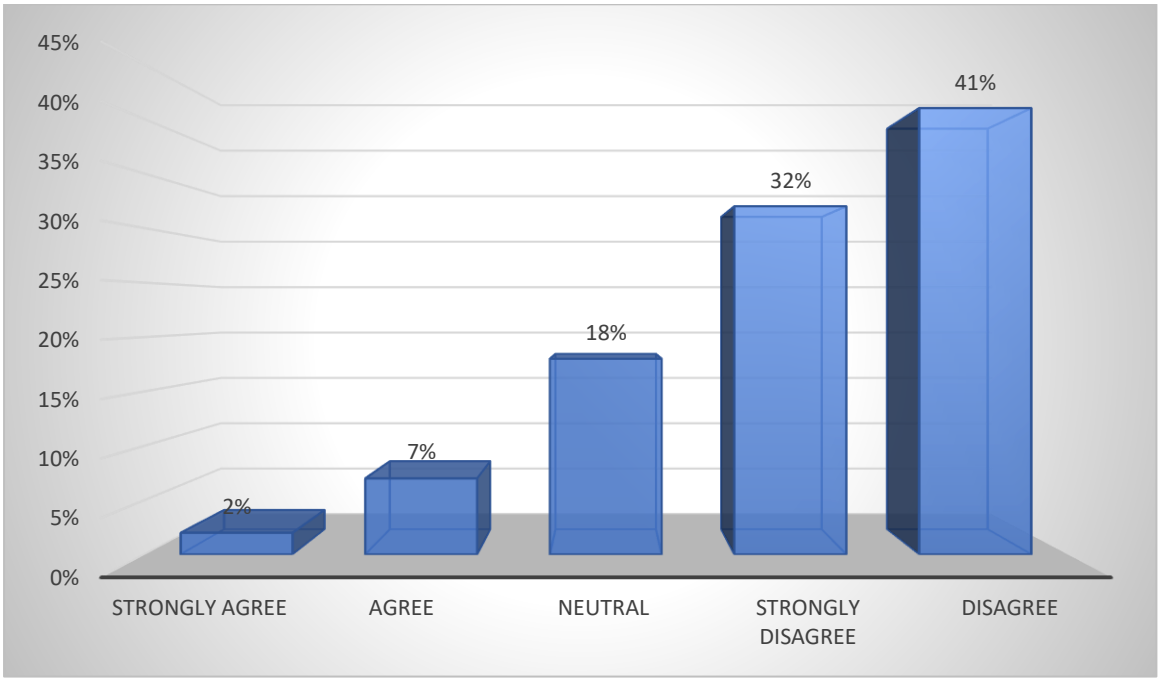


The data reflected above indicated that 8% of the participants strongly agreed that their organisation offers staff development opportunities, while 26% indicated that they just agreed with the above statement. A total of 20% maintained a neutral view, and 27% disagreed with the fact that their organisation offers staff development opportunities. Only 19% strongly disagreed with the statement. The development opportunities factor revealed a score of 0.656 this score is regarded enough for the analysis, which deems to reveal reliability and consistency between the constructs grouped in the factor analysis.

Table 4.8: My organisation offers continuous basic computer training skills.

		Frequency	Valid Percent	Cumulative Percent	Cronbach's Alpha
Valid	**Strongly Agree**	1	2%	2%	.927
	Agree	6	7%	9%	
	Neutral	17	18%	27%	
	Strongly Disagree	30	32%	59%	
	Disagree	37	41%	100%	
	Total	**n=91**	**100%**	**100%**	

Figure 4.8: My organisation offers continuous basic computer training skills.

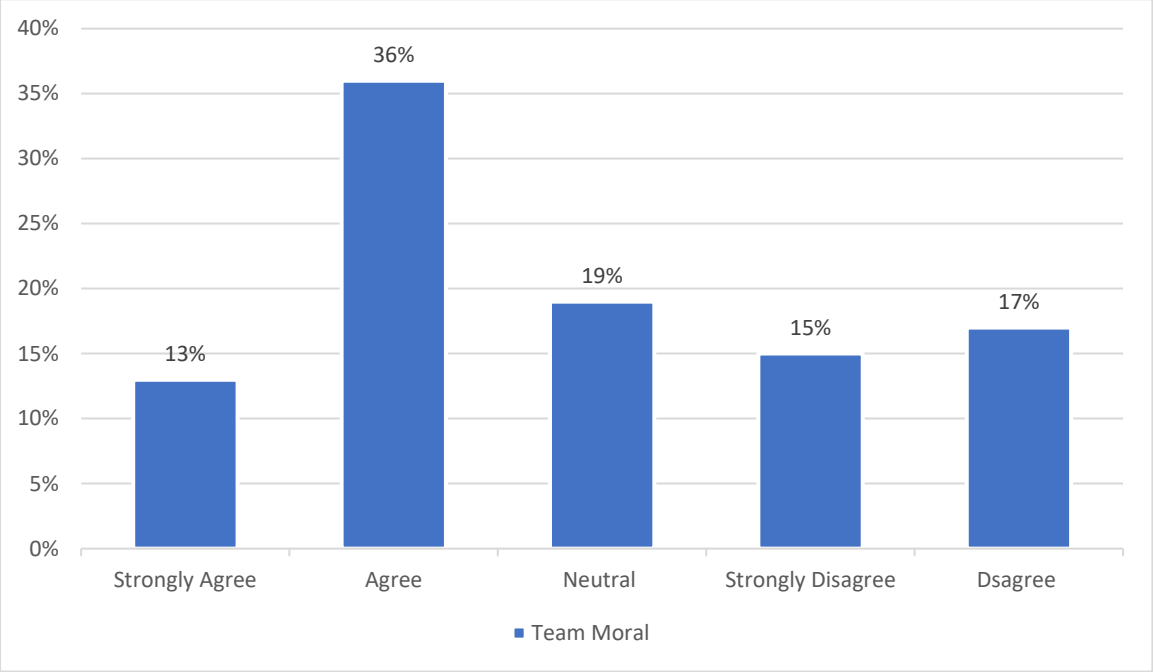


The table and figure above conveyed that, only 2% of the sampled respondents strongly agreed with the statement that their organisation offers continuous basic computer training skills, while 7% agreed with the statement. A total of 18% of the respondents were neutral about the statement above and 32% of the sampled population indicated that they strongly disagreed with the statement above. The remaining 41% stated that they disagreed with the statement. The training skills factor revealed a score of 0.927 this score is regarded to be enough for the analysis, which deems to reveal reliability and consistency between the constructs grouped in the factor analysis.

Table 4.9: The team morale in my department is high.

		Frequency	Valid Percent	Cumulative Percent	Cronbach's Alpha
Valid	**Strongly Agree**	12	13%	24%	.858
	Agree	33	36%	49%	
	Neutral	17	19%	68%	
	Strongly Disagree	14	15%	83%	
	Disagree	15	17%	100%	
	Total	**n=91**	**100%**	**100%**	

Figure 4.9: The team morale in my department is high.



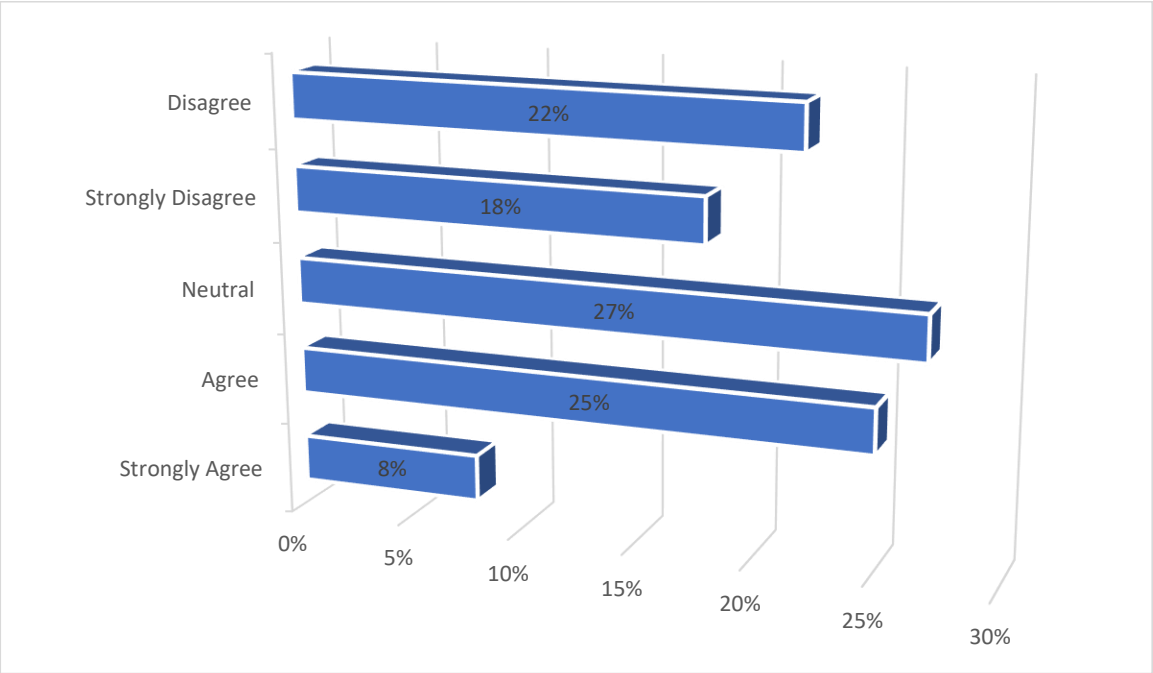
The results shown above provide clear evidence that most of the respondents, about 13% strongly agree with the statement above, whilst 36% agree that their team morale within their respective department is high. On the other hand, 19% of them remained neutral to the statement; 15% strongly disagreed with the statement; while the remaining 17% disagreed. The team morale factor revealed a score of 0.858 this score is regarded to be good enough for the analysis, which deems to reveal reliability and consistency between the constructs grouped in the factor analysis.

4.4 Section B: Variables that promote job satisfaction within the Madadeni Regional Hospital employees

Table 4.10: I am satisfied with the pay I receive compared to what other organisations offer.

		Frequency	Valid Percent	Cumulative Percent	Cronbach's Alpha
Valid	**Strongly Agree**	7	8%	8%	.890
	Agree	23	25%	33%	
	Neutral	25	27%	60%	
	Strongly Disagree	16	18%	78%	
	Disagree	20	22%	100%	
	Total	**n=91**	**100%**	**100%**	

Figure 4.10: I am satisfied with the pay I receive compared to what other organisations offer.

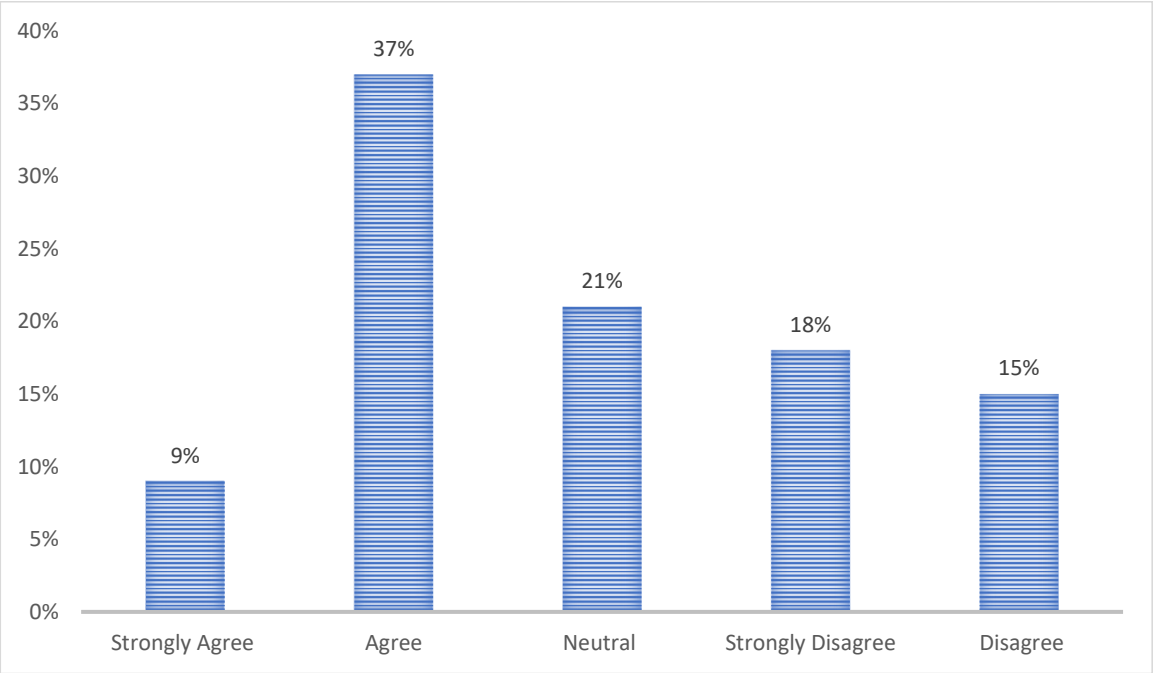


As per the data above, 8% of the study sample concurs with the statement that they are satisfied with the pay they receive compared to what other organisations offer. Whilst 25% of the sampled population stated that they agree with the statement. A total of 27% indicated neutrality to the above statement. Whilst a total of 18% of the sampled population strongly disagreed with the statement. The remaining 22% of the respondents disagreed. The payment factor revealed a score of 0.890 this score is regarded to be enough for the analysis, which deems to reveal reliability and consistency between the constructs grouped in the factor analysis.

Table 4.11: I receive appropriate additional allowances/ benefits (for example, car allowance, housing, medical aid etc.).

		Frequency	Valid Percent	Cumulative Percent	Cronbach's Alpha
Valid	**Strongly Agree**	8	9%	9%	.899
	Agree	34	37%	46%	
	Neutral	19	21%	67%	
	Strongly Disagree	16	18%	85%	
	Disagree	14	15%	100%	
	Total	**n=91**	**100%**	**100%**	

Figure 4.11: I receive appropriate additional allowances/ benefits (for example, car allowance, housing, medical aid etc.).

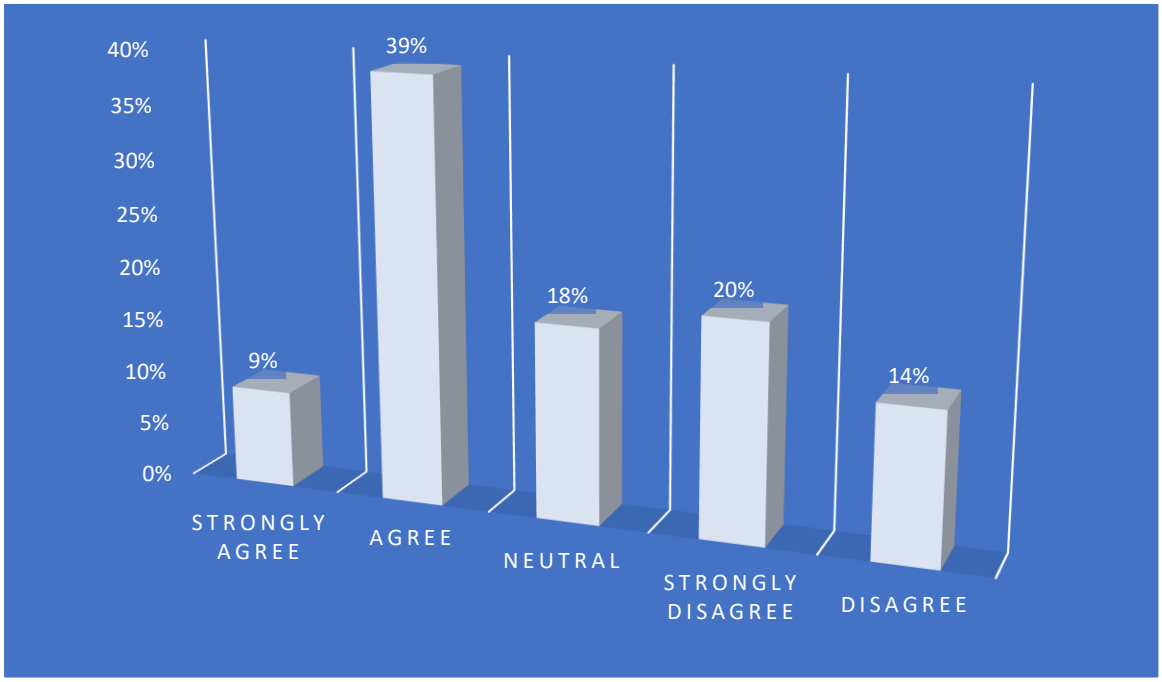


The statement required the participants to state whether they receive appropriate additional allowances/ benefits. Table and Figure 4.11 above illustrates that 9% of the respondents strongly agree with the statement, while 37% of the respondents indicated that they agree, a total of 21% pointed out that they were unsure of the variable being present or not. A total of 18% strongly disagreed with the above statement and the remaining 15% indicated that they disagree with the statement above. The appropriate benefits factor revealed a score of 0.899 this score is regarded to be enough for the analysis, which deems to reveal reliability and consistency between the constructs grouped in the factor analysis.

Table 4.12: I receive fair additional incentives/bonuses.

		Frequency	Valid Percent	Cumulative Percent	Cronbach's Alpha
Valid	**Strongly Agree**	8	9%	9%	.792
	Agree	36	39%	48%	
	Neutral	16	18%	66%	
	Strongly Disagree	18	20%	86%	
	Disagree	13	14%	100%	
	Total	**n=91**	**100%**	**100%**	

Figure 4.12: I receive fair additional incentives/bonuses.

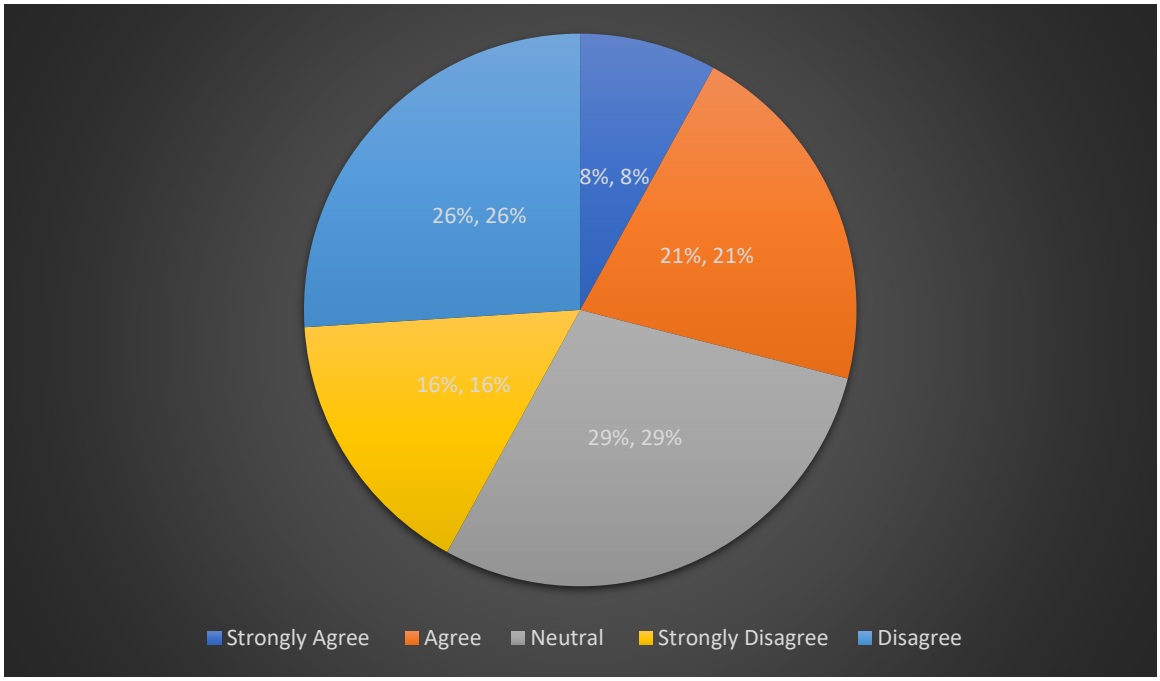


The results in Table and Figure 4.12 above show that 9% of the respondents strongly agreed that they receive fair additional incentives/bonuses, whilst a total of 39% agreed to the statement, a total of 18% were unsure about the statement, whilst 18% disagreed, and 20% strongly disagreed to the statement, whilst the remaining 14% disagreed with the statement. The appropriate benefits factor revealed a score of 0.792 this score is regarded to be enough for the analysis, which deems to reveal reliability and consistency between the constructs grouped in the factor analysis.

Table 4.13: My salary motivates me to produce the highest quality work.

		Frequency	Valid Percent	Cumulative Percent	Cronbach's Alpha
Valid	**Strongly Agree**	7	8%	8%	.897
	Agree	19	21%	29%	
	Neutral	26	29%	58%	
	Strongly Disagree	15	16%	74%	
	Disagree	24	26%	100%	
	Total	**n=91**	**100%**	**100%**	

Figure 4.13: My salary motivates me to produce the highest quality work.



By analysing the feedback from the above statement, 8% of respondents indicated that they strongly agreed with the statement that indicated that their salary motivates them to produce the highest quality work, whilst 21% of the sampled respondents indicated that they only agree with the statement. The feedback also indicated that 29% of the respondents were unsure about their salary motivating them to produce the highest quality work. On the other hand, 26% of the sampled respondents disagreed with the statement and the remaining 16% strongly disagreed. The salary motivator factor revealed a score of 0.897 this score is regarded to be enough for the analysis, which deems to reveal reliability and consistency between the constructs grouped in the factor analysis.

Table 4.14: I receive constructive performance appraisal feedback (EPMDS).

		Frequency	Valid Percent	Cumulative Percent	Cronbach's Alpha
Valid	**Strongly Agree**	6	7%	7%	.636
	Agree	29	32%	39%	
	Neutral	19	21%	60%	
	Strongly Disagree	15	16%	76%	
	Disagree	22	24%	100%	
	Total	**n=91**	**100%**	**100%**	

Figure 4.14: I receive constructive performance appraisal feedback (EPMDS).

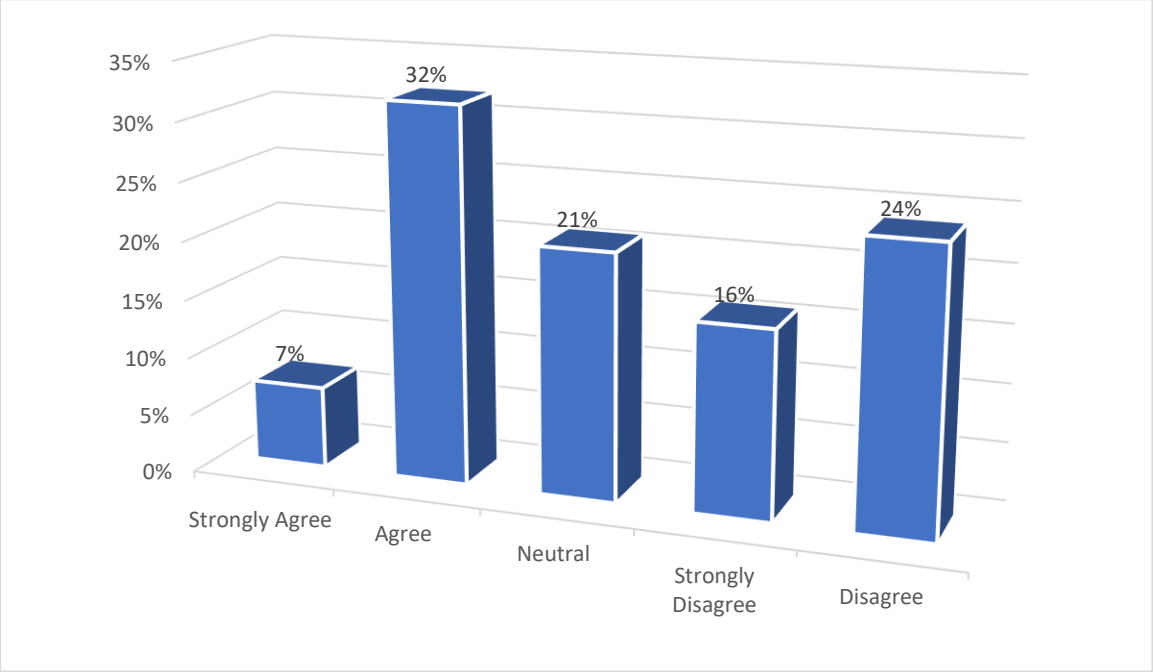


Table and figure 4.14 indicate that 7% of the respondents who participated in the survey strongly agreed that they receive constructive performance appraisal feedback, 32% of the sampled respondents indicated that they agreed with the statement. Whilst a total of 21% remained unsure about the statement. The data in the table above further illustrated that 16% of the sampled population strongly disagreed with the statement and the remaining 24% stated that they disagreed with the statement. The salary motivator factor revealed a score of 0.636 this score is regarded to be enough for the analysis, which deems to reveal reliability and consistency between the constructs grouped in the factor analysis.

Table 4.15: My Manager gives praise for the job well done.

		Frequency	Valid Percent	Cumulative Percent	Cronbach's Alpha
Valid	**Strongly Agree**	21	23%	23%	.769
	Agree	29	32%	55%	
	Neutral	30	33%	88%	
	Strongly Disagree	6	7%	95%	
	Disagree	5	5%	100%	
	Total	**n=91**	**100%**	**100%**	

Figure 4.15: My Manager gives praise for the job well done.

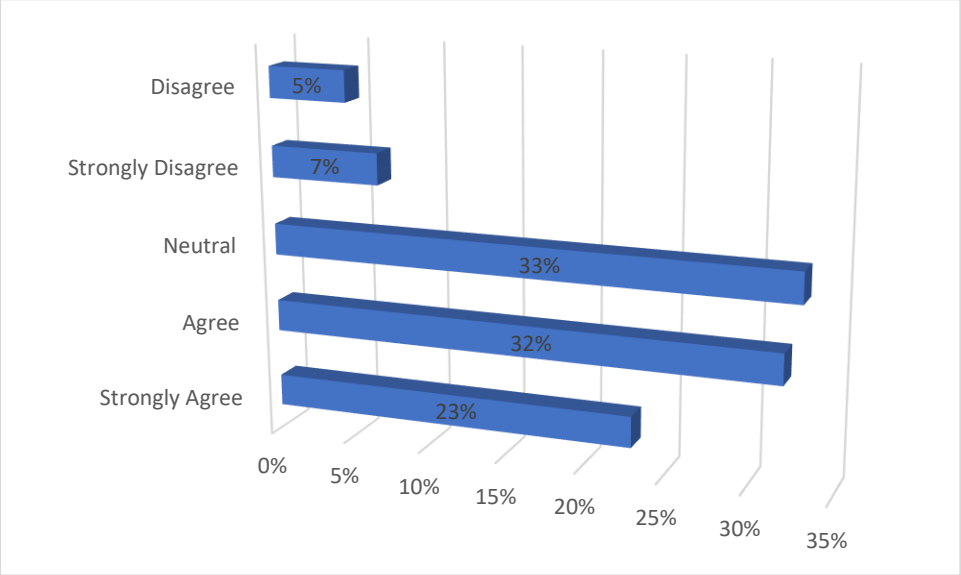


Table and Figure 4.15 indicates that 23% of the respondents who participated in the survey strongly agreed that their managers gave praise for the job well done, 32% of the sampled respondents indicated that they agree with the statement. Whilst a total of 33% remained unsure about the statement. The data in the table above further illustrated that 7% of the sampled population strongly disagreed with the statement and the remaining 5% stated that they disagreed with the statement. The above factor scored between 0.769 which are deemed to reveal reliability and consistency between the constructs as they were grouped in the factor analysis.

4.5 Section C: Variables that hinder job satisfaction within Madadeni Regional Hospital employees

Table 4.16: I work in a relaxed comfortable environment.

		Frequency	Valid Percent	Cumulative Percent	Cronbach's Alpha
Valid	**Strongly Agree**	7	8%	8%	.719
	Agree	20	22%	30%	
	Neutral	24	26%	56%	
	Strongly Disagree	22	24%	80%	
	Disagree	18	20%	100%	
	Total	**n=91**	**100%**	**100%**	

Figure 4.16: I work in a relaxed comfortable environment.

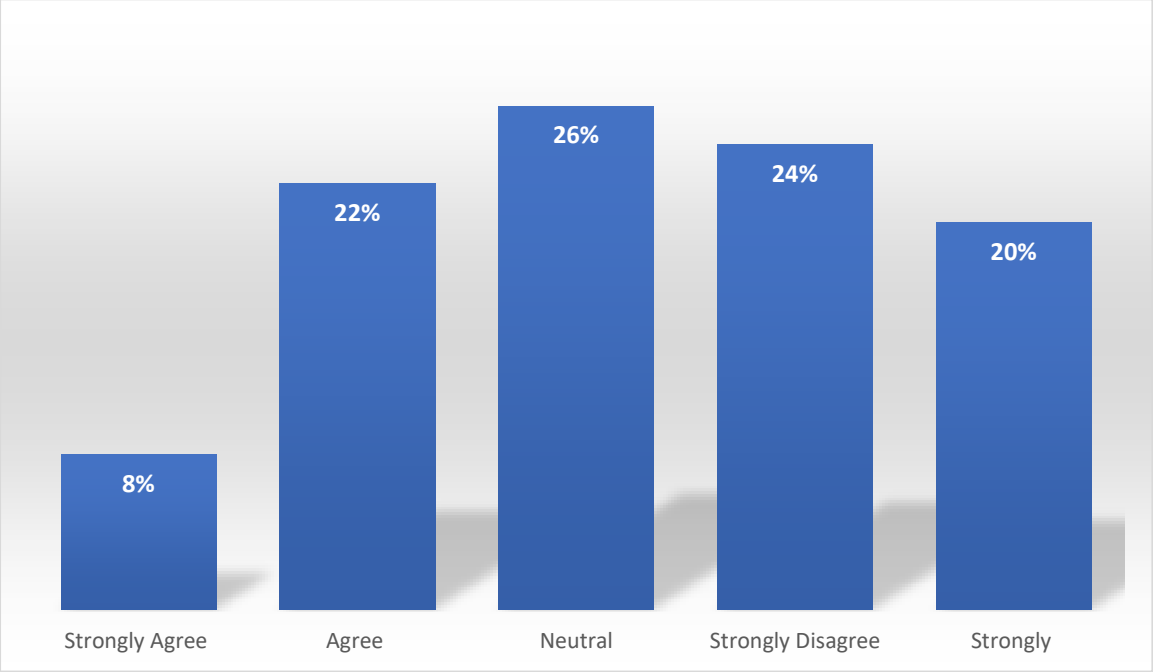
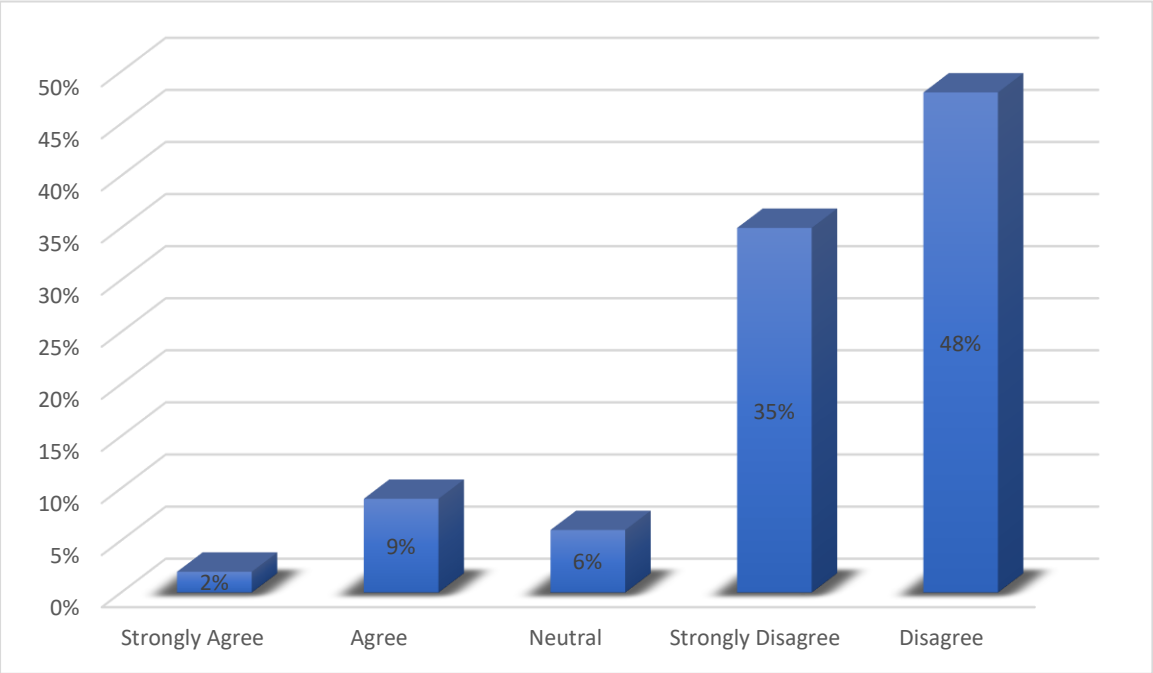


Table and Figure 4.16 shows that 7 participants representing a proportion of 8% reported that they strongly agree that they work in a relaxed comfortable environment. This followed by 22% indicating that they agree with the statement, 24 respondents representing at 26% proportion of the sampled population also indicated that they were unsure about the statement above, and (24%) respondents indicated that they strongly disagreed with the statement. Lastly 20%of the sampled respondents indicated that they disagree with the statement. The above factor scored between 0.719 which are deemed to reveal reliability and consistency between the constructs as they were grouped in the factor analysis.

Table 4.17: My office/workstation has a heating and cooling system that is functional.

		Frequency	Valid Percent	Cumulative Percent	Cronbach's Alpha
Valid	**Strongly Agree**	2	2%	2%	.758
	Agree	8	9%	11%	
	Neutral	5	6%	17%	
	Strongly Disagree	32	35%	52%	
	Disagree	44	48%	100%	
	Total	**n=91**	**100%**	**100%**	

Figure 4.17: My office/workstation has a heating and cooling system that is functional.

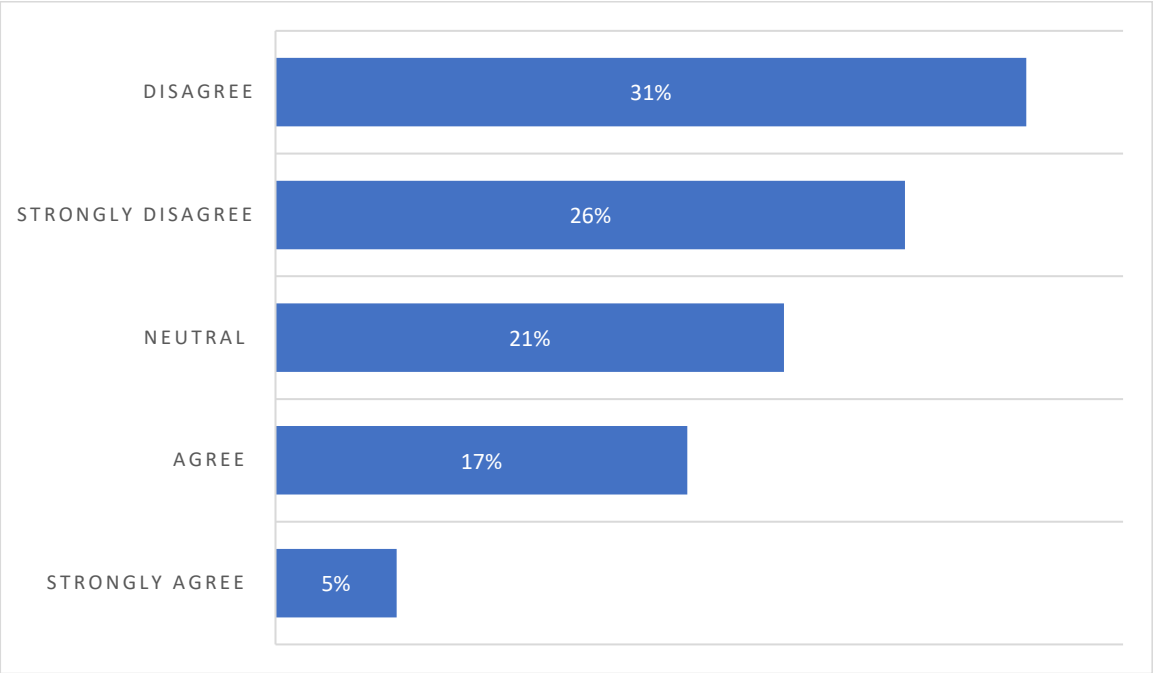


The statement required the participants to state whether their office/workstation has a heating and cooling system that is functional. Table 4.17 above illustrates that 2% of the respondents strongly agreed with the statement, while 9% of the respondents indicated that they agreed. A total of 6% pointed out that they were unsure of the variable being present or not. A total of 48% disagreed with the above statement and the remaining 35% indicated that they strongly disagreed with the statement above. The above factor scored between 0.758 which are deemed to reveal reliability and consistency between the constructs as they were grouped in the factor analysis.

Table 4.18: My office/workstation is fully furnished with a functional telephone, computer, printer and scanner.

		Frequency	Valid Percent	Cumulative Percent	Cronbach's Alpha
Valid	**Strongly Agree**	4	5%	5%	.685
	Agree	16	17%	22%	
	Neutral	19	21%	43%	
	Strongly Disagree	24	26%	69%	
	Disagree	28	31%	100%	
	Total	**n=91**	**100%**	**100%**	

Figure 4.18: My office/workstation is fully furnished with a functional telephone, computer, printer and scanner.

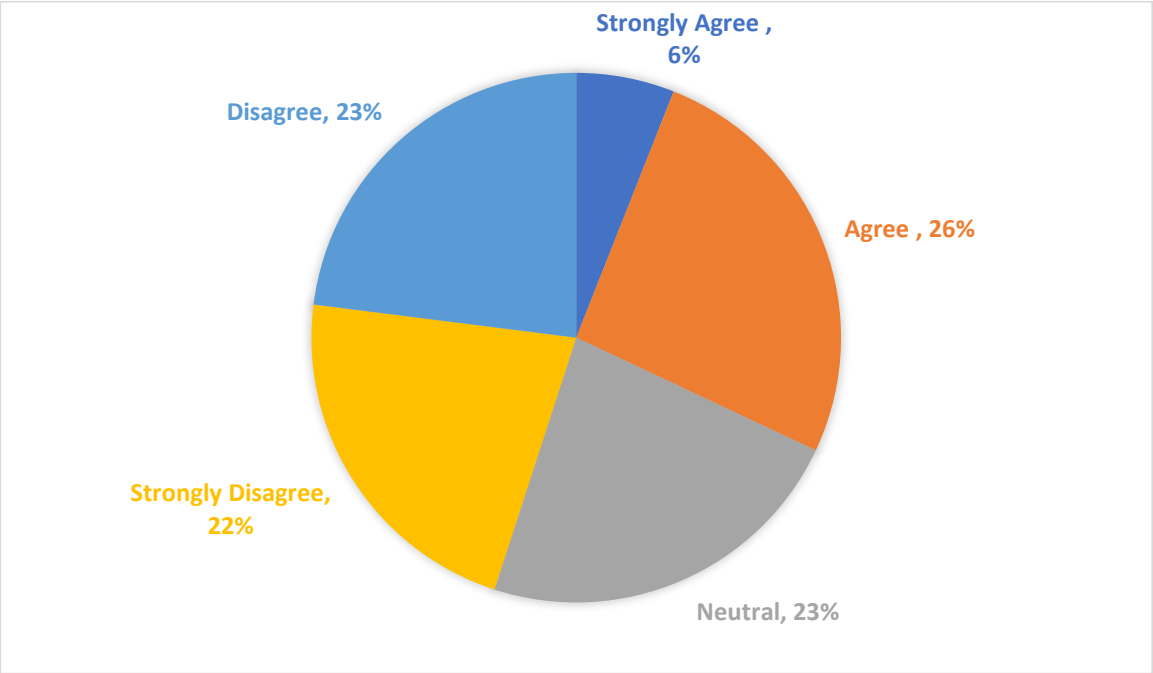


The results in Table and Figure 4.18 above show that 5% of the respondents strongly agreed that their office/workstation is fully furnished with a functional telephone, computer, printer and scanner, whilst a total of 17% agreed to the statement, a total of 21% were unsure about the statement, whilst 31% disagreed, and the remaining 26% strongly disagreed to the statement. The above factor scored between 0.685 which are deemed to reveal reliability and consistency between the constructs as they were grouped in the factor analysis.

Table 4.19: I have the necessary equipment and supplies to perform my daily duties (material resources).

		Frequency	Valid Percent	Cumulative Percent	Cronbach's Alpha
Valid	**Strongly Agree**	5	6%	6%	.844
	Agree	24	26%	32%	
	Neutral	21	23%	55%	
	Strongly Disagree	20	22%	77%	
	Disagree	21	23%	100%	
	Total	**n=91**	**100%**	**100%**	

Figure 4.19: I have the necessary equipment and supplies to perform my daily duties (material resources).



By analysing the feedback from the above statement, 6% of respondents indicated that they strongly agreed with the statement that indicated that they have the necessary equipment and supplies to perform my daily duties, whilst a large proportion of 26% of the sampled respondents indicated that they only agree with the statement. The feedback also indicated that 23% of the respondents were unsure if they have the necessary equipment and supplies to perform my daily duties, 23% of the sampled respondents disagreed with the statement and the remaining 22% strongly disagreed. The above factor scored between 0.844 which are deemed to reveal reliability and consistency between the constructs as they were grouped in the factor analysis.

Table 4.20: The equipment and supplies are of good quality and maintained by due dates.

		Frequency	Valid Percent	Cumulative Percent	Cronbach's Alpha
Valid	**Strongly Agree**	4	5%	5%	.637
	Agree	23	25%	30%	
	Neutral	20	22%	52%	
	Strongly Disagree	27	30%	82%	
	Disagree	17	18%	100%	
	Total	**n=91**	**100%**	**100%**	

Figure 4.20: The equipment and supplies are of good quality and maintained by due dates.

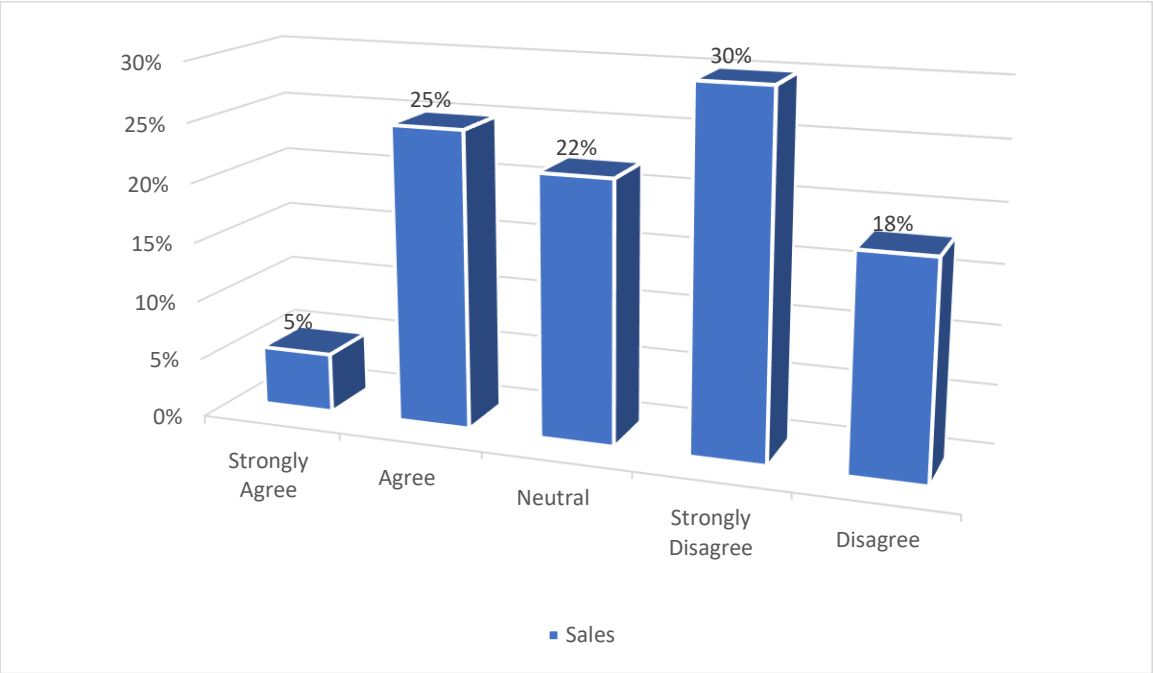


Table and Figure 4.20 that 5% of the respondents who participated in the survey strongly agreed that equipment and supplies are of good quality and maintained by due dates, 25% of the sampled respondents indicated that they agreed with the statement, whilst a total of 22% remained unsure about the statement above. The data in the table above further illustrated that 30% of the sampled population strongly disagreed with the statement and the remaining 18% stated that they disagreed with the statement. The above factor scored between 0.637 which are deemed to reveal reliability and consistency between the constructs as they were grouped in the factor analysis.

Table 4.21: I am satisfied with my daily allocated workload.

		Frequency	Valid Percent	Cumulative Percent	Cronbach's Alpha
Valid	**Strongly Agree**	9	10%	10%	.720
	Agree	26	29%	39%	
	Neutral	25	27%	66%	
	Strongly Disagree	16	18%	84%	
	Disagree	15	16%	100%	
	Total	**n=91**	**100%**	**100%**	

Figure 4.21: I am satisfied with my daily allocated workload.

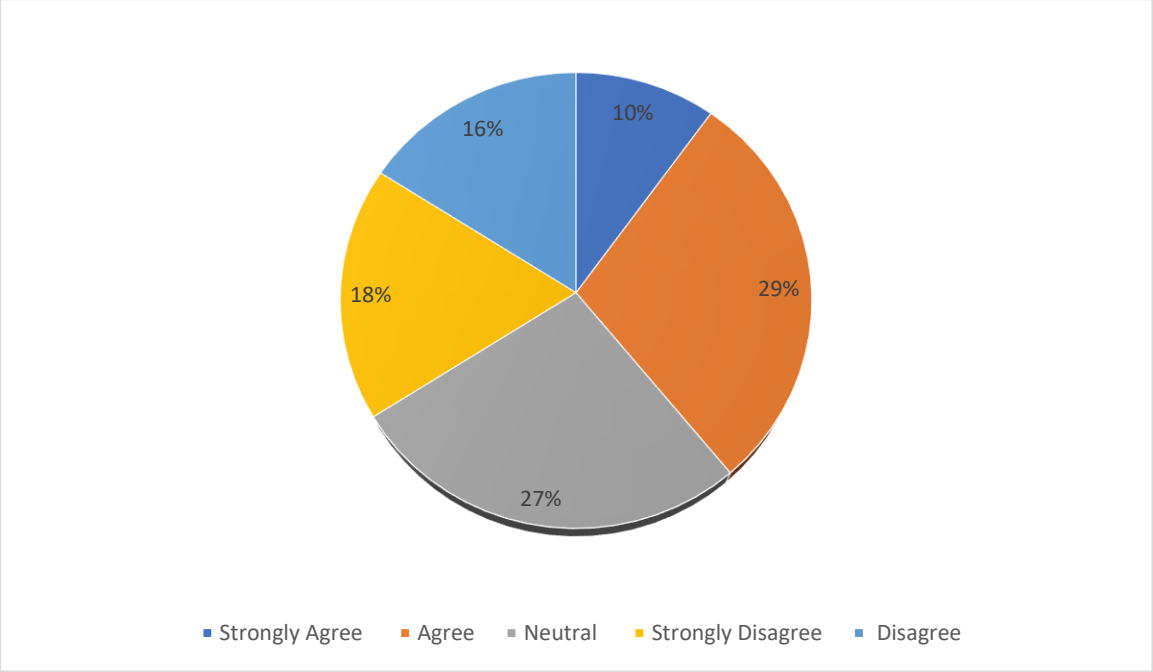
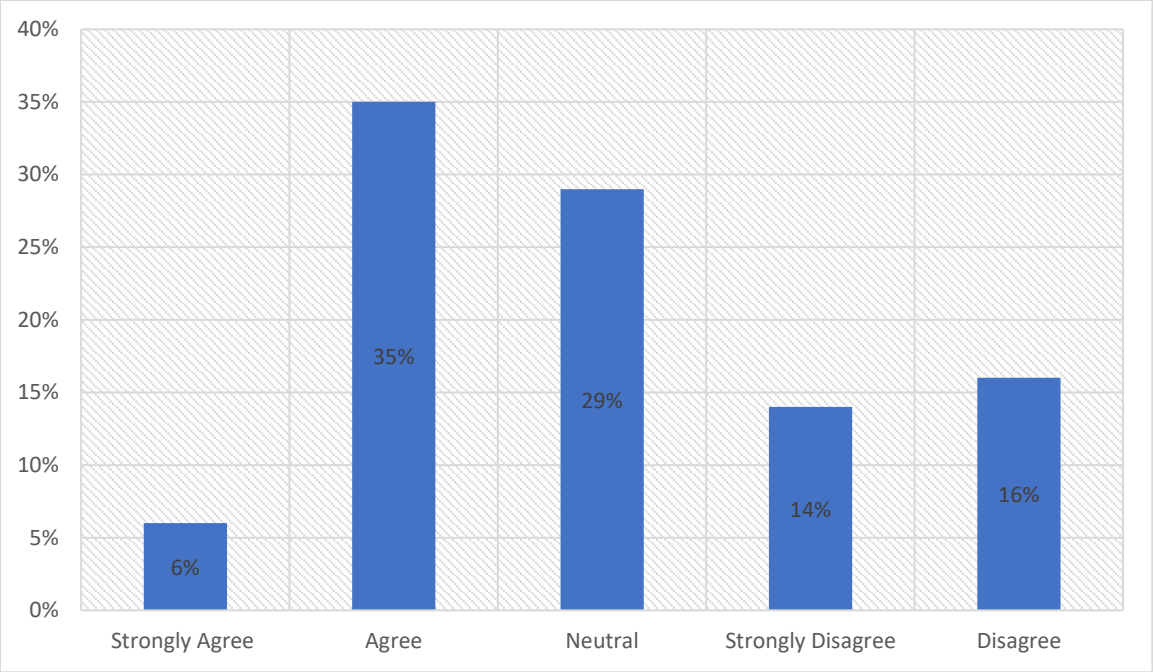


Table and Figure 4.21 shows that 9 respondents representing a proportion of 10% reported that they strongly agreed that they are satisfied with their daily allocated workload, this is followed by 26 respondents representing 29% proportion who indicated that they agreed with the statement, 25 respondents representing 27% proportion of the sampled population indicated that they were unsure about the statement above, and 18% respondents indicated that they strongly disagreed with the statement. Lastly, 16% of the sampled respondents indicated that they disagreed with the statement. The above factor scored between 0.720 which are deemed to reveal reliability and consistency between the constructs as they were grouped in the factor analysis.

Table 4.22: I have flexible working hours.

		Frequency	Valid Percent	Cumulative Percent	Cronbach's Alpha
Valid	**Strongly Agree**	5	6%	6%	.811
	Agree	32	35%	41%	
	Neutral	26	29%	70%	
	Strongly Disagree	13	14%	84%	
	Disagree	15	16%	100%	
	Total	**n=91**	**100%**	**100%**	

Figure 4.22: I have flexible working hours.

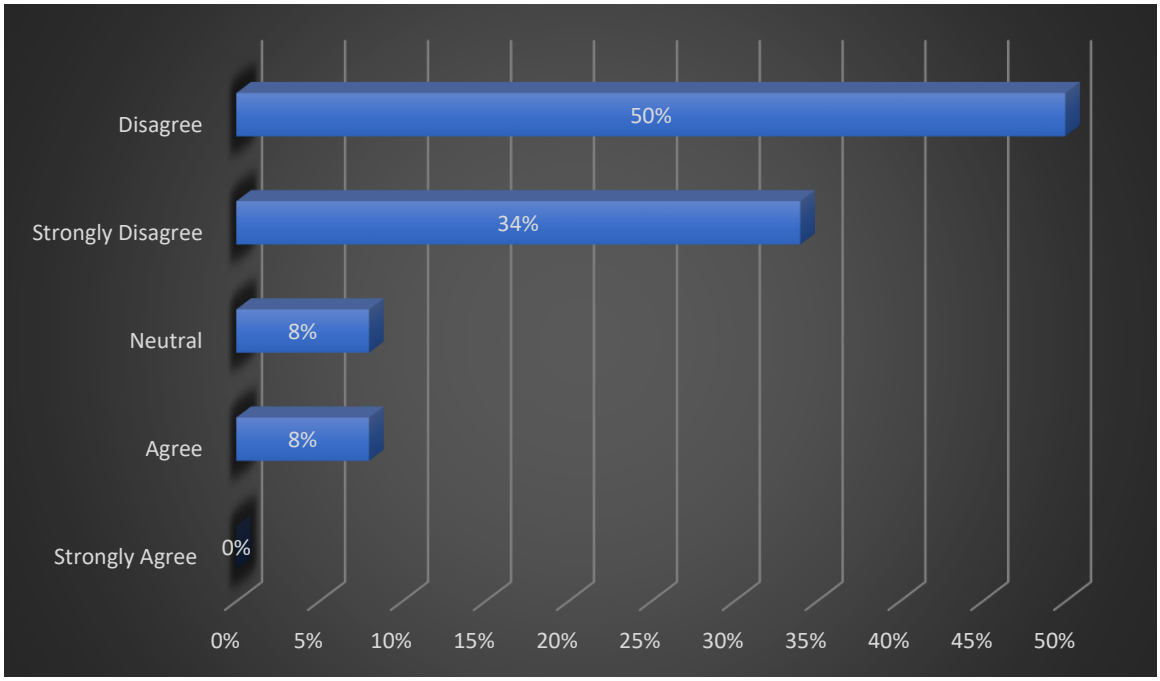


The statement required the participants to state whether they have flexible working hours or not, from the data above a total of 6% of the respondents stated that they strongly agreed with the statement, whilst 35% of the participants stated that they only agreed with the statement. Only 29% of the sampled respondents indicated that they were unsure about the statement. When requested to state whether they have flexible working hours or not, 14% stated that they strongly disagreed with the statement, whilst only 16% stated that they just disagreed with the above statement. The above factor scored between 0.811 which are deemed to reveal reliability and consistency between the constructs as they were grouped in the factor analysis.

Table 4.23: I have a well-furnished tea/dining/rest room.

		Frequency	Valid Percent	Cumulative Percent	Cronbach's Alpha
Valid	**Strongly Agree**	0	0%	0%	.814
	Agree	7	8%	8%	
	Neutral	7	8%	16%	
	Strongly Disagree	31	34%	50%	
	Disagree	46	50%	100%	
	Total	**n=91**	**100%**	**100%**	

Figure 4.23: I have a well-furnished tea/dining/rest room.

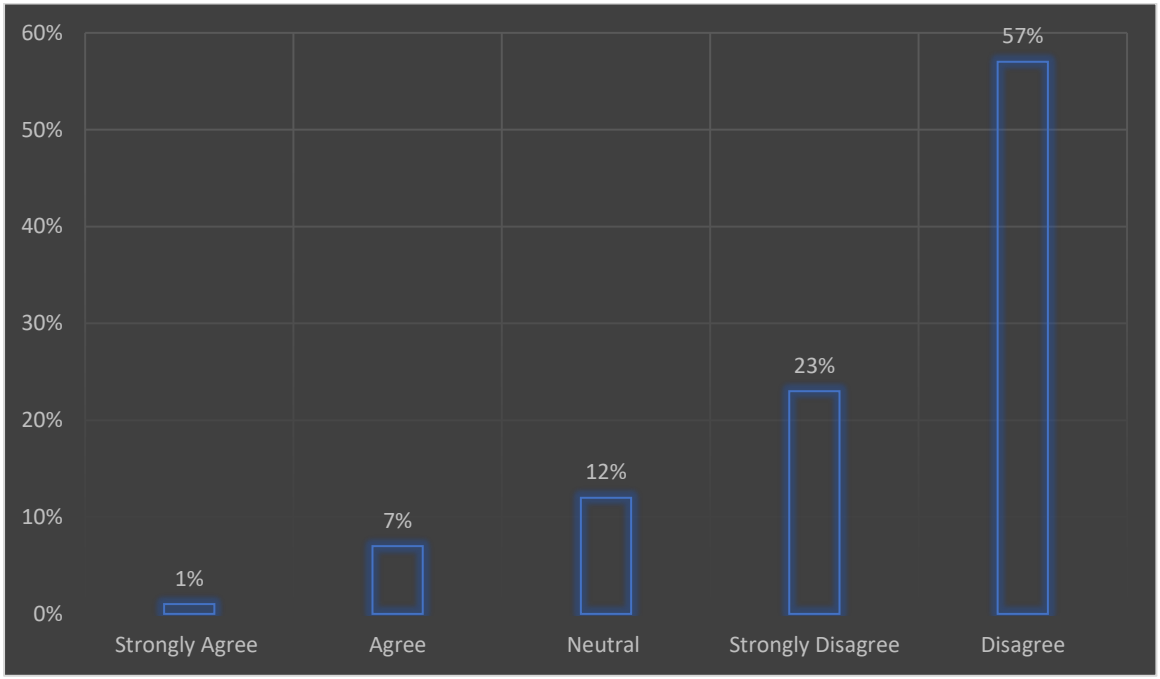


The statement required the participants to state whether they have a well-furnished tea/dining/rest room within the organisation, the table above illustrates that 0% of the respondents strongly agreed with the statement, while 8% of the respondents indicated that they agreed with the above statement, whilst a total of 8% pointed out that they were unsure of the variable being present or not. On one end 34% of the sampled population strongly disagreed with the statement and the remaining 50% strongly disagreed with the statement. The above factor scored between 0.814 which are deemed to reveal reliability and consistency between the constructs as they were grouped in the factor analysis.

Table 4.24: There is a descent canteen/coffee shop that provides sit in, take away and delivery services.

		Frequency	Valid Percent	Cumulative Percent	Cronbach's Alpha
Valid	**Strongly Agree**	1	1%	1%	.846
	Agree	6	7%	8%	
	Neutral	11	12%	20%	
	Strongly Disagree	21	23%	43%	
	Disagree	52	57%	100%	
	Total	**n=91**	**100%**	**100%**	

Figure 4.24: There is a descent canteen/coffee shop that provides sit in, take away and delivery services.

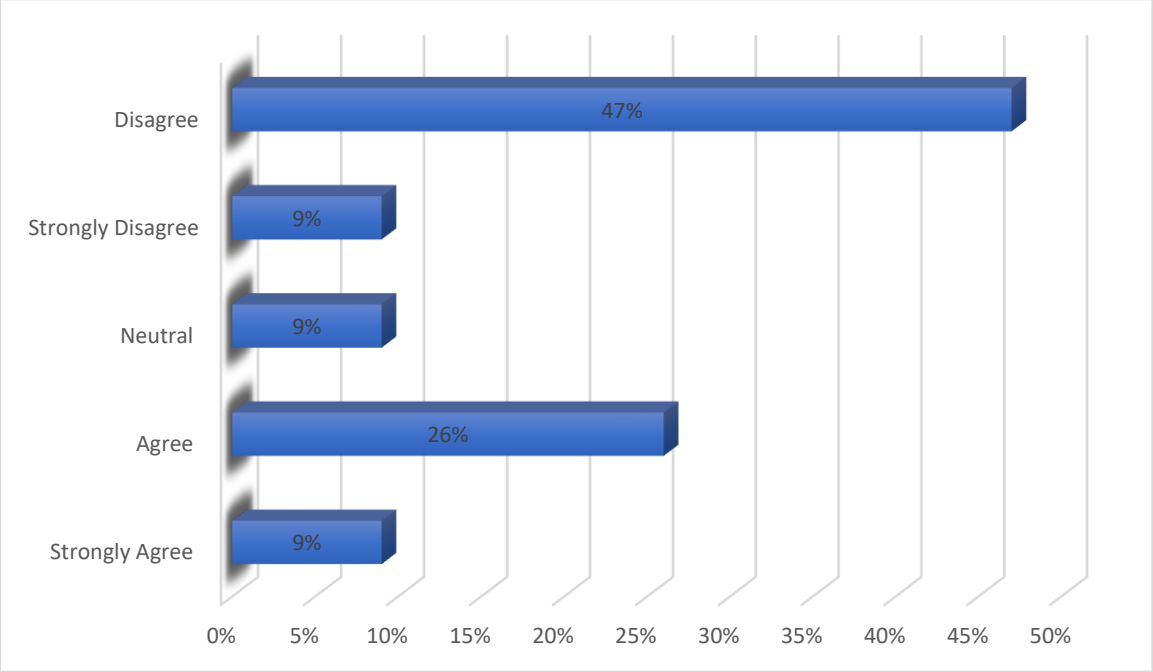


As illustrated in Table and Figure 4.24 above, 1% of the research participants stated that they strongly agreed with the notion that there is a decent canteen/coffee shop that provides sit in, take away and delivery services, 7% of the research respondents indicated that they agreed with the statement. Whilst a total of 12% remained neutral about the statement above, and 57% disagreed with the statement, the remaining 23% are those who strongly disagreed with the statement. The above factor scored between 0.846 which are deemed to reveal reliability and consistency between the constructs as they were grouped in the factor analysis.

Table 4.25: I have a parking space/well demarcated parking bay.

		Frequency	Valid Percent	Cumulative Percent	Cronbach's Alpha
Valid	**Strongly Agree**	8	9%	9%	.896
	Agree	24	26%	35%	
	Neutral	8	9%	44%	
	Strongly Disagree	8	9%	53%	
	Disagree	43	47%	100%	
	Total	**n=91**	**100%**	**100%**	

Figure 4.25: I have a parking space/well demarcated parking bay.

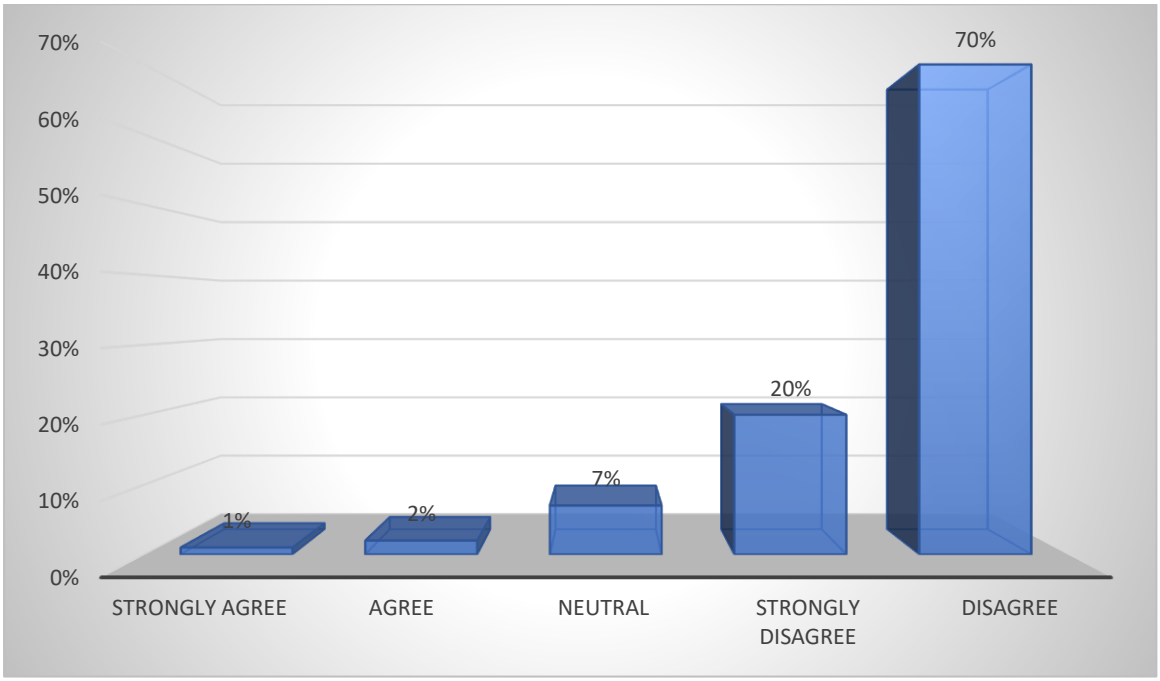


The data above in Table 4.25 revealed that 9% of the respondents strongly agreed to the fact that they have a parking space/well-demarcated parking bay, whilst 26% agreed with the statement, 9% of the sampled population choose to remain neutral about the statement, and a total of 47% strongly disagreed with the above statement, and only 9% disagreed. The above factor scored between 0.896 which are deemed to reveal reliability and consistency between the constructs as they were grouped in the factor analysis.

Table 4.26: Child care facilities are available.

		Frequency	Valid Percent	Cumulative Percent	Cronbach's Alpha
Valid	**Strongly Agree**	1	1%	1%	.842
	Agree	2	2%	3%	
	Neutral	6	7%	10%	
	Strongly Disagree	19	20%	30%	
	Disagree	63	70%	100%	
	Total	**n=91**	**100%**	**100%**	

Figure 4.26: Child care facilities are available.

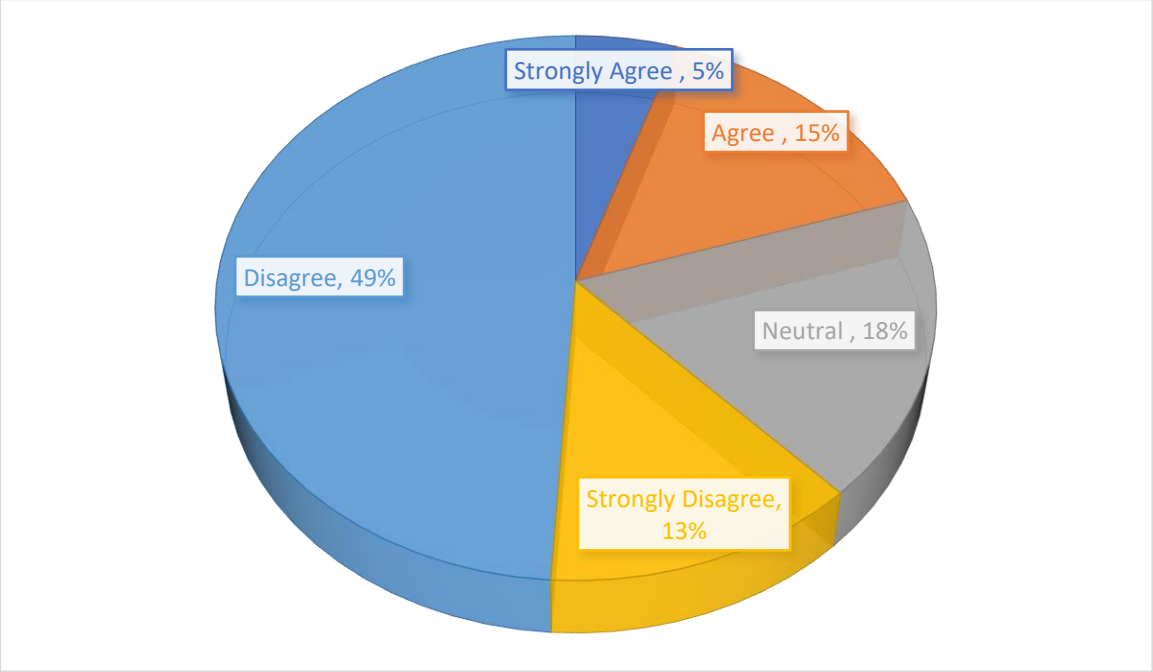


As established in Table and Figure 4.26 above, 1% of the respondents strongly agreed that child care facilities are available within the organisation. This followed by a proportion of 2% recording that they agreed with the above statement, 7% recorded that they were unsure of the statement, with a total of 20% who stated that they strongly disagreed with the statement, and 70% of the respondents indicated that they disagreed with the statement. The above factor scored between 0.842 which are deemed to reveal reliability and consistency between the constructs as they were grouped in the factor analysis.

Table 4.27: Physical wellness programmes (aerobics/gyms) are accessible.

		Frequency	Valid Percent	Cumulative Percent	Cronbach's Alpha
Valid	**Strongly Agree**	4	5%	5%	.806
	Agree	14	15%	20%	
	Neutral	16	18%	38%	
	Strongly Disagree	12	13%	51%	
	Disagree	45	49%	100%	
	Total	**n=91**	**100%**	**100%**	

Figure 4.27: Physical wellness programmes (aerobics/gyms) are accessible.



As illustrated in Table and Figure 4.27 above, 5% of the research participants stated that they strongly agreed that physical wellness programmes (aerobics/gyms) are accessible, while 15% of the sampled population indicated that they only agreed with the statement above. The primary findings also indicated that 18% of the respondents remained uncertain or neutral, whilst 49% stated that they disagree with the statement and the remaining 13% strongly disagreed. The above factor scored between 0.842 which are deemed to reveal reliability and consistency between the constructs as they were grouped in the factor analysis.

Table 4.28: Employee safety and security is always promoted in the work place.

		Frequency	Valid Percent	Cumulative Percent	Cronbach's Alpha
Valid	**Strongly Agree**	2	3%	3%	.921
	Agree	26	28%	31%	
	Neutral	23	25%	56%	
	Strongly Disagree	18	20%	76%	
	Disagree	22	24%	100%	
	Total	**n=91**	**100%**	**100%**	

Figure 4.28: Employee safety and security is always promoted in the work place.

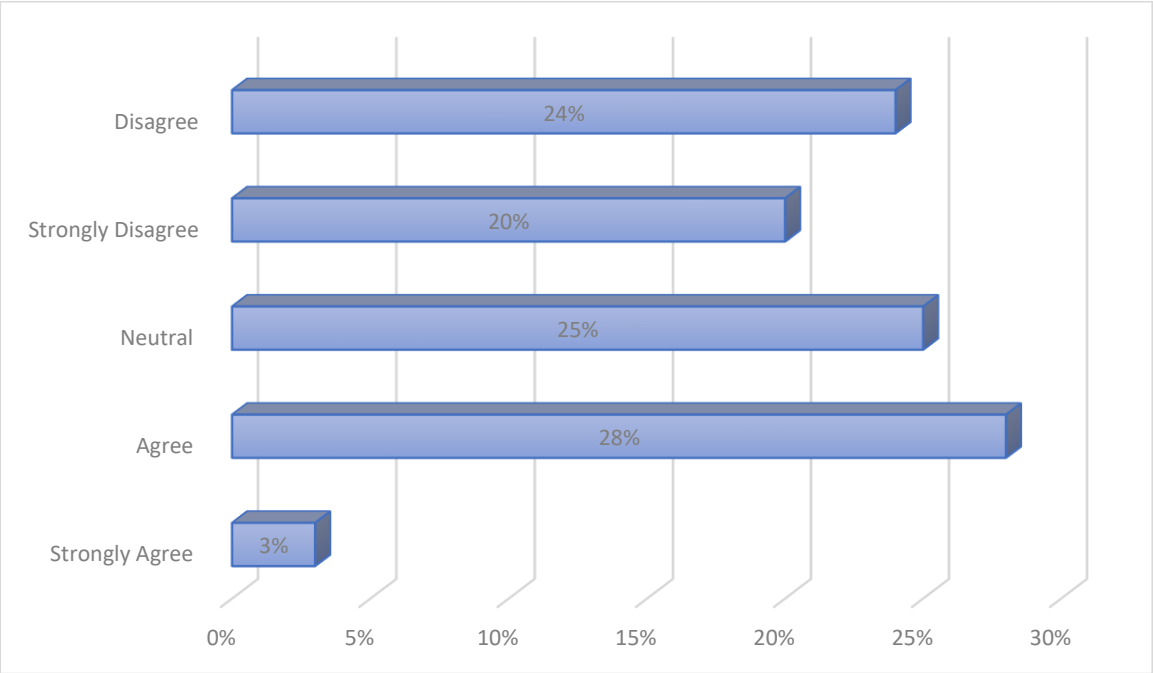
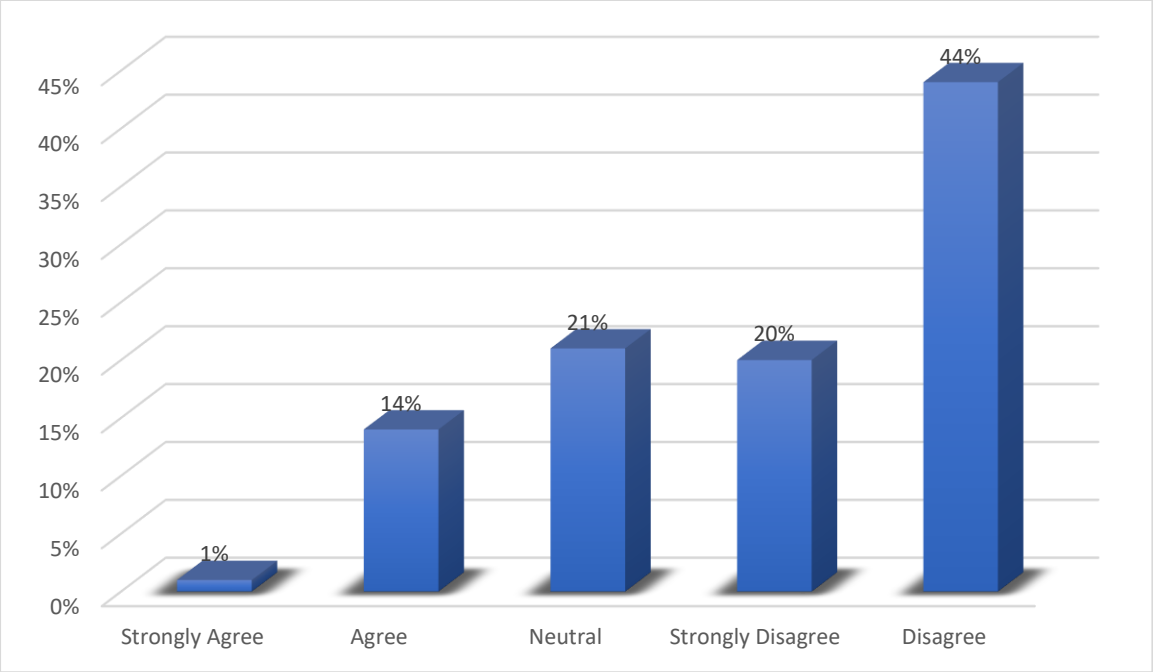


Table and Figure 4.28 above indicates that employee safety and security is always promoted in the workplace, a small proportion of 3% strongly agreed with the statement and a large proportion of 28% of the respondents agreed with the statement. Nevertheless, 25% of the respondent indicated that they were unsure about the above statement, whilst a total of 20% strongly disagreed with the statement and the remaining 24% indicated that they disagreed with the statement. The above factor scored between 0.921 which are deemed to reveal reliability and consistency between the constructs as they were grouped in the factor analysis.

Table 4.29: Team building workshops/exercises are available.

		Frequency	Valid Percent	Cumulative Percent	Cronbach's Alpha
Valid	**Strongly Agree**	1	1%	1%	
	Agree	13	14%	15%	.616
	Neutral	19	21%	36%	
	Strongly Disagree	18	20%	56%	
	Disagree	40	44%	100%	
	Total	**n=91**	**100%**	**100%**	

Figure 4.29: Team building workshops/exercises are available.



As illustrated in Table and Figure 4.29 above, 1% of the research respondents stated that they strongly agreed that team building workshops/activities were available, followed by a proportion of 14% of the respondents stating that they agreed with the statement. Whilst 21% of the respondents indicated that they were unsure of the statement, with 20% indicating that they strongly disagreed with the statement. The remaining 44% stated that they disagreed with the statement. The above factor scored between 0.616 which are deemed to reveal reliability and consistency between the constructs as they were grouped in the factor analysis.

Table 4.30: I am involved / engaged in organisations meetings.

		Frequency	Valid Percent	Cumulative Percent	Cronbach's Alpha
Valid	**Strongly Agree**	6	7%	7%	
	Agree	30	33%	40%	.839
	Neutral	25	27%	67%	
	Strongly Disagree	13	14%	81%	
	Disagree	17	19%	100%	
	Total	**n=91**	**100%**	**100%**	

Figure 4.30: I am involved / engaged in organisations meetings.

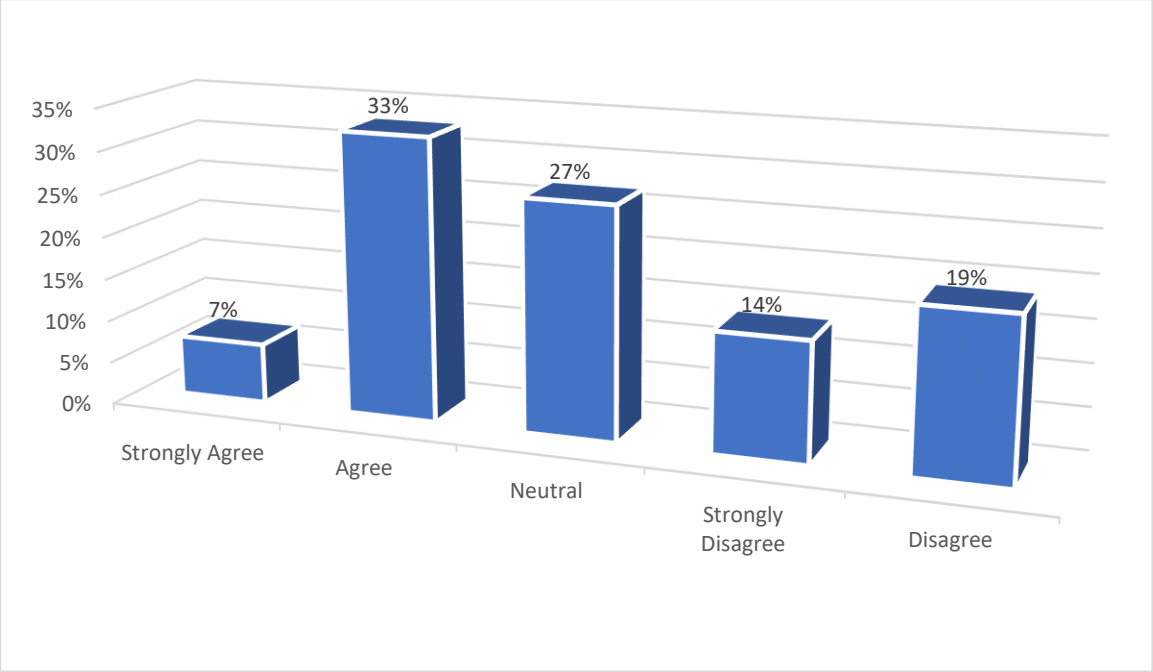


Table and Figure 4.30 above indicated the percentage of respondents who strongly agreed with the statement was at 7%, whilst a majority of the respondents 33% agreed with the statement that employees are involved/engaged in organisations meetings. A total of 14% indicated that they strongly disagreed with the statement above and 19% stated that they disagreed. The remaining 27% of the respondents indicated that they were unsure of the statement above. The above factor scored between 0.839 which are deemed to reveal reliability and consistency between the constructs as they were grouped in the factor analysis.

4.6 Section D

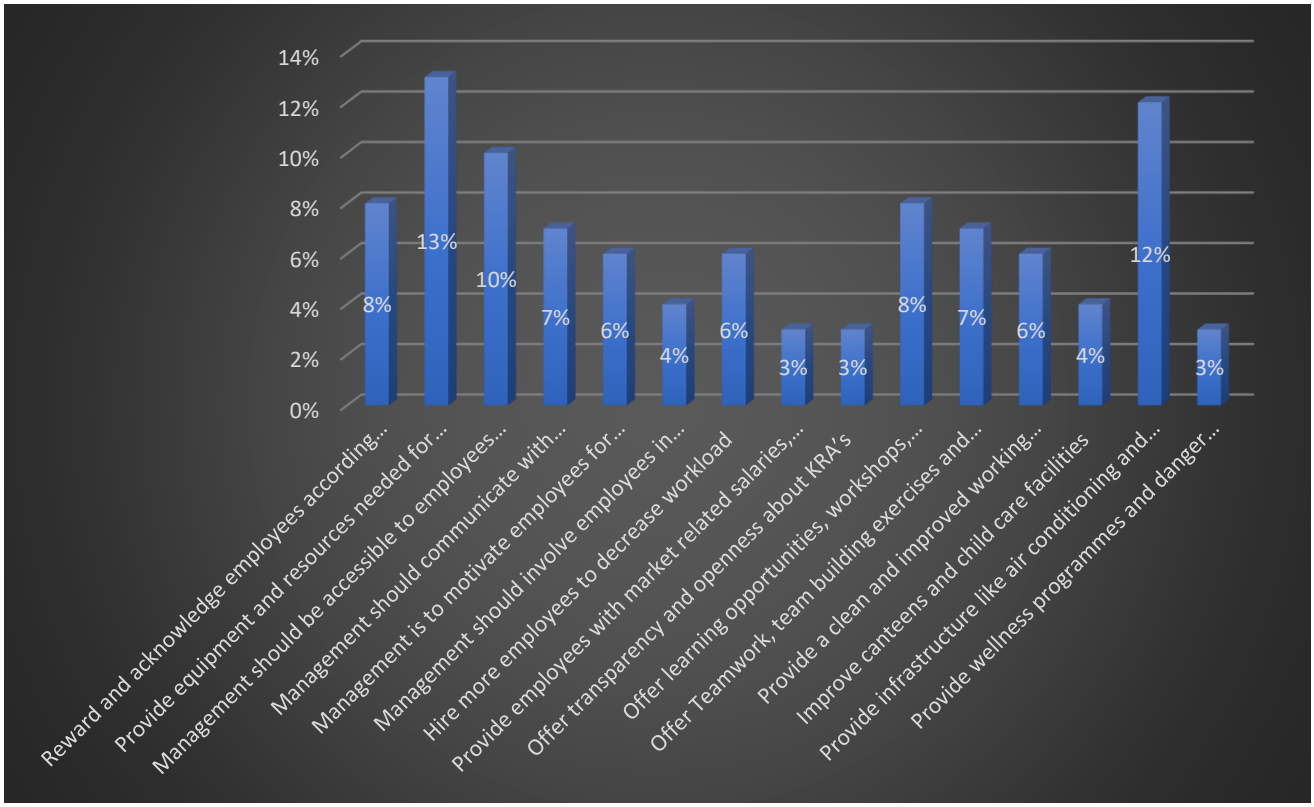
For improving job satisfaction of employees in your organisation, what suggestion(s)/recommendation(s) would you make?

Table 4.31: Recommendations

Recommendation	Frequency	Percentage	Cumulative percentage
Reward and acknowledge employees according to their performance	8	8%	8%
Provide equipment and resources needed for employees to carry out tasks	12	13%	21%
Management should be accessible to employees and offer a more democratic leadership style	9	10%	31%
Management should communicate with employees	6	7%	38%
Management is to motivate employees for increased morale	5	6%	44%
Management should involve employees in meetings and day to day running' and delegate tasks	4	4%	48%
Hire more employees to decrease workload	5	6%	54%
Provide employees with market related salaries, incentives, rewards and promotions	3	3%	57%

Offer transparency and openness about KRA's	3	3%	60%
Offer learning opportunities, workshops, training and updated scopes of practice for employee development	7	8%	68%
Offer Teamwork, team building exercises and accountability	6	7%	75%
Provide a clean and improved working environment to be conducive	5	6%	81%
Improve canteens and child care facilities	4	4%	85%
Provide infrastructure like air conditioning and safe parking bays closer to the place of employment	11	12%	97%
Provide wellness programmes and danger allowances	3	3%	100%
Total	**n=91**	**100%**	**100%**

Figure 4.31: Recommendations



The table and figure above indicate that only 8% of participants stated that they wanted management to reward and acknowledge employees according to their performance, whilst those that wanted management to provide equipment and resources needed for employees to carry out tasks was 13%. Those that indicated that management should be accessible to employees and offer a more democratic leadership style was at 10% and those that stated that management should communicate with employees was at 7%. The data in the table above indicated that management has to motivate employees for increased morale was represented by 6% and those that indicated that management should involve employees in meetings and day to day running' and delegate tasks was at 4%.

The table and figure 4.31 further indicates that some respondents were of the notion that management hiring more employees to decrease workload by 6% and those that indicated that they wish for management to provide employees with market-related salaries, incentives, rewards and promotions were 3%. Some respondents at 3% indicated that they need management to offer transparency and openness about KRA's, whilst some needed to be offered learning opportunities, workshops, and training and updated scope of practice for employee development at 8%. Certain

respondents stated that they recommend teamwork, team-building exercises and accountability at 7% and those that indicated that they want to be provided with a clean and improved working environment to be conducive at 6%. A total of 4% indicated that they wanted improved canteens and availability of child care facilities and those that indicated the need to be provided with infrastructures like air conditioning and safe parking bays closer to the place of employment at 12%, whilst the remaining 3% indicated that they want to be provided with accessible wellness programmes and danger allowance sat 3%.

4.7 Conclusion

The quantitative data gathered by the questionnaire were presented and analysed in the previous sections according to the research aims. The responses that recorded high mean ranges were considered as specific values of references or markers for interpretation. To get an overview of the most outstanding responses, this section concluded with a comparison of the responses that obtained different statistical groupings of relevance to this research.

In this chapter, information was presented based on findings from the research done on the level of job satisfaction among employees at Madadeni Regional Hospital, KZN. The research data was collected mainly using questionnaires with each questionnaire divided into four sections. Each of the sections in the questionnaire highlight important data which assisted in recommending an effective way of improving job satisfaction of employees in your organisation.

The next chapter provides a discussion on the findings. The key findings are discussed and recommendations are made for practice and further research.

Chapter Five: Conclusions and Recommendations

5.1 Introduction

In this chapter, the results are discussed based on the study aims and objectives related to an investigation into the level of job satisfaction among employees at Madadeni Regional Hospital, KZN. The study aimed to investigate the level of job satisfaction among employees at Madadeni Regional Hospital, KZN. The objectives of the study were, to determine the current level of job satisfaction among employees at Madadeni Regional Hospital, KZN, identify variables that promote job satisfaction, identify variables that hinder job satisfaction among employees and make recommendations to KZN Madadeni Regional Hospital management on issues that contribute significantly to employee morale and motivation to improve job satisfaction. In addition, the study limitations, recommendations and the need for future research are proposed in this chapter.

5.2 Findings from the Study

5.2.1 The current level of job satisfaction among employees of Madadeni Regional Hospital, KZN

This study indicated the lowest job satisfaction (mean score) for employees. The proportion of job satisfaction rate was at (38%) among employees with a total of (36%) of those who decided not to answer the variable with 26% dissatisfied employees (Table 4.1). The working environment within the hospital could be perceived to be not so good, this is in proportion to (44%) participants who indicated that they did not perceive their work environment as relaxed and comfortable. The other explaining factors might be a low salary (proportionate to working hours) in comparison to colleagues working in the private sector, favourable and safe working conditions, continuous training, staff development, employee retention, availability of human and material resources, et cetera. The access to resources such as a functional heating and cooling system, furniture, computers and printers was highly limited which restricted their overall satisfaction with the working environment.

This study found that the proportion of employees who were satisfied with their allocated workload was only (39%). However, (34%) had an excessive workload which

could be the reason for dissatisfaction as too much workload leads to the pressure of work and burn out. Excessive workload could be related to the increased attrition rate of frontline workers due to the reasons such as resignations, death, medical boarding, dismissal, perceived poor lack of job satisfaction, migration to the private sector and other countries and low morale (DoH, 2009:05). It could also be related to the KZN Provincial Treasury (DoH) which placed a moratorium on the filling of all posts in all Departments with effect from 29 October 2009. However, the executive authority could approve the filling of essential/critical posts only. It is only the posts funded through conditional grants and other donor funding which were exempted from this moratorium, and all other posts that were not considered essential/critical were frozen (DoH, 2009; DoH, 2011). Essential/scarce occupational class were Professional Nurses, Medical Officers, Specialist, Registrar Pharmacist and Radiographers. Furthermore, Professional Nurses who had resigned were not employed directly by the institution however their employment rested on the approval by the Head of the Department of Health after a motivation by the institution (DoH, 2016).

The above had a negative impact on staffing levels especially nursing categories that were excluded, for example, Enrolled Nurses, Enrolled Nursing Assistants, Support Staff such as Allied Health Workers, General and Administration Staff. As there was a shortage of this category of employees some of their duties were then done by nurses and doctors leading to overstretching and excessive workload. Health HR have a significant role in delivering healthcare services to the population. Health planners and policymakers should guarantee that an adequate number of workforce with required competencies is in place at the right time. The Workload Indicators of Staffing Need (WISN) method is a human resource management tool that provides health managers with an evidence-based approach with an objective in establishing staffing levels (WHO, 2015).

According to the current findings, when it comes to an open communication/ transparency and information sharing culture, only (29%) of the respondents were positive, (41%) were not in agreement, whilst (30%) were neutral (Table 4.5). Poor vertical communication is seen as a barrier to effective strategic alignment (Kibe, 2014:04). Effective communication is one of the important prerequisites for strategic alignment to succeed Executive, Middle and Operational Management should communicate better with their teams. Constant communication is the key for both

building relationships and ensuring that important information is made available and all employees are updated on important news.

Most participants (46%) were dissatisfied with staff training and development opportunities offered in their workplace and only (34%) were satisfied that they were offered training and development opportunities (Table 4.7). It is important that the organisation gives employees the opportunity to learn and develop as this creates a positive work environment, which in turn, supports business strategy as well as motivates and retains current employees. Studies have shown that training and development has a significant positive impact on employee job satisfaction (Kossivi *et al*., 2016:262).

The survey of the past studies demonstrated that there are numerous results and impacts on the relationship between training and development and job satisfaction (Al-Alawi *et al*., 2016:03; Noe *et al*., 2017:288). Research states that training and development is a learning practice that can assist workers to grow their ability and knowledge for improved performance (Warnich *et al.,* 2015:342).

Results in the current study also indicated that (73%) of staff had not received continuous computer training skills and this could be concerning at this time of expansive information technology and in the era of the Fourth Industrial Revolution (Table 4.8). In the study conducted at PHC facilities, data sources revealed that those at PHC facility levels felt inadequately prepared to use the computer because of a lack of computer skills and this was cited as a major setback as they had to learn these new technical skills (Ravhengani & Mtshali, 2017).

5.2.2 Variables that promote job satisfaction within Madadeni Regional Hospital

Salaries and Benefits

Most participants (40%) were dissatisfied, while (33%) were satisfied with their pay in comparison to their work assignments (Table 4.11). The satisfaction rate for additional incentives/bonuses was (48%) and (34%) dissatisfaction with incentives and bonuses.

Maslow's Hierarchy of Needs Theory regards a comfortable salary as the Physiological need, which is basic and needs to be satisfied first, so when somebody has a satisfactory salary, all other basic needs can be afforded. The results are supported by Khunou and Davhana-Maselesele (2016:08) who found that 88% of Nurses in North West Province were dissatisfied with their salaries. Poor salaries and remuneration lower employees job satisfaction, level of professionalism, performance and promotes frustration and dissatisfaction (Dhurup *et al*., 2014:83).

5.2.3 Variables that hinder job satisfaction within Madadeni Regional Hospital Employees

5.2.3.1 Working conditions

The majority of respondents (44%) were dissatisfied and (30%) were satisfied with working conditions (Table 4.16). Maslow's Hierarchy of Needs Theory classifies the pleasant working environment as a basic need that must be provided by the employer. However, the Herzberg's Two Factor Theory ranks working conditions as a Hygiene Factor that plays a role in making employees feeling satisfied with their jobs and is important in the workplace because if missing, the likelihood of employees being dissatisfied will rise (Kapur, 2018:05). The results of the current study therefore confirm, or are in line with Herzberg Two-Factor Theory, as (44%) of the respondents were not satisfied with their working conditions.

The low satisfaction rate of (8%) and high dissatisfaction rate of (84%) for a well-furnished tea/dining/restroom needs urgent consideration by management (Table 4.23). The explaining factors for dissatisfaction could be a lack of a decent canteen/coffee shop that provides sit in, take away and delivery services as the dissatisfaction rate was (80%) and satisfaction rate (8%) (Table 4.24). Dissatisfaction with the availability of parking space rated (56%) and satisfaction rate (35%) (Table 4.25). Maslow's Hierarchy of Needs ranks the above as self-esteem needs that entail respect and recognition (Reukauf 2018:15).

Lack of workplace amenities could be the factor that contributed to dissatisfaction among employees. This was demonstrated by (83%) dissatisfaction rate with workstations and offices that operated without functional heating and cooling system

which facilitate ventilation. Too much heat as well as too much cold has an adverse effect on the health and comfort of the employees.

Fifty-seven percent (57%) dissatisfaction with offices and workstations that were not fully-furnished with functional telephone, computer, printer and scanner. Twenty-two (22%) of the respondents were satisfied with the above amenities. This, as well, should be a great concern to the management as with modern times, communication, training, e-learning, personal file registration and record-keeping are done electronically. Employees often prefer to work in a comfortable, clean, safe modern and well-equipped environment, as well as in good conditions characterised by appropriate temperature, lighting, and free from noise pollution (Kupur, 2018:05). Employees working in an organisation with poor working conditions or environment are often depressed, demoralised and dissatisfied with their jobs (Raziq & Maulabakhsh, 2015:724).

Most employees were dissatisfied with safety and security in their working environment. Forty-four (44%) and only (31%) were satisfied (Table 4.28). This could be a contributory factor to a poor working environment. Safety and security is the second level of needs according to Maslow's Hierarchy of Needs, which needs to be satisfied once the basic and lower-level needs have been satisfied (Xu, 2015:13). Employees need good working environments to function optimally. The DoH guide on retention of employees in KZN (DoH, 2009) as effective from 01 January 2010, stated that managers have a responsibility to look after the welfare of employees, provide good working conditions and provide the necessary material or resources.

Most employees were not satisfied (45%) with the availability of supplies and equipment needed to perform daily allocated duties and responsibilities effectively, whereas (32%) were satisfied and (23%) were neutral (Table 4.19). This should be of great concern to the management of Madadeni Regional Hospital as the organisation needs to develop a strategy for providing supply chain management services, to observe Just-in-Time principles. Most organisations are focusing on the implementation of Six Sigma and Lean Six Sigma Principles in hospitals (Honda *et al*., 2018:70). Six Sigma has become a successful approach for organisations that want to achieve operational excellence and high standards of quality (Barrios & Jiménez, 2016). In the study that was conducted in a district hospital in the Mpumalanga

province, factors such as the critical shortage of medical equipment, either due to unavailability or non-functioning, were considered a barrier to the ability of the health system to deliver quality health services (Moyimane *et al*., 2017). Forty-eight percent (48%) stated that the equipment and supplies were not of good quality and were not maintained and serviced as per the service plan. Thirty percent (30%) were satisfied with the quality and maintenance of the equipment and twenty-two percent (22%) were neutral. All of the above variables could have a negative impact on service delivery. The National Core Standards of Health Establishments in South Africa requires that medical equipment be maintained according to manufactures requirements to keep the equipment reliable, safe and available for use when required for diagnostics, treatment and monitoring of patients (NCS, 2011).

5.2.3.2 Team Morale

Everitt (2020) highlighted reasons why team morale is important and those include, improved productivity, improved performance and creativity, reduced leave days, higher attention to details, safer workplace and increased quality work.

The current study indicated that (49%) participants had high team morale in their departments against (32%) who reported low morale and (19%) who were neutral. Morale can have detrimental effects on the organisation's productivity. According to Everitt (2020), issues like high absenteeism, customer complaints, poor attitude, and poor work quality are the consequences of low morale in the workplace. Sixty-four percent (64%) of participants revealed that team building workshops and exercises were not available, (33%) of the respondents agreed on not being involved in the organisation's meetings, whereas (40%) were involved. This is also concerning as organisational meetings are a platform for disseminating information and also essential for teamwork.

5.2.3.3 Work-Life Balance

Work-Life Balance is defined as an individual's ability to meet work and family commitments as well as none work responsibilities and activities (Talukder *et al*., 2019). Work-Life Balance is also attracting increasing scholarly attention for its potential to advance positive outcomes for both individuals and organisations (Priya, 2017:39). Work-family conflict refers to that conflict that arises as a result of the interference of work demands with that of family demands. Prolonged work schedule,

rotational shifts, work pressure and job stress were the root causes of work-family conflict (Priya, 2017:40). Work-family conflict reduces the work-life balance of its employees.

Thirty percent (30%) of participants did not agree that they had flexible working hours, (41%) agreed that they had flexible working hours. This could be associated with the fact that Doctors, Nurses, Radiographers and Pharmacists have a prolonged work schedule and they also do rotational shifts. The results are in agreement with the findings of the study conducted by Raza (2017) that highlighted the challenges and enhancers for work-life balance amongst working women working in the IT and Education sector, which found extended and odd working hours as a challenge. Most women preferred to have flexible times and a conducive work environment (Raza, 2017:207). Child care facilities are not available within the facility, notwithstanding the fact that the healthcare sector is dominated by women. The guide on the retention strategy of employees states that managers are charged with the responsibility to look after the welfare of their supervisees, which include, providing crèche facilities (DoH, 2009:11). The researcher agrees with the above retention strategy as proposed by the DoH. Furthermore, Dhavala *et al*. (2019:128) points out that the majority of female staff live in nuclear families and have a greater responsibility of bringing up their children. Therefore, the availability of childcare facilities within the institution will assist with childcare responsibility.

Wellness programmes through the establishment of the Employee Assitance Programme (EAP) officers demonstrate the commitment of the DoH in creating a good working environment. The intention is to help workers as both employees and human beings (DoH, 2009). This study demonstrated that aerobics/gyms were not accessible to (62%) of employees. Only (20%) agreed to have access. This could be due to the fact that nurses, doctors and some clinical support staff work long shifts as well as rotational shifts and could not fit in the set schedule.

It was found that dependent variable job satisfaction had a positive relation with independent variables communication in Figure 4.5 which indicates that (41%) of employees were not satisfied with the organisation's information culture, variable benefits in Figure 4.11 indicates that (33%) employees were not satisfied with additional benefits, Figure 4.23 on working conditions indicated that (84%) of

employees were not satisfied with working conditions, as well as Figure 4.18 on the working environment which indicated that (56%) of employees were not satisfied with their workstation. Figure 4.19 indicated that (55%) employees were not satisfied with the availability of working tools, Figure 4.29 indicated that (64%) employees were not satisfied with the availability of team-building exercises. This indicates that there are several variables that hinder job satisfaction among employees at Madadeni Regional Hospital. A negative correlation was noted with independent variables, Figure 4.14 organisational supervision system indicated that (40%) of the respondents were dissatisfied with supervisors' supervision, Figure 4.21 indicated that (34%) employees were dissatisfied with the workload, Figure 4.10 indicated that (40%) employees were not satisfied with their pay/salary and Figure 4.7 indicated that (46%) of the respondents were dissatisfied with their career prospects. The results are in agreement with the study conducted by Khonou and Davhana-Maselesele (2016:08) which revealed that (87%) of nurses were dissatisfied with their working conditions and working environment which included a lack of clean working environment, inadequate equipment and supplies. The results were further supported by Khunou and Davhana-Maselesele (2016:08) who found that (88%) of Nurses in the North West Province, in South Africa were dissatisfied with their salaries.

5.3 Findings from the Literature Review

Raziq and Maulabakhsh (2015:724) described the work environment as "the totality of all factors that influence satisfaction and performance" including factors making an environment psychologically and physically healthy. These factors have been positively linked to the work environment, job satisfaction and retention among acute care nurses (Noe *et al*., 2017). Chen and Fang (2016) studied the correlation between the nursing work environment and nurse burnout, job satisfaction in the Western region of Mainland China. The result of the study supports that the nursing work environment affects nurse burnout, job satisfaction, and turnover intention. Khan and Jan (2015:17) examined nurse intentions to remain employed reporting higher intentions of leaving the job related to organizational commitment and stress.

The theories that were presented in Chapter two indicated the complex nature of the relationship between motivation, job satisfaction and job performance, such that different components of the work environment cannot be viewed one-dimensionally

(Smit *et al*., 2016). Furthermore, the nature of motivation, concerning job satisfaction and job performance, was explained, including the measurement of job satisfaction.

Various theories exist on what motivates employees and on how one could employ such findings to enhance the employees' motivation in terms of improving levels of job satisfaction (Hopper, 2020:01). The content theories of motivation explain the underlying forces of why people (i.e., 'respondents', in the present study) tend to have different needs at different times (Badubi, 2017:04).

The content theories of motivation, particularly Maslow's Hierarchy of Needs Theory, and Herzberg's Two-Factor Theory assume the existence of a direct relationship between motivation and job satisfaction. Herzberg differentiated between motivation and what moves employees. Moving people involves peoples' performance at work, primarily because they are paid as promised (using the carrot-and-stick approach) so that when the payment is withdrawn or reduced, the extent of satisfaction is reduced as well.

Due to the multiple needs that people have simultaneously, it is therefore impossible to satisfy all their needs at the same time. It is apparent that the motivation process deals with the unsatisfied needs of an employee. Such needs lead to a state of tension, which is followed by an unspecified amount of effort, depending on the extent of the pressure exerted to satisfy the need. The literature review's findings further indicated that motivation in the workplace is primarily seen as the driving force behind human behaviour in relation to their work (Salleh *et al*., 2016:02). In contrast, job satisfaction, as work behaviour, is primarily seen as being essential and significant for the attainment of employee effectiveness and efficiency.

5.4 Summary of Findings from the Primary Research

From the primary research findings, the statistics strongly indicated that the employees concerned were satisfied with the benefits, bonuses, well-structured orientation, and induction programme for new employees.

However, they were not satisfied with the working conditions and physical environment including the availability of amenities, safety and security, opportunities for training

and development, work-life balance, availability of good quality supplies and team morale.

The findings of this study are in agreement with the research done in the African countries which found that while monetary rewards were the backbone of employee retention, however, non-monetary rewards also enhance employee intrinsic motivation and affective commitment (Oleribe *et al*. 2019:397). Inadequate remuneration, substandard health care systems, limited training opportunities and daily security problems are also factors that contribute to brain drain and are the driver of the global shortage of health care workers (Aidalina & Aniza, 2015:53). Maphumulo & Bhengu (2019:02) are also in agreement with the notion that healthcare workers are faced with overwhelming patient loads, poor and unsafe working conditions, short-term medical supplies and technology.

The results of the study have useful implications for improved service delivery in the health sector. Thus, the top management of Madadeni Regional Hospital in KwaZulu-Natal could consider the results of the study to be important. Job satisfaction is very important and the management involved should strive to enhance the well-being and satisfaction of their employees.

Madadeni Regional Hospital, KZN management should see job satisfaction as part of the holistic workplace entity. Job satisfaction, as a single factor, cannot, on its own, result in employee non-performance. The recommendations that are provided hereunder are proposed to guide the top management of Madadeni Regional Hospital in KZN, to develop strategies, resolve problems, and improve the existing policies.

Furthermore, the study has indicated the importance of motivation and job satisfaction. Thus, it is essential for the top management of Madadeni Regional Hospital in KZN, to consider different ways of improving employee job satisfaction levels.

This study documented that (38%) of staff working in this public sector hospital were satisfied with their jobs, however, there is scope for further enhancement within a realistic range. Various factors of job satisfaction were defined along with their interrelation, supported by Maslow's Hierarchy of Needs Theory, as well as Herzberg Two-Factor Theory. Monitoring of job satisfaction could be undertaken on a regular basis to determine the factors that need improvement. By enhancing job satisfaction,

hospital managers can improve not only the mental, psychological and social well-being of the work-force, but also the financial health of an organisation. The researcher envisages sharing the results of the study with authorities in the DoH, UHERB and Management of Madadeni Regional Hospital with the hope that recommendations will be taken into consideration in the future.

5.5 Recommendations

The following recommendations were made:

5.5.1 DoH KZN Province

5.5.1.1 Strategy for the Retention of Personnel

The Human Resource Planning Component should monitor and evaluate whether the current retention strategy is efficient and effective. This could be done through analysis of staff satisfaction survey results, absenteeism, monitoring records, as well as staff exit interview records.

5.5.1.2 Staffing Levels

Standardise health worker patient ratio which will be used as a yardstick for measuring staffing levels.

5.5.1.3 Health Workforce Planning and Management

Develop an evidence-based framework for health workforce planning and management which have worked for a primary healthcare facility in KZN and other African continents (WISN) (WHO, 2015) to assess the present workforce needs for Madadeni Regional Hospital. According to the study conducted by Ravhengani & Mtshali (2017), the WISN method developed by WHO in 2016 (a) is reportedly one of the tools that can assist countries, including South Africa, in ensuring successful health workforce planning and management. (Namaganda *et al*., 2015:132). As indicated in other studies conducted in African regions, the government should ensure there is a budget and resources to ensure that effective WISN is in place (Namaganda *et al*., 2015:132; WHO 2016 (c)). A study conducted by Nayebi *et al*. (2017) in Iran revealed that there was a shortage in the number of nursing staff required for an emergency department of a general training hospital in Qazvin. For

instance, it was found that there were only 55 nursing staff members against the 63 that was required for effective service delivery. Additionally, work pressure was calculated to be 0.87, and that depicted a moderate burden of workload on current nursing staff (Nayebi *et al*., 2017).

5.5.1.4 Supply Chain Management

Monitor and evaluate if Supply Chain Management Policies operate on the basis of lean/JIT principles. There is also a need to align the Supply Chain Management practices with the five pillars of procurement guidelines, namely, value for money, open and effective competition, ethics and fair dealing, accountability and report, and equity.

5.5.1.5 Health Technology Services

Recommend availability of Health Technology Services on-site, to manage expensive and sophisticated equipment, provide technical support which includes maintenance of equipment and training of equipment user and operators. This will minimise the frequency of breakdowns and expenditure for spare parts, service and maintenance. Effective management of technology directly contributes to improved patient health outcomes and staff satisfaction (Palozzi *et al*., 2019:03).

5.5.2 Madadeni Regional Hospital Management

5.5.2.1 Compensation

As the result of the study indicated that (40%) of the employees were not satisfied with their salary and (27%) were neutral, therefore, policymakers must offer attractive salary packages to health care employees based on inflation. As much as it was seen from the literature that money is not a motivator, nor does it increase job satisfaction, however it is one of the tools that organisations use to attract, retain and satisfy employees.

5.5.2.2 Training and Development

The results of the study revealed that (73%) of the staff were not offered continuous basic computer training skills. The organisation should provide basic computer

training opportunities for the employees. According to the study, (46%) of the staff were not offered development opportunities.

- Strengthen the availability of a well-functional clinical/skills development department (Learning Curve) to establish modern ways of training employees.
- Offer mandatory training courses to staff, for example, Basic Life Support, Advanced Life Support, Health and Safety in the workplace, customer Care skills etcetera.
- Plan for training based on the employees needs in consultation with the HR department including leadership, administrative and computer skills etcetera.
- Invite and involve experts in various fields of training to make it fruitful.
- Organise workshops, webinars for employees, as well as attending conferences.
- Initiate quarterly clinical governance half days for all directorates as this is a learning opportunity.
- Motivate for an increase in the quotas for basic and post-basic courses also review the strategy used for selection of suitable candidates.

5.5.2.3 Communication

- Strengthen the culture of effective communication and information sharing with employees, meeting them at various forums, open lines of dialogues, either addressing the employees as a collective or as individuals so that employees can address any issues that may arise in the workplace.
- Promote open and healthy communication channels within all departments.

5.5.2.4 Team Building

- Introduce team building events that will be initiated at management level, inviting professional motivators as well as getting out of the institution. This way, employees could build a better relationship with management and co-workers, which may in turn increase job satisfaction levels of employees in the organisation.
- Encourage team-building events at departmental level to promote teamwork.

5.5.2.5 Safety and Security

- Upgrade the infrastructure to meet with safety standards.
- Urgently promote and prioritise the safety and security of employees, day and night by employing well-trained security personnel.
- Install and consistently monitor CCTV cameras in the wards and at all strategic points.

5.5.2.6 Working Environment

- Prioritise improving the current working conditions and provide all necessary amenities is of utmost importance.
- Improve existing infrastructure (colour, décor, design, furniture, heating and cooling systems) to help enhance job satisfaction among workers.
- Improve tea/rest/dining and canteen areas to promote rest and relaxation during breaks.
- Oversee that the canteen and tuck shop to serve healthy food and snacks.
- Provide water and drinks vending machines in all blocks.
- Provide functional basic working tools like computers. IT technician should be visible on-site for troubleshooting and maintenance.

5.5.2.7 Workload

- There should be written motivation for the filling of vacant posts for nurses, doctors and clinical support staff and all other employee categories to curb the shortage of staff and lessen the work overload.
- Motivate for a regulated staff bank within the institution where employed staff can apply to work overtime during their days off and during their annual leave (benchmark from other intuitions including private sector).
- Motivate short term contracted personnel to cover for planned maternity leave, study and vacation leave.

5.5.2.8 Work-Life Balance

- There should be buy-in and marketing of wellness project activities (gyms and yoga) so that they are accessed by nurses and doctors who work long hours and night duty.

- Create child care facilities within the institution.
- Facilitate the provision of ATMs for various banks within the institution.
- Facilitate the provision of launderette services for staff within the hospital.
- Organise staff shuttles for staff who stay far from work.
- Review the current duty schedule involving the staff and make changes where necessary to promote flexibility.
- Review the current system of leave planning and scheduling to accommodate quality work-life balance.
- Facilitate the provision of hairdressing as well as massage saloons within the institution.

The above constructs/suggestions should further be monitored by the executive management, who should recommend the appropriate changes to be made to the Provincial DOH to ensure that job satisfaction levels are sustained. Doing so could ultimately lead to an improvement in the current levels of employee satisfaction.

5.6 Future research

Future research of this nature may assist HR Managers and managers at 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. Bakotic (2015:93) contended that being aware of the job satisfaction of employees allow personnel managers to be proactive and decide on the interventions that will ensure the commitment and involvement of the employees.

There is a need for further research about the job satisfaction of employees in the said organisation and topics are proposed below:

- An inclusive study of all Employee groups
- A qualitative research study is recommended to obtain in-depth information related to exploring job satisfaction in a specific health sector
- Inclusion of district hospitals within Amajuba District
- An external researcher with an advantage that he/she will not be known by participants hence avoidance of neutral responses and/or data collection tool should be designed such that it does not have neutral responses.

- Involvement of middle management as they were excluded from the study

5.7 Conclusion

The study examined the level of job satisfaction among the employees working in Madadeni Regional Hospital in KZN. In the current chapter, conclusions were presented relating to the findings of the research, firstly referring to the literature review, and secondly relating to the empirical study. Following such a presentation, recommendations were made for future research in the current field of study. Various factors of job satisfaction were defined in the context of both Maslow's Hierarchy of Needs Theory, as well as Herzberg Two-Factor Theory. It was also recommended that monitoring of job satisfaction should be undertaken regularly to find the factors that need improvement. By enhancing job satisfaction, hospital managers can improve not only the mental, psychological and social well-being of the work-force, but also the financial health of an organisation. The researcher envisages sharing the results of the study with authorities in the DOH, UHERB and Management of Madadeni Regional Hospital with the hope that recommendations will be taken into consideration in the near future.

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Appendices

Appendix A: Participants consent form

UMgungundlovu Health Ethics Review Board Secretariat
Natalia Building (South Tower 10th floor, Room 102)
330 Langalibalele Street
Private Bag X9051
Pietermaritzburg 3200
Tel: 033 395 3123 / 3189 / 2805
Fax: 033 3943782
Email: hrkm@kznhealth.gov.za

Information to participants

Dear Participant

I am Debora Mhlongo Manthata. I am a Master of Business Administration (MBA) student at MANCOSA conducting research regarding “An Investigation into the Level of Job Satisfaction among Employees at Madadeni Regional Hospital in KwaZulu-Natal”. The aim of the study is to investigate the level of job satisfaction among employees at the Madadeni Regional Hospital, KwaZulu-Natal and to proffer recommendations in areas where opportunities for improvement exist. This study is part of the Degree requirement.

The importance of your participation in the study is that your responses will form a valuable input towards a fuller understanding of the research study. The questionnaire enclosed will gather data pertaining to this study and will give further insight into the level of job satisfaction among employees at Madadeni Regional Hospital in KwaZulu-Natal.

Confidentiality will be maintained. Your identity will be protected it will not be shared with anyone else and only the Researcher involved in this study will have the access Information obtained in the study will be kept confidential. Collected data will be kept in a secured place for a period of 5 years as per UMgungundlovu Ethics Review Board Regulations.

Please note that participation in this study is voluntary and that you can withdraw from the study or refrain from answering questions that you deem inappropriate or

uncomfortable. There will be no serious risk known or anticipated on the participation in this study.

If you have any questions or concerns about completing the questionnaire or participating in this study, you may contact me at 084 383 7960 or by e-mail debora.mhlongo@gmail.com. If you have any questions about your rights as a research subject, you may contact UMgungundlovu Health Ethics Review Board Secretariat at the above contact details.
Thanking you in advance for participating in this study.

Yours sincerely,

Debora Mhlongo Manthata

Consent

I hereby agree to participate in the research on an investigation into motivation of staff at Madadeni Regional Hospital.

I understand that I am participating freely and without being forced in any way to do so. I also understand that I can stop participating at any point should I not want to continue and that this decision will not in any way affect me negatively. I understand that this is a research project whose purpose is not necessary to benefit me personally in the immediate or short term. I understand that my participation will remain confidential.

Signature of the participant: _____

Date: _____

Appendix B: Final questionnaire

Questionnaire

Section A: The current level of job satisfaction among employees of Madadeni Regional Hospital, KZN

There is no right or wrong answer for the following section below. Please rate the following statements by placing a cross (X) on the column truest to you experience, where 1 = Strongly Agree; 2 = Agree; 3 = Neutral (Undecided); 4 = Disagree; 5 = Strongly Disagree.

	Strongly Agree (1)	**Agree (2)**	**Neutral (3)**	**Disagree (4)**	**Strongly Disagree (5)**
1. My current employer and work environment gives a feeling of satisfaction.					
2. I will be working for the same organisation in the next 2 years.					
3. I have a well-defined/clear job description.					
4. More and more individuals are seen leaving the organisation regularly.					

5. My organisation has open communication/transparency/ information sharing culture.					
6. My organisation has a well-structured Orientation and Induction programme for new employees.					
7. My organisation offers staff development opportunities (short/long term courses, coaching, mentoring and supervision).					
8. My organisation offers continuous basic computer training skills.					
9. The team morale in my department is high.					

Section B: Variables that promote job satisfaction within the Madadeni Regional Hospital employees

	Strongly Agree (1)	**Agree (2)**	**Neutral (3)**	**Disagree (4)**	**Strongly Disagree (5)**
10. I am satisfied with the pay I receive compared to what other organisations offer.					
11. I receive appropriate additional allowances/ benefits (for example, car					

allowance, housing, medical aid etc.).					
12. I receive fair additional incentives/bonuses.					
13. My salary motivates me to produce the highest quality work.					
14. I receive constructive performance appraisal feedback (EPMDS).					
15. My manager give praise for the job well done.					

Section C: Variables that hinder job satisfaction within Madadeni Regional Hospital employees

	Strongly Agree (1)	**Agree (2)**	**Neutral (3)**	**Disagree (4)**	**Strongly Disagree (5)**
16. I work in a relaxed comfortable environment.					
17. My office/workstation has a heating and cooling system that is functional.					
18. My office/workstation is fully furnished with a functional telephone, computer, printer and scanner.					

19. I have the necessary equipment and supplies to perform my daily duties (material resources).					
20. The equipment and supplies are of good quality and maintained by due dates.					
21. I am satisfied with my daily allocated workload.					
22. I have flexible working hours.					
23. I have a well-furnished tea/dining/rest room.					
24. There is a descent canteen/coffee shop that provides sit in, take away and delivery services.					
25. I have a parking space/well demarcated parking bay.					
26. Child care facilities are available.					
27. Physical wellness programmes (aerobics/gyms) are accessible.					

28. Employee safety and security is always promoted in the work place.					
29. Team building workshops/exercises are available.					
30. I am involved/engaged in organisations meetings.					

SECTION D

For improving job satisfaction of employees in your organisation, what suggestion(s)/recommendation(s) would you make?

_____

_____

_____

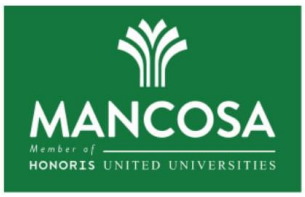
_____

_____

_____

Thank you for participating!

Appendix C1: MANCOSA Ethical Clearance



26 May 2020

To whom it may concern

RE: CONFIRMATION OF ETHICAL CLEARANCE

This letter serves to confirm that Ms Debora Thembeka Busiswa Mhlongo Manthata (128406) has been granted ethical clearance by the Research Ethics Sub-Committee for the dissertation titled: "An investigation into the level of job satisfaction among employees at Madadeni Regional Hospital in KwaZulu- Natal".

This approval is subject to the observance by the researcher of the requirements for ethical conduct in research and with due diligence to the particular research survey population.

Thank you and kind regards

pp

Mr P. Soni
Chairperson: Research Ethics Sub-Committee
Tel: +27 31 300 7200
Email: Paresh.Soni@mancosa.co.za

Durban: P.O. Box 49494, East End, Durban, 4018, South Africa, 26 Samora Machel (Aliwal) Street, Durban, 4001, South Africa
Tel: +27 31 300 7200, Fax: +27 31 300 7297 email: mba@mancosa.co.za website: www.mancosa.co.za

Johannesburg: P.O. Box 291354, Melville, Johannesburg, 2109, South Africa, 1 Cedar Avenue, Auckland Park, Johannesburg, 2092, South Africa
Tel: +27 11 853 3000, Fax: +27 11 482 9072 email: jhb@mancosa.co.za website: www.mancosa.co.za

Cape Town: P.O. Box 411, Rondebosch, 7701, South Africa, TNS House, 6 Thicket Street, Newlands, Cape Town, 7708, South Africa
Tel: +27 21 671 6576, Fax: +27 21 671 4306 email: capetown@mancosa.co.za

MANCOSA is registered with the Department of Higher Education and Training (DHET) as a private higher education institution under the Higher Education Act, 1997 (as amended). Registration No.2000/HE07/003. CK No. 1996/004727/07

Appendix C2: UHERB Approval Letter

KWAZULU-NATAL PROVINCE
HEALTH
REPUBLIC OF SOUTH AFRICA

Physical Address
Postal Address
Tel: 033 395 2102 Fax: 033 394 3782 Email: Vuyiswa.siwela@kznhealth.gov.za
www.kznhealth.gov.za

DIRECTORATE:
Umgungundlovu Health Ethics
Research Board (UHERB)

Reference: UHERB 009/2020
Enquiries: Ms V. Siwela, 033 395 2102
Date 08 September 2020

Dear Ms Debora Mhlongo-Manthata

RE: APPROVAL OF SUBMITTED STUDY:

An investigation into the level of job satisfaction among employees at Madadeni Regional Hospital in KwaZulu-Natal.

UHERB has pleasure in informing you that your study has been granted full ethical approval.

In order to proceed with conducting the study, the following is required:

i. Institutional support from the participating study sites
ii. Provincial Health Research and Ethics Committee (PHREC) approval.
Application is done online on the National Health Research Database (NHRD) website: www.nhrd.hst.org.za . You will need to register and obtain a username and password before registering your application online. Please go to: "Request use of Provincial facilities".
iii. Upload all the necessary documents.
iv. Submit a report upon completion of the study.
v. All research conducted during the COVID-19 period must adhere to the national guidelines:
    a) Use of face mask
    b) Social distancing
    c) Hand sanitization

This approval is valid for a period of twelve months only starting from the date the approval is granted.

You are requested to electronically, submit an annual report of your study to this Board.

You are also requested to report to this Board anything that might warrant reconstruction of ethical approval of the protocol including but not limited to:

- Serious or unexpected adverse effects to participants
- Proposed changes to the protocol
- Unforeseen events that might affect continued ethical acceptability of the project

You are requested to inform the Board if the project is terminated or suspended before anticipated date of completion.

We wish you well on your study.

Regards

Dr Damian Clarke
FCS (SA) MBA, M Med Sci, MBA, M Phil, Phd
Chairperson, UHERB

Fighting Disease, Fighting Poverty, Giving Hope

Appendix C3: Department of Health Permission to Conduct the Study Letter

health
Department:
Health
PROVINCE OF KWAZULU-NATAL

Physical Address: 330 Langalibalele Street, Pietermaritzburg
Postal Address: Private Bag X9051
Tel: 033 395 2805/ 3189/ 3123 Fax: 033 394 3782
Email:
www.kznhealth.gov.za

DIRECTORATE:
Health Research & Knowledge Management

NHRD Ref: KZ_202009_024

Dear Ms DTB Mhlongo Manthata
MANCOSA

Approval of research

1. The research proposal titled **'An investigation into the level of job satisfaction among employees at Madadeni regional hospital in KwaZulu Natal'** was reviewed by the KwaZulu-Natal Department of Health (KZN-DoH).

   The proposal is hereby **approved** for research to be undertaken at Madadeni Hospital.

2. You are requested to take note of the following:
   a. *All research conducted in KwaZulu-Natal must comply with government regulations relating to Covid-19. These include but are not limited to: regulations concerning social distancing, the wearing of personal protective equipment, and limitations on meetings and social gatherings.*
   b. *Kindly liaise with the facility manager BEFORE your research begins in order to ensure that conditions in the facility are conducive to the conduct of your research. These include, but are not limited to, an assurance that the numbers of patients attending the facility are sufficient to support your sample size requirements, and that the space and physical infrastructure of the facility can accommodate the research team and any additional equipment required for the research.*
   c. *Please ensure that you provide your letter of ethics re-certification to this unit, when the current approval expires.*
   d. *Provide an interim progress report and final report (electronic and hard copies) when your research is complete to* ***HEALTH RESEARCH AND KNOWLEDGE MANAGEMENT, 10-102, PRIVATE BAG X9051, PIETERMARITZBURG, 3200*** *and e-mail an electronic copy to hrkm@kznhealth.gov.za*
   e. *Please note that the Department of Health shall not be held liable for any injury that occurs as a result of this study.*

For any additional information please contact Mr X. Xaba on 033-395 2805.

Yours Sincerely

Dr E Lutge
Chairperson, Health Research Committee
Date: 19/10/2020

Fighting Disease, Fighting Poverty, Giving Hope

Appendix C4: Permission letter from Madadeni Regional Hospital

health
Department:
Health
PROVINCE OF KWAZULU-NATAL

DIRECTORATE:

Physical Address :Madadeni Hospital F0001,Section 6, Madadeni
Postal Address: Private Bag x6642, Newcastle, 2940
328257 Fax: 034 3749187 Email: happy.khanyi@kznhealth.gov.za
www.kznhealth.gov.za

Office of the Chief Executive officer

Reference: Permission to Conduct Research for Academic Purposes

Date: 2019-04-09

Ms. D. Mhlongo- Mantatha

Dear Madam

Receipt of your letter is hereby acknowledged and serves as reference.
I have pleasure to inform you that your request to conduct a research on the 'An investigation into the level of satisfaction among employees is hereby supported.

Please note the following:
Ensure the adherence to policies, procedures, protocols and guidelines of the Department of Health with regards to the research.
The research will only commence once this office has received the confirmation from the Provincial Health Research Committee of Kwazulu- Natal department of health.
Please ensure that this office is informed before you commence research.
Madadeni Hospital will not provide resources for this research.
You will have to provide feedback to this facililty on your findings

Thanking you

Sincerely

.....

HSL Khanyi
Chief Executive Officer
Madadeni Hospital

Fighting Disease, Fighting Poverty, Giving Hope