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Job Satisfaction and Perceived Workplace Conditions among Nursing Officers at Teaching Hospital Jaffna, Sri Lanka: A Descriptive Cross-Sectional Study

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ABSTRACT:

Background: Nursing officers' perceptions of their jobs and working conditions provide actionable information for hospital quality improvement.

Objective: To describe reported satisfaction among nursing officers at Teaching Hospital Jaffna, Sri Lanka, during a routine institutional assessment in third quarter of 2024.

Methods: A descriptive cross-sectional secondary analysis of anonymised aggregate results from a routine staff satisfaction survey was conducted. Fifty nursing officers were selected and 40 returned questionnaires (response rate 80%). A standard staff satisfaction questionnaire supplied by the Directorate of Healthcare Quality and Safety, Ministry of Health, Sri Lanka, assessed 34 items across seven domains.

Results: Of 40 respondents, 30 (75%) were female and 22 (55%) were aged 26–35 years. On the direct overall job-satisfaction item, 26 (65%) reported being satisfied or very satisfied. Community recognition attracted favourable responses from 36 (90%), adequacy of job-related training from 34 (85%) and supervisory fairness from 31 (77.5%). Favourable responses were less frequent for fair salary (15, 37.5%), adequacy of materials for patient care (8, 20%), rest-room comfort (11, 27.5%) and recreation facilities (11, 27.5%).

Conclusion: The assessment identified favourable perceptions of some intrinsic and professional aspects of nursing work alongside practical concerns regarding remuneration and workplace resources. Findings are descriptive and should inform participatory local improvement and a more robust follow-up survey.

KEYWORDS: Job satisfaction, Nursing officers, Hospital management, Quality improvement, Workplace conditions, Sri Lanka

I. INTRODUCTION

Job satisfaction among nurses is relevant to workforce wellbeing and organisational functioning. Nurses perform continuous clinical, coordination and patient-support functions, making their perceptions of work, recognition, staffing resources, professional relationships and opportunities for advancement important topics for hospital leadership [1,2]. Although satisfaction survey findings cannot establish changes in clinical quality or patient outcomes, they can identify priorities for further enquiry and institutional improvement.

Sri Lankan studies demonstrate that different professional groups and institutions may experience different workplace challenges. A cross-sectional survey of 59 nurses in Base Hospital Medirigiriya examined organisational domains including working conditions, training, remuneration and recognition [3]. A study of public health inspectors in Sabaragamuwa Province identified dissatisfaction with advancement, income and payments, notwithstanding generally favourable interpersonal relationships [4]. An earlier Hambantota district study of public health workers likewise examined motivational and organisational dimensions of satisfaction [5]. Differences in questionnaires, professional groups and scoring systems preclude direct comparison of composite satisfaction values.

Teaching Hospital Jaffna undertook a routine institutional staff satisfaction assessment in in third quarter of 2024. The present paper describes available aggregated responses from nursing officers, identifies domains with relatively favourable and

unfavorable perceptions, and considers implications for hospital quality improvement. It does not attempt to identify causal determinants of satisfaction.

II. MATERIALS AND METHODS

A. Study Design and Setting

This descriptive cross-sectional study uses data from a routine institutional staff satisfaction and quality-improvement assessment conducted among nursing officers at Teaching Hospital Jaffna, Sri Lanka, from July 1 to September 30 of 2024.

B. Participants and Sampling

Fifty (50) nursing officers were selected using cross-sectional random selection method and 40 returned questionnaires, yielding a response rate of 80%.

C. Survey Instrument

The questionnaire was a standard staff satisfaction survey format supplied by the Directorate of Healthcare Quality and Safety, Ministry of Health, Sri Lanka, contain 34 satisfaction items grouped into job satisfaction (six items), workload (four), professional support (nine), training received (three), remuneration (six), career development (two) and working conditions (four). Items used five response categories, from very dissatisfied to very satisfied, with a neutral midpoint. Several items contain negative phrasing; only directly interpretable item responses were used for the main descriptive findings.

D. Data Sources and Statistical Analysis

The source was Respondent-level data and the original SPSS file. “Favourable” denotes the sum of satisfied and very satisfied categories for straightforward positively phrased items, not an externally validated satisfaction cut-off. The sum of the seven published domain means (109.700) disagreed with the archived overall mean (119.225).

E. Ethics and Governance

This report is a retrospective, descriptive analysis of anonymous, aggregated nursing staff satisfaction data collected during a routine institutional quality-improvement assessment in 2024. The authors confirm that institutional permission to publish the survey findings has been granted. No personally identifiable respondent information was available for this manuscript. The original survey was not initiated as a prospective research study.

III. RESULTS

A. Participant Profile

Forty of 50 selected nursing officers returned questionnaires (80%). Women constituted 30 (75%) and men 10 (25%). The largest age group was 26–35 years (22, 55%), followed by 36–45 years (11, 27.5%). Twenty-two respondents (55%) reported fewer than four years of total departmental service and 24 (60%) fewer than four years working at Jaffna. This comparatively junior respondent profile may affect how the institutional snapshot is interpreted.

Table I. Selected Characteristics of Respondents (N=40)

Characteristic	Category	n (%)
Gender	Female	30 (75.0)
Gender	Male	10 (25.0)
Age	≤25 years	4 (10.0)
Age	26–35 years	22 (55.0)
Age	36–45 years	11 (27.5)
Age	46–55 years	1 (2.5)
Age	≥56 years	2 (5.0)
Total departmental service	<4 years	22 (55.0)
Working at Jaffna	<4 years	24 (60.0)

B. Selected Item-Level Satisfaction Findings

A majority reported satisfaction with community recognition (90%), use of their skills at work (82.5%), adequacy of training for their present job (85%) and fair treatment by their supervisor (77.5%). The direct item assessing overall satisfaction with the job yielded 26 favourable responses (65%). In contrast, reported satisfaction was lower for the fairness of salary (37.5%), adequacy of materials and instruments for patient care (20%), comfort of the unit rest room (27.5%) and availability of recreation facilities

(27.5%). These figures represent particular item responses and not percentages classified as satisfied on a validated multi-item scale.

Table II. Favourable Responses for Selected Positively Worded Items (N=40)

Domain	Item (abbreviated wording)	Satisfied / very satisfied n (%)
Job satisfaction	Community recognition for nursing work	36 (90.0)
Job satisfaction	Opportunity to use skills at work	33 (82.5)
Job satisfaction	Overall satisfaction with job	26 (65.0)
Workload	Hours worked are appropriate	15 (37.5)
Workload	Time for patient/client care is sufficient	17 (42.5)
Professional support	Support and cooperation from doctors	26 (65.0)
Professional support	Supervisor treats respondent fairly	31 (77.5)
Training	Adequately trained for present job	34 (85.0)
Training	Enough in-service training opportunities	17 (42.5)
Remuneration	Salary is fair	15 (37.5)
Remuneration	Roster allocation for extra duty payments is fair	22 (55.0)
Career development	Promotions go to the right person at the right time	19 (47.5)
Career development	Opportunities to advance career are adequate	16 (40.0)
Working conditions	Conducive workstation conditions	14 (35.0)
Working conditions	Adequate materials/instruments for patient care	8 (20.0)
Working conditions	Comfortable rest room in unit	11 (27.5)
Working conditions	Acceptable recreation facilities	11 (27.5)

Notes: Percentages use 40 respondents as the denominator. Item wording is abbreviated for readability.

C. Domain Scores

The seven domains displayed in Table III. These means are presented solely as an audit trail of the original output and must not be compared directly because each domain comprises a different number of items. Their sum (109.700) does not equal the separate reported total satisfaction mean (119.225).

Table III. Original Domain Means

Domain	Items	Mean (sum score)
Job satisfaction	6	21.900
Workload	4	12.375
Professional support	9	29.375
Training	3	10.025
Remuneration	6	18.925
Career development	2	6.425
Working conditions	4	10.675
Sum across domains	34	109.700
Overall score stated separately	34	119.225

IV. DISCUSSION

In this routine hospital survey, approximately two-thirds of the responding nurses endorsed satisfaction with their job overall, with relatively favourable reports of community recognition, training adequacy and fair treatment by supervisors. Alongside these favourable perceptions, fewer than half endorsed the fairness of salary (37.5%) and multiple aspects of workplace infrastructure and resources. The resulting pattern suggests that institutional action should not be guided by a single undifferentiated satisfaction score.

The findings have parallels with other Sri Lankan healthcare workforce research, while differing sufficiently in measurement to warrant restraint. Loganathan and Jayasinghe reported work-related satisfaction and correlations with organisational factors among nurses in Medirigiriya [3]. Kumarasinghe and Samaranayake found substantial dissatisfaction with income and advancement among public health inspectors despite more positive interpersonal relationships [4]. Sanjeewa and Herath also identified pay, promotions and appraisal concerns among public health personnel [5]. These studies provide context, but different populations and instruments mean that percentages, scores and correlational findings should not be treated as directly transferable to Teaching Hospital Jaffna.

The modest proportion satisfied with adequacy of patient-care instruments (20%) is an actionable perception worthy of triangulation with ward-level inventories, equipment availability records, work improvement teams and patient-safety monitoring. It is not proof of objectively inadequate equipment or patient harm. Similarly, reported remuneration dissatisfaction may reflect national pay structures rather than matters fully within institutional management control. Locally modifiable practices—communication, transparent duty rosters, escalation of maintenance concerns and access to development opportunities—could be considered through participatory quality-improvement cycles, with outcomes evaluated prospectively.

The survey also illustrates the importance of data governance for routine quality-improvement activities. A repeat survey would permit cautious assessment of change following improvement interventions.

A. Strengths and Limitations

A practical strength is the broad coverage of nursing work across seven management-relevant domains, using a recognised institutional survey format. The 80% response rate among those selected limits, but does not eliminate, non-response concerns. Major limitation is the small single-hospital sample. Social desirability and non-response bias cannot be excluded.

V. CONCLUSIONS

This 2024 institutional assessment found that most of the 40 responding nursing officers expressed overall satisfaction with their jobs, while sizeable proportions indicated dissatisfaction or neutrality on salary fairness, workplace resources, staff amenities and career opportunities. These descriptive findings offer a basis for prioritising participatory local enquiry and improvement. A follow-up survey with, preserved anonymised source data, would support reliable trend assessment.

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DECLARATIONS

Ethics statement: This study involved retrospective analysis of anonymous, routinely collected quality-improvement data from a cross-sectional nursing staff satisfaction survey. No personally identifiable information was available for the analysis. Institutional permission for publication has been granted.

Conflict of interest: The authors declare that they have no conflicts of interest regarding the publication of this manuscript.

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Author contributions: Sathiyamoorthy T conceived and designed the study, supervised data collection, interpreted the findings and critically reviewed the final manuscript. Thileeban A contributed to data collection, interpretation of findings, manuscript revision and final approval of the manuscript. Gandeepan T participated in data collection, performed data analysis and prepared the initial manuscript draft.

Author approval: All three named authors have read and approved the final manuscript and accept accountability for their contributions.

Data availability: This report used aggregate SPSS output tables from a 35-page institutional survey report and respondent-level data.

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