Original Article

Practice environment and work-related quality of life among nurses in a selected hospital in Zamboanga, Philippines: A correlational study

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ABSTRACT

Background & Aim: Nurses often work in problematic work environments, characterized by various difficulties and stress-factors that can undermine nurses' full capacity to provide excellent care. Also, the nurse practice environment can have an impact on the quality of work-life, nurse recruitment and retention, and quality patient outcomes. Thus, the study assessed the relationship between practice environment and work-related quality of life as perceived by nurses in a selected hospital in Zamboanga City, Philippines.
Methods & Materials: A descriptive correlational design was used in the study, and the total population of nurses was recruited as participants. The Practice Environment Scale of the Nursing Work Index and Work-Related Quality of Life Scale were used to gather the needed data. Data were analyzed using mean, standard deviation, and Spearman rank-order correlation.
Results: A total of 103 nurses were surveyed in the study. In the perceived practice environment scale, it was revealed that the nursing foundation for quality of care was the highest (M=3.01, SD=0.20) and staffing and resource adequacy was the lowest (M=2.56, SD=0.45). On the other hand, job career satisfaction was the highest (M=3.64, SD=0.57) and stress at work was the lowest (M=2.55, SD=0.22) in the perceived work-related quality of life scale. The study showed a significant relationship between the perceived practice environment and perceived work-related quality of life (rho=0.287, p=0.003).
Conclusion: The study revealed that nurses have a favorable work-related quality of life and practice environment. However, formulating and enhancing programs for nurses such as incentive and professional development should be done as this can help foster and sustain a positive practice environment and job satisfaction.

Introduction

Nursing practice environment has been identified as an essential factor in improving patient safety and health outcomes. Lake defines nursing practice environment as the organizational characteristics of a work setting that facilitate or constrain professional nursing practice (1). International insights and empirical studies show the importance of balanced, healthy, and supportive nurse practice environments and psychosocial work environments to achieve and sustain a stable and high-performance nurse workforce (2-4).

Furthermore, there is an increasing amount of evidence which shows that favorable practice environments lead to greater satisfaction among workers, lower levels of burnout and a lower number of professionals who wish to change the workplace or abandon the profession (5-6). On the other hand, an unhealthy work environment for nurses leads to their inability to protect their patients. A report by the American Nurses Association (7), identified some causes of unsafe workplaces such as health care errors, staffing shortages, and nursing shortage. Also, the same report described that a work environment where nurses are "stressed, fatigued, unable to use their critical thinking skills" allowed for higher incidences of errors, failures, and injuries. Which significantly affects their quality of work life.

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According to Walton (8) quality of work-life is the personnel reaction to work; especially its essential outcome about job needs satisfaction and psychological health. Hence, it is related to the welfare of employees at work and is different from job satisfaction. When the needs of the employees at work are not met, they experience a lot of work stress that will have an adverse effect on the welfare of employees and their job performance (9). Hackman and Oldhams (10) consider "quality of work-life" as a work environment that can fulfill employees' personal needs by providing a positive interaction effect between their physical and mental well-being. Therefore, "quality of work-life" can be considered as a complex organizational issue, since it concerns the challenge of creating positive interaction between the physical and mental well-being of employees towards increased productivity (11).

Several studies on the quality of work-life and practice environment have already been published; however, none has examined the relationship between practice environment and quality of work-life among Filipino nurses. Research has shown a direct correlation between the quality of nurses' practice environments and productivity, recruitment and retention, job satisfaction, sick time usage and most importantly, the quality of patient care and patient outcomes. The pace of improvements in practice environments can accelerate if the evidence is translated clearly for researchers, managers, and policymakers. Examining nurses' perceptions of these two concepts will expand understanding of the relationship of nurses' work environment and quality of work-life, especially in the context of the Philippines.

Methods

The study employed a descriptive correlational design in order to determine the relationship between the practice environment and work-related quality of life among nurses in a selected hospital in Zamboanga City, Philippines.

In order to select the participants in the study, the total population of nurses was utilized. A total of 103 nurses working in different units in a selected Level 3 Philhealth accredited hospital in Zamboanga City were recruited. Nurses must be employed in the hospital as a staff nurse providing direct patient care for at least one year and were willing to participate in the study. Nurse supervisors and head nurses were excluded since they are not directly involved in patient care.

The study utilized a three-part questionnaire which includes the demographic profile sheet, practice environment scale (PES-NWI) and work-related quality of life (WRQoL) in order to gather the data needed.

A demographic profile sheet was used to obtain information on the participant's age, sex, educational attainment, and years of experience.

Practice Environment Scale of the Nursing Work Index (PES-NWI) was developed by Lake (1) to determine the organizational characteristics of environments that were attractive to nurses. The scale consists of 31 items that questions are scored based on Likert's four-point scale.

Work-Related Quality of Life Scale (WRQoL) by Van Laar, Edward, and Easton (12) is a 5-point Likert scale containing 23 items, which is used to gauge the perceived quality of life of employees.

The authors tested both the instruments for internal consistency reliability among Filipino nurses which showed a value of 0.89 for PES-NWI and 0.94 for WRQoL.

Before the conduct of the study, permission was first sought to the developer of the tool. An ethics approval was then obtained from Ateneo de Zamboanga University Research Ethics Committee. After establishing the reliability of the survey questionnaires, a letter was sent to the Chief Executive Officer, Medical Director and Nursing Director of the selected hospital to ask for permission to conduct the study.

After getting approval to conduct the study, the participants were screened based on the inclusion criteria set by the researchers.

Informed consent was then secured from eligible participants and was oriented regarding the objectives of the study. Then, the PES-NWI and WRQoL were administered to the nurses working in the selected hospital.

Data was encoded in Microsoft Excel 2016 and was analyzed using mean, standard deviation, and Spearman rank-order correlation using IBM SPSS Statistics for Windows, Version 23.0. Armonk, NY: IBM Corp.

Participants were oriented regarding the study's goal and objective, associated risk, and benefits of participation and were encouraged to ask any questions regarding the study. Also, verbal and written consent was secured once the respondents decided to participate. The participants determined the time and site of the administration of questionnaires.

Also, participants were informed that they might refuse to answer the question if they find it too confidential or may cause them any discomfort.

The study was approved for conduct by the Research Ethics Committee of the Ateneo de Zamboanga University.

Results

As shown in Table 1, the mean age of the participants was 25.76 (3.61), and the majority of them were females. Also, most of them have a Bachelor's Degree, and only one has a Master's degree and the mean years of experience was 3.29 (2.60)

Practice Environment of Nurses

Table 2 shows the level of practice environment of nurses with the nursing foundation for quality care having the highest mean while staffing and resource adequacy having the lowest mean among the subscales of PES-NWI.

Table 1. Demographic characteristics of nurses

Demographic characteristics		Nurses (N=103)		
		Mean (SD)	N	%
Age		25.76 (3.61)		
Gender	Male	27	27	26.21
	Female		76	73.79
Educational attainment	Bachelor's Degree		102	99.02
	Master's Degree		1	0.98
Years of experience		3.29 (2.60)		

Table 2. Level of practice environment of nurses

Practice environment of nurse	Nurses (n=103)	
	Mean	SD
Nurse Participation in Hospital Affairs	2.84	0.27
Nursing Foundation for Quality Care	3.01	0.20
Nurse Manager Ability, Leadership, and Support of Nurses	2.82	0.15
Staffing and Resource Adequacy	2.56	0.45
Collegial Nurse-Physician Relations	2.78	0.04
Over-all	2.802	0.22

Work-related quality of life

The level of work-related quality of life of nurses is shown in Table 3. Job career satisfaction obtained the highest rating among the subscales of work-related quality of life while stressing at work the highest.

Relationship between practice environment of nurses and work-related quality of life

In order to determine the relationship between practice environments and work-related quality of life, a spearman rank correlation test was used. Table 4 revealed that a significant relationship exists between the practice environment and work-related quality of life (rho=0.287, p=0.003).

Table 3. Level of work-related quality of life

Work-Related Quality of Life	Nurses (N=103)	
	Mean	SD
General Well-Being	3.28	0.26
Home-Work Interface	3.09	0.16
Job Career Satisfaction	3.64	0.57
Control at Work	3.35	0.23
Working Conditions	3.53	0.23
Stress at Work	2.55	0.22
Over-all	2.802	0.22

Table 4. Relationship between practice environment and work-related quality of life

Factor	N	Mean± SD	Spearman's rho	P	Interpretation
Work-related quality of life	103	3.13±0.64	0.287	0.003	Significant
Practice environment	103	2.90±0.38			

Discussion

This study determined the relationship between the nurse practice environment and quality of work-life among staff nurses at a private hospital in Zamboanga City. In terms, nurse practice environment, nursing foundations for quality of care was the highest mean which refers to the initiatives offered to staff nurses aiming at the improvement of the quality of care rendered to patients. Nursing education and continuing professional advancement placed a high priority on the delivery of quality nursing care. Griscti and Jacono (13) stated that what motivates nurses for learning should be clarified and considered. On the other hand, staffing and resource adequacy, which refers to the availability of human resources, equipment, and supplies to promote patient care was the lowest. Indeed, the result in staffing supports the current trend in the shortage of nurses in the country. The delivery of quality health care has been affected by the lack of human resources. According to the Philippines Department of Health, the ideal nurse to patient ratio is 1:12; however, this has been a problem in many hospitals due to the shortage of nurses in the country. This result is similar to the study done by Friese et al. (14) where it was revealed that wards have

an inadequate number of manpower and resources. An increase nursing workload due to lack of human resources can lead to a higher incidence of administration of wrong medication or dose, greater incidence of adverse events, complaints from the patient and their families, wound infection and increased incidence of patient death (15-18). Thus, enough staffing is vital for an organizational human resource in which nurses can contribute to effective patient care.

Although nurses have a positive perception about the practice environment demonstrated by the favorable practice environment in terms of nurses' participation in hospital affairs, nursing foundations for quality care, and nurse manager ability, leadership, and support of nurses, they had a negative perception about the practice environment in terms of staffing and resource adequacy. Positive nurse practice environment and specifically hospitals that are committed to quality as demonstrated by a favorable work environment in terms of nursing foundations for quality of care are linked with higher levels of nurse job satisfaction. This is consistent with the literature reporting that nurses prefer working with competent staff and in organizations committed to providing quality care (19).

As far as the work-related quality of life is concerned, nurses demonstrated the low quality of life in terms of general well-being, home and work interface, and working conditions, while nurses perceived the average quality of work-life when it comes to job and career satisfaction, control at work and stress at work. Hospital environments generate a lot of stress which can affect job satisfaction which can then lead to high turnover and lower quality of life (20). Hence, it is essential to acknowledge a job well done in order to enhance job satisfaction. In this study, staff nurses of the selected hospital have high job satisfaction and a low level of stress.

The study revealed a significant relationship between the practice environment of the nurses and work-related quality of life. The results may be critical to developing strategies to improve the quality of work-life among nurses and to increase nurse retention. Furthermore, improvements in nurses' quality of work-life may enhance recruitment efforts by both attracting former nurses back to the organization and encouraging young people to consider pursuing a career (21). Finally, monitoring the practice environment and work-related quality of life will benefit patient care because the quality of care has been linked to the quality of the work-life of nurses.

The limitation of the study is that it only focuses on nurses from level 3 Philhealth accredited hospitals, hence, including nurses from Level 1 and Level 2 is needed.

The study revealed that nurses have a favorable work-related quality of life and practice environment. However, formulating and enhancing programs for nurses such as incentive and professional development should be done as this can help foster and sustain a positive practice environment and job satisfaction.

Conflict of Interest

The authors declare that there are no conflicts of interest in the publication of this study.

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