Background

The environment of healthcare organizations has been identified as a determinant for the wellbeing of professionals and for the achievement of patient safety (Bates et al. 2009). In pediatric units, specifically, the nursing practice is embedded in a caring-centred approach that involves responsible and decision-making with patients (Mikkelsen & Frederiksen 2011; Talon et al. 2015). The work environment in pediatrics can intensify the emotional exhaustion levels and interfere with the job satisfaction of nurses (Sekol & Kim 2014).

Studies have been conducted to understand the influence of the nursing practice environment and staff outcomes (Jacobs, L.M. et al. 2012). These studies do not assess the influence of the organizational environment in these relationships (Jacobs, L.M. et al. 2012; Wilson et al. 2012) or safety climate (Sexton, J.B. et al. 2014). Exposure to Leadership WalkRounds in neonatal intensive care units is associated with a better patient safety culture.

There is a need to study organizational aspects related to patient care, professional recognition, support of the nursing manager, and a learning through failures approach (Bates, D.W. et al. 2009).

Methods

The study aims to assess the correlations between the nursing practice environment and emotional exhaustion levels, safety climate, job satisfaction and intention to leave the profession; and to test a theoretical model of the relationships between these variables (Figure 1).

Study design and setting: a cross-sectional study in fifteen inpatient units and three intensive care units of two pediatric hospitals in Brazil, and the two hospitals together provide a total of 168 inpatient beds and 41 intensive care beds.

Population and sample: 267 professional nurses (nurses, nursing technicians, and nursing assistants) directly involved in patient care. The signature on the informed consent was obtained. Participants were asked to complete the forms in a place that ensured their privacy, and to return them completed to the researchers within 14 days.

Data collection and statistical analysis: the sample was obtained by convenience, and data collection was performed from December 2013 to February 2014. The response rate mean rate reached 82.7%. For data collection, we used the Nursing Work Index - Revised (NWI-R) and the Maslach Burnout Inventory. The analysis was performed using SPEARMAN’S correlation coefficient between the domains of the Nursing Work Index - Revised and emotional exhaustion, job satisfaction and safety climate variables.

Results

Table 1: Table 1: Spearmann’s correlation coefficient between the domains of the Nursing Work Index – Revised and emotional exhaustion, job satisfaction and safety climate variables.

Table 2: Table 2: Measurement model: convergent validity and internal consistency reliability.

Table 3: Table 3: Measurement model: square roots of Average Variance Extracted (in the principal diagonal) and correlation between domains.

Table 4: Table 4: Structural model: predictive relevance (R²), effect size (f²) and Pearson’s Coefficient of Determination (R²).

Conclusions

Autonomy, control over the work environment and staff factors are associated with emotional exhaustion, job satisfaction, safety climate, and intention to leave the job. Organizational investments – such as initiatives for reduction or relief of burnout, professional involvement in decision-making related to patient care, professional recognition, support of the nursing manager, and a learning through failures approach – contribute positively to the development of a favorable work environment and have significant impact on job satisfaction and safety climate.

References

