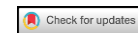


Influence of Employees' Job Satisfaction and Performance on Health Care Delivery in Abia State University Teaching Hospital, Nigeria

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ABSTRACT

Employee's job satisfaction for high performance in the workplace has been of great concern since the beginning of industrial revolution. Satisfaction is believed to be fundamental to individual and organizational performance. To this end, in recent time, especially in a developing country like Nigeria, there has been increasing concern over the adverse implications of the failure to adequately satisfy all levels of employees in any work organization. It is on this context that this study looked at the employees job satisfaction and performance and its effect on health care provision, with reference to Abia State University Teaching Hospital Aba, Nigeria. The general objectives of this study is to examine the extent which employee job satisfaction and performance among health workers in Abia State University Teaching Hospital Aba, affect health care delivery in the institution. This study adopted a survey research design using structured questionnaire for qualitative data and in-depth interview for qualitative information. From the findings, it was concluded that despite the findings that majority of the workers were not satisfied in relation to the satisfaction indicators such as prompt payment of salaries, on the job training, objective promotion, payment of allowances, etc; the workers delivered their duties diligently. Finally, it was recommended that the hospital management should ensure regular and adequate staff training and development programmes with a view to improving staff skills, knowledge, attitude, ability, competence, and above all, satisfaction of the staff for optimum performance.

Keywords: Influence, employees, Job satisfaction, Job performance, Health care delivery, Health workers.

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Highlights of this paper

- The general objectives of this study is to examine the extent which employee job satisfaction and performance among health workers in Abia State University Teaching Hospital Aba, affect health care delivery in the institution.
- On the basis of results this study concluded that despite the findings that majority of the workers were not satisfied in relation to the satisfaction indicators such as prompt payment of salaries, on the job training, objective promotion, payment of allowances, etc; the workers delivered their duties diligently.

1. INTRODUCTION

Work is an important and integral part of man. People aspire to be gainfully employed as well as to be happy with what they do as work. That is why [Organ and Ryan \(1995\)](#) submit that the happier people are performing their work, the more satisfied they are. [Haas et al. \(2000\)](#) recognised that among health workers, doctors are increasingly becoming dissatisfied with their job. Any organisation that values its staff considers an average worker as source of quality and productivity gains. Enhancing employee's job satisfaction in organisations appears to be paramount and is often regarded as the fundamental source of improving performance level ([Adeyinka, 2007](#)).

Job satisfaction is considered to be an area that has attracted more research in organisational behaviour and organisational psychology over the past three decades ([George and Jones, 2008](#)). Thus, the study of the relationship between job satisfaction and job performance became the Holy Grail of organisational behaviour research ([Weiss and Cropanzano, 1996](#)). The burgeoning literature on their relationship suggests that, job is recognised as not the only means of earning a living, but as a major extension of identifying a person's happiness.

Job satisfaction could be described as feelings of affective responses to the facets of workplace situation. [Saari and Judge \(2004\)](#) acknowledge that job satisfaction is phenomenon best described as having both cognitive and affective feeling of character. Employee reports of affect (feeling) at work can be used to measure job satisfaction; and affective experiences while on the job are also causes of job satisfaction. Hence, employee job satisfaction is the affective state of employees regarding multiple facets of their job.

There is also a cognitive component to job satisfaction which is made up of judgments and beliefs about the job ([Brown and Peterson, 1993](#)). [Nassah \(2008\)](#) reveal the underlying benefits of employee job satisfaction in the work place; including increased organisational citizenship behaviour (OCB), increased longevity of an organisation which fosters career development, individual well-being and overall organisational health, decreased counter productive work behaviour, decreased absenteeism, etc. These are indicators considered to be vital to job satisfaction. They, according to [Tenaihi \(2010\)](#) exist as a result of pay, promotion, benefits, supervisors, co-workers, work conditions, communication, job security, and safety. From these, job satisfaction can thus be viewed as the overall impression one has about ones job in terms of specific aspects of the job e.g., compensation, autonomy, and colleagues including specific results such as performance and productivity.

[Silver and Mateus \(2008\)](#) further submit that job satisfaction can be influenced by a wide variety of factors such as competitive pay, adequate staffing, a pleasant working environment, opportunities for personnel and professional growth, a reasonable workload, supervision, recognition, noticeable progress of patient, positive relationships with co-workers, autonomy on the job, job security, career advancement and contingent rewards. [Chow \(2009\)](#) study demonstrated the importance of job satisfaction to an organization in terms of its positive relationship with individual performance, employee relations, physical and mental health and satisfaction. Thus more satisfied employees tend to be more productive and creative ([Khamlub et al., 2013](#)).

Some negative impact identified greater non-conformance with procedures and policies, increases in work accidents and organizational conflicts that may increase the rate of medical errors, thus jeopardising patient safety,

and higher employment costs, that contribute to the shortages of health-care providers. According to [Khamlub *et al.* \(2013\)](#) job satisfaction is necessary to retain existing doctors, as well as to promote recruitment of new ones. In short, the quality of health-care workers depends on the level of job satisfaction. Studies conducted from July to September 2011 at the health centres in the Vientiane capital and Bolikhamsai provinces have demonstrated differences in how health-care providers feel about their jobs. Findings varied, with some research revealing job satisfaction, while others disclosed dissatisfied health care providers.

However, the relevance of health personnel and their attendant function cannot be over-emphasised. According to [Barr *et al.* \(2004\)](#) Health professionals are at the heart of any health system, and a well-motivated workforce is the pre-requisite for a functioning health system. On the home front, most of the workers benefits such as housing, transport and other allowances, adequate health-care facilities, etc, are lacking in most hospitals. These have in most cases led to health workers embarking on industrial actions such as strikes. Nevertheless, there are several promising policies by government and stake holders; which severally are not implemented.

The above scenario notwithstanding, Abia State University Teaching Hospital (ABSUTH) is a training hospital for Abia State University medical students. Over the years, the hospital has ranked high above other teaching hospitals in the country. Incidentally, the graduating students also, rank tops among their contemporaries. To this end, there is need to investigate health workers' job satisfaction and its effect on health care provision with reference to Abia State University Teaching Hospital (ABSUTH) Aba, Nigeria.

1.1. Statement of the Problem

The management of people at work is an integral part of the management process. To understand the critical importance of people in the organisation is to recognise that human elements and the organization are synonymous. But some employers do not appreciate the efforts of the staff and the fact that the employees have to be motivated to ensure that they do what they have to do so that the goals and objectives of the organisation are achieved. Because of the prevailing situation in Nigeria where supply of labour is greater than its demand, they (employers) do not believe much in effective motivation of workers to achieve high performance. That is, they uphold the view that even if workers are not satisfied with their job, they cannot leave since there is limited number of job opportunities in the labour market. In response to this, the workers may not do their work conscientiously and properly. In other words, where there is no proper planning, workers may not prioritise their tasks accordingly. They may perform their task with lukewarm attitude the effect of which is inefficiency and low performance.

Records show that the payment of staff salaries and benefits in the hospital has not been regular. As a result, in June (2015) health workers in ABSUTH embarked on strike for 11 months over basic benefits and pay. The workers felt that they were over-looked, not recognised and appreciated by their employers for their hard work, and in turn developed decreased, motivation. In addition, it was observed that the staff of ABSUTH were not promoted as and when due, and that disparity existed in the staff promotion system in the hospital, which could pose a challenge to job performance in the institution since the inequity in the staff promotion system could lead to demotivation, loss of morale, and interest among the staff.

In view of the above, one wonders how the hospital still comes up tops in ranking amongst teaching hospitals in Nigeria. It, therefore, becomes imperative to ascertain the level of satisfaction and the indices of health workers happiness at ABSUTH. Hence, the problem of this study lies in providing answer to the following question: To what extent has job satisfaction affected health care delivery at Abia State University Teaching Hospital?

1.2. Objectives of the Study

The general objective of this study was to examine the extent job satisfaction among health workers in Abia State University Teaching Hospital Aba affect health care delivery in the institution. The specific objectives were to:

- i. Investigate the significance of staff training on job satisfaction and performance among the staff of ABSUTH, Aba.
- ii. Ascertain the effect of staff promotion on job satisfaction among staff of ABSUTH. Aba
- iii. Explore the impact of salary payment and other monetary incentive on staff job satisfaction in ABSUTH Aba.
- iv. Examine how job satisfaction in the institution affects performance of staff in the discharge of their duties

2. THE CONCEPT OF JOB SATISFACTION

Job satisfaction is the individual employee's general attitude towards the job. It is also an employee's cognitive and effective evaluation of his or her job. Job satisfaction is defined as "the extent to which people like (Satisfaction) or dislike (Dissatisfaction) their jobs" (Spector *et al.*, 2009). Job satisfaction can also be defined as contentment (or lack of it) arising out of interplay of employee's positive and negative feelings toward his or her work (Businessdictionary.com, 2014).

2.1. Nature of Job Satisfaction

Yearly, professional health workers leave the shores of Nigeria looking for greener pastures. They migrate to Western countries, Asian and even African countries for better conditions of service. It came to be heard that Saudi Arabia organises periodic job interviews for Nigerian health workers in Nigeria (Aragon Research, 2008). Workers attitude are the same as job satisfaction a positive feeling about a job. A worker with high job satisfaction means he had a positive feeling about his job; the same is also true of negative feeling about job with low satisfaction.

There is high turnover rate of health workers seeking better offers and other conditions of service and one of the reasons is lack of job satisfaction (Lambert *et al.*, 2001). Job dissatisfaction serves as a push factor. Job satisfaction is a major determinant of intentions to leave by health care providers. And in some countries less than 50% of the required are available to serve the population it is even worst in rural health centres most of the staff were not qualified staff they do not have the requisite training and the qualified health care workers deployed to rural institutions leave in the shortest possible time (Hongoro and Normand, 2006; World Health Organization, 2006).

The extent by which a worker believes that his employer cares about his welfare, efforts and contribution to the organisation is described as perceived organisational support. There are studies that identified organisations that are supportive to be ones that involve them in decision- making, provide them with fair rewards and provide supportive supervisions to the workers (Farh *et al.*, 2007).

2.2. Causes of Job Satisfaction

Barling and Iverson (2010) pointed out that interesting jobs, opportunity for training, independence, variety and control constitute a positive organisational environment it has been shown that workers in the developing countries or those considered to earn low pay correlate well with job satisfaction but as the income reaches a certain point it is no longer a significant factor associated with job satisfaction. Interdependent, social relationships outside

the work place and feedback, these have been shown to be strongly associated with job satisfaction (Humphrey *et al.*, 2007).

Personality has been shown to affect job satisfaction. An employee with positive core self- evaluation believes in his competences and worth. He is more satisfied with his job than this counterpart with negative core self- satisfaction. He actively seeks challenging jobs and thrives well, compared to his counterpart with negative core self- evaluation who does less challenging and monotonous jobs, Judge and Watanabe (2009).

2.3. Factors that Influence Job Satisfaction

These include but not limited to the following; compensation and benefit to employees; promotions/training/opportunity for career developments challenging work /difficult task, co-workers relationship/sharing/ trust supervisors employee relationship/coaching, interesting work environment; Appreciation of work by the employee, job security, remuneration; Promotion/ growth; Good working conditions accessibility to proper tools of work; personal loyalty to the firm.

Tactful discipline, sympathetic help with problems, flexible work schedule, health insurance benefits, Gratuity and pension benefits. Others include loans, institutional transport, missions and visions of organisation, potential for future growth and employee expectation.

A model was developed by Mitchell (1982) to look at the relationship between factors, that caused dissatisfaction and those that leads to job satisfaction, presence of these factors or their absence may lead to job dissatisfaction. Rose (2003) looked at the following factors that were supposed to have influences on job satisfaction: individual well- being, working hours, work orientation, financial variables, employment contract, and market and job mobility. He concluded that there was no strong support for their influence on job satisfaction. He found the influence of workplace to be a significant factor.

Factors related to the contractual features of the job were found by him to be more important. Promotion opportunities that have been assured to the employee by signing a contract, nominal pay increments, bonuses and most importantly, a permanent job, significantly increased, job satisfaction score. A recognized career path was also found to be highly significant factor relating to job satisfaction. He found low association between job satisfaction and increase in earnings. More than half of his respondents thought high levels of work related stress and a desire to work fewer hours accounted for job dissatisfaction.

2.4. Potential Effects of Job Satisfaction

The exit- voice- loyalty-neglect-framework according to Liu *et al.* (2010) was made to explain the effect of job dissatisfaction to the organisation or health facility Figure 1. The model has four responses, which differ along two dimensions; constructive or destructive and active or passive.

The bit response: The dissatisfied employees seek to leave the organisation change position or resign when they are not happy with their job.

The voice response: is constructive in nature, the employee seeks ways to improve the prevailing conditions or discuss the organisations problems and participating in unionism.

The loyalty response: Acting passively but with hope of the conditions improving. The employee may defend the actions of his employers when criticised. The employee expects the management to do the right thing.

Neglect response: The employee passively allows conditions to deteriorate and is characterised by chronic absenteeism, lateness, reduced work rate and increased mistakes.

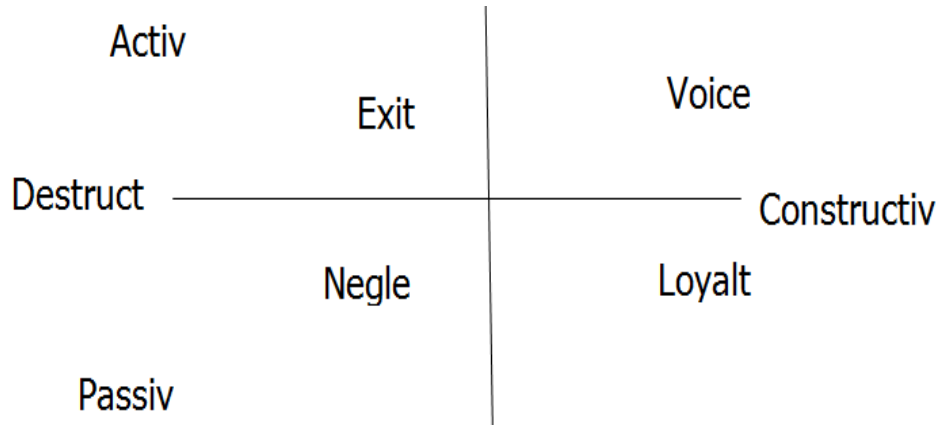


Figure-1. Exit-voice-loyalty-neglect-framework model.

Source: Stephen and Robbins (2008).

2.5. Job Satisfaction and Performance

Job satisfaction has been proven by several studies to correlate well with increase productivity or performance (Judge *et al.*, 2001). Also, the relationship between job satisfaction and performance was found to be even higher for professional jobs and for less non- professional jobs. This contrasts with other earlier findings of a weak correlation between job satisfaction and performance (Laffoldan and Muchinsky, 1985).

Organisations with satisfied employees tend to have more productivity compared to those with few satisfied employees (Ostroff, 1992). Few staff result to poor job performance, these staff offer substandard health care services and they are not responsive to the needs of the patients. Hughes *et al.* (2002) state “Most performance problems can be attributed to unclear expectation, skills, deficit, resource or equipment shortages or a lack of motivation.” A failing health system is evident by low salaries, difficult working and living conditions and inappropriate training.

2.6. Job Satisfaction and Organisational Citizenship Behaviour

Job satisfaction has been found to transcend the immediate improvement in job productivity and also includes benefits to the society. Satisfied employees are happy to help others outside the work environment and to readily defend the organisation in which they work. Employees that have good caring relationship with their co- workers engage in helpful behaviours while those with difficult relationships with their co-workers are less likely to help others (Hoffman *et al.*, 2002).

2.7. Job Satisfaction and Customer (Patient) Satisfaction

Studies have shown that satisfied employees result in satisfied customers (in this study satisfied patients). Studies also link low motivation among employees to low client or patient satisfaction. Williams (2004) found low satisfaction among employees satisfaction is essential to the provision of high quality health care. Dissatisfied health care providers provide poor quality and inefficient health care that leads to wastages and increase hidden and sometimes overt cost of care (Grol and Lawrence, 1995).

2.8. Job Satisfaction and Life Satisfaction

This is a new area of study, which looks at the relationship between, job satisfaction and life satisfaction. Life satisfaction is the way a person perceives how his or her life has been and how they feel about where it is going in

the future. It is a measure of well-being as well as a cognitive, global judgment. It is having a favourable attitude of one's life as a whole (Wikipedia, 2012). Researchers have looked at three possibilities;

1. **Spill over:** Here job experiences spill over into non-working life and the reverse may also hold true
2. **Segmentation:** Here job and life experiences are separated
3. **Compensation:** Here an individual seeks to compensate, for a dissatisfying job by seeking fulfilment and happiness in his or her non-working life and the reverse may hold true (Judge and Watanabe, 1994).

Studies on spill over effect have shown the link between job and life satisfaction to be positively correlated. Job experiences spill over into employee's personal life. Live experiences can also spill over the employee's job experiences. They found the relationship to be reciprocal (Judge *et al.*, 1994). Other studies have shown a relationship between job satisfaction and depression (Thomas and Ganster, 1959). It is apparent that organisations have little control over an employee's job satisfaction; their job satisfaction is a result in part of spill over of their life satisfaction. It is important for organisations to improve employee job satisfaction or risk spill over effect into their satisfaction and well-being.

2.9. Personal Characteristics and Job Satisfaction

Job satisfaction in general, increases with age because most of the dissatisfied workers would have resigned or would have been fired for one reason or the other and older workers have greater chance of job fulfilment (Spector, 2000). In terms of gender, most studies found no statistically significant association between gender and job satisfaction. The white race has been found to be happier than most other race. Research has found slight negative relationship between level of education and satisfaction. Those with little education are much contented with their work than those that are highly educated.

With respect to those who believe that they control their destiny have higher satisfaction. The higher the occupational level, which is associated with increase, challenge and autonomy, the greater the satisfaction (Armstrong, 2009).

3. THEORETICAL FRAMEWORK (Equity Theory by Adams (1965))

Equity theory by Adams (1965) is anchored on the employee's perception of fairness and equilibrium. Thus it is based on the premise that our levels of motivation, job satisfaction, and performance are related to how fairly we believe we are treated in comparison with others. If we believe we are unfairly treated, we attempt to change our beliefs or behaviour until the situation appears to be fair. However, there are three components involved in this perception of fairness: inputs, outputs, and input-output ratios (Aamodt, 1959). According to Armstrong (2009) equity theory is concerned with the perceptions people have about how they are being treated as compared with others. To be treated equitably is to be treated fairly in comparisons with other group of people (a reference group) or a relevant other person. Armstrong (2009) Further states that, equity involves feelings and perceptions, and it is always a comparative process. Equity is not synonymous with equality, which means treating everyone the same, since this would be inequitable if they deserve to be treated differently in accordance with their performances.

In relation to the present study, the health workers in Abia State University Teaching Hospital (ABSUTH) Aba, will tend to perform at high levels and such outcomes are relative also to that of other employees in the same or similar work organisations within and across the nation.

4. METHODOLOGY

This study adopted a survey research design to study a sample of 250 (calculated using Taro Yamane’s formula) out of a population of 1013 workers. The simple random sampling was used to proportionately draw the respondents who were administered the instrument (questionnaire) in the offices. Table 1 below contains the proportionate distribution of the sampled health workers in the different departments of the teaching hospital under study.

Table-1. Proportionate Distribution of Sample Units according to Department.

Department	No. of staff to be selected
Medical Doctors	38
Administration	61
X-ray	3
Medical records	13
Medical Laboratory	15
Pharmacy	7
Account	10
Nursing Service Department (NSD)	93
Catering	10
Total	250

Source Field Survey, 2018.

5. DATA PRESENTATION, ANALYSIS AND DISCUSSIONS

Out of the Two hundred and fifty (250) copies of the questionnaire distributed to the respondents in Abia State University Teaching Hospital, (ABSUTH), Aba, two hundred and forty seven (247) were properly completed and returned while three (3) were not. This means 99% return rate and sufficiently representative for the study. The questions and the resulting responses centred on substantive issues in job satisfaction strategies and job performance

Table 2 below contains the responses on staff training and level of performance. The table shows that, 11.74 percent of the respondents expressed that they go on training “agree” in the organisation; 70.45 percent not certain that they do “undecided” go on training; and 17.81 percent indicated that they have never gone on training at all. Thus, it is deduced that the majority of the staff in the hospital are not regularly trained; while others have never been trained at all.

Also, Table 2 below shows that among the 90 respondents whose responses indicated that they are regularly trained, 74.44 percent perform “high” in their jobs; while 23 respondents perform low. But, among the respondents whose responses indicated that they are not regularly trained, and those whose responses indicated that they have never been trained at all, 12.10 percent perform “high” (this means that the irregular training does not affect their performance); 53.50 percent perform at an average level; while 34.39 percent perform “low”. The implication of this is that irregular staff training and lack of training among some staff effect job performance in Abia State University Teaching Hospital ABSUTH, Aba.

Furthermore, the table shows that 100 percent expressed that the area(s) of training in the hospital are determined by the hospital management. The implication is that the staff may have little or no interest in the area(s) they are being trained. To this end, the training received by the staff may have little or no effect on their performance in any case the training area(s) does not interest them. But, due to fear of losing their jobs, it was always difficult for any staff to declare his/her lack of interest in the area he/she is to be trained. Hence, the management may end up wasting money and time embarking on the training that may contribute little or nothing to staff performance.

Table-2. Responses on Staff Training and level of job Performance.

Variables	Frequency	%
Regularity of staff training N = 247		
Often	29	11.74
Not Often	174	70.45
Not at all	44	17.81
Total	247	100
Impact of regular training of staff on job performance N = 90		
High	67	74.44
Low	23	25.56
Total	90	100
Impact of irregularity or lack of training on job performance N = 157		
High		
Moderate	19	12.10
Low	84	53.50
	54	34.39
Total	157	100
Decision of the area(s) of training N = 247		
The staff	0	0
The hospital management	247	100
Others, please specify	0	0
Total	247	100
Coverage of the training area(s), if determined by the hospital management N = 247		
Staff area of specialisation		
General training	89	36.03
Both (staff area of specialization and general training)	41	16.60
	117	47.37
Total	247	100
Encouragement for further studies in special courses N = 247		
Yes	239	96.76
No	8	3.24
Total	247	100
Nature of the study leave N = 239		
Study leave with pay	68	28.45
Study leave without pay	171	71.55
Total	247	100

Source: Field Survey, 2018.

However, [Table 2](#) also shows that 36.03 percent of the respondents indicated that training in the hospital relates to the staff area of specialisation; 16.60 percent indicated that the training usually anchor on general training; while 47.37 percent indicated that the training is usually on both the staff area(s) of specialisation and general training. This indicates that staff training in ABSUTH, Aba cuts across the staff area of specialisation and general training, depending on the staff duties and responsibility in the hospital.

Again, from [Table 2](#) above, it is observed that 96.76 percent of the respondents said that the hospital encourages further studies in special courses; while 3.24 percent said that the hospital does not encourage further studies in special courses. Also, 3.24 percent said that the hospital does not grant leave; while the majority (71.55 percent) indicated that the hospital grants study leave with pay. From the above discussion, it is observed that the hospital, in most cases does not pay the staff while on study leave. The implication of this is that it may discourage most staff who may wish to apply for leave to undergo further studies in special courses but do not have adequate finance to take care of their needs and the course requirements for the required duration, since they will not be paid while on study leave.

Table-3. Response on Staff Promotion and level of Job Performance N = 247.

Variables	Frequency	%
Regularity of staff promotion as and when due		
Very often	11	4.45
Often	67	27.13
Not often	162	65.59
Not at all	7	2.83
Total	247	100
Fairness in staff promotion		
Yes	37	14.98
No	53	21.46
Not always	157	63.56
Total	247	100
Impact of staff promotion system on job performance		
High	31	12.55
Moderate	72	29.15
Low	144	58.30
Total	247	100

Source: Field Survey, 2018.

Table 3 above, presents the data distribution of responses on staff promotion and level of job performance. The table reveals that 4.45 percent of the respondents expressed that the staff of ABSUTH, Aba do receive their promotion very often as and when due; 27.13 percent expressed that they do receive their promotion “often” as and when due; while 65.59 percent expressed that they do “not often” receive their promotion as and when due; and 2.83 percent expressed that they do not receive their promotion as and when due at all. However, the fact that majority of 65.59 percent expressed that the staff are not promoted as and when due, while a smaller percentage (31.58%) expressed that the staff are being promoted as and when due, is an indication that there is the problem of irregular staff promotion as and when due among the staff of ABSUTH, Aba.

Furthermore, the table shows that 14.98 percent of the respondents indicated that the hospital maintains fairness in staff promotion; 21.46 percent indicated that the hospital does not maintain fairness in staff promotion; while 63.56 percent indicated that the hospital does “not always” maintain fairness in staff promotion.

Also, Table 3 above shows that 31 (12.55 percent) of the respondents indicated that the promotion system in the hospital does not affect their performance, hence, they perform high in their jobs; 29.15 percent indicated that they perform average level; while 58.30 percent indicated that the promotion system of the hospital inhibits their performance, in other words, it is deduced that disparity exist in the staff promotion system of ABSUTH which in turn de-motivates the staff, and inhibits their morale, thereby resulting in low job performance among the staff.

Exploring this further in the course of in-depth interview, it was discovered that most respondent alluded to these practice. The interview participants were of the view that training is of great importance towards the growth of any organisation. Training is of great importance to any organisation which cannot be overemphasised. Its importance includes:

- i. Attainment of organizational goal
- ii. Improving on the health status of our patience
- iii. Improving on the already existing standard of the organization.
- iv. Equipments are properly maintained and optimally used in the administration of health care services.
- v. Genuine drugs are properly administered.
- vi. Patients receive adequate training.
- vii. Staff attained a high level of job satisfaction

- viii. There is a perceived sense of belonging among the staff these views were held by the following in the course of my in-depth interview with the respondents: (IDI/Chief Medical Director, Chief Nursing Officer, ABSUTH).

Table-4. Responses on Feedback Reports, Welfare, Employee Participation in Decision-Making Processes, and Awards.

Variables	Frequency	%
Regularity of Feedback reports N = 247		
Very often	14	5.67
Often	88	35.63
Not often	108	43.72
Not at all	37	14.98
Total	247	100
Nature of the Feedback reports: mostly when the staff make mistakes or perform badly on their jobs N = 210		
Yes	24	11.43
Not	89	42.38
Not always	97	46.19
Total	210	100
Consideration of staff contributions on the issues that affect them in decision-making N = 247		
Very often	25	10.12
Often	111	44.94
Not often	102	41.30
Not at all	9	3.64
Total	247	100
Regularity of awards for excellent services N = 247		
Very often	0	0
Often	94	38.06
Not often	132	53.44
Not at all	21	8.50
Total	247	100
Provision of health insurance service for the staff N = 247		
Yes	247	100
No	0	0
Total	247	100
Regularity of salary advance to the staff N = 247		
Very often	0	0
Often	0	0
Not often	13	5.26
Not at all	234	94.74
Total	247	100

Source: Field Survey, 2018.

Table 4 above contains the responses on feedback reports, welfare, employee participation in decision-making processes, and award issues. The table shows that 14 respondents, representing 5.67 percent of the respondents indicated that they “very often” receive feedback reports on their level of performance; 35.63 per cent indicated that they “often” receive feedback reports on their level of performance; 43.72 per cent indicated that they do “not often” receive feedback reports on their level performances; while 14.98 per cent indicated that they do not receive feedback report on their level of performances “at all”.

Among the 210 respondents whose responses indicated that they do “very often”, “often” receive feedback reports on their level of performance, 11.43 percent said that the feedback reports in the hospital are given mostly when the staff make mistakes or perform badly in their jobs; 89 respondents, representing 42.38 percent said that the feedback reports are not mostly given when the staff make mistakes or perform badly in their jobs; while 46.19 percent indicated that the feedback reports are “not always” given mostly when the staff make mistakes or perform badly on their jobs. Thus, it is deduced that feedback reports among the staff of ABSUTH are not mostly given

when the staff make mistakes or perform badly in their duties. In other words, feedback reports in the hospital are generally given whether the staff performs high or low in their jobs.

Furthermore, **Table 4** above reveals that 10.12 percent indicated that the hospital “very often” considers the contributions of the staff on the issue that affect their work-life in the decision-making processes; 44.94 percent indicated that the hospital “often” considered the contributions of the staff on the issue that affect their work-life in the decision-making processes; 41.30 percent indicated that the hospital does “not often” considered the contribution of the staff on the issues that affect the work-life in the decision making processes; while 3.64 percent indicated that the hospital does not consider the contribution of the staff at all in the decision making processes.

On the issue of award, **Table 4** above shows that none of the respondents indicated that the hospital “very often” provides awards for excellent performance; while 38.06 percent indicated that the hospital “often” provides awards for excellent performance; 53.44 percent indicated that the hospital does “not often” provide awards for excellent performance; and 8.50 percent indicates that the hospital does not provide awards for excellent performance at all.

Also, **Table 4** above further indicates that the entire 100 percent indicated that the hospital does not provide health insurance service for the staff. Lastly, **Table 4** above shows that none of the respondents indicated that the hospital “very often” or “often” grant loan to the staff, 5.26 per cent indicated that the hospital does “not often” grant loan to the staff; while 94.74 per cent indicated that the hospital does not grant loan to the staff at all, rather it assists the staff in obtaining loans from their various banks.

Table 5 below contains the data distribution of responses on how regular staff salaries and other monetary incentives are paid, and the effects on staff performance. It reveals that 2.02 receive their salaries “Very Often” while 6.07 percent indicated that they “often” receive their salaries as and when due; 83 percent indicated they do “not often” receive their salaries as and when due; while 8.91 percent indicated that they do not receive their salaries as and when due at all.

Among the 13 respondents whose responses indicated that they often receive their salaries and as when due, 53.85 percent indicated that the regularity of salary payment encourages them to perform high. 30.77 percent indicated that they perform at average level; while 15.38 per cent perform low. Also among the 234 respondents whose responses indicated “Not often” and “Not at all” to the question on the regularity of salaries payment, 8.12 percent perform “high” irrespective of the fact that they do not receive their salaries and as when due; while 39.74 percent perform at an average level; and 52.14 percent perform low. In other words, the table above reveals that the staffs of ABSUTH, Aba do not receive their salaries as and when due, and as such do not prioritise their jobs, the effect of which is inefficiency and low performance among the staff.

Again, **Table 5** below shows that the staffs of ABSUTH do not receive the 13th month salary at the end of the year. This is, predicated on the revelation that the 100 percent expressed that they do not receive addition of a month (13th month) salary at all at the end of the year. Furthermore, the table shows that 26.72 percent indicated that they receive hazard allowance “very often” and “often” respectively; while none of the respondents indicated “not often” or not at all”. Hence, this is the indication that the ABSUTH, Aba does often receive their hazard allowance.

Table-5. Response on payment of Salaries and other Monetary Incentives, and level of Job Performance.

Variables	Frequency	%
Regularity of salary Payment N = 247		
Very often	5	2.02
Often	15	6.07
Not often	205	83
Not at all	22	8.91
Total	247	100
Impact of regularity of payment as and when due on job performance N = 13		
High		
Moderate	7	53.85
Low	4	30.77
	2	15.38
Total	13	100
Impact of irregularity or lack of salary payment as and when due on job performance N = 234		
High	19	8.12
Moderate	93	36.74
Low	122	52.14
Total	234	100
Regularity of payment of hazard allowance N = 247		
Very often	66	26.72
Often	181	73.28
Not often	0	0
Not at all	0	0
Total	247	100
Regularity of annual levy N = 247		
Very often	25	10.12
Often	166	67.21
Not often	39	15.79
Not at all	17	6.88
Total	247	100
Regularity of payment of annual leave allowance And as when due N = 230		
Very often		
Often	18	7.83
Not often	47	20.43
Not at all	151	65.65
	14	6.09
Total	230	100

Source: Field Survey, 2018.

More so, Table 5 reveals that 10.12 percent and 67.21 percent indicated that they do go on annual leave “very often” and “often”; 15.79 percent indicated that they do “not often” go on annual leave at all. Among the 230 respondents whose responses indicated that they “very often”, “often”, and “not often” go on annual leave; 7.83 per cent expressed that they do receive their annual leave allowances very often as and when due; 20.43 per cent expressed that they do “often” receive their annual leave allowance as and when 6.09 per cent expressed that they do not receive annual leave allowances at all. However, the fact that more than 60 per cent of the respondents indicated that they do “Not often” receive their annual leave allowances as and when due, is a clear indication that the staff of ABSUTH, Aba do not often receive their leave allowances as and when due.

Table 6 below contains the data distribution of responses on job rotation and its effect on the level of staff performance. The table shows that 100 percent of the respondents indicated that the hospital rotates the staff job. The table also reveals that 36 (14.57 percent) indicated that their jobs are “very often” rotated; 17.00 percent indicated that their jobs are “often” rotated; 27.94 percent indicated that their job are “not often” rotated; while 40.49 percent indicated that their jobs have never been rotated “at all”. The implication of the above revelation is

that job rotation among the staff of ABSUTH does not affect certain staff in the organisation. That is, while some members of staff are rotated from one job or department to the other; others are not.

Table-6. Responses on Job Rotation and level of Staff Performance.

Variables	Frequency	%
Availability of job performance N = 247		
Yes	247	100
No	0	0
Total	247	100
Regularity of job rotation N = 247		
Very Often	36	14.57
Often	42	17.00
Not Often	69	27.94
Not at all	100	40.49
Total	247	100
Effectiveness of the rotation on job performance N = 247		
Very Often		
Often	18	12.24
Not Often	61	41.50
Not at all	48	32.65
	20	13.61
Total	247	100

Source: Field Survey, 2018.

Furthermore, among the 147 respondents, whose responses indicated that their jobs have ever been rotated, 12.24 percent expressed that the job rotation is “very much” effective on their performance; 41.50 percent expressed that the job rotation is “much” effective on their performance; 32.65 percent expressed that the job rotation is not much effective on their performance; while 13.61 percent indicated that the job rotation makes no difference on their performance.

6. CONCLUSION

Based on the findings of this study, the researcher concludes that satisfaction strategies operated by the Government and Abia State University teaching Hospital Management Board are not adequate enough to engage the staff for excellent job performance. However, to get the very best out of the workers’ abilities, experience, and capabilities, concerted efforts must be made by the management to satisfy them through providing for their general (physical, social, and psychological) wellbeing in the work place. Furthermore, from the revelations of the study, there is no doubt that if drastic measures are not taken to ensure adequate staff satisfaction in ABSUTH, Aba the hospital may sooner or later lose her glory due to low staff performance. Finally, it is the belief of the researcher that if taken into consideration, the recommendation of this research it will go a long way in helping the Government and Board of ABSUTH to provide ameliorative measures to the problems of satisfaction and job performance in state owned establishments and Abia state at large.

7. RECOMMENDATIONS

In relation to the findings of this study, the following recommendations were made with a view to providing ameliorative measures to the identified problems of job satisfactions and its effect among health worker of Abia State University Teaching Hospital.

- i. The government and Abia State University Teaching Management Board should try as much as possible to curtail any form of delay in the payment of staff salaries and allowances, like the annual level allowance, and

ensure that they are paid as and when due. This is necessary because it is generally believed that we work to obtain that which we need from work; and that which we obtain impact on and influence our attitude and behaviour towards our job in the organisation.

- ii. Great effort should be made by the government and Abia State University Teaching Hospital Management Board to combat corruption and any form of disparity that could mar excellent job performance among the staff of the Hospital.
- iii. Management of the hospital should ensure that regular and adequate staff training and development programme are organised for the staff with a view to improving their skill, knowledge, ability, attitude, competence, and above all motivate them for excellent performance. The management should also endeavour to sponsor or encourage the staff to undergo further studies in special courses and seminars. This is necessary considering the fact that the opportunity to continue to grow and develop through training and development programmes is believed to be one of the most important factors in employee satisfaction, performance and retention.

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