

RECURRENT CHANGES, JOB RESOURCES AND NURSES' PERCEPTION OF QUALITY OF SERVICES

Rik Verhaeghe, Ph.D & Peter Vlerick, Ph.D.

The aims of this study were (a) to investigate the association between the appraisal (threat and challenge) of recurrent changes in the work environment and nurses' perception of quality of services, (b) to test the buffering effects of job resources (i.e. supervisor and organizational support, timing control and method control) in this relation, and (c) to compare the results of (a) and (b) between an inpatient and outpatient clinic setting. Nurses' perception of quality of services was assessed basing on the five dimensions of the Servqual model: tangibles, reliability, responsiveness, assurance and empathy (Parasuraman et al., 1985). Secondly, 'job control' was measured with the questionnaire of Wall et al. (1995) to assess the perception of decision latitude on method and timing in work organization. Finally, 'social support' was measured as 'supervisor' and 'organizational' support.

A cross-sectional research design was used. The study was conducted in 10 randomly selected general hospitals in Belgium (5 public and 5 private hospitals). Self-report questionnaires measured our study variables among 6.174 employees (response rate of 51%). This study was focused on a sub-sample of 1412 Registered nurses, employed in inpatient clinics (n=1006) and outpatient clinics (n=406). Occurrence of five recurrent changes in their work environment in the past 6 months and (positive and negative) appraisals of these changes were related to nurses' perception of quality of services.

Results showed that the occurrence of recurrent changes in the work environment of nurses was significantly negatively related to nurses' perception of quality of services (PQS). Linear regression analysis revealed that negative appraisal of changes was negatively related to nurses' PQS. On the other hand, positive appraisal of changes was positively related to some dimensions of PQS. 'Timing control' was found as a significant moderator in the negative relationship between negative appraisal of changes and the level of responsiveness in services (P=0.039): Nurses with high levels of 'timing control' reported significantly more responsiveness in services when negative appraisal of changes was high, compared to nurses reporting low levels of 'timing control'. 'Method control' was buffering the positive relationship between positive appraisals of changes and the level of reliability of services (P=0.022): Nurses with high levels of 'method control' reported significantly more reliability of services when positive appraisal of changes was low, compared to nurses reporting low levels of 'method control'.

No significant differences were found between an inpatient and outpatient clinic setting.

CORRESPONDING AUTHOR: Rik Verhaeghe, Ph.D., Department of Public health, Ghent University, 185 De Pintelaan, Ghent, B-9000, Belgium