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Job Satisfaction among a Multigenerational, Critical Care, Nursing Workforce

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Job Satisfaction among a Multigenerational, Critical Care, Nursing Workforce

By

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A thesis submitted to the faculty of
Gardner-Webb University School of Nursing
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Abstract

Despite the slight ease of the nursing shortage due to the current recession, the United States is expected to still have a shortage of approximately 260,000 registered nurses by the year 2025 (American Association of Colleges of Nursing, 2011). Healthcare is an ever changing profession where nurses, no matter their generation, must learn to adapt to their constantly changing environment and expectations. Job satisfaction is a strong and constant predictor of retention and can vary greatly across generations. The purpose of this study was to get insight into generational differences related to job satisfaction and to use these data to increase clarity concerning retention approaches specific to these generations. The organizing framework was based on Abraham Maslow's Hierarchy of Needs Theory. The study participants were registered nurses who have had at least three months experience in the critical care setting at their current organization. Spearman's Correlation was used to determine relationships between their generation of birth and certain factors of their job satisfaction along with their overall job satisfaction. The data provided support that there is a significant relationship between overall job satisfaction and the registered nurse's birth year. These data also points out windows of opportunities for improvement for certain categories among the specific generations in question.

Recommendations for further research include using a broader sample incorporating various regions of the United States and facilities of larger size. Determining how the different generations perceive their working environments is the first step in developing a plan and strategies to improve their overall satisfaction leading to improved retention.

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Job Satisfaction among a Multigenerational, Critical Care, Nursing Workforce

Chapter I

Introduction

Today, healthcare is on the uphill climb from a nursing shortage. Due to the downward spiral of the economy, the shortage has been slightly eased, however this is a trend that most analysts believe to be temporary. Despite the recession the nursing shortage in the United States is expected to grow to 260,000 registered nurses by 2025 (AACN, 2010). Although a rapidly aging workforce is a primary contributor to this projected shortage there are other factors that influence this shortage as well. Job satisfaction in nurses should be of great concern for any organization. Although it is a primary goal for most organizations to continue to recruit new nurses, it is also very costly and time consuming; therefore ensuring job satisfaction in the current employees is of utmost importance.

A generation can be defined as “a group of individuals born and living contemporaneously” (Merriam-Webster.com). Each generational group shares similar values and motivations that can be related to their historical life experiences. These different attitudes and beliefs are thought to produce “generational-specific attitudes and values regarding work and work environment” (Wilson, Squires, Widger, Cranley, Tourangeau, 2008, p 717). Currently there are four generational cohorts of registered nurses in the workforce: Veterans (born before 1945); Baby Boomers (born 1946-1964); Generation X (born 1965-1979) and Generation Y or Millennials (Born 1980-onwards) (Wilson et al., 2008). In the nursing workforce, all of these generations work side by side, all bringing their different views on work ethic and life balance to the table and expect to be managed appropriately. “Given the diverse attitudes of nurses of different generations, it is vital to explore how overall job satisfaction and

satisfaction with specific aspects of work are similar and different across the generations” (Wilson et al., 2008, p. 718). Research has linked poor nurse work environment to poor nurse outcomes such as poor job satisfaction. Nursing turnover is expensive and results in growing shortages (Baernholdt & Mark, 2009). Management is not easy work. Making a conscious effort to ensure the work that is being done counts in terms of retention and productivity can increase retention for both staff nurses and management. The first step in focusing on retention is understanding the similarities and differences in the multigenerational workforce at hand.

Background

Veteran nurses make up 24% of the nursing workforce (Sudheimer, 2009) and portray the characteristics of being conservative, overly cautious and very loyal to their organization and authority (Wilson et al., 2008). Baby Boomers make up 47% (Sudheimer, 2009,) and are the largest group of nurses currently working today. They value their performance along with titles and promotions. They want to work but also need to ensure purpose and meaning (Wilson et al., 2008). They are a very dedicated group who believe in company loyalty but want to be compensated with a good pension for their years of service (Sudheimer, 2009). Generation X nurses make up 24% of the nursing workforce (Sudheimer, 2009). They are self- directed and enjoy work environments that promote their talents, creativity and expertise. They “work to live” and are more likely to change jobs if they are unhappy with their environment (Wilson et al., 2008). They are very focused on taking care of themselves first and have little company loyalty (Sudheimer, 2009). Generation Y nurses make up 8% of the nursing workforce (Sudheimer, 2009) and want to maintain a balance between home and work and are life- long learners (Wilson et al., 2008). They enjoy working in groups, expect an extended orientation so

they can feel comfortable with their job and desire frequent and constructive feedback (Carver & Candela, 2008).

Theoretical Framework

The theoretical framework used in this study is based on Abraham Maslow's Hierarchy of Needs (Appendix A). Maslow developed this theory as a means to help understand human behavior. His model, however, can also relate to the business world as its setting provides a "means to understand and affect employee motivation" (Benson & Dundis, 2003). This model can influence a number of different fields including healthcare in that it continues to be used to understand what is important to individuals. Maslow's theory was used as a framework for this study because it can help to identify the various organizational benefits that can be offered to satisfy employees' needs, in turn helping to reduce expenses and increase revenues.

Maslow created a visualization of his hypothesis in the form of a pyramid that is divided into five levels. The purpose of the model is to understand that unless an individual's or employee's basic needs have been met, they cannot advance to the next higher level of the pyramid. We are motivated by unsatisfied needs. Certain lower needs must be satisfied before higher needs can be attended to.

At the bottom of the pyramid is the psychological needs level. This includes food, water and shelter which are the most basic needs for human survival. Maslow states that at the base of the business pyramid would be monetary compensation which could include wages, salaries, bonuses, and retirement plans (Sadri & Bowen, 2011). He states that "if individuals are in their minds, fairly paid, they will not spend an inordinate amount of time thinking about their salaries" (Benson & Dundis, 2003, p. 317). These wages would then be used to provide their

basic survival needs. Another physiological need that is becoming more important to many employees is work-life balance. This is a trait that has become a necessity in recruitment and retention.

When the basic needs have been met, the employee moves to the next tier on the pyramid and seeks safety. This should include physical and mental safety which involves freedom from anxiety and stress. In a working environment this could be helped by the employer providing adequate benefits and training. This could include adequate health coverage for employee and families along with disability and life insurance plans. This only adds to the feeling of long term safety within an organization. Once the individual's basic safety conditions have been met then they would look to the third stage which Maslow identifies as the social level. This level includes the individual's need for "belongingness, friendship and love" (Benson & Dundis, 2003, p. 316). Employees often seek social belongingness in the workplace. Although much of the focus in an organization is often pointed towards the technical aspects and training, the importance of the social relationships of employees should not be underestimated when focusing on retention. Employees who are looking for this belonging are more likely to continue their employment at a company based on the social support systems that they have established with their co-workers and management.

As belongingness and social acceptance increase, it is possible to look toward the fourth tier of the pyramid which is self-esteem. In this stage the "individual seeks to feel competent, confident and self-assured" (Benson & Dundis, 2003, p. 316). Maslow's esteem needs include the needs for "responsibility, reputation, prestige, recognition and respect from others" (Sadri & Bowen, 2011, p. 47). On an organizational basis, this can be based on the individual's rewards,

incentives, recognitions and positive performance appraisals. These lead to self –confidence which will only strengthen the employee’s motivation and increase productivity.

After this self-esteem is imbedded, the employee can then escalate to the fifth and top tier of the pyramid which is to accrue self –actualization and develop their potential. This includes increasing their confidence and beginning to take risks and venture out to learn new things. “As the individual learns and grows in the work environment, Maslow suggests that duty becomes pleasure and pleasure is merged with duty” (Benson & Dundis, 2003, p. 317). This translates to the employee’s need for self-fulfillment and to become the best one is capable of becoming (Sadri & Bowen, 2011). This level of Maslow’s hierarchy should be used to inspire employees and motivate them to perform at their highest potential.

Maslow ultimately suggests that in order to motivate employees, they must be made to feel secure, needed and appreciated. Leadership must understand which needs are crucial for individual employee motivation. “Motivated employees work harder, produce higher quality and greater quantities of work, are more likely to engage in organizational citizenship behaviors and are less likely to leave the organization in search of more fulfilling opportunities” (Sadri & Bowen, 2011, p. 45). Maslow’s research suggests that employee motivation requires more than just an acceptable salary and that all employees are not motivated by the same incentives. Managers must identify the individual needs of each employee and ensure they offer benefits that help satisfy needs at all five levels of Maslow’s hierarchy.

Purpose and Rationale

The average age for nurses in the United States is 41.8 years of age (Wieck, Dols & Landrum, 2010). One startling estimate indicates that approximately “50% of current nurses will leave the workforce in the next 5-10 years due to retirement, disability and/or career changes” (Carver & Candela, 2008, p.984). Job satisfaction has been shown to be a strong and consistent predictor of employee retention. There are many different generations of employees who have made a career out of nursing. Is it possible for different generations of nurses to have different focus points when it comes to job satisfaction? The purpose of this study is to find out just that, only in a critical care setting.

Having a better understanding of these generations and their priority differences can eventually lead to more specific retention approaches. “Retention of knowledgeable and experienced RNs as well as retaining and promoting the continuing development of less-experienced RNs are necessary to stabilize the workforce and to ensure adequate supply of RN’s over the upcoming years” (Wilson et al, 2008, p. 717). Nurses of each generation develop different attitudes making it vital to explore how their overall job satisfaction and satisfaction with specific elements in their work environment compare across generations. Determining how different generations perceive their workplace could be the first step in developing specific retention strategies to improve the quality of work for all nurses. Competitive employers must be knowledgeable about employee characteristics and preferences at different stages in their careers in order to recruit and retain.

Research Questions

1. Is there a relationship between overall job satisfaction and the generation of a critical care nurse's birth?
2. What categories of job satisfaction were each generation most and least satisfied with?
Where should nursing management aim their focus for each generation in the future?

Chapter II

Review of the Literature

Introduction

The nursing workforce is a very diverse population when it comes to generational differences. Little research has been completed on where the focus needs to lie for each different population in question. The small amount of research that has been completed, however, has consistently shown that the “workforce consists of generational groups with different attributes and priorities” (Blythe, Baumann, Zeytinoglu, Denton, Akhtar-Danesh, Davies & Kolotylo, 2008, p.137). Depending on the generation, job satisfaction may hold many different meanings. “Nurses who report a higher level of job satisfaction are more likely to remain employed in their current health care organization. Conversely, nurses who are less satisfied are less likely to remain employed in their current health care organization” (Wilson, Squires, Widger, Cranley, & Tourangeau, 2008, p.717). In an effort to have a better overall relationship with their employees, managers and executives need to acquire a better understanding of what is important to each generation.

Generational Differences and Job Satisfaction

An exploratory analysis was conducted to determine whether nurses in different age groups had different attitudes towards their work (Blythe et al, 2008). In this study, attitudes of nurses from different decades were compared using the New Healthcare Worker Questionnaire which included questions pertaining to demographics, employment status, work status preferences and the nursing workplace (Blythe et al, 2008). A total of 1,396 surveys were returned with a response rate of 52%.

Results from the study revealed that commitment to their organization and the nursing profession was moderate among all age groups except for those 30-39 years of age which reported low commitment levels. When questioned about job satisfaction, all age groups were low to moderately satisfied overall. "The nurses were most satisfied with the type of work they were doing, their immediate supervisors and their coworkers" (Blythe et al, 2008, p.145) but were only moderately satisfied with the "financial rewards, rules and procedures, and promotional opportunities" (Blythe et al, 2008, p.145). Contingent rewards, rules and procedures, and promotional opportunities were the least satisfying categories for all age groups. "The youngest nurses were also dissatisfied with pay and pay raises, while the oldest nurses were dissatisfied with fringe benefits" (Blythe et al, 2008, p.145).

Nurses 50 years of age and above revealed the greatest overall job satisfaction specifically related to pay and promotion opportunities. Moderate stress levels were reported from all age groups and all were determined as experiencing some burnout. One of the most significant findings in this study was that nurses over 50 appeared relatively content with their work and were the least stressed of the four groups. However, they also scored higher on the lack of personal accomplishment than younger nurses. The nurses ages 30-39 were the most negative group when it came to assessment of their work, work environment and overall satisfaction.

Another study conducted by Wilson, Squires, Widger, Cranley, and Tourangeau in 2008 explored the generational differences in job satisfaction. This study recognized the fact that there were an increasing number of nurses that were retiring before the age of 65 but the number of seats in nursing programs was not increasing to fill this gap.

This study distinguished between nurses by dividing them up into the previously discussed four generations; Veterans (born before 1945), Baby Boomers (born 1946-1964), Generation X (born 1965-1979) and Generation Y or Millennials (born 1980 onwards). This study was completed using the McCloskey Mueller Satisfaction Scale. For this study more than one third of the Baby Boomers and Generation X nurses were employed in critical care, where more than half of Generation Y nurses provided care on a medical or surgical unit. Results indicated nurses in Generations X and Y again reporting a significantly lower level of overall job satisfaction than Baby Boomer nurses. Again, this study showed that the Baby Boomers were more satisfied in categories such as extrinsic reward, pay benefits and scheduling than their younger cohorts. This study recommended that health care organizations need to recognize that their structures may not be optimal for retaining the younger nurses that are currently in this environment and strategies need to be formed to promote retention for this generation. It suggested establishing formal recognition programs, providing professional development days for those with higher job satisfaction and getting nurses involved with shared governance where they are empowered to help with decision making. It also highly recommended future studies to ensure that these and other strategies that are put into place are helping with the retention of this very necessary group of nurses.

“Understanding how to relate to the different generations and tapping into their individual strengths can lead to improved nursing work environments” (Carver & Cadela, 2008, p.984). Just as managers have increased their knowledge concerning different ethnic and cultural diversity, results from this study suggested that knowledge concerning generational diversity is just as important. The nursing population was broken down into the four generational groups (Veterans, Baby Boomers, Generation X and Millennials) and certain characteristics of each were discussed, including; defining life events, expectations of employer

and comfort with technology. Researchers noted that of course all members of each generation will not be exactly the same but there are certain qualities that the majority of the group develops based on their collective life journeys and experiences. Apoltolidis and Polifroni (2006) conducted a survey of nurse satisfaction at work along with generational differences and found that “Baby Boomers prefer autonomy over professional status and Generation X needs an environment that promotes professional growth and fosters communication and interaction with colleagues” (p.508). Members of the Generation X are less likely to stay in a job that shows no potential for growth. The authors reminded their readers that it is important to understand the needs of this generation especially to increase their job satisfaction and keep them in the workforce. Generation Xers can be viewed as very negative because of their tendencies to be “impatient, inattentive, arrogant, skeptical, and demanding” or they can be viewed as very positive because of their characteristics of being “independent, pragmatic, and good at multi-tasking” (Carver & Candela, 2008, p.988).

Millennials are more accustomed to working in teams and having more supervision and structure. This group will expect more extensive orientation, a fun environment, variety of work projects and flexible work schedules (Carver & Candela, 2008). “So far the Millennial Generation appears to be a good fit for the nursing profession; team players who want to make a difference in the work and who are techno-literate” (Carver & Candela, 2008, p. 989). This research suggests that nurse managers who realize that each employee will bring his/her own perspectives to work and in turn allow employees to carry out their job duties in their preferred style will improve “organizational commitment, job satisfaction, well-being and productivity” (Carver and Candela, 2008, p. 990) and will lead to a happier and more productive workforce.

In a study done where the Baby Boomer generation and Generation X were compared, qualities such as burnout, turnover intention, areas of work life and personal knowledge transfer were examined. The results showed that Generation X nurses experience their work settings as less consistent with their personal values than do the Baby Boomers. Generation X nurses also have a higher rate of job burnout and are less motivated to participate in knowledge sharing (Leiter, Jackson, & Shaughnessy, 2008) These results only echo the previous studies in an effort to reiterate the importance of developing retention strategies for these Generation X nurses.

“The key to retention is creating an environment where all of the generations feel welcome and valued” (Wieck, Dols, & Landrum, 2010, p. 7). Wieck et al. (2010) completed a survey in which a generational analysis was assessed related to nurse satisfaction and management priorities with the common goal of increasing retention. One result verified that the work ethic and values of the upcoming workforce were much different than their Baby Boomer parents. The authors described the “twenty something” generation as wanting a manager who “attends to their personal needs, nurtures and supports them, provides a motivating environment, and has good people skills” (Weick et al, 2010, p. 8). The younger generation wants to be “led not managed” (Weick et al, 2010, p. 13). One commonality that they found was that the more mature and experienced nurses also expect personal attention from their managers. Among the four age groups that were studied, (18-26 years, 27-40 years, 41-60 years, and >60 years) all chose supportive as the number one characteristic that they desire in a manager except the youngest group who chose dependable.

The younger generations would like to be managed by a “team player who values their participation on the work team and who offers praise and gratitude sincerely and regularly”

(Weick et al, 2010, p. 11). Surprisingly, the most senior category is the only one that mentioned quality at all.

Summary

Nurse recruiters and managers should be aware that nurses have different needs at different stages of their career. Because of this, a variety of strategies are required to attract them to, and retain them in, the nursing workforce. Solving the shortage of nurses in hospitals can only be accomplished if nurses who are employed in the hospital settings stay there.

Previous research has provided evidence that job satisfaction is significant and consistently correlated with retention among nurses in general. However, little research can be found on certain specialty nursing units including specifically critical care. It has been argued that the critical care environment can be qualitatively different from many other nursing environments due to a constant exposure to life-threatening crisis situations and much higher decisional stress. Studies have shown that the unit structure can have a significant effect on overall job satisfaction for critical care nurses. The more work related decisions the nurses were able to participate in, the more satisfied they were with their work (Bucknall & Thomas, 1996).

“Nurses who report a higher level of job satisfaction are more likely to remain employed in their current health care organization” (Wilson, et al, 2008). Fluctuations in turnover of critical care nurses are a complex problem and the leadership characteristics of their managers may be a determinant in this rate (Boyle, Bott, Hansen, Woods & Taunton, 1999). Long term strategies for managers should include understanding the characteristics of the

different generations of nurses in an effort to increase job satisfaction therefore leading to retention and organizational commitment.

Chapter III

Method

Subjects

A total of 87 questionnaire packets were distributed to, multigenerational, registered nurses from the Intensive Care and Float Pool Units of a rural, 241 bed, acute care facility in North Carolina. To be included in the sample, the registered nurses must have been employed in the critical care setting for at least 3 months at the time of distribution of the questionnaires.

Sampling & Setting

Questionnaire packets including demographic questionnaires, surveys and informed consent letter , were distributed to all Registered Nurses in the Intensive Care and Float Pool Units of this rural hospital via their workplace mailboxes. Completed questionnaires were returned to the investigator in the enclosed, self- addressed envelopes.

Instruments

A demographic data sheet was formulized to obtain demographic variables of race, generation, gender, education, years of experience, employment status, and specialty certifications (Appendix B).

The McCloskey/ Mueller Satisfaction Scale (MMSS), is a 31 question survey that was designed to be used to assess the satisfaction of hospital staff nurses. In 1974 McCloskey did a study on nurses who had resigned from jobs and asked what rewards would have kept them on their job. This survey is based on those results and was revised in 1987 and again in 1990 to the current version. This survey uses a Likert scale and captures eight types of satisfaction: satisfaction with extrinsic rewards, scheduling, family/work balance, co-workers, interaction,

professional opportunities, praise/recognition, and control/responsibility(Appendix C). Each item is scored 1 to 5 with 5 indicating the highest level of satisfaction. The subscales were assessed to determine if they correlate with other variables as theoretically expected: task variety, autonomy, feedback, friendship opportunities, task identity, and intent to stay. “Moderate positive correlations found for all expected relationships demonstrate construct validity” (Mueller, 1990, p. 1).

The subscales were then correlated with the Brayfield-Rothe General Job Satisfaction Scale and with subscales from Hackman and Oldham’s Job Diagnostic Survey. Correlations ranged between .53 and .75 indicating criterion-related validity. Correlations between these two scales actually indicated that the McCloskey/Mueller Satisfaction Survey may be a more valid measure of nursing satisfaction compared with the other scales that were not designed with nurses in mind (Mueller, 1990).

Ethical procedures

The investigator initially completed a research review board proposal form (Appendix E) and received approval to conduct this study from Gardner-Webb University. Participants were informed that completion of the questionnaires were completely voluntary and anonymity was maintained by requesting that participants make no identifying marks on any of the questionnaires. The investigator and advisor’s contact information were made available to all of the participants if any questions or concerns arose. Permission to conduct the study was obtained from the Chief Nurse Executive in the organization where the study was conducted .

Data Collection Procedures

A total of 87 MMSS questionnaires, along with a demographics questionnaire and a cover letter including the informed consent form (Appendix F) were placed in the workplace mailboxes of all Intensive Care and Critical Care Float Pool registered nurses meeting the inclusion criteria at this rural hospital. Completing and returning the questionnaires implied consent for participation in the study.

Data Analysis Procedures

Each returned questionnaire was assigned a number and responses were then entered for each individual item into the Statistical Package for Social Sciences program for computing results using Spearman's Correlation.

Chapter IV

Results

Statistical Presentation

Descriptive statistics were used to analyze the demographic data listed below in Table 1. The participants consisted of 37 Registered Nurses who were currently employed in the Intensive Care Unit or Critical Care Float Pool of a 241 bed, acute care facility in North Carolina. This resulted in a 42.5% response rate. In an effort to correlate the data most accurately, the demographics questionnaire asked for year range of birth rather than age. The majority of the respondent's birth years were between 1965-1979 making them Generation Xers (N= 16). There were 33 females and only 4 male respondents. Races consisted of Caucasian (N= 36) and African- American (N=1). Educational backgrounds were as follows: Associates Degree (N= 19), Baccalaureate Degree (N= 16), and Masters Degree (N= 2). Employment status resulted in Full Time (N= 32) and Part Time (N= 5). The average years of nursing experience was 10.2 years.

Table 1

Frequencies of Demographic Data

VARIABLE	FREQUENCY	PERCENTAGE
RACE		
Caucasian	36	97.3
African- American	1	2.7
GENDER		
Male	4	10.8
Female	33	89.2
YEAR OF BIRTH		
1946-1964 (Baby Boomers)	7	18.9
1965-1979 (Generation X)	16	43.3
1980 and After (Generation Y)	14	37.8
EDUCATION		
Associates Degree	19	51.3
Baccalaureate Degree	16	43.3
Masters Degree	2	5.4
EMPLOYMENT STATUS (related to number of hours worked)		
Full Time (36 hour per week or >)	32	86.4
Part Time (20-36 hour per week)	5	13.6
YEARS OF EXPERIENCE IN NURSING		
0- 5 years	16	43.2
6-10 years	7	18.9
11-15 years	5	13.6
16-20 years	3	8.1
21-25 years	2	5.4
26-30 years	3	8.1
31-35 years	1	2.7

Job satisfaction scores were obtained by calculating the mean of each generation's responses to 30 of the 31 questions in the McCloskey/Mueller Satisfaction Scale ($M = 116$, $SD = 16.6$). Number 20 in the survey was omitted due to the insignificance of the question related to the study. Scores ranged from 74-139 out of a possible 150 points. The ordinal data were separated into 8 categories: extrinsic rewards, scheduling, balance of family and work, co-workers, interaction opportunities, professional opportunities, praise and recognition, and control and responsibility. Spearman Correlation was used to determine significance between the overall scores of the McCloskey/Mueller Satisfaction Scale and each generation (Baby Boomers, Generation X and Generation Y) along with the scores for each of the eight categories compared to each generation as listed in Table 2. Data analysis revealed that there was a significant correlation between the overall satisfaction scores ($r = .343$, $p = 0.38$) along with the categories of scheduling ($r = .315$, $p = 0.58$) and professional opportunities ($r = .448$, $p = 0.005$) to the generations in question. A one way ANOVA was also attempted to obtain additional information concerning the specific categories compared to each of the generations but the results were comparable to the Spearman Correlation and no new information was obtained.

Table 2

Correlation between Generation and Category

		Generation
Generation	Spearman Correlation Sig (2- tailed) N	1 37
Total Satisfaction Score	Spearman Correlation Sig (2- tailed) N	.343* .038 37
Extrinsic Rewards	Spearman Correlation Sig (2- tailed) N	.116 .494 37
Scheduling	Spearman Correlation Sig (2- tailed) N	.315* .058 37
Family Work Balance	Spearman Correlation Sig (2- tailed) N	.337 .041 37
Co-worker Satisfaction	Spearman Correlation Sig (2- tailed) N	.050 .769 37
Interaction Opportunities	Spearman Correlation Sig (2- tailed) N	.292 .080 37
Professional Opportunities	Spearman Correlation Sig (2- tailed) N	.448** .005 37
Recognition	Spearman Correlation Sig (2- tailed) N	.169 .316 37
Control/Responsibility	Spearman Correlation Sig (2- tailed) N	.249 .137 37

* Correlation is significant at the 0.05 level (2-tailed)

**Correlation is significant at the 0.01 level (2- tailed)

The second research question focuses on the actual results for each generation to see if there are trends within the generations that need to be focused on. Out of a possible score of

5.0, the overall job satisfaction for this sample was 3.77875. The mean for each generation and each category is represented on Table 3.

Table 3

Mean Scores

GENERATION	EXTRINSIC REWARDS	SCHEDULING	FAMILY-WORK	CO-WORKERS	INTERACTION	PROFESSIONAL	PRAISE	CONTROL	OVERALL
Y	3.82	4.46	3.54	4.07	4.32	3.66	4.28	4	4.018
X	3.87	4.06	3.25	3.96	3.95	3.39	4.12	3.9	3.8125
BB	3.6	3.71	3.14	4	3.89	2.9	3.75	3.05	3.505

Chapter V

Discussion

Interpretation of Findings and Implications for Nursing

This study's purpose was to determine if there was a relationship between the generation of a critical care nurse's birth and their overall job satisfaction. Data analysis for this study revealed that there was indeed a significant relationship between the two variables. The generation of a critical care nurse's birth does indeed have an effect on their overall job satisfaction. Additionally, the individual categories of scheduling and professional opportunities were also found to have a significant correlation to the nurse's generation of birth as well. A different generation of birth essentially results in a different current age for these nurses. Flexibility of work schedules and opportunities for professional advancement are both very important categories for each generation, however, depending on the current age, it may hold a different rank in priority. In previous studies Generation X and Y were found to have a significantly lower level of overall job satisfaction than Baby Boomers. Interestingly enough, this study resulted in just the opposite. Baby Boomer nurses (M= 3.5) resulted in lowest level of overall satisfaction, followed by Generation X nurses (M= 3.8) and Generation Y nurses (M= 4.0). The smaller sample size for the Baby Boomers may have played a role in this change but also the more stressful environment of Critical Care could have a long term effect as well.

The second part of the research question for this study focused on the relationship of certain categories to each generation in question. The Baby Boomers make up the largest group of nurses working today and are known to value their performance, titles and promotions (Sudheimer, 2009) In this study, this group was most satisfied with their relationships with their peers and physicians while at work, followed by the praise and positive recognition that they

receive. They are, however, moderately (M=3.6) satisfied with their extrinsic benefits package, which to this group, with retirement approaching, is a top priority. Opportunities for improvement are clear with this group in the category for professional opportunities. They are not satisfied with the opportunities they are given to provide input on committees, participate in research and do not feel as if they are given opportunities to write and publish.

Generation X Nurses are self-directed and like to work in environments that promote their talents and creativity. This group is also very likely to change jobs if they are not happy with this environment (Wilson et al., 2008). In this study, the Generation X Nurses seem to be the most satisfied with the positive praise and recognition that they are receiving. This includes being satisfied with their supervisor and the recognition and encouragement brought to the staff by them. This can be a key element in staff retention as managers seem to focus quite frequently on the negative aspects of day to day work routine rather than bringing out the positives. Scheduling was also scored very highly by this group. In contrast, the Generation X Nurses scored the category concerning balancing family and work the most negative of all of their categories. The questions related to this category concerned opportunity for part time work, maternity leave and the availability of child care facilities. At least part of this generation is currently at the age and time in their lives where these types of amenities are very important factors and benefits that they look for when applying for and retaining a job.

Generation Y Nurses put great importance on balancing home and work life along with the desire to receive frequent and constructive feedback (Wilson et al., 2008). They also desire a variety of work projects and flexible work schedules (Carver & Candela, 2008). This group was the most satisfied with the scheduling category, receiving the highest mean score (M= 4.46) in all of the categories for any generation. The questions concerning this category tell us that they

are very satisfied with their flexibility of their hours, weekends and compensation pay. This group was overall, moderately to highly satisfied with every category but like the previous generation, scored the family work life balance category the lowest which is very concerning given that this is a top priority for this group. This generation is still of child bearing age and wants to ensure that they will have adequate coverage for maternity leave while also making available child care facilities a priority.

Critical Care nurses live in a very stressful environment each and every day of their work lives. They must make decisions very quickly and depend on their critical thinking skills to accurately ensure the care of their patients. Because of this, they may endure very many months of very extensive training, which in turn is very costly to the organization. This only stresses the importance of retention techniques for these nurses making this study and its findings very valuable. There is not one stereotypical Critical Care nurse. They come from all generations, races, and backgrounds. In order to retain these valuable nurses, management must focus on the important factors for each of these generations. They must also use the negatively scored categories as windows of opportunity that are now transparent and lay their focus on these points.

Limitations

Possible limitations of the study include limited volunteer participation rate in each age group resulting in more information on some generations and less in others. No information was obtained regarding the Veterans generation. Other limitations included that only one response from the African-American race and a very small sample of males were obtained. The

convenience sampling and geographic location may also limit generalization to a larger population.

Implications for Further Research

As this study was conducted in only one organization within the United States, a broader study incorporating larger organizations and various regions could be performed to incorporate a larger sample size. Depending on the organization's benefits packages and other opportunities, more specific questions could be asked to zero in on more key factors of job satisfaction.

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Appendix A

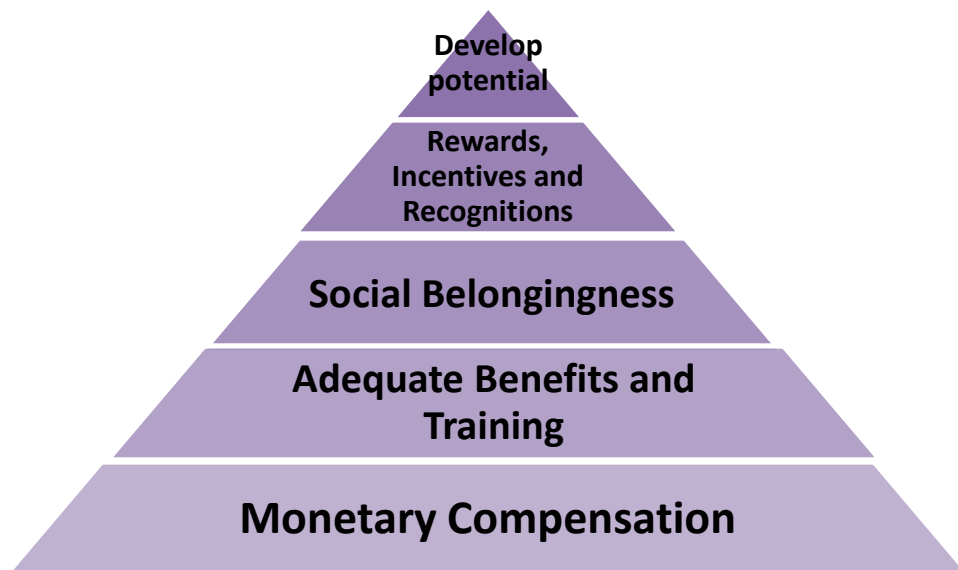
Abraham Maslow's Hierarchy of Needs

Abraham Maslow's Hierarchy of Needs



Maslow's hierarchy of needs- motivation theory. (n.d).

Abraham Maslow's Hierarchy of Needs Related to Business



(Benson & Dundis, 2003)

Appendix B
Demographic Data Form

Demographics Questionnaire

Please choose the answer for each multiple choice question below that best describes yourself and fill in the blanks as appropriate.

1. Race/Ethnicity

- a. Caucasian
- b. African-American
- c. Asian
- d. Hispanic
- e. Other _____

2. Year of Birth

- a. 1945 or before (Veteran)
- b. 1946-1964 (Baby Boomer)
- c. 1965-1979 (Generation X)
- d. 1980 or after (Generation Y)

3. Gender

- a. Male
- b. Female

4. Education

- a. Diploma
- b. Associates Degree
- c. Baccalaureate Degree
- d. Master's Degree

5. Years of experience as a Registered Nurse _____

6. Employment Status

- a. Full Time (36 hours per week or greater)
- b. Part Time (20-36 hours per week)
- c. Once weekly or less

8. Please list any specialty certifications that you hold (CCRN, PCCN etc). _____

Appendix C

McCloskey/Mueller Satisfaction Scale (MMSS)

McCloskey/Mueller Satisfaction Scale (MMSS)

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How satisfied are you with the following aspects of your current job?
Please circle the number that applies.

	Very Satisfied	Moderately Satisfied	Neither Satisfied nor Dissatisfied	Moderately Dissatisfied	Very Dissatisfied
1. salary	5	4	3	2	1
2. vacation	5	4	3	2	1
3. benefits package (insurance, retirement)	5	4	3	2	1
4. hours that you work	5	4	3	2	1
5. flexibility in scheduling your hours	5	4	3	2	1
6. opportunity to work straight days	5	4	3	2	1
7. opportunity for part-time work	5	4	3	2	1
8. weekends off per month	5	4	3	2	1
9. flexibility in scheduling your weekends off	5	4	3	2	1
10. compensation for working weekends	5	4	3	2	1
11. maternity leave time	5	4	3	2	1
12. child care facilities	5	4	3	2	1
13. your immediate supervisor	5	4	3	2	1
14. your nursing peers	5	4	3	2	1

	Very Satisfied	Moderately Satisfied	Neither Satisfied nor Dissatisfied	Moderately Dissatisfied	37 Very Dissatisfied
15. the physicians you work with	5	4	3	2	1
16. the delivery of care method used on your unit (e.g. functional, team, primary)	5	4	3	2	1
17. opportunities for social contact at work	5	4	3	2	1
18. opportunities for social contact with your colleagues after work	5	4	3	2	1
19. opportunities to interact professionally with other disciplines	5	4	3	2	1
20. opportunities to interact with faculty of the College of Nursing	5	4	3	2	1
21. opportunities to belong to department and institutional committees	5	4	3	2	1
22. control over what goes on in your work setting	5	4	3	2	1
23. opportunities for career advancement	5	4	3	2	1
24. recognition for your work from superiors	5	4	3	2	1

	Very Satisfied	Moderately Satisfied	Neither Satisfied nor Dissatisfied	Moderately Dissatisfied	Very Dissatisfied
25. recognition of your work from peers	5	4	3	2	1
26. amount of encouragement and positive feedback	5	4	3	2	1
27. opportunities to participate in nursing research	5	4	3	2	1
28. opportunities to write and publish	5	4	3	2	1
29. your amount of responsibility	5	4	3	2	1
30. your control over work conditions	5	4	3	2	1
31. your participation in organizational decision making	5	4	3	2	1

Appendix D

Use of McCloskey/Mueller Satisfaction Scale Approval



Permission to use form:

This gives permission to use the McCloskey/Mueller Satisfaction Scale (MMSS) to Sara Clay for the purpose as stated in the request dated 9/27/11.

The instrument may be reproduced in a quantity appropriate for this project.

Signed:

Sue Moorhead

Sue Moorhead, Associate Professor, College of Nursing

Date: October 5, 2011



The University of Iowa
The Center for Nursing Classification & Clinical Effectiveness
College of Nursing 407 CNB
Iowa City Iowa 52242 USA

Appendix E

Gardner-Webb University Institutional Review Board Approval



THE INSTITUTIONAL REVIEW BOARD
of
GARDNER-WEBB UNIVERSITY

This is to certify that the research project titled
Job Satisfaction Among a Multigenerational Critical Care Nursing Workforce

being conducted by Sara Clay

has received approval by the Gardner-Webb University IRB.

Date 1/5/12

Exempt Research

Signed Lindy Miller
Department/School/Program IRB Representative
Wicki Walker
Department/School/Program IRB Member

Expedited Research

Signed _____
Department/School/Program IRB Representative

Department/School/Program IRB Member

IRB Administrator or Chair or Institutional Officer

Non-Exempt (Full Review)

Signed _____
IRB Administrator

IRB Chair

IRB Institutional Officer

Expiration date _____

IRB Approval:

Exempt Expedited Non-Exempt (Full Review)

Revised 09-09

Appendix F
Informed Consent Form

Job Satisfaction among a Multigenerational, Critical Care, Nursing Workforce

Consent for Participation

Mrs. Sara Clay is a Graduate Student in Gardner-Webb University's MSN program studying job satisfaction among the different age groups in the nursing profession. Although the study will not benefit you directly, it may provide information and results that directly correlate job satisfaction through the many generations of nursing.

The appropriate people and review boards of Gardner-Webb University have approved the study and its procedures. The procedure includes responding to a questionnaire concerning your current job satisfaction and a demographics questionnaire. Participation in this study will take approximately 10 minutes. You are free to ask any questions concerning the study or about being a subject and may call Mrs. Clay at (704) 472-9297 or Dr. Cindy Miller at Gardner-Webb University at (704) 406-4364.

Your participation in this study is voluntary; you are under no obligation to participate. You have the right to withdraw at any time. The completion and return of the questionnaires will serve as your consent to participate.

Please make no identifying marks on the questionnaires. Your identity will not be revealed while the study is being conducted or when the study is reported or published. All study data will be collected by Mrs. Clay and will be stored in a secure place. You may request a copy of the results following completion of the study. Please return all completed questionnaires in the provided envelopes to the ICU Assistant Director's, mailbox no later than Wednesday, February 22, 2012. Thank you for your time and willingness to participate.