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Career Development and Job Satisfaction  
of Registered Nurses practising in  
community settings.

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ABSTRACT.

A study of aspects of the career development and job satisfaction of registered nurses practising in community settings.

The study surveys the literature on career development and job satisfaction, deriving a new model of career development which allows for patterns of growth and nongrowth in a career; then applies this model to a particular work field - that of registered nurses practising in community settings, postulating that a pattern of nongrowth or occupational role integration (i.e. where the role incumbent ceases to discriminate between her experience of her job and her expectations of it), will be applicable to the majority of nurses in the population studied.

Four research hypotheses, designed to demonstrate career nongrowth, were tested:

- (1) that there is no positive linear relationship between level of perceived autonomy and job satisfaction.
- (2) that there is no positive linear relationship between level of perceived challenge and job satisfaction.
- (3) where subjects report low job satisfaction the length of tenure is short and perceived autonomy and perceived challenge are low.
- (4) where subjects report high job satisfaction, the length of tenure is long, age is correspondingly high, but perceived autonomy and perceived challenge approximate the means of the total sample.

The population selected for study was 'all registered nurses practising in community settings (with the exception of nurses in private employment, e.g. attached to nursing bureaus) in the Palmerston North Health District', the target population being located and the co-operation of nurses with the research proposal sought, in an initial letter to all likely employment agencies.

The short form of the Job Diagnostic Survey (Hackman & Oldham, 1974), from which measures of perceived autonomy, perceived challenge and job satisfaction were obtained, and an accompanying biographical data sheet, were administered by reply-paid mail to all nurses in the target population who agreed to participate in the study (not necessarily a representative sample of the target population), with an 88% response rate.

The results of the present study (based on N=63) support the hypotheses outlined above, indicating:

- (1) that perceived autonomy does not differ between subjects grouped according to levels of job satisfaction;
- (2) that there is a curvilinear relationship between perceived challenge and job satisfaction; and
- (3) that age and length of tenure are positively related to job satisfaction where subjects report being highly satisfied.

The majority (75%) of nurses in the respondent sample report being either satisfied or highly satisfied in the absence of high levels of perceived challenge. Suggesting that high challenge in an occupational role is not a relevant job expectation for these nurses, and that little pressure for change in nursing roles may be expected from nurses in the

respondent sample.

The configuration of variables demonstrated in the results is consistent with the postulated pattern of career nongrowth or occupational role integration. A modal pattern of career development is postulated for the respondent sample, in which early occupational role integration occurs where there is perceived threat to a competent role identity, subsequent to career re-entry after a lengthy interval of nonpractice (median 11 years nonpractice for respondent sample).

A brief discussion of the implications of occupational role integration, for the introduction of change in community nursing practice in New Zealand, is included.

## Preface.

Registered Nurses who are engaged in active practise as nurses in the community, are employed in a variety of organisational settings, and have differing, although overlapping roles. All have undergone a similar basic work socialisation experience - that of a hospital - based nurse training programme, although with the first intake of nurses graduating from technical institute nurse training programmes late in 1975, alternative basic work socialisation experiences are now available.

The question arises as to what factors influence subsequent career development and job satisfaction of registered nurses; in particular, those nurses who work in community settings? This question is the focus of the present study.

Researchers have examined variables relevant to career development and job satisfaction at two levels - factors within the individual, and job - related or organisational factors. Recent studies have focused on the interaction effects of individual needs with job or organisational characteristics.

Little attention has been paid in the career literature to a third level of analysis - that of the larger system within which the individual and the organisation function: in this case the health care system. Yet organisations, and the roles of individuals within those organisations, are impinged upon by changes or pressure for change occurring within the larger system. Witness the effects of the 1974 Government White Paper 'A Health Service for New Zealand', on individuals and organisations operating within the health care system in New Zealand.

It follows that the roles of community practise nurses <sup>1</sup> will be influenced by pressures for change within the health care system.

Three forces for change are evident in the New Zealand situation :

- (a) increasing demands for health care, which exceed the available resources; and
- (b) a new emphasis on preventive health care rather than curative medicine; and
- (c) an alteration in the focus of health care delivery from hospital to community settings.

Expanded or extended roles for nurses practising in community settings, have been introduced as a means of coping with the increasing demand for health care - an example in New Zealand being the introduction of the Government subsidised 'practice nurse' scheme in rural, and later in urban areas. Similar role developments have occurred in the United Kingdom, and there is extensive North American literature on expanded or extended roles for nurses.

Thus the career development and consequent job satisfaction of community practice nurses are directly influenced by changes in the health care system.

It is necessary to limit the scope of the present study, which therefore focuses on individual and organisational variables which may influence the career development and job satisfaction of community practice nurses; but the discussion of the results in Chapter V examines the implications of the research findings for planned changes in the health care system.

1 a term coined by Kinross, Thomson, Pybus & Chick (1975), used in the present study to cover all registered nurses practising in community settings.

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