

# Job Characteristics, Work Environment, and Patient-Centered Care: A Focus on Community Health Nurses in a Rural and Peri-Urban Municipality in Ghana

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**Abstract:** Employee job characteristics and work environment have been considered crucial factors that can influence the practice of patient-centered care behaviour among health workers. The government of Ghana has been implementing interventions to strengthen the healthcare system in rural and peri-urban communities. However, the majority of Community health nurses prefer to work in urban areas than in deprived communities. This has resulted in a dearth of essential primary health care services for most rural and peri-urban residents.

**Purpose:** The purpose of this research is to examine the relationship between job characteristics, working environment, and patient-centered care behavior of Community Health Nurses in selected rural and peri-urban areas in the Bekwai Municipality, Ghana.

**Methods:** The study was conducted among 80 Community Health Nurses (CHNs) in health facilities within Bekwai-Municipality. A semi-structured questionnaire and interview guide were used for the data collection conducted between May-June 2021. The data collection instrument measured and analysed one dependent variable, patient-centered behavior, and two independent variables, job characteristics, and working environment.

**Results:** The respondents acknowledged the role played by job characteristics on patient-centered care (PCC). However, there were varied views on the extent to which the components of monotony, autonomy, performance feedback, and task identity influence healthcare delivery in the rural setting. Moreover, the findings indicate that community health nurses in rural areas were partly satisfied with their work environment as represented by physical characteristics, source of information on work requirements, compensation methods, and social relationships with co-workers and supervisors. The findings demonstrate a perceived positive relationship between employee job characteristics and patient-centered behavior in the ideal spatial context.

**Conclusion:** It was concluded that to improve patient-centered care through job characteristics and work environment, hospital management should strengthen the aspect of autonomy in the work of CHNs as well as provide good compensation to motivate workers (CHNs) in rural facilities. Health facility regulatory bodies seeking to improve patient-centered care should enhance job and work characteristics and introduce effective workplace social support and compensation systems.

**Keywords:** Job characteristics, working environment, patient-centered care behavior, Community Health Nurses, Ghana.

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## 1. BACKGROUND

Job characteristics which have been classified as the development of tasks and work settings are usually is considered to have an inextricable link with the accomplishment of organizational objectives for high performance, enhancement of individual talents and needs, and provision of chances for job satisfaction (Schermerhorn, Hunt, and Osborn, 2005). Previous research has highlighted the relevance of job characteristics in enhancing employee job performance, which in turn leads to improved patient-centered care behavior within the healthcare setting. Borman (2004), asserts that when

rethinking job characteristics, the goal is always to improve job performance. It is believed that job features impact employee performance by increasing workers' passion and devotion to their jobs, which in turn allow them to contribute more effectively within an organization. In assessing job characteristics, variables such as autonomy, work diversity, and task identification are important indicators of performance among Nurses (Maru, Biwott, and Chenuos, 2016). Workload, job security, and shift work, according to Vijayan (2017), are other employment factors that impact employee performance. Arguably, some researchers have indicated that job characteristics affect performance, although not as strong as the working environment. In contrast, a quality work environment has been advanced as an indication of employee value generation in businesses (Mandal & Krishnan, 2016). It is believed that fostering a great working environment increases healthcare professionals' dedication to patient-centered care in the healthcare setting (Shaller, 2007).

According to studies by Lloyd, Elkins, and Innes (2014), elements that encourage Patient-Centered Care (PCC) include a persistent focus on employee satisfaction through improvements in the work environment, and communication of the Patient-Centered Care strategic vision, realistic staff workload, and workplace social support. To ensure the accomplishment of Patient-Centered Care, Sheller (2007), emphasizes the need to harness an environment that appreciates and respects professionals in the same way as organizational leaders want employees to care for patients and families. Staff workload, strong staff relationships, and support have also been identified as variables influencing patient-centered care by Lloyd, Elkins, and Innes (2014).

Consequently, the quest to improve patient-centered care cannot be advanced in isolation from contextual healthcare issues. Rapid social and economic expansion in nations throughout the world has increased the number of older individuals who are vulnerable to degenerative and chronic diseases, as well as novel patterns of sicknesses caused by social and economic issues. Communities are dealing with a huge number of people of all ages who receive little or no healthcare because they cannot pay or access services (Vermeir, 2009). The struggle of these communities to get and access healthcare services, on the other hand, has resulted in the strengthening of Ghana's community healthcare system which is centered on primary health care. The government of Ghana has put in place various interventions to strengthen the community healthcare system. These include the construction of more health training institutions to increase the community health workforce, the construction of more health centers and CHPs compounds to absorb these nurses, and the recruitment of more community health nurses into the health system and providing incentives for them.

Despite these efforts, the majority of these Community health nurses prefer to work in cities and towns rather than in deprived rural and peri-urban communities due to the inequalities in the working environment and negative job characteristics. As a result, the high proportion of nurses refusing to work in rural settlements has resulted in a dearth of essential primary health care services for its residents. At the core of these challenges, relatively few studies have been conducted on job characteristics, working conditions, and patient-centered care behavior among Community Health Nurses (CHN) in Ghana's rural areas such as Bekwai Municipality.

The goal of this research is to examine the relationship between job characteristics, working environment, and patient-centered care behavior among Community Health Nurses in rural and peri-urban areas in Bekwai Municipality, Ghana. The study also aims to accomplish the following objectives: (1) to examine the nature of job characteristics among Ghanaian community health nurses. (2) to ascertain the dimensions of the working environment encountered by Ghanaian community health nurses. (3) to explore the link between job characteristics and patient-centered care and (4) to ascertain the link between working environment and patient-centered treatment. The research will attempt to address the following questions: (a) What are the dimensions of job characteristics seen among Ghanaian Community Health Nurses? (b) What are the working conditions for community health nurses in Ghana? (c) What are the associations between CHN job characteristics and patient-centered care? (d) What are the connections between the CHN working environment and patient-centered care?

## **2. METHOD**

The paper adopted an exploratory approach within the ontological philosophical perspective and interpretative research paradigm to conduct an in-depth and holistic investigation using mixed research methods. The study's population consisted of Community Health Nurses (CHNs) who operate in health facilities within Bekwai-Municipality under the auspices of the Ghana Health Service (GHS) and the Bekwai Municipal Health Directorate (BMHD). CHNs were utilized in the study because, as compared to other healthcare professionals, they are more mandated to operate in remote and distant regions. They are also the majority group of healthcare workers in line with the research objectives. A CHN is a

nurse who has received specialized training in both nursing and public health sciences and uses it to promote optimal health for the entire community (Jaquansah, 2007). A sample size of 80 out of 100 staff was selected for the study. The purposive sampling technique was used to include as many participants as possible based on their availability and willingness. A semi-questionnaire and interview guides were used for the data collection.

### 3. MEASURES

Data for the study was collected with the use of self-administering questionnaires and interview guides. The data collection instrument measured one dependent variable, identified as patient-centered behavior, and two independent variables namely, job characteristics and working environment. The questionnaire was designed based on an extensive literature review on PCC and the elements of job characteristics and work environment. These studies have measured PCC in the healthcare setting as well as work environment, job characteristics, and performance in healthcare and non-healthcare organizations. The key features of job characteristics, work environment, and PCC as used in the previous studies were found to be helpful and were adopted to develop the measured items for this study.

#### 3.1 Job characteristics

The independent variable, job characteristics with three domains namely; Task Identity, Autonomy, and Performance Feedback was measured on a five-point Likert scale (from 1 = strongly disagree, to 5 = strongly agree). Respondents were asked to indicate the extent to which they agree to the items under each of the domains. *Task Identity* comprises five items, *Autonomy* is of four items and *Performance Feedback* is made of five items.

#### 3.2 Work Environment

Respondents' satisfaction level with their working environment (independent variable) was also assessed under the domains; Physical, Psychological, and Social relationships. For each item under each of the domains, the answer was ranked on a five-point Likert scale (from 1 = very dissatisfied, 2 = somewhat dissatisfied, 3 = neutral (uncertain), 4 = generally satisfied, 5 = very satisfied). The physical domain consists of five items, the Psychological domain consists of two items, and the Social Relationship domain consists of four items

#### 3.3 Patient-Centered Care Behavior (PCCB)

The dependent variable, Patient-centered behavior was measured on a 5-point Likert scale (1 = never, 2 = seldom, 3 = sometimes, 4 = often, 5 = always), using seven items. The perceived relationship between job characteristics, work environment, and patient-centered behavior was also measured using a dichotomous question.

#### 3.4 Demographic characteristics

Age, gender, the highest level of education, working experience, community, and facility were collected.

Data collection and analysis

The selected employees (CHNs) from various health facilities within the municipality were contacted. The semi-structured questionnaires were administered to each respondent after granting verbal consent for participation in the study. Interviews were conducted with selected respondents for triangulation and the generation of in-depth information. In all, 80 responses were received and were used in the data analysis. Descriptive statistics were employed to analyze the data collected and were presented using frequencies and percentages.

### 4. RESULTS

#### 4.1 Demographic Information of Respondents

Concerning demographic data of respondents (n=80), the majority of the respondents were females (n=48,60%). More than half of the respondents were between the ages of 30-39 (55%). A greater portion (n=45, 56.25%) of the respondents were diploma holders. Approximately 80%, n=64 are currently working in the hospitals. Also, a greater portion (58.75%, n=47) of the respondents are working in peri-urban communities. Lastly, most (46.25%, n=37) of the respondents have less than 12 months of working experience. Table 1. Below presents the demographic information of the respondent.

**Table 1. Descriptive statistics of respondents' demographic background (N=80)**

DESCRIPTION	FREQUENCY	PERCENTAGE
<b>Gender</b>		
Male	32	40.00
Female	48	60.00
<b>Age</b>		
20-29	34	42.50
30-39	44	55.00
40-49	2	2.50
<b>Level of education</b>		
Certificate	27	33.75
Diploma	45	56.25
Graduate	8	10.00
<b>Facility</b>		
CHPs Compound	6	7.50
Health Centre	10	12.50
Hospital	64	80.00
<b>Community</b>		
Rural	33	41.25
Peri-Urban	47	58.75
<b>Working experience</b>		
Less than 1 year	37	46.25
1-2 years	14	17.50
5-9 years	17	21.25
10+ years	12	15.00

Source: Field survey, May 2021

#### 4.2 Job Characteristics of employees (CHNs)

In accessing the degree to which staff (CHNs) are affected by their job characteristics at work, respondents were asked to indicate the extent to which they agree to the items under the following three domains; task identity, autonomy, and performance feedback.

##### 4.2.1 Task Identity

Table 2. Presents a summary of the degree to which task identity affects employee performance.

Concerning task identity, a majority (58.8%, n=47) agreed that their job duties, requirement, and goals are clear and specific whilst 12.5%, n= 10 of the respondents stated that they are uncertain. On job simplicity and uncomplicated, most (53.75%, n=43) of the respondents stated that they agree that their job was simple and uncomplicated whilst 6.25%, n= 5 of the respondents strongly disagree that their task was simple and uncomplicated. A majority (46.25%, n=37) of the respondents stated that they agree that their job requires them to do one activity at a time. On the other hand, 20%, n=16 of the respondents stated that they disagree with the question.

**Table 2. Task identity**

Task Identity	Frequency				
	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Job duties, requirements, and goals are clear and specific	0(0.00%)	0(0.00%)	10(12.50%)	47(58.80%)	23(28.70%)
Tasks I do on my job are simple and uncomplicated	5(6.25%)	12(15.00%)	15(18.75%)	43(53.75%)	5(6.25%)
My job requires me to do one activity at a time	5(6.25%)	16(20.00%)	8(10.00%)	37(46.25%)	14(17.50%)
Use of a number of complex skills in this job	5(6.25%)	13(16.25%)	25(31.25%)	28(35.00%)	9(11.25%)

Source: Field survey, May 2021

Approximately, 35% denoting 28 of the respondents agreed that their job requires them to use several complex skills to execute their task. Finally, respondents were also asked whether their job required them to work for long hours. A percentage of 33.75 denoting 27 of the respondents agreed with the question whilst 26.25%, n=21 of the respondents strongly disagreed that their job required them to work for long hours.

#### 4.2.2 Autonomy

Measuring the degree to which autonomy affects staff (CHNs) performance with direct influence on Patient-centered care behavior among them, a majority (43.75%, n=35) of the respondents agreed that there was freedom in doing their job whilst 21.25% of the respondents disagreed.

**Table 3. Autonomy**

Autonomy	Frequency				
	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
Freedom in doing my job	5(6.25%)	17(21.25%)	9(11.25%)	35(43.75%)	14(17.50%)
Exercise full control over my job	4(5.00%)	7(8.75%)	9(11.25%)	51(63.75%)	9(11.25%)
Making of decisions	4(5.00%)	7(8.75%)	15(18.75%)	41(51.25%)	13(16.25%)
Opportunity to develop a work schedule	12(15.00%)	6(7.50%)	10(12.50%)	36(45.00%)	16(20.00%)

Source: Field survey, May 2021

Also, 63.75% denoting 51 of the respondents agreed that they exercise control over their job whilst a percentage of 8.75 of the respondents disagreed with the question. Concerning decision making, most (51.25%, n= 41) of the respondents agreed that they can make decisions on their own whilst a small portion (8.75%, n=7) of the respondents disagreed with the question. Lastly, a total of 36 denoting 45% of the respondents agreed that they have the opportunity to develop their work schedule. A smaller portion (7.5%, n=6) disagree that they have the opportunity to develop a working schedule relating to their job.

#### 4.2.3 Employee (CHNs) Performance Feedback

The first line of questioning under this section was to find out the rating level during the evaluation of respondents. A little over half (52.5%, n=42) indicated that they were highly rated during the evaluation, 17.5% of the respondents also stated that they were neutral to their ratings during the evaluation.

A smaller portion (8.75%, n=7) of the respondents stated that they disagree with the fact that they were rated high during job evaluation.

**Table 4. level of satisfaction of employee performance feedback**

Performance Feedback	Frequency				
	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
I was rated highly during the evaluation of my performance	8(10.00%)	7(8.75%)	14(17.50%)	42(52.50%)	9(11.25%)
I am satisfied with my job delivery	0(0.00%)	0(0.00%)	2(2.50%)	56(70.00%)	22(27.50%)
I always meet performance standards	0(0.00%)	2(2.50%)	8(10.00%)	56(70.00%)	14(17.50%)
I am committed to performing better in my job	0(0.00%)	3(3.75%)	4(5.00%)	30(37.50%)	43(53.75%)
I am not likely to quit my job soon	5(6.25%)	6(7.50%)	15(18.75%)	21(26.25%)	33(41.25%)

Source: Field survey, May 2021

On job delivery satisfaction among respondents, an overwhelming majority (70%, n=56) of the respondents agreed that they are satisfied with their job delivery whilst a very small portion (2.5%, n=2) indicated that they were neutral about their job delivery satisfaction. Approximately, 70% denoting 56 of the respondents said they meet the performance standards of their job and a smaller number (2.5%, n=2.5%) of the respondents disagree that they always do not meet performance standards set for their job. On employee commitment, more than half (53.75%, n=43) of the respondents strongly agree that they are committed to better job performance. A total of 3 denoting 3.75% of the respondents disagree that they are committed to performing better in their job. Finally, respondents were asked whether they were likely to quit their job soon. The results were that most (41.25%, n=33) of the respondents strongly agreed that they are not likely to quit their job soon.

### 4.3 The Overall Satisfaction Level of Employee Working Environment

In accessing the overall level of satisfaction of employees' working environment, the respondents were asked to indicate the extent to which they are satisfied with items under the following domains: physical, psychological, and social relationship.

#### 4.3.1 Physical Environment

In accessing the overall level of satisfaction of employees' physical working environment, staff was asked whether they are satisfied with their job equipment. The result was a little over half (52.5%, n=42) of the respondents were generally satisfied with the equipment in carrying out their duties whilst a small portion 2.5% denoting 2 of the respondents stated that they are very dissatisfied with the equipment used in carrying out their duties at their workplaces. On facility layout, a total of 32 denoting 40% of the respondents were generally satisfied with the layout of their facility and a smaller number 4 denoting 5% of the respondents stated they were very dissatisfied with the current layout of their facilities. Also, regarding the temperature and ventilation system of the facility, a majority (48.75%, n=39) of the respondents were generally satisfied with their workplace temperature and ventilation system whilst a small number 12 denoting 15% of the respondents stated that they are somewhat dissatisfied with their facility temperature and ventilation system. Space available within the working facility was also delved into among the respondents.

**Table 5. Physical Environment**

Physical	frequency				
	Very Dissatisfied	Somewhat Dissatisfied	Neutral	Generally Satisfied	Very Satisfied
Equipment for carrying out your duties	2(2.50%)	11(13.75%)	13(16.25%)	42(52.50%)	12(15.00%)
Facility layout	4(5.00%)	14(17.5%)	23(28.75%)	32(40.00%)	7(8.75%)
Temperature and Ventilation system of your facility	0(0.00%)	12(15.00%)	10(12.50%)	39(48.75%)	19(23.75%)
Space	10(12.50%)	16(20.00%)	8(10.00%)	38(47.50%)	8(10.00%)
Lighting system	2(2.50%)	6(7.50%)	13(16.25%)	31(38.75%)	28(35.00%)

Source: Field survey, May,2021

The result was 38 denoting 47.5% of the respondents were generally satisfied with their facility space whilst 10 representing 12.5% of the respondents stated that they are very dissatisfied with the space available in their facility for working purposes. Finally, the level of satisfaction concerning the lightning system in their facility was also delved into. A total of 31 representing 38.75% of the respondents said they are generally satisfied with their facility lightning system whilst a smaller portion 2.5% denoting 2 of the respondents indicated that they were very dissatisfied with the current lighting system in their facility.

#### 4.3.2 Psychological Environment

About the working environment, respondents were also interrogated about the source of information on their work requirements. The results of this question showed that a little over half (51.25%, n=41) of the respondents were generally satisfied with the current source of information concerning their working requirements whilst one-fourth (n=20, 25%) of the respondents on the other hand were very satisfied with the source of information about their working requirement.

**Table 6. Psychological Environment**

Psychological	Frequency				
	Very Dissatisfied	Somewhat Dissatisfied	Neutral	Generally Satisfied	Very Satisfied
Source of information on work requirement	0(0.00%)	1(1.25%)	18(22.50%)	41(51.25)	20(25.0)
Compensation method used	31(38.75%)	17(21.25%)	18(22.50%)	7(8.75%)	7(8.75%)

Source: Field survey, May 2021

However, 18 denoting 22.5% of the respondents were neutral to their current source of information concerning their work whilst only 1 denoting 1.25% of the respondents indicated being somewhat dissatisfied with the current source of information concerning working requirements. On the compensation method, staff was interrogated to solicit their level of satisfaction with the compensation method. The result was that a total of 31 denoting 38.75% of the respondents were very dissatisfied with the compensation method for their duties and schedules whilst 22.5% denoting 18 of the respondents indicated that they are neutral about how they are compensated in their various schedules. Notwithstanding this, 17 of the respondents representing 21.25% on the other hand expressed their views on working compensation as somewhat dissatisfied and 2 groups of the respondents with 7 membership representing 8.75% were generally and very satisfied with their current compensation method in their facility.

#### 4.3.3 The Overall Level of Satisfaction of Social Relationships Among Colleague Workers

In accessing the level of satisfaction of staff with regards to the relationship with their colleague workers, 32.5% denoting 26 of the respondents stated they are neutral to the relationship with other coworkers whilst 23 of the respondents (28.75%) indicated that they are generally satisfied with the relationship with coworkers. On teamwork and employee assistance, a total of 34 representing 42.5% of the respondents stated that they are generally satisfied with the teamwork and readiness of others to assist, 17 of the respondents denoting 21.25% indicated that they are neutral and very satisfied with the readiness of others to assist and work as a team and 12.50% of the respondents are of the view that they are somewhat dissatisfied with the readiness of others to assist and work as a team. A very minute number (n=2, 2.50%) of the respondents indicated that they are very dissatisfied with the readiness of others to assist and work as a team.

**Table 7. The overall level of satisfaction in social relationships among colleague workers**

Social	Frequency				
	Very Dissatisfied	Somewhat Dissatisfied	Neutral	Generally Satisfied	Very Satisfied
Relationship among coworkers	9(11.25%)	3(3.75%)	26(32.50%)	23(28.75%)	19(23.75%)
Readiness of others to assist and teamwork	2(2.50%)	10(12.50%)	17(21.25%)	34(42.50%)	17(21.25%)
Relationship between superiors and subordinates	7(8.75%)	15(18.75%)	14(17.50%)	21(26.25%)	23(28.75%)
Communication style used	9(11.25%)	10(12.50%)	7(8.75%)	43(53.75%)	11(13.75%)

Source: Field survey, May 2021

With the relationship between the supervisors and subordinates, a total of 23 denoting 28.75% of the respondents stated that they are very satisfied with the relationship between them and their superiors whilst 18.75% representing 15 of the respondents were somewhat dissatisfied with the relationship between the supervisors and subordinates. A small section (n=7, 8.75%) of the respondents indicated that they are very dissatisfied with the relationship between the supervisors and the subordinates. Lastly, on communication style used at the workplace, a little over half (n= 43, 53.75%) of the respondents were generally satisfied with the communication style used whilst 11 of the respondents denoting 13.75% were very satisfied with the communication style used. Also, a total of 10 denoting 12.5% were somewhat dissatisfied with the communication style used

#### 4.4 Patient-Centered Care Behavior

In accessing patient-centered care behavior among staff (CHNs), they investigated several patient-centered care behavior that they exhibit when rendering service to their patients. The first sub-question under this section was to find out how the respondents involve patients and families in decision-making regarding their care. Out of the 80 respondents, 34 each of

the respondents (42.5%) summing up to 68 indicated that they often and always involve patients and their families in decision making concerning the care of patients whilst 10 of the respondents denoting 12.5% indicated that they sometimes involve family and patients in the decision-making process.

**Table 8. Patient-Centered Care Behavior**

Behavior	Frequency				
	Never	Seldom	Sometimes	Often	Always
I involve patients and families in decision making regarding their care	0(0.00%)	2(2.50%)	10(12.50%)	34(42.50%)	34(42.50%)
I inform and educate patients on everything about their condition	0(0.00%)	0(0.00%)	10(12.50%)	33(41.25%)	37(46.25%)
I put patient first in all I do in the facility	0(0.00%)	0(0.00%)	2(2.50%)	24(30.00%)	54(67.50%)
I provide patients with prompt services	0(0.00%)	0(0.00%)	10(12.50%)	23(28.75%)	47(58.75%)
I ensure that patients are comforted irrespective of their condition	0(0.00%)	0(0.00%)	6(7.50%)	24(30.00%)	50(62.50%)
I pay attention to patient's needs	0(0.00%)	0(0.00%)	2(2.50%)	20(25.00%)	58(72.50%)
The patient is the center of everything I do in the facility	0(0.00%)	0(0.00%)	2(2.50%)	15(18.75%)	63(78.75%)

Source: Field survey, May 2021

The next question was to find out how often the respondents inform and educate patients on everything about their condition. A total of 37 denoting 46.25% of the respondents indicated that they always educate their patients about their condition whilst 33 of the respondents representing 41.25% stated that they often do so. Approximately 10 denoting 12.5% indicated that they sometimes educate their patients about their condition. Furthermore, the next line of questioning under this section was to find out if the respondents put patients first in all they do in the facility. A little over half of the respondents (n=54, 67.50%) indicated that they always put patients first in all they do whilst 24 of the respondents representing 30.00% stated that they often put patients first in all they do in the facility. A very minute portion of the respondents (n=2, 2.5%) are of the view that they sometimes put patients first in all they do in the facility. On providing prompt services to patients, more than half of the respondents (n=47,58.75%) indicated that they always provide patients with prompt services whilst 23 of the respondents representing 28.75% indicated that they often provide patients with prompt services. However, 10 of the respondents denoting 12.5% stated that they sometimes provide patients with prompt services. With patient comfortability, respondents were questioned on how often they ensure patients are comfortable irrespective of their condition. More than half of the respondents (n=50,62.50%) indicate that they always do so whilst 24 of the respondents (30.00%) often ensure patients are comfortable irrespective of their condition. A small number of the respondents (n=6,7.5%) sometimes ensure patients are comfortable irrespective of their condition. In addition, respondents were also asked how often they pay attention to the needs of patients. More than half of the respondents (n=58,72.50%) stated that they always pay attention to the needs of patients whilst 20 of the respondents (25.00%) often do so. The last question for this research was to find out how often everything they do is centered on the patients. The findings showed that the majority of the respondents (n=63,78.75%) indicated that they always do everything centered around patients whilst 15 of the respondents representing 18.75% stated that they often do everything centered around the patients in the facility. The respondents who sometimes do everything centered around the patients were 2 representing 2.5% of the respondents.

#### 4.5 Relationship Between Job Characteristics and Patient-Centered Care

The relationship between job characteristics and its promotion of patient-centered care among staff was also interrogated. This current study revealed that most of the respondents (n=55,68.75.0%) indicated that their current job characteristics promote patient-centered care whilst the remaining 25 of the respondents denoting 31.25% were of the view that they don't know whether their current job characteristics promote patient centered care or otherwise.

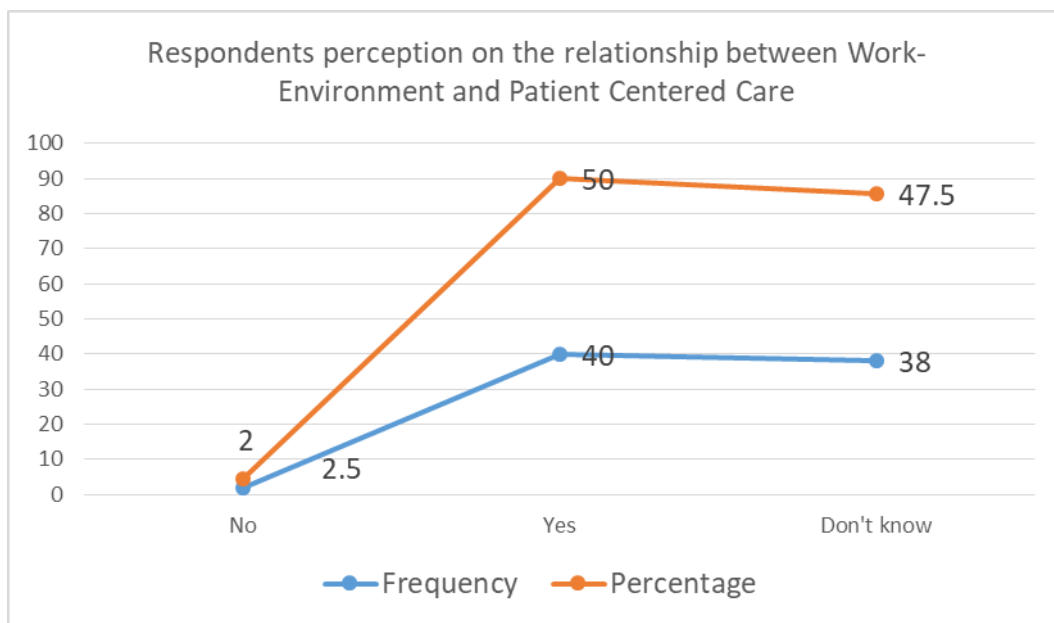
The respondents who testify that their current job characteristics promote patient-centered care were 55 and they gave the following reasons; 9 of the respondents indicated that they treat their patients holistically, and 6 of the respondents also shared their views that they provide education and services that meet the requirement and satisfaction of their patients. A total of 10 of the respondents stated that their working characteristics encompass the involvement of the patients in addition to their family members or guardians in decision making thus promoting patient-centered care. In addition, 6 of



the respondents stated that their patients are their topmost priority in the services they provide to them whilst 14 of the respondents also indicated that they carry out their services to the satisfaction and doorsteps of their patients. The last 10 of the respondents were of the view that they interact a lot with their patients and assist them in making the right choices and decisions geared towards their healthcare regimen.

#### 4.6 Relationship Between Work Environment and Patient-Centered Care

The relationship between the current working environment of respondents and its promotion of patient-centered care in this current study was also investigated. The results in figure 1.1 indicated that half of the respondents (n=40,50.00%) were of the view that indeed their current working environment promotes patient-centered care whilst less than half of the remaining respondents (n=38,48.0%) on the other hand share the view that they are not aware whether or not their current working environment promotes patient-centered care. A minute portion of the respondents (n=2, 2.0%) stated that their current working environment does not promote patient-centered care in their facility.



Source: Field survey, May 2021

**Figure 1. Respondents' Perception of Relationship between Work Environment and Patient-Centered Care**

Their reasons for such responses were sorted out. A total of 2 of the respondents indicated that their working environment does not promote patient-centered care. Their reasons were that there was a lack of space, sitting chairs for patients, and resources in addition to poor working conditions existed in their working environment and as such do not promote patient-centered care.

Also, 40 of the respondents on the other hand were of the view that their current working environment did enhance patient-centered care. A total of 19 of the respondents indicated that they possess most of the tools and commodities necessary to render the appropriate services to their patients. In addition, 12 of the respondents shared their views that there existed rapid promptness of the necessary services in their facility which enhances patient-centered care in their facility. Furthermore, 7 of the respondents indicated that their working environment is patient-friendly and thus promotes patient-centered care and 2 of the 40 respondents stated that because there was absolute confidentiality about services rendered to their patients, it promotes patient-centered care.

## 5. DISCUSSION

Employee job characteristics are one of the most important factors influencing patient-centered care behaviors among employees. Thus, this study found it worth analyzing the actual effect of job characteristics on patient-centered care behavior among CHNs in the healthcare centers of Bekwai Municipality. Like other previous studies in some parts of the country have reported (Abekah & Nkrumah, 2021; Maru et al., 2013), a significant positive effect of autonomy, employee performance feedback, and task identity on nurses' performance. Job characteristics are closely interweaved with job design. When jobs are considered and designed in a manner that motivates employees, satisfaction in the workplace improves (Sageer et al, 2012).

The positive relationship between employee job characteristics and patient-centered behavior suggests that healthcare managers who wish to improve PCC in their facilities may consider improving job characteristics by introducing job schedule redesign strategies to minimize monotony and improve autonomy, performance feedback mechanism, and task identity among frontline health workers including CHNs.

The study deemed it necessary to also evaluate the effect of employees' work environment (CHNs) and their satisfaction with patient-centered care. In this aspect of the study, the areas covered were the physical environment and psychological and social relationships with co-workers.

The physical environment of the employee workplace has been a major determinant of employee satisfaction. Previous literature (Moyimane et al., 2017) discloses that poor physical environments such as poor equipment, the layout of facilities, temperature, ventilation, and lighting system; and inadequate working space result in employee job dissatisfaction. This study proves that good working equipment, facility layout, temperature and ventilation system; and working space promote employee satisfaction. Thus, the majority of the respondent was satisfied with the equipment used in carrying out their duties, the layout of their facilities, the temperature, ventilation, and lighting system at their facilities as well their working space. Hence, they are very satisfied with their job.

Social support is a coping strategy against occupational stress; a factor found to be associated with poor outcomes in the healthcare setting, particularly among clinical staff (Wang et al,2010; Farquharson et al, 2013). Employees' perception of both co-workers and supervisory support in this study were significant predictors of employee job satisfaction as well as patient-centered behavior. In a study on family and patient-centered care, it was found that good working relationships between employees as well supervisors facilitate employee satisfaction as well as patient and family-centered care (Lloyd, Elkins & Innes, 2018). This means that workplace social support can serve as a valuable resource to healthcare managers for improving PCC and acculturation of health professionals (CHNs) to PCC. In this study, findings on both determinants (employee-supervisor relationship and co-worker support) show that majority of the respondents were found to be satisfied. Hence, the great contribution of co-worker support and superior-subordinates relationship to employee job satisfaction as well as the patient-centered behavior of CHNs.

Patient-centered care (PCC) strives on the efforts of employee job design as well as their working environment at all levels in the healthcare system. Yet, in this study, 31.25% and 50.0% of employees surveyed said they did not know about the relationship between their job characteristics and patient-centered care as well as the relationship between their work environment and patient-centered care respectively, implying that these employees have no facts about their job characteristics and environmental conditions that promote patient-centered care much more to provide services in a patient-centered manner. This could be attributed to the working experience of employees. Almost all employees were less than one (1) year of experience with very few distributed among 1-2 years, 5-9 years, and 10 years and above. Even though research reveals mixed findings on the number of years of working experience on employee performance (Loretto, Duncan & White, 2000; Joseph, 2014), the years of working experience of respondents in this study might have contributed to the patient-centered care behavior spectacle.

## 6. CONCLUSION

Generally, the study sought to assess the job characteristics, working environment, and patient-centered care among community nursing workers. It further investigated the effect of job characteristics and the working environment of community nursing workers on patient-centered care behavior. Overall, the study demonstrated that the job characteristics and work environment of respondents greatly influenced patient-centered care behavior.

Consequently, this study shows that education on patient-centered care alone is not enough to improve patient-centered behavior among CHNs. Health facility management and health regulatory bodies seeking to improve patient-centered must consider the improved job and work characteristics in combination with workplace social support and compensation.

Concerning the findings of this study, the following recommendations are made;

- i. Task identity and autonomy are essential predictors of nurses' performance in the health sector. Autonomy and task identity provide employees the freedom and
- ii. discretion over their jobs. Apart from involving nurses in developing work schedules, hospital management should provide more freedom in how they work, allowing them more discretion to make decisions. Hence all aspects of autonomy should be

- iii. strengthened within the expectation of the nurses to cause higher performances and hence positive job outcomes.
- iv. The Government together with the Ministry of Health and Ghana Health Service should ensure that there is equitable distribution in the allocation of resources in the health facilities. Thus, when this suggestion is successfully implemented, the work environment will be improved irrespective of the category of the health facility as this significantly impacts patient-centered care behavior as illustrated in this study and previous ones
- v. One strategy to improve workers' performance is the existence of compensation in the working environment. Compensation energizes workers to give their best and thus indirectly improving job performance and productivity. Management and administrative bodies together with the Government must provide good compensation methods to motivate workers in the various health facilities.
- vi. There is gradual migration of healthcare provision to patients to healthcare centered on the patients (patient-centered care). This facilitates the healing or recovery regimen given to patients by the workers in the health facilities. Therefore, there must be a comprehensive effort by the appropriate bodies to educate nursing students and nurses on the importance of ensuring that patient-centered care is their goal irrespective of any challenges they encounter in the health facilities.

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