9. Summary

Title: Analysis of factors influencing nursing care rationing and nurses' job satisfaction. Introduction: Rationing of nursing care involves withholding or omitting all necessary nursing interventions due to insufficient time, staffing or lack of skills. In understaffed wards, nurses are forced to minimize or omit certain tasks, increasing the risk of negative patient outcomes. Satisfaction with life and work determines greater effectiveness in nurses' work and the creation of a positive work environment, and this may influence the level of rationing of care. It has also been shown that nurses who are more satisfied with their lives are less likely to ration their care. It should also be noted that professional burnout is another negative factor affecting the safety and quality of patient care. Currently, there is limited knowledge regarding how issues of job burnout and job satisfaction affect the level of care rationing in the hospital. Despite available research, there is still insufficient understanding of the mechanisms of how professional burnout and job satisfaction affect care rationing and thus contribute to safety and quality of care. Therefore, the aim of this thesis was to analyze selected factors affecting care rationing and job satisfaction among nurses.

Material and methods: A group of 320 participants was finally qualified for the study. The criteria of inclusion in the study were: voluntary and informed consent to participate in the study and minimum one-year work experience. The standardized research tools in Polish language adaptation were used in the study, such as: (1) the Basel Extent of Rationing of Nursing Care Revised – BERNCA-R, (2) the Satisfaction with Job Scale – SSP, (3) the Satisfaction with Life Scale – SWLS and (4) the Maslach Burnout Inventory – MBI. The original self-reported metric was also used to collect basic sociodemographic data. The analysis was performed in the R program (4.0.3), where the significance level was set at p < 0.05. The study was approved by the Bioethics Committee of the Wroclaw Medical University (no. KB-584/2018).

Results: A total of 320 people, of which 305 women and 15 men participated in the study, The most representative age ranges for the study group were 41-50 years (n=122). Most of the respondents were in a relationship (75.94%), had a bachelor's degree (33.75%) and work experience of more than 20 years (55.94%). In terms of postgraduate training, the largest proportion of respondents were completing qualification and specialist courses. Among all study participants, the majority had one job (55.94%), were employed in inpatient care (81.25%), worked shifts (75.31%), and cared for 6-15 patients while on duty (33.12%). The mean total BERNCA-R score was 1.53 points (SD=0.81 points). Thus, it can be concluded that the frequency of rationing of care by the respondents is between "never" and "rarely". The

average SSP score was 21.07, which is 4.21 points per question. So, the respondents were neither satisfied nor dissatisfied with their job. The results of the SWLS showed that 147 out of 320 survey participants (45.94%) had high life satisfaction, 116 respondents (36.25%) had medium life satisfaction and 57 respondents (17.81%) had low life satisfaction. The MBI results showed that the overall burnout index averaged 31.22 points out of a possible 100 (SD=22.39 points), the most was affected by lack of professional accomplishment (M=35.62 points), to a slightly lower by emotional exhaustion (M=32.95 points), and to the lowest by depersonalization (M=25.08 points). The results of univariate analysis indicate the following statistically significant (p<0.05) relationships in terms of the BERNCA scores: the higher the job satisfaction (SSP), the lower the frequency of care rationing; the higher the overall burnout (MBI), the higher the frequency of care rationing – here the relationship obtained in all MBI domains, i.e. emotional exhaustion, depersonalization and lack of professional accomplishment. In addition, the following variables have a statistically significant effect on the higher frequency of rationing (BERNCA): age 31-40 years, work experience of more than 20 years, work in inpatient care and other jobs. In contrast, a multivariate linear regression model showed that significant (p<0.05) independent predictors of BERNCA score were completed specialization, working in inpatient care, providing for 6-15, 16-25 and > 35 patients on duty, and the total MBI score. The results of the univariate analysis indicate the following statistically significant (p<0.05) relationships in terms of the SPP scores: the more frequent the rationing of care, the lower the perception of job satisfaction; the higher the perception of life satisfaction, the higher the perception of job satisfaction; the higher the level of general job burnout, the lower the perception of job satisfaction - here the relationship obtained in all MBI domains, i.e. emotional exhaustion, depersonalization and lack of professional accomplishment. Furthermore, higher job satisfaction (SSP), is statistically significantly affected only by the variable: nurse occupational group. On the other hand, a multivariate linear regression model showed that the significant (p<0.05) independent predictors of SSP score are: status of being a single, the SWLS score and the total MBI score.

Conclusions: The nurses assessed their level of care rationing as low. Increased levels of care rationing were affected by lower job satisfaction and higher levels of job burnout, but also by age 31-40 years, length of service over 20 years and working in inpatient care. Increased level of rationing of nursing care is related to achieved specialization, working in inpatient care, providing on-duty care for 6-15, 16-25 and more than 35 patients, as well as a total burnout score. In turn, lower job satisfaction was affected by increased rationing of nursing care and higher levels of burnout.

Key words: rationing of nursing care, job satisfaction, life satisfaction, professional burnout.