

# International Journal of Engineering Sciences & Research Technology

(A Peer Reviewed Online Journal)  
Impact Factor: 5.164



**Chief Editor**  
Dr. J.B. Helonde

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Mr. Somil Mayur Shah

### ABSTRACT

This study determined the level of self-esteem, job performance and job satisfaction of Nurses in Biliran Provincial Hospital using descriptive-correlational research design involving 40 Nurses. The study revealed that more than one half of the Nurses were having regular status of appointment; almost all of the them were Bachelor's degree holder; and almost one half of the them had monthly income of "Less than PHP 17, 473.00" and were connected to BPH within 1 to 5 years.

The Nurses had "high self-esteem" level, "very satisfactory" job performance level, and "satisfied" job satisfaction level. Highest educational attainment, monthly income, and number of years in service had no significant relationship to the level of self-esteem; but status of appointment had significant relationship with the level of self-esteem. Nurses' highest educational attainment, status of appointment, and monthly income had no significant relationships to their job performance level; but their number of years in service had significant relationship to their job performance level.

Nurses' highest educational attainment, monthly income, and number of years in service were not significantly related to their level of job satisfaction; but status of appointment was significantly related to their level of job satisfaction. There was no significant relationship between the level of self-esteem and level of job performance, and between the level of job performance and level of job satisfaction.

The BPH Administration needs to give great importance and optimal improvements to the Nurses' level of self-esteem, job performance, and job satisfaction by offering them a competitive pay and by giving activities, in-service trainings and opportunities on the image of nurses and self-esteem. Nurses also need to pursue graduate studies.

**KEYWORDS:** Biliran Provincial Hospital, job performance, self-esteem, job-satisfaction, Nurses.

### 1. INTRODUCTION

Self-esteem is a subjective attitude of a person about his/her soul and the appreciation of his/her value. It denotes to a truthful, acceptable, stable gratitude of one's worth as a person. Self-esteem is accurately defined by how much value people place on themselves and it is the evaluative component of self-knowledge. [1]

In an environment of tension and division of labor such as Healthcare Services, the performance of employees is one of the most basic challenges because it is closely related to effectiveness, knowledge management and quality from one side; and on the other side, to management's financing and organization's development. Doctors and Nurses performance are inseparably linked to the safety of patients. [2]

Another challenge faced by Nurses is in the area of job satisfaction, a key issue for health care professionals around the world. [3] Job satisfaction is "the collection of feelings and beliefs that people have about their current jobs. [4]It is "a positive feeling about a job resulting from an evaluation of its characteristics".[5]It as "a pleasurable or positive emotional state resulting from the appraisal of one's job or job experiences".[6]

For Registered Nurses (RN) working in Hospitals and other health care organizations, staffing typically is a day-of-operations function in which designated persons assess and determine the shift-to-shift ratio of Nurses to patients to ensure adequate staffing on each shift and unit. Typically, staffing processes don't look further than 24 hours in advance of the shift, or 48 hours for a weekend or holiday. [7]Nurses have a professional duty to be

knowledgeable about staffing as part of their responsibility to patients. Nurse Managers and other leaders may be accountable to their organization for Nurse staffing, but definitely all Nurses are accountable to their patients and the profession. [8]

Region 8 Profile (2015) divulged that with the 10 permanent Nurses at Biliran Provincial Hospital (BPH) and with the total Biliran Province population of 173,890, every Nurse was serving 17,389 people. [9]

As a former employee of BPH, the researcher worked as a staff nurse for about two and a half years. He was assigned in the various clinical areas of the hospital such as at the pediatric ward, medical ward, communicable disease ward, obstetric and gynecologic ward, surgical ward, intensive care unit, and emergency room. During his stay in BPH he was well oriented with the rules and regulations of the institution and was well aware of the struggles nurses experienced due to increased nurse-to-patient ratio or excessive patient load. In addition to that, nurses were being pulled out of their wards to be forwarded to other areas (wards/special areas) due to the lack of nurses. Hence, both the nurse that was left in the ward and the one who was forwarded were having more patient loads that made matters worse for both of them. Increasing their already excessive patient loads often led to exhaustion, burnouts, and absenteeism. Furthermore, he was able to witness the low retention of nurses in BPH due to the lack of opportunities to get a regular item.

With the given scenario at BPH, the researcher wanted to determine the level of self-esteem, level of job performance and level of job satisfaction of Nurses in Biliran Provincial Hospital. Results of the study could be an input for an action plan to be addressed to BPH's administration and other concerned agencies.

## 2. MATERIALS AND METHODS

This study utilized the descriptive-correlation research design, involving 40 randomly selected Nurses who worked in BPH for at least two years.

The following instruments were used in the study: Part I described the demographic profile of the respondent-Nurses which composed of status of appointment, highest educational attainment, monthly income, and number of years connected to BPH. Part II dealt with the level of self-esteem which was adopted from the study of Zamanzadeh *et al.*, [10], in which indicators were categorized into three aspects: sense of worthy related to perceived professionalism level, socialization into the profession, and enthusiasm about being a Nurse. Four-point scale was used on the responds of the different self-esteem aspects: 4 - very high self-esteem, 3 - high self-esteem, 2 - low self-esteem, and 1 - very low self-esteem. Part III dealt with the level of job satisfaction which was taken from the study of Clarke. [11] The Four-point scale was used on the different indicators of the level of job satisfaction: 4 - very satisfied, 3 - satisfied, 2 - somewhat dissatisfied, and 1 - very dissatisfied.

Certain statistical tools were utilized to provide quantitative picture of the gathered data: frequency distribution and simple percentage were used mainly in the tabulation of the profile of the Nurses such as status of appointment, highest educational attainment, monthly income, and the number of years connected with BPH; weighted mean was used in computing the levels of Nurses' self-esteem, job performance, and job satisfaction; and Pearson Product-Moment correlation was used in determining the significant relationships between the different variables of the study.

## 3. RESULTS AND DISCUSSION

### 3.1 Profile of the Nurses at Biliran Provincial Hospital

Table 1 presents the profile of the Nurses in BPH. Results show that more than one half of the Nurses or 24 (60%) were having regular status of appointment, representing the total number of approved plantilla by the provincial government. Next in rank or 15 (37.5%) were with contractual/job order status, representing the total number of additional nurses approved by the provincial government. The remaining one (1 or 2.50%) had a volunteer status, representing the nurse who was willing to work without pay while waiting for an opening in the casual/job order or plantilla position.

Most of the Nurses or 35 (87.50%) were Bachelor's degree holders. They had not yet pursued their graduate studies because the university that existed in the Province did not offer post graduate courses for Nurses. Pursuing graduate studies outside Biliran Province could have disrupted their work and job rotation schedules, aside from their financial constraints. The remaining 5 (2.50%) were MAN degree holder which were all in the higher supervisory position such as the senior nurse, nurse supervisor, or chief nurse.

Almost one half or 15 (38.46%) of the Nurses' monthly income were at the salary range of "Less than PHP 17,473.00", representing the contractual/job order Nurses with an actual salary of PHP 300/day or ranging from PHP 6,000-7,000/month who were on a "no work no pay" basis. A little over one fourth of them or 14 (35.90%) were receiving salaries within the range of PHP 17,473.00-PHP 20,179.00 or salary grades 9 to 11, representing the Staff Nurses or Nurse I. Less than one-fourth of them or 7 (17.50%) received salary within the range of PHP 20,180.00-PHP26, 494.00 or salary grades 12 to14, representing the Senior Nurses or Nurse II. The least of them received salary ranges of PHP26, 495.00-PHP31, 765.00 or salary grades 14 to 16 (2 or 5.13 %), representing the Nurse Supervisors or Nurse II. One of them (1 or 2.56%) was receiving PHP38, 086 –PHP47, 037.00 or within salary grades 17 to 20, representing the Chief Nurse or Nurse III. One (1) Nurse (2.56%) who was on a volunteer status had not been receiving salary at all.

Almost one half of the respondents or 18 (45%) were connected to BPH within 1 to 5 years represented either the volunteer, contractual/job order, or the staff Nurse. Next in rank which is a little over one-fourth of them or 12 (30%), were those with 6 -10 years in service, representing either the staff Nurses and/or the senior Nurse. Less than one-fourth of the Nurses or 7 (17.50%) had 11-15 years in service, also representing either the staff Nurses or the senior Nurses. Two (2 or 5%) Nurses had been in the service for 16 - 20 years, representing either the senior Nurses or the Nurse supervisor. Lastly, one (1 or 2.5%) Nurse had been in the service within 21-25 years, representing the chief Nurse.

Results show that most of the Nurses had not been at the service for considerable number of years because most of them either transferred to other health care related institutions with better salary; or they got opportunities to work abroad after meeting the required number of years in hospital experience.

The cost of losing an employee can range from 25 to 200 percent of that employee's salary, some of which revolve around customer service disruption and loss of morale among other employees, burnout of other employees, and the costs of hiring someone new. [12] In the case of BPH it was a voluntary turnover, a type of turnover that is initiated by the employee for various reasons.

*Table 1. Profile of the Nurses at Biliran Provincial Hospital*

Profile	f	%
<i>Status of Appointment</i>		
Regular	24	60.00
Contractual/Job Order	15	37.50
Volunteer	1	2.50
<b>Total</b>	<b>40</b>	<b>100</b>
<i>Highest Educational Qualification</i>		
MAN degree holder	5	12.50
BS Degree Holder	35	87.50
<b>Total</b>	<b>40</b>	<b>100</b>
<i>Monthly Income</i>		
PHP 38,086.00 -PHP 47,037.00	1	2.56
PHP 31, 766.00-PHP 38,085.00	0	0
PHP 26, 495.00-PHP 31,765.00	2	5.13
PHP 20, 180.00-PHP 26,494.00	7	17.50
PHP 17,473.00-PHP 20,179.00	14	35.90
Less than PHP 17, 473.00	15	38.46
<b>Total</b>	<b>39</b>	<b>100</b>
<i>Number of years connected to BPH</i>		
21 to 25 years	1	2.50
16 to 20 years	2	5.00



11 to 15 years	7	17.50
6 to 10 years	12	30.00
1 to 5 years	18	45.00
<b>Total</b>	<b>40</b>	<b>100</b>

### 3.2 Level of Self-Esteem of BPH Nurses

An important dependent variable of this study is the level of self-esteem of BPH Nurses, results of which are shown in Table 2.

The level of self-esteem of the Nurses in terms of “sense of worthy related to perceived professionalism level” got an average weighted mean (AWM) of 3.04, interpreted as “high self-esteem”. All indicators obtained “high self-esteem” responses. The results imply that BPH Nurses did not have very high feeling of power, usefulness and the feeling of being important which are the essence of the “sense of worthy related to perceived professionalism level”. A considerable number of them were having contractual status of employment and were only receiving a minimal salary of less than PHP 17,473.00 to PHP 20,179.00 a month.

Another component of self-esteem is on “socialization into the profession”. The result shows that the indicators are equally divided between “high self-esteem” and “low self-esteem” responses; and the AWM was 2.65, interpreted as “high self-esteem”. This result shows that Nurses’ self-esteem were not at a very high level for role tolerance, accepting the professional constraints, and hope for professional development aspects; and they had low level of self-esteem on the areas of confusion, regret/guilt, and anxiety/worry. This result is understandable because of the struggles they experienced in having excessive patient load and the low of opportunities to get a regular item at BPH.

Burnout is a psychological syndrome that may show up as emotional exhaustion, depersonalization and reduced personal accomplishment; emotional exhaustion is the feeling of being depleted and empty in the sense of resources; depersonalization is when the person has cynicism and negative attitude toward clients which may lead to having this feeling that the people deserve the problems that they have, and this may be as a result of emotional exhaustion. Emotional exhaustion and depersonalization may be somewhat related. Reduced personal accomplishment is the third aspect of burnout which is when the workers feel dissatisfied or unhappy about themselves in working with clients. [13]

Behaviors representative of role tolerance and the permanent state of confusion and fear of the future can be seen in those who remain in a state of role-related limbo. A Nurse who is in role-related limbo constantly envies people from other professions; and in fact, merely tolerates their current role as a Nurse. [14]

For the level of enthusiasm of being a Nurse, the AWM is 3.17, interpreted as “high self-esteem”, with all indicators receiving “high self-esteem” responses. This means that the Nurses felt “high self-esteem” on the areas of interest, pride, mental vitality, joy of performing tasks, joy of communicating with counterparts, joy of learning, and joy of being recognized as a Nurse. A Nurse who enjoys being a nurse is always happy and cheerful. They enjoy and take pride in being introduced in public as a nurse. For them, the duties or tasks of the profession are not viewed a burden – they will undertake eagerly. However, most of BPH Nurses did not feel this way. In fact they had not been enjoying their role as Nurses to a very high level.

With an overall weighted mean (OWM) of 2.98, the Nurses at BPH had “high self-esteem” level which means that their sense of worth, socialization to the nursing profession, and enthusiasm of being a Nurse were not very high. This could be possibly due to the minimum salary they received, their status of appointment, and the burden they felt on their increased nurse-to-patient ratio. This result is parallel to the finding of Kamimura, [15], who found out that the level of self-esteem of the nurses was perceived as usually high which replicate the suitable psychological conditions for work.



Table 2. Level of Self-Esteem of Biliran Provincial Hospital Nurses

Sense of Worthy Related to Perceived	WM	Interpretation
1 Use of critical thinking	3.15	high self-esteem
2 Ethics	3.12	high self-esteem
3 Being prestigious	2.92	high self-esteem
4 Efforts to have professional autonomy	3.12	high self-esteem
5 Importance of clinical skills	3.18	high self-esteem
6 Importance of knowledge	3.20	high self-esteem
7 Efforts to expert the profession	3.18	high self-esteem
8 Feeling of power	2.62	high self-esteem
9 Feeling of usefulness	3.15	high self-esteem
10 Feeling of importance	2.95	high self-esteem
11 Spirituality and holiness	3.02	high self-esteem
12 Self-expression	2.88	high self-esteem
<b>AWM</b>	<b>3.04</b>	<b>high self-esteem</b>
Socialization into the Profession	WM	Interpretation
1 Role tolerance	2.88	high self-esteem
2 Confusion	2.48	low self-esteem
3 Regret/guilt	2.42	low self-esteem
4 Anxiety/worry	2.40	low self-esteem
5 Accepting the professional constraints	2.75	high self-esteem
6 Hope for professional development	3.00	high self-esteem
<b>AWM</b>	<b>2.65</b>	<b>high self-esteem</b>
Enthusiasm about Being a Nurse	WM	Interpretation
1 Interest	3.25	high self-esteem
2 Pride	2.90	high self-esteem
3 Mental vitality	3.15	high self-esteem
4 Joy of performing tasks	3.25	high self-esteem
5 Joy of communicating with counter-parts	3.20	high self-esteem
6 Joy of learning	3.28	high self-esteem
7 Joy of being recognized as a Nurse	3.15	high self-esteem
<b>AWM</b>	<b>3.17</b>	<b>high self-esteem</b>
<b>OWM</b>	<b>2.98</b>	<b>high self-esteem</b>

Data Scoring: 3.26-4.00—very high self-esteem; 2.51-3.25--high self-esteem  
 1.76-2.50 --low self-esteem; 1.00-1.75 --very low self-esteem

### 3.3 Job Performance of Nurses in BPH for the Last Two Years

An equally important dependent variable considered in this study is on the job performance of the Nurses in BPH for the last two (2) years. This is presented in Table 3.

Results show that the ratings were divided into three categories with the resulting AWM: Quality (Q), Efficiency (E), and Timeliness (T). The actual accomplishments of the identified “Success Indicators (Targets + Measures)” were rated for all components of the two (2) Major Final Outputs - MFO1 and MFO2. All components of MFO1 which is on the “provision of effective & efficient patient care & health services” obtained AWM from 4.00 to 4.10 which is interpreted as “very satisfactory”, except on the “assessment of patients’ condition” which obtained a Satisfactory rating of 3.98.

This means that BPH Nurses’ MFO1 performance on the areas of executing doctors’ order and renders direct nursing care, health education & counseling, documentation of nursing activities, and cleanliness and orderliness were “very satisfactory” or very acceptable. The Nurses’ actually accomplished “very satisfactorily” on the following: executing properly, safely, and accurately Doctors’ orders; conducting health education and counseling which had been understood and followed by patients and family; properly classified patients according to illnesses; and observing waste segregation. However the Nurses’ actual performance on “prompt favorable action to all patient need/call” was only rated as “satisfactory”.

For the MFO2 which is on the “functional hospital committee towards quality improvements”, the Nurses obtained an AWM of 4.28, interpreted as “very satisfactory”. The success indicator for MFO2 is the “implementation of committee action plans” and the actual accomplishment they made was that the “Action plans set by committees was implemented with remarkable improvement relative to patient care”.

With an OWM of 4.15, interpreted as “very satisfactory”, the Nurses’ job performance was very acceptable. This may imply that although they had been struggling due to the previously mentioned actual scenario at BPH, they should have been doing their job very satisfactorily because providing patients care & health services and implementing improvements relative to patient care were very critical issues. In addition, Nurses’ job performance needed to be at a good level for BPH to be one of the agencies to qualify for Performance Based-Bonus (PBB), a yearly benefit given to all regular or permanent government employees whose agency fully complied all the requirements. PBB’s guidelines is according to section 4.3, Performance Rating of Employees and CES positions of the Guidelines on the Grant of the Performance-Based Bonus for Fiscal Year 2018, under Executive Order No. 80 S. 2012 and Executive Order No. 201 s. 2016.[16]

**Table 3. Job Performance of Nurses at BPH for the Last Two Years: Individual Performance Commitment and Review (IPCR) Accomplishment (FY 2017 & FY 2018)**

MFO	MAJOR FINAL OUTPUT	Success Indicators (Targets + Measures)	Actual Accomplishment	Ratings				Inter-pretation
				(Q) WM	(E) WM	(T) WM	(Ave)- WM	
MF O1	<b>Provision of effective &amp; efficient patient care &amp; health services</b> A. Administration of clinical and medical service mgt. in coordination with other hospital team, administrative & support staff. 1. Execute doctors order and renders direct Nursing care.  2. Assessment of patients’ condition  3. Health education & counseling  4. Documentation of nursing activities  5. Cleanliness & Orderliness	Drug administration all routes, charting, diagnostic and nursing procedures, and referrals.  During ward rounds or when acute change of patients condition noticed.  Within the confinement period of patients.  Patients’ chart, diet list & discharge log-book, census.  Patient classification and waste segregation.	All doctors’ order executed properly, safely, and accurately.  Prompt favorable action to all patient’ need/call  Conducted Health education and counselling understood and followed by patients and family.  Patients properly classified according to illnesses.  Waste segregation observed.	4.08	3.95	3.98	4.00	VS
				4.05	3.95	3.95	3.98	S
				4.10	4.00	3.90	4.00	VS
				4.15	4.08	3.92	4.05	VS
				4.35	4.02	3.92	4.10	VS
MF O2	<b>Functional Hospital committee towards quality improvements. (HECM)</b> 1. Attends & participates committee meetings & proposes possible interventions towards BPH.	Implementation of committee action plans	Action plans set by committees was implemented with remarkable improvement relative to patient care	4.45	4.38	4.02	4.28	VS
<b>OWM</b>				4.19	4.06	3.95	<b>4.07</b>	<b>VS</b>

Data Scoring: 4.50 – 5.0 – Outstanding; 4.00-4.49 – Very Satisfactory; 3.2- 3.99 – Satisfactory; 2.3-3.19 – Unsatisfactory; 1.0-2.29 - Poor Legend: S – Satisfactory, VS – Very Satisfactory

### 3.4 Level of Job Satisfaction of the Nurses in BPH

Another important dependent variable being taken into consideration is on the level of job satisfaction of BPH Nurses. Results are presented in Table 4.

Findings reveal that majority of the indicators (22 out of 24) under job- satisfaction were rated from 2.53 to 3.20, all interpreted as “satisfied”. Only statement on “work giving a feeling of personal accomplishment” and “job making good use of Nurses’ skills and abilities” received respective ratings of 3.38 and 3.28, both interpreted as “very satisfied”.

Under the “job passion and self-evaluation” part, all indicators earned “satisfied” responses. Overall, the level of job satisfaction of the Nurses was 2.92, interpreted as “Satisfied”. This result implies that BPH Nurses generally did not reach the highest peak in terms of their job satisfaction because of the various factors such as on their status of appointment in which a considerable number of them were in contractual or job order status, low salary, and excessive patient load. The result concurs with Abraham Maslow’s needs hierarchy. [17]

Hierarchy of needs explains human motivation in general; and it can very well relate to job satisfaction. In any work setting, compensation is the basic need for employees to meet their basic physiological needs. Safety needs can manifest itself through job security and/ or having suitable hospital structures and policies. Satisfying employees’ physiological needs and safety needs can lead them the feeling of belongingness to the workplace, which will result to positive relationships with colleagues and supervisors in the workplace. Satisfied employees feel they are valued and appreciated by their colleagues and their organization. The highest level is when the employee seeks to self-actualize where they need to grow and develops in order to become everything they are capable of becoming. Although it could be seen as separate, the progressions from one step to the next all contribute to the process of self-actualization. Therefore, organizations need to improve employee job satisfaction by meeting their basic needs in order for them to address higher-order needs. [17]

*Table 4. Level of Job Satisfaction of BPH Nurses*

Indicators	WM	Interpretation
1. I feel encouraged to come up with new and better ways of doing things.	3.20	satisfied
2. My work gives me a feeling of personal accomplishment.	3.38	very satisfied
3. I have the tools and resources to do my job well.	2.75	satisfied
4. On my job, I have clearly defined quality goals.	2.93	satisfied
5. The Administration does an excellent job of keeping Nurses informed about matters affecting us.	2.60	satisfied
6. When a patient is dissatisfied, I can usually correct the problem to their satisfaction.	2.83	satisfied
7. I understand why it is so important for BPH to value diversity (to recognize and respect the value of differences in gender, age, etc.)	3.10	satisfied
8. My job makes good use of my skills and abilities.	3.28	very satisfied
9. My supervisor’s head visibly demonstrates a commitment to quality.	2.83	satisfied
10. Senior supervisors visibly demonstrate a commitment to quality.	2.85	satisfied
11. The information I receive from management on what is going on in my division.	2.75	satisfied
12. My involvement in decisions that affect my work.	2.98	satisfied
13. Considering everything, I am satisfied with my job.	3.05	satisfied
14. The information I receive from management on what’s going on in the Hospital.	2.78	satisfied
15. My opportunity to get a better job at the Hospital.	2.88	satisfied
<b>Job Passion and Self-Evaluation</b>		
16. I experience personal growth such as updating skills and learning different jobs.	2.83	satisfied
17. Management looks to me for suggestions and leadership.	2.73	satisfied
18. Supervisors encourage me to be my best.	2.53	satisfied



19. I am rewarded for the quality of my efforts.	2.73	satisfied
20. I am valued by my supervisor.	2.80	satisfied
21. The hospital has a positive image to my friends and family.	3.23	satisfied
22. My job makes a difference in the lives of others.	3.05	satisfied
23. I solve patients' problems.	3.10	satisfied
24. Overall, I am satisfied with my job.	3.20	satisfied
<b>AWM</b>	<b>2.92</b>	<b>satisfied</b>

Data Scoring:

3.26-4.00 --very satisfied; 2.51-3.25—satisfied; 1.76-2.50--somewhat dissatisfied;

1.00-1.75-- very dissatisfied

### 3.5 Relationship of Variables

Relationships of variables were determined to fully substantiate the general objective of the study.

#### 3.5.1 Relationship between Profile and Level of Self-Esteem

Table 5 presents the relationship between the profile of the Nurses and their level of self-esteem.

Results from the Table show that the null hypothesis on the significant relationships between the level of Nurses' self - esteem and their profile in terms of highest educational attainment, monthly income and number of years in service are accepted because all the p-values of 0.916, 0.216 and 0.179 are greater than their corresponding r - values of -0.017, -0.200, and -0.097 at significance level of  $\alpha = 0.05$ . Therefore, there was no significant relationship between the highest educational attainment, monthly income and number of years in service of the Nurses and their level of self-esteem.

On the other hand, the p-value of 0.091 for the relationship between the status of appointment and level of self-esteem was smaller than the r – value of -0.271, at  $\alpha = 0.05$ . This qualifies for the rejection of the null hypothesis. Therefore, there was negative or inversely proportional significant relationship between the status of appointment and level of self-esteem of BPH Nurses.

These results imply that the BPH Nurses' highest educational attainment, monthly income, and number of years in service had no bearing to their level of self-esteem; but Nurses' status of appointment affected to their level of self-esteem.

On the status of appointment affecting Nurses' level of self-esteem, this is understandable because a change in status of appointment could surely boost their egos since it is an indication that they had been rewarded for the quality of efforts they made, among other reasons. Status of appointment of BPH Nurses really mattered to them since almost one half of the Nurses-respondents were on contractual/job order status; thus it affected their level of self-esteem. The result concurs with Maslow's Hierarchy of Needs,[17], which states that within an organization, financial compensation and healthcare are some of the benefits which help an employee meet their basic physiological needs.

Table 5. Relationship between the Profile and Level of Self-Esteem

Variables	r-value	p-value	Decision	Interpretation
Highest Educational Attainment and Level of Self-Esteem	-0.017	0.916	H <sub>0</sub> Accepted	Not significant
Monthly Income and Level of Self-Esteem	-0.200	0.216	H <sub>0</sub> Accepted	Not significant
Status of Appointment and Level of Self-	-0.271	0.091	H <sub>0</sub> Rejected	Significant
Number of Years in Service in BPH and Level of Self-Esteem	-0.179	0.269	H <sub>0</sub> Accepted	Not significant

Significance level  $\alpha = 0.05$

#### 3.5.2 Relationship between the Profile and Level of Job Performance

Table 6 shows the relationship between the profile and level of job performance.

As depicted from the Table, the p-values of 0.281, 0.954, and 0.641 for highest educational attainment, status of appointment, and monthly income, respectively, are greater than their corresponding r-values of 0.175, 0.009, and 0.076. This leads to the acceptance of the null hypothesis. Therefore, Nurses' highest educational attainment, status of appointment, and monthly income were not significantly related to their job performance level.

For the number of years in service and job performance level, the resulting p-value is 0.194 which is lesser than the r-value of 0.210. This leads to the rejection of the null hypothesis. This means that the Nurses' number of years in service affected their job performance level. The longer they stayed at BPH, the higher their job performance level become.

This result concurs with the findings of Ng *et al.* and Feldman *et al.* who said that older workers and longer-tenured workers do not engage in less innovation-related behavior than their younger and more junior counterparts; and workers at the high end of the age and tenure did not perform especially poorly on their tasks. [18][19]

*Table 6. Relationship between Profile and Level of Job Performance*

Variables	r-value	p-value	Decision	Interpretation
Highest educational attainment and level of job performance	0.175	0.281	H <sub>0</sub> Accepted	Not significant
Status of appointment and level of job performance	0.009	0.954	H <sub>0</sub> Accepted	Not significant
Monthly Income and level of job	0.076	0.641	H <sub>0</sub> Accepted	Not significant
Number of years in service in BPH and level of job performance	0.210	0.194	H <sub>0</sub> Rejected	Significant

Significance level  $\alpha = 0.05$

### 3.5.3 Relationship between the Profile and Level of Job Satisfaction

Table 7 presents the results of this particular null hypothesis.

The Table shows that the p-values of 0.578, 0.244, and 0.715 at  $\alpha = 0.05$  for highest educational attainment, monthly income, and number of years in service, respectively, are all greater than their corresponding r-values of -0.091, -0.188 and -0.060. These all lead to the acceptance of the null hypothesis.

For the relationship between the status of appointment and level of job satisfaction, result shows that the resulting p-value of 0.281 is lesser than the r-value of -0.461 at  $\alpha = 0.05$  significance level. This leads to the rejection of the null hypothesis.

These results imply that Nurses' highest educational attainment, monthly income, and number of years in service were not significantly related to their job satisfaction level; but their status of appointment affected to their level of job satisfaction.

In the case of BPH, once the Administration raised the status of appointment of their Nurses, from contractual to regular status, their level of job satisfaction elevated because they felt they finally belonged to BPH.

The result concurs with the findings of Gurkova *et al.* and Wang *et al.* who both found that educational level was not significantly related to job satisfaction. [20][21] As to monthly income, the result disagrees with the findings of Mondal *et al.* who said that job satisfaction is increasing when the salary structure is increasing. [22]

*Table 7. Relationship between Profile and Level of Job Satisfaction*

Variables	r-value	p-value	Decision	Interpretation
Highest Educational Attainment and level of job satisfaction.	-0.091	0.578	H <sub>0</sub> Accepted	Not significant
Status of appointment and level of job satisfaction.	-0.461	0.281	H <sub>0</sub> Rejected	Significant

Monthly income and level of job satisfaction.	-0.188	0.244	H <sub>0</sub> Accepted	Not significant
Number of Years in Service in BPH and level of job satisfaction	-0.060	0.715	H <sub>0</sub> Accepted	Not significant

Significance level  $\alpha = 0.05$ 

### 3.5.4 Relationship between the Level of Self-Esteem and Level of Job Performance

Table 8 presents the relationship between the level of self-esteem of the BPH nurses and their level of job performance.

Results shows that the p-value is equal to 0.453, with an r-value is -0.122 at  $\alpha = 0.05$ . Since the p-value is greater than the r-value, the null hypothesis was accepted. This means that the Nurses' level of self-esteem did not affect to their job performance level.

In BPH, just like other government agencies in the country, Nurses' job performance were usually at "very satisfactory" level, for them to qualify for the Performance Based Bonus (PBB).

Employees' job performance is actually a major factor to qualify for PBB that is the reason why the Nurses' level of self-esteem did not affect to their job performance level. This finding concurs with the findings of Kanfer who said that high importance of performance to self-esteem individuals can be expected to be more motivated to perform well at work (based upon self-enhancement principles) and hence exhibit the hallmarks of motivated individuals.[23]

**Table 8. Relationship between Level of Self-Esteem and Level of Job Performance**

Variables	r-value	p-value	Decision	Interpretation
Level of Self-esteem and Level of Job Performance	-0.122	0.453	H <sub>0</sub> Accepted	Not significant

Significance level  $\alpha = 0.05$ 

### 3.5.5 Relationship between the Level of Job Performance and Level of Job Satisfaction

Another relationship of variables taken into consideration is between the level of job performance of the Nurses and their level of job satisfaction. The result is shown on Table 9.

Data shows that the null hypothesis is accepted. This is based from the fact that the p-value of 0.991 is greater than the r-value of 0.002, at  $\alpha = 0.05$  level of significance. This means that the level of job performance of the Nurses had no bearing to their level of job satisfaction.

Being a major component of PBB, job performance of Nurses needed to be at a good level. This is the most valid reason why BPH Nurses' level of job satisfaction did not affect to their job performance level.

The result is in contrast to the study on achievement motivation which reveals that individuals with high need for achievement (Nach) prefer moderately challenging tasks because tasks that are too challenging carry with them a higher risk for failure, which is unacceptable to high-Nach individuals.[24] It would then stand to reason that performing a job well is likely to be more satisfying (and performing a job poorly more dissatisfying) to high-Nach individuals because success is their primary motivation. [25]

**Table 9. Relationship between the Level of Job Performance and Level of Job Satisfaction**

Variables	r-value	p-value	Decision	Interpretation
Level of Job Performance and Level of Job Satisfaction	0.002	0.991	H <sub>0</sub> Accepted	Not Significant

Significance level  $\alpha = 0.05$ 

## 4. CONCLUSION

Despite the fact that BPH Nurses had high-level of self-esteem, very satisfactory level of job performance, and satisfied level of job satisfaction, there is still a need for BPH administration and by the Nurses themselves to

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make rooms of improvements for the said areas of concerns for their overall welfare and growth; and to elevate the level of health care they will be giving to their patients. Therefore, at Biliran Provincial Hospital setting, the level of self-esteem, job performance, and job satisfaction need to be given great importance and optimal improvements.

## 5. ACKNOWLEDGMENT

In grateful recognition of their valuable contributions to the completion of this work, the researcher wishes to convey his sincere appreciation to the following:

Michelle B. Yu, RN, DM, the Dean of the School of Health & Allied Health Sciences and the Chairman of the panel of examiners, for her constant advice and guidance thereby making the timely completion of the manuscript;

Risa P. Chua, RN, Ed. D., his adviser, for the invaluable insights, constant encouragement and technical assistance which resulted in the refinement of this academic endeavor;

Jill Marie C. Hermogenes, RN, ED and Candice Marie B. Daño, RN, MAN, the members of the panel of examiners, for their valuable comments and suggestions thereby making this work more comprehensive and meaningful;

Victor C. Cañezzo, Jr., Ed. D. the University President of Biliran Province State University, for his ceaseless support and inspiration among the faculty of the University to pursue graduate studies which challenged the researcher to work for the completion of this academic effort;

The Biliran Provincial Hospital Nurses, the respondents of the study, for their active involvement and participation in the conduct of the study;

Juliet Romero, RN, his wife, for the constant love and encouragement to pursue this graduate study;  
Rossini B. Romero, ME (CE), Ph.D., his mother, for spending her time in the organization of the data; and above all, to the Almighty God, for being the source of strength and wisdom therefore making this work a success.

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