Job satisfaction vs. organizational climate: a cross-sectional study of Brazilian nursing personnel

Satisfação no trabalho vs. clima organizacional: estudo transversal em profissionais de enfermagem brasileiros

Satisfacción laboral vs clima organizacional: estudio transversal en profesionales de enfermería brasileños

Ricardo Toshio Yamassake[I] ; Patricia Campos Pavan Baptista[I] ;
Vinicius Anselmo Albuquerque[I] ; Chennyfer Dobbins Abi Rached[I]

[I]Universidade de São Paulo, São Paulo, SP, Brazil

ABSTRACT
Objective: relating the job satisfaction of the nursing team and the organizational climate in a University Hospital. **Method:** cross-sectional, quantitative study. EQUATOR checklist used to report the study is SQUIRE 2.0. The sample consisted of 226 nursing workers from a university hospital on the west side of the city of São Paulo, Brazil. A Socio-demographic and Professional Characterization Questionnaire, Organizational Climate Scale for Health Organizations (ECOOS) and Work Satisfaction Questionnaire (S20 / S23) were been applied. **Results:** the relationship of job satisfaction and organizational climate is complex and is associated with the experience of each individual, the higher the Organizational Climate score, the higher the Work Satisfaction score. **Conclusion:** there is a correlation between job satisfaction and organizational climate; it was verify through the applied instruments that there are several dimensions and sub-dimensions associated with this relationship.
Descriptors: Occupational Health Nursing; Nursing Leadership; Job Satisfaction.

RESUMO
Objetivo: relacionar a satisfação profissional da equipe de enfermagem e o clima organizacional em um Hospital Universitário. **Método:** estudo transversal, quantitativo. A lista de verificação EQUATOR usada para relatar o estudo é SQUIRE 2.0. A amostra foi composta por 226 trabalhadores de enfermagem de um hospital universitário da zona oeste da cidade de São Paulo, Brasil. Foram aplicados o Questionário de Caracterização Sociodemográfica e Profissional, a Escala de Clima Organizacional para Organizações de Saúde (ECOOS) e o Questionário de Satisfação no Trabalho (S20 / S23). **Resultados:** a relação entre satisfação no trabalho e clima organizacional é complexa e está associada à experiência de cada indivíduo. Quanto maior o escore de Clima Organizacional, maior o escore de Satisfação no Trabalho. **Conclusão:** há correlação entre satisfação no trabalho e clima organizacional; foi verificado através dos instrumentos aplicados que existem várias dimensões e subdimensões associadas a esta relação.
Descritores: Enfermagem do Trabalho; Liderança em Enfermagem; Satisfação no Trabalho.

RESUMEN
Objetivo: relacionar la satisfacción profesional del equipo de enfermería y el clima organizacional en un Hospital Universitario. **Métodos:** estudio transversal, cuantitativo. La lista de verificación de EQUATOR utilizada para informar el estudio es SQUIRE 2.0. La muestra se compuso de 226 trabajadores de enfermería de un hospital universitario en la zona oeste de la ciudad de São Paulo, Brasil. Se aplicaron: el Cuestionario de Caracterización Sociodemográfica y Profesional, la Escala de Clima Organizacional para Organizaciones de Salud (ECOOS) y el Cuestionario de Satisfacción Laboral (S20 / S23). **Resultados:** la relación entre la satisfacción laboral y el clima organizacional es compleja y está asociada a la experiencia de cada individuo. Cuanto mayor sea el puntaje de Clima Organizacional, mayor será el puntaje de Satisfacción Laboral. **Conclusión:** existe una correlación entre la satisfacción laboral y el clima organizacional; se verificó a través de los instrumentos aplicados que existen varias dimensiones y subdimensiones asociadas a esta relación.
Descriptores: Enfermería en Salud Ocupacional; Liderazgo en Enfermería; Satisfacción Laboral.

INTRODUCTION

The influence of work on the life of human beings is undeniable since, through it, they establish their dignity, obtain sustenance and social status and promote relationships[1]. Potentiation of wear out and/or strengthening factors in the health-disease process are limited to work, depending on the way in which it is organized[2].

In addition to technological incorporation, increased complexity of processes and demands for high productivity and goals, the work context experienced by Nursing workers, characterized by inadequate resources, both in quantitative and qualitative aspects, is an element that has deteriorated the health of this group in many ways[3].

On the other hand, it is also important to highlight that the work process carries positive elements with it, related to satisfaction and well-being, which must be investigated. Research on organizational climate has been carried out in order to understand how workers behave in organizations, how they feel about the climate and its influence on well-being[4].

The concept of organizational climate is the values attributed by the individual with regard to the practices and behaviors experienced in companies. In a sense, the climate has been described as the workers' shared perception in the work environment[5]. A positive organizational climate can lead to less stressed and to fewer exhausted workers. At the same time, a stressful work environment can lead to less job satisfaction and, therefore, exert a negative influence on the employees' well-being[6,7].

The organizational climate portrays the perceptions of the set of individuals of a given organization about their work context. This involves the most diverse factors, such as relationships with peers and bosses, the tasks to be performed, the benefits and the working conditions, among others, which may be one of the vulnerability factors for the development of work-related stress conditions[8]. It is worth mentioning that this concept is broad and can be seen in different ways, which leads to inaccuracies and interpretations of a divergent organizational culture[9].

The organizational climate is one of the relevant constructs in the field of organizational behavior, being a construct investigated over the years. It is a theme related to the individual's perception of the work environment, constituting a regulatory and guiding tool for human behavior within organizations[8]. The organizational climate also has a theoretical scope of the construct and the ability to analyze characteristics such as interpersonal relationships, leadership, recognition and reward, among others, based on the perceptions of the organization's workers, which implies the perception of job satisfaction[9].

The situations perceived by the Nursing team brought to light the determinant of job satisfaction as a source of influence on well-being and safety in the clinical practice, as well as changes in the context of the climate and the team's commitment to carrying out its activities[10].

Considering the concerns that permeate the Nursing workers' health, and believing that the organizational climate can interfere with job satisfaction, the current study seeks to relate the Nursing team's job satisfaction and the organizational climate in a University Hospital.

METHOD

This is a cross-sectional field study with a quantitative approach. The EQUATOR checklist used to report the study is SQUIRE 2.0.

The study was carried out at the University Hospital of the University of São Paulo (*Hospital Universitário-Universidade de São Paulo*, HU-USP), located in the West of the city of São Paulo, state of São Paulo. The sample consists of 226 workers from the Nursing team. The inclusion criteria was to be trained in Nursing, either at the higher or mid-level. The exclusion criteria were professionals who were distanced from work due to sick leave, pregnancy or vacation.

The organizational climate and job satisfaction constructs were considered as dependent variables, respecting the global scores.

The demographic characteristics (age, gender, marital status, number of people with whom they live, family income, schooling, professional training, leisure activities and care for dependents at home) and the functional characteristics (personal income, workplace, position, length of professional experience, mean number of weekly working hours and other employment relationships) were considered as independent variables.

The data were collected from April to December 2019. The Free and Informed Consent Form, as well as the questionnaires, was delivered personally to each study participant by the researchers. For collection, the delivery date was scheduled according to the workers' and the researcher's availability. Furthermore, it was established that, for situations of participants who were negligent in relation to the instruments' delivery deadlines, up to three new dates for return were proposed without failure. Otherwise, it was interpreted as data loss due to the participant's withdrawal. Three instruments were used, namely: Sociodemographic and Professional Characterization Questionnaire, Organizational Climate Scale for Health Organizations (*Escala do Clima Organizacional para Organizações de Saúde*, ECOOS) and Work Satisfaction Questionnaire (S20/S23).

ECOOS was developed and validated by Menezes et al. (2009) and consists of 64 items, assessed on a 5-point scale ranging from "Strongly disagree" (1) to "Strongly agree" (5). It consists of seven dimensions: Leadership, Professional Development, Relationships and Team Spirit, Relationships with the Community, Safety at Work, Strategy and Remuneration.

To verify job satisfaction, the Job Satisfaction Questionnaire (S20/S23) was used, prepared by Meliá and Peiró, Brazilian version by Carlotto and Câmara[11] with 20 items, and evaluated on a 5-point scale ranging from "Totally dissatisfied" (1) to "Totally satisfied" (5). It consists of three dimensions: Satisfaction with Hierarchical Relationships, Satisfaction with the Physical Work Environment, and Intrinsic Job Satisfaction.

Double data entry was performed in a Microsoft Excel spreadsheet. Subsequently, the files were exported to the STATA software, version 14, to check data validity, consistency, correction and recoding, with subsequent statistical analysis. The Epi Info software, version 3.5.4, from the Centers for Disease Control and Prevention was used to analyze the losses.

The reliability analysis of the questionnaires used was carried out using Cronbach's alpha coefficient.

Characterization of the study population was carried out through descriptive analysis using means, standard deviations, minimum and maximum values of the scores of the quantitative variables and proportions for the qualitative variables. As for the analysis of the associations between job satisfaction and organizational climate and job satisfaction, a bivariate analysis of the factors associated with job satisfaction was performed with the Shapiro-Wilk test to verify adherence of the Job Satisfaction score to normal distribution, determining the types of statistical tests to be applied.

The correlations between the quantitative variables and the Job Satisfaction score were analyzed using Pearson's correlation coefficient for variables with normal distribution and with Spearman's correlation coefficient for nonparametric variables. To compare the means of the Job Satisfaction score according to the categories of the qualitative variables, homogeneity of variances was initially assessed using the Barlett test. As the variables presented constant variance, the ANOVA test used. With a statistically significant difference between the means, the Bonferroni post hoc test was performed for multiple comparisons.

The regression analysis between Job Satisfaction and Organizational Climate was also performed. Subsequently, the remaining variables that presented $p<0.20$ in the bivariate analysis were inserted in the modeling. The "p" value determined the order of entry into the multiple model. The modeling process was stepwise forward. The independent variables remained in the multiple model if $p<0.05$ and/or if they were adjustment variables. The qualitative variables were transformed into indicator variables (Dummy). A 5% significance level was used in all the analyses performed.

The research protocol was approved by the institution's Research Ethics Committee, and formal authorization was obtained from the service that hosted collection.

RESULTS

The sample consisted of 226 professionals from the Nursing team, 88.5% (n = 200) of whom were female; age range between 50 and 59 years old, 36.3% (n = 82); as for professional training, 54.4% (n = 123) were Nursing technicians; and 36.3% (n = 82) had 21 or more years of experience in the hospital under study, as can be seen in Table 1.

There was a statistically significant correlation between Organizational Climate and Job Satisfaction: the higher the Organizational Climate score, the higher the Job Satisfaction score ($p<0.001$, r = 0.424).

The confirmatory analysis of the dimensions of each of the variables used was performed with the structural equation model to test the relationships between the variables. Cronbach's alpha confirmatory analysis for the climate was 0.95. The global score (considering all the questions in the questionnaire) presented a Cronbach's alpha coefficient of 0.95. Exclusion of any question would not lead to any improvement in the results of the dimensions or the global score.

In the Job Satisfaction variable, the Cronbach's alpha value was 0.85, except for the Remuneration dimension, which obtained a result of 0.79. The global score (considering all questions in the questionnaire) presented a Cronbach's alpha coefficient of 0.97. Exclusion of any question would not lead to any improvement in the results of the dimensions or the global score.

The global score for Job Satisfaction had a mean of 3.22 points (SD = 0.89 points) and a median of 3.30 points, varying from 1.20 to 5.00 points. As for the dimensions, the highest satisfaction level was in Intrinsic Job Satisfaction (mean of 3.30 points; SD = 1.03 points) and the lowest level was in Physical Work Environment (mean of 3.13 points; SD = 1.08 points). The mean of Hierarchical Relationships was 3.25 points (SD = 1.02 points).

The Shapiro-Wilk test showed that the Job Satisfaction score had normal distribution ($p>0.05$) and the other quantitative variables presented non-parametric distribution ($p≥0.05$).

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TABLE 1: Sociodemographic distribution of the Nursing team workers. São Paulo, SP, Brazil, 2019.

Variable	Participation*		Losses		Total		p**
	N	%	N	%	N	%	
Gender							
Female	200	88.5	245	87.5	445	87.9	0.732
Male	26	11.5	35	12.5	61	12.1	
Age group (years old)							
Less than 40.0	62	27.4	41	14.6	103	20.4	0.002
From 40.0 to 49.9	64	28.3	98	35.0	162	32.0	
From 50.0 to 59.9	82	36.3	105	37.5	187	37.0	
60.0 and more	18	8.0	35	12.5	53	10.5	
Not reported	0	0.0	1	0.4	1	0.2	
Professional qualification							
Nursing Assistant	16	7.1	43	15.4	59	11.7	0.015
Nursing Technician	123	54.4	149	53.2	272	53.8	
Nurse	85	37.6	90	32.1	175	34.6	
Not reported	2	0.9	-2	-0.7	0	0.0	
Length of experience in the hospital (years)							
Less than 11.0	58	25.7	34	12.1	92	18.2	<0.001
From 11.0 to 20.9	79	35.0	102	36.4	181	35.8	
21.0 and more	82	36.3	151	53.9	233	46.0	
Not reported	7	3.1	-7	-2.5	0	0.0	
Work area							
Clinical Nursing	40	17.7	60	21.4	100	19.8	0.002
Surgical Nursing	52	23.0	44	15.7	96	19.0	
Obstetric Nursing	31	13.7	67	23.9	98	19.4	
Pediatric Nursing	50	22.1	44	15.7	94	18.6	
Outpatient Clinic	36	15.9	66	23.6	102	20.2	
Management	4	1.8	12	4.3	16	3.2	
Not reported	13	5.8	-13	-4.6	0	0.0	
Total	**226**	**100.0**	**280**	**100.0**	**506**	**100.0**	

Note: Not reported and negative values are due to inconsistencies in the databases and were not considered in the chi-square test calculations

Among the correlations performed, it was found that only age showed a statistically significant association with Job Satisfaction: the higher the age, the higher the satisfaction level (p = 0.029, r = 0.0146).

Table 2 presents the Job Satisfaction dimensions with emphasis on Dimension 3 - Intrinsic Job Satisfaction and with higher scores on the opportunities offered by work to do things that they enjoy and work as a conduit for achievement, both with 3.37 points.

TABLE 2: Descriptive statistics of the job satisfaction dimensions*, Nursing workers. São Paulo, SP, Brazil, 2019.

Dimension	N	Mean	Median	Standard Deviation	Minimum*	Maximum*
1. Satisfaction with Hierarchical Relationships	235	3.5	3.27	1.02	1.00	5.00
2. Satisfaction with the Physical Work Environment	235	3.13	3.20	1.08	1.00	5.00
3. Intrinsic Job Satisfaction	232	3.30	3.50	1.03	1.00	5.00
Global Job Satisfaction Score	227	3.22	3.30	0.89	1.20	5.00

*Scores ranging from 1.00 to 5.00 points

In the correlation of functional characteristics with Job Satisfaction, only the performance sector was associated with Job Satisfaction (p = 0.001), with the highest satisfaction levels occurring in the sectors classified as "Outpatient Clinic" (mean of 4.60 points). Clinical Nursing presented the highest satisfaction level (mean of 3.55 points, SD = 0.87) and Pediatric Nursing attained the lowest satisfaction level (mean of 2.88 points, SD = 0.82).

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Interpretation of the model was as follows: for each one-point increase in the Organizational Climate score, there was a 0.486-point increase in the Job Satisfaction score, regardless of the other variables in the model. For the Clinical Nursing work area, there was a 0.312-point increase in the Job Satisfaction score when compared to the other work areas. See Table 3.

TABLE 3: Factors associated with the Job Satisfaction score identified through linear regression analysis, Nursing workers. São Paulo, SP, Brazil, 2019.

Variables	Bivariate				Multiple			
	β	$CI_{95\%}$ (β)	p	r^2	β	$CI_{95\%}$ (β)	p	r^2a
Organizational climate	0.525	[0.340; 0.697]	<0.001	0.18	0.486	[0.326; 0.646]	<0.001	0.21
Age (in years old)	0.011	[-0.001; 0.023]	0.061	0.02	--	--	--	
Work area*				0.06				
Clinical Nursing	0.320	[0.020; 0.620]	0.037		0.312	[0.018; 0.606]	0.038	
Pediatric Nursing	-0.347	[-0.637; -0.057]	0.019		-0.308	[-0.595; -0.020]	0.036	
Time of training in the profession (in years)	0.008	[0.005; 0.020]	0.224	0.01	--	--	--	
Liability for people who are dependent on care: unknown or not reported	0.262	[-0.012; 0.536]	0.061	0.02	--	--	--	
Male**	-0.180	[-0.564; 0.204]	0.357	0.00	-0.180	[-0.549; 0.190]	0.340	

* Reference category: Other work areas
** Reference category: Female

Regarding the Organizational Climate dimensions, the results obtained through ECOOS showed that the global score for Organizational Climate had a mean of 3.49 points (SD = 0.71 points) and a median of 3.53 points, varying from 1.63 to 5.00 points. As for the dimensions, the highest scores were in Leadership (mean of 3.81 points; SD = 0.99 points), Relationships and Team Spirit (mean of 3.73 points; SD = 1.00 points) and Safety at Work (mean of 3.64 points; SD = 0.99 points). The lowest score was in Strategy (mean of 2.83 points; SD = 0.98 points). Remuneration reached a mean of 3.55 points (SD = 0.96 points), the mean value of Relationships with the Community was 3.41 points; SD = 0.85 points), and Professional Development reached a mean of 3.15 points (SD = 1.00 points).

There were highlights for Dimension 1 - Leadership, especially the following items: "my boss knows the technical aspects of their work well" (4.55 points), "communication with my boss is easy and open" (4.20 points), "I trust in my boss's decisions" (4.02 points) and "my boss accepts suggestions for improving work" (4.02 points). An important highlight for the items with the worst scores was for "there is equal treatment between managers and subordinates" (3.27 points) and "I participate in the decisions that affect my work" (3.35 points).

The Hierarchical Relationships dimension pointed out weaknesses in equal treatment and a sense of justice with a low possibility of participating in decisions in the work area (both with a mean of 3.12). In addition, low satisfaction with the support received from higher levels (mean of 3.22), was associated with low participation in decisions in the organization or in the work area (mean of 3.16).

DISCUSSION

The mean age coincides with the national scenario. It is worth noting that the study locus has a percentage of workers over the ages of 49 to 59.9 years old. This has been the case in the Brazilian scenario, as there is a need to maintain income, forcing professionals to continue working even after retirement. The reasons for this phenomenon are multifactorial, including criteria of a personal, cultural and economic nature[12].

When observing the global score for Job Satisfaction (mean of 3.22 points), it can be said that workers are satisfied with their work, an assessment strengthened by Intrinsic Job Satisfaction (mean of 3.30; SD = 1.03), with work being a major provider of Personal Fulfillment (mean of 3.37) because workers have the possibility to do things they enjoy (mean of 3.37).

In the same sense, promoting satisfaction of the Hierarchical Relationships (mean of 3.25 points; SD = 1.02 points) also stood out. A mean of 3.51 points was identified in Work Supervision carried out by workers; in this hospital, it is possible to maintain good personal relationships with the authorities (mean of 3.43), exercising periodicity of supervision also with a high mean value (4.42 points); sustained by the way in which they evaluate and judge the employees' work (mean of 3.38), which makes it possible to decide with autonomy on their own work (mean of 3.37).

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This data is extremely relevant in the study, as it shows that the Nursing team is satisfied with the supervision and with the good personal relationships established with the authorities. This is a positive response for leaders because it points out which paths they should continue to take in order to guarantee this satisfaction and even increase it[13].

The Nursing practice focuses on the Nursing team's interpersonal relationships, including the multidisciplinary team and the family. The patients whose values, beliefs and desires of an individual or collective nature have derived from the environment in which they live and have developed must therefore be considered to guarantee a positive organizational climate and the consequent satisfaction of the professionals at work[14].

When the organizational climate is positive, the tendency is for personal and professional satisfaction to be attained. This has been represented by the relationships of satisfaction, collaboration, interest and motivations, among others that are evidenced by the workers. If the perception of the climate is negative, the environment becomes overloaded and tense, with the risk for the employees to feel frustrated regarding their own needs, causing discontent and leading to disinterest, non-conformity, apathy and even diseases, such as Burnout Syndrome.

In the Hierarchical Relationships dimension, the items with the highest satisfaction level were supervision with their work personal relationships with the authorities, periodicity of supervision, the way in which they evaluate and judge their work and the possibility of autonomously deciding on their own work. In this hospital, it is possible to maintain good personal relationships with the authorities, exercising periodicity of supervision sustained by the way in which they evaluate and judge the employees' work, which makes it possible to decide with autonomy on their own work.

The Hierarchical Relationships also pointed out the lack of collaborators to participate in decisions in the work area, in addition to the insufficient support of the higher levels. In this aspect, it is possible to identify a similarity regarding the power and autonomy restrictions, these factors precluding the manifestation of good relationships with colleagues, showing that dissatisfaction is more associated with the organizational culture itself, with greater or lesser participation. When investigating job satisfaction, a "fair" satisfaction level with Management Bodies was identified, with lower rates for "management recognition" and "communication"[15,16].

Study limitations

Among the limitations of this study, we can mention the fact that it was conducted in a single hospital, with a specific sample and limited to civil servants in a Brazilian context. Thus, the results cannot be generalized to other types of organization.

The fact that the study has a cross-sectional design prevented us from drawing conclusions about the time order of effects and causal relationships. To avoid such limitations, we suggest other researchers to resort to longitudinal methodologies within a multi-method approach.

A point to consider is that the assessment was made with a focus on job satisfaction versus the organizational climate, not examining quality of life, which can deeply influence job satisfaction. It is interesting for future papers to consider the multilevel relationships between attitudes, behaviors and aggregate performance at the team level.

Conclusion

The objective of this paper was to investigate the association between job satisfaction and the organizational climate of the Nursing team workers in the context of a public hospital in Brazil. It was shown that there is a correlation between the Organizational Climate and Job Satisfaction: the higher the Organizational Climate score, the higher the Job Satisfaction score ($p<0.001$, $r = 0.424$).

The organizational climate is subjective. However, it represents the social atmosphere of an organization. This fact justifies the reason why it is fundamental to consider it for achieving employee satisfaction at work.

The organizational climate is the expression of the feelings, perceptions and attitudes of the individual at work, which is influenced by human resource management practices, organizational values and interpersonal relationships, in addition to policies that seek to establish goals and rewards for achieving them. In addition to the health institutions' internal contexts, as complex beings, workers bring with them individual needs that, either directly or indirectly, change their perception of satisfaction in the work universe.

In the findings of this study, the highest job satisfaction level was found in the Intrinsic Job Satisfaction dimension, which was described as a feeling that work is conducive to personal fulfillment, as well as offering opportunities to do things in which the individual stands out and enjoys. The lowest level was found in the Physical Work Environment, and this dimension was related to the physical structure, lighting and ventilation of the workplace, as well as to hygiene and health issues; this is justified because the sample is from a university (public) hospital. In Brazil, health resources are increasingly scarce. Consequently, investment in infrastructure ends up been compromised. Proper maintenance of the

infrastructure was linked to the way in which the organizational structure and other administrative issues are handled in the institution where, sometimes, they are not simple practices.

Thus, it is possible to understand that the job satisfaction construct is an immediate result of a complex context, in which workers are inserted in their workplace. There are associated issues regarding the experiences of each of the individuals, also including the collective experiences, as well as the way in which these experiences were interpreted by each of the members and by the institutions involved.

Understanding the relationship between the organizational climate and job satisfaction provides subsidies for the elaboration of strategies to mitigate the processes of workers' exhaustion, illness and inability, as well as helping to improve the productivity and effectiveness of the Nursing work process. It is also necessary to realize the correlated dimensions as fragile in order to maintain a positive organizational climate which makes it possible to perform a thorough analysis of the Nursing professionals' attitudes on these aspects and seek to improve items that can affect the organizational climate and compromise job satisfaction.

The results suggest that the areas with potential to initiate improvement strategies in search of job satisfaction are Satisfaction with Hierarchical Relationships, Intrinsic Job Satisfaction, Leadership and Professional Development. Therefore, it is suggested that policy makers and administrators emphasize policies that develop leadership in the professionals whose job positions them as managers, directors, coordinators or supervisors and that they improve their professional development techniques of the Nursing team as a whole in search for full satisfaction of the workers in the organization.

REFERENCES

1. Marx K. The capital. Critique of Political Economy. Book First. Sao Paulo: Nova Cultural, 1996 (in Portuguese).
2. Felli VEA., Baptista PCP. Nursing worker health. Sao Paulo: Manole. (in Portuguese), 2015.
3. Baptista PCP. Disability at work: the understanding of nursing managers [free teaching]. São Paulo: School of Nursing. Universidade de São Paulo (in Portuguese), 2014.
4. Pecino V, Díaz PA, Mañas MA. Clima, Estrés y Satisfacción Laboral: Un Estudio Multinivel en el SectorPúblico. Rev. Psicol. Soc. [Internet]; 2017 [cited 2021 Sep 15]; 32:52–79. DOI: http://dx.doi.org/10.18800/psico.201602.007.
5. Bakker AB., Demerouti E. Job Demands–Resources theory: Taking stock and looking forward. J Occup Health Psychol [Internet]. 2017 [cited 2021 Sep 15]; 22(3):273-85. https://doi.org/10.1037/ocp0000056.
6. Pecino V. Organisational Climate, Role Stress, and Public Employees' Job Satisfaction. Int. J. Environ. Res. Public Health [Internet]. 2019 [cited 2021 Sep 25]; 16(10):1792. DOI: https://doi.org/10.3390/ijerph16101792.
7. Randhawa G, Kaur K. Organizational climate and its correlates: review of literature and a proposed model. Journal of Management Research [Internet]. 2019; [cited 2021 Sep 18]; 14(1):25-40. https://www.indianjournals.com/ijor.aspx?target=ijor:jmr&volume=14&issue=1&article=003.
8. Fleury MJ, Grenier G, Bamvita J, Chiocchio F. Associated and mediating variables related to job satisfaction among professionals from mental health teams. Psychiatr Q [Internet]. 2018 [cited 2021 Sep 18]; 89(2):399-413. DOI: https://doi.org/10.1007/s11126-017-9543-6.
9. Nelson RE, Mei A. Production technology and organizational culture in a mass transportation company. Organ. Soc. [Internet]. 2017 [cited 2021 Sep 15]; 24(81):261-84. DOI: https://dx.doi.org/10.1590/1984-9230814.
10. Forehand GA, Gilmer HB. Environmental variation in studies of organizational behavior. Psychological Bulletin [Internet]. 1964 [cited 2021 Sep 19]; 62(6):361-82. DOI: https://doi.org/10.1037/h0045960.
11. Carlotto M, Câmara S. Psychometric properties of the Job Satisfaction Questionnaire (S20/23). Psico-USF [Internet]. 2018 [cited 2021 Sep 28]; 13(2):203-10. DOI: https://dx.doi.org/10.1590/S1413-82712008000200007.
12. Kaewpan W, Peltzer K. Nurses' intention to work after retirement, work ability and perceptions after retirement: a scoping review. Pan Afr Med J [Internet]. 2019 [cited 2021 Sep 16]; 33:217. DOI: https://doi.org/10.11604/pamj.2019.33.217.17568.
13. Fitrio T, Apriansyah R, Utami S, Yaspita H. The Effect of Job Satisfaction to Organizational Citizenship Behavior (OCB) Mediated by Organizational Commitment. IJSRM [Internet]. 2019 [cited 2021 Sep 15]; 7(9):1300–10. DOI: https://doi.org/10.18535/ijsrm/v7i9.em01.
14. Japiassu RB, Rached CDA. O enfermeiro líder em coaching: revisão das principais considerações científicas. Int Journal Develop Research [Internet]. 2020 [cited 2021 Sep 25]; 10(6):36782-4. Available from: http://www.journalijdr.com/o-enfermeiro-l%C3%ADder-em-coaching-revis%C3%A3o-das-principais-considera%C3%A7%C3%B5es-cient%C3%ADficas.
15. Silva CINP, da, Potra TMF dos S. Professional satisfaction of nurses in a local health unit: determinants of satisfaction. Nursing Journal Reference [Internet]. 2019 [cited 2021 Sep 15]; IV(20):117-28. DOI: https://dx.doi.org/10.12707/RIV18077.
16. Asgari S, Shafipour V, Taraghi z, Yazdani-Charati J. Relationship between moral distress and ethical climate with job satisfaction in nurses. Nurs Ethics [Internet]. 2019 [cited 2021 Sep 25]; 26(2):346-56. DOI: https://doi.org/10.1177%2F0969733017712083.