

Research Article

The Effects of Total Quality Management in Health Facilities on Employees' Job Satisfaction and on Organisational Commitment: A Case in A Private Hospital

Sağlık Kurumlarında Toplam Kalite Yönetimi Uygulamalarının Çalışan İş Doymu ve Örgütsel Bağlılığına Etkisi: Bir Özel Hastane Örneği

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Abstract

Humans' expectations have also increased due to the developing technology, increase in communication networks, rise in the level of education and of income. Thus, patients would like to receive treatment in institutions where they will feel safe and choose to work in institutions where staff job satisfaction is high. As different from other sectors which have activities in service sector, it is important for healthcare institutions to have qualified work force beside having financial power and technological equipment. It is because errors in delivering healthcare service can result in serious losses- even in losses of lives.

One of the fundamental indicators of quality in healthcare is the safety of patients and of employees. Having a quality certificate is a significant indicator of the fact that the quality of patient care has attained a certain standard and that patient and employee safety has been maintained in the hospital holding the certificate. This paper aims to analyse the effects of quality applications in a private hospital having activities in the sector of healthcare on employees' job satisfaction and their organisational commitment and to determine the correlations between quality activities, employees' job satisfaction and their organisational commitment. The population for the study was composed of 462 employees in a private hospital in Ankara.

The analyses demonstrated that there were statistically significant correlations between perceptions of total quality management and job satisfaction. It was found according to standard regression coefficient that one unit of increase in perceptions about total quality management caused 0.743 unit of increase in job satisfaction. Besides, significant correlations were found between perceptions of total quality management and organisational commitment. It was another finding that one unit of increase in perceptions of total quality management resulted in 0.457 unit of increase in organisational commitment.

Key Words: *Quality, Total Quality Management, Job Satisfaction, Organisational Commitment, Healthcare Institutions.*

Öz

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Gelişen teknoloji, küreselleşme, iletişim ağlarının artması, eğitim ve gelir düzeyindeki artışlar ile birlikte insanların beklentileri de artmıştır. Hastalar kendilerini güvende hissedecekleri kurumlarda tedavi olmayı istemekte, personel iş doyumunun yüksek olduğu kurumlarda çalışmayı tercih etmektedir. Hizmet alanında faaliyet gösteren diğer sektörlerden farklı olarak sağlık hizmeti veren kurumların maddi güce ve teknolojik donanımına sahip olmalarının yanında nitelikli iş gücüne sahip olmaları da çok önemlidir. Çünkü sağlık hizmeti sunumundaki hatalar insanın hayatını kaybetmesine varan ciddi kayıplar ile sonuçlanabilmektedir.

Sağlıkta kalitenin temel göstergelerinden birisi hasta ve çalışan güvenliğidir. Bir hastanenin kalite belgesine sahip olması demek hasta bakım kalitesinin belirli bir standartta olduğunun, hasta ve çalışan güvenliğinin sağlandığının önemli göstergelerindendir. Bu araştırma, sağlık sektöründe faaliyet gösteren özel bir hastanede uygulanan kalite uygulamalarının, çalışan iş doyumunu ve örgütsel bağlılığı üzerine etki durumunu değerlendirmek ve kalite çalışmaları ile çalışan iş doyumunu ve örgütsel bağlılığı arasındaki ilişkiyi ölçmek amacıyla yapılmıştır. Araştırmanın evrenini Ankara ilinde faaliyet gösteren özel bir hastanede çalışan 462 çalışan oluşturmaktadır.

Yapılan analizler sonucunda Toplam Kalite Yönetimi algısı ile iş doyumunu arasındaki ilişki istatistiksel açıdan anlamlı bulunmuştur. Standart regresyon katsayısına göre, Toplam Kalite Yönetimi Algısı değişkenindeki 1 birim artışın İş Doyumu değişkeninde 0,743 birim artışa neden olduğu görülmüştür. Ayrıca Toplam Kalite Yönetimi Algısı ile Örgütsel Bağlılık arasındaki ilişki de istatistiksel olarak anlamlı bulunmuştur. Standart regresyon katsayısına göre Toplam Kalite Yönetimi Algısı değişkenindeki 1 birim artışın Örgütsel Bağlılık değişkeninde 0,457 birim artışa neden olduğu görülmüştür.

Anahtar Kelimeler: Kalite, Toplam Kalite Yönetimi, İş Doyumu, Örgütsel Bağlılık, Sağlık Kurumu.

1. INTRODUCTION

Clients' expectations began to differ in sectors with the advance of technology. While it was important for firms to manufacture cheap goods and services in the period of industrial revolution- the period when density in production started, later it was considered insufficient to make cheap production in meeting customers' expectations. One of the most important conditions for businesses to keep existing and to have sustainability in competition is the obligation to produce high quality goods and services today.

Meeting patients' and employees' satisfaction- an indicator of quality- is one of the irrevocable components of the continuation of the process. The employees with high satisfaction will have high job satisfaction and their organisational commitment will rise. Total quality management, which is a system involving all the staff beginning with top management, is the most frequently used model of quality in institutions recently.

Continuous quality improvement, which is influenced by developments in quality management in manufacturing sector, has been an area of concerns in healthcare sector especially since the 1980s (Walshe and Boaden, 2006). Focus on quality management and more specifically on patients' safety gained momentum in the late 1990s with the release of reports like "To err is Human"- which laid emphasis on the size of negative events. The report revealed that approximately 44,000-98,000 people died of medical errors annually. The report also argued that the figure was bigger than the number of people who were killed by traffic accidents (43,458) or died of breast cancer (42,297) and AIDS (16,516) every year (Kohn et al., 2000).

Improving the quality in healthcare services is one of the priorities of the healthcare systems all over the world. Several patients are still harmed by preventable factors everyday despite the serious and widespread efforts to improve quality in healthcare. No institutions offering healthcare service today have attained consistent perfection (Chassin and Loe, 2013).

Various attempts including total quality management, plan-implement-control-take precautions, statistical process control and six sigmas were made to improve the quality of care.

One of the most important strengths of the businesses which would like to be prominent in front of their opponents is their staff. Businesses can attain success in front of their opponents by managing their internal resources actively and effectively. Their most important internal resource is their employees.

Employees' performance will also reflect the performance of the organisation. Their job satisfaction will rise when they work by embracing their job and when they find their work meaningful- which will lead to achievement on the part of businesses. Managers have a great part in securing that employees have job satisfaction. It is managers who will make job satisfaction continuous in organisations. Job

satisfaction is not something that is met once and then can be ignored. Individuals who are happy in their job will increase their performance, thus, they will work more efficiently and labour turnover will decrease. The staff who work unhappily, on the other hand, will work with less performance, absenteeism from work will increase, their productivity will decrease, they will probably sabotage the work and will perhaps leave the job ultimately (Taş, 2012).

The most important production factor in an organisation is humans. The way to be able to benefit from the developing technology is through human factor even though technological tools are advancing more and more today. One of the most important issues in achieving the goals and doing the activities effectively in an organisation is to secure that employees continue working. High employee turnover will reduce staff motivation in addition to causing financial losses in organisations. Reduced motivation will, in turn, cause reduction in work quality. The issue of “organisational commitment” is considered as an important factor in preventing the hitches which can be caused by employee turnover in organisations (Güçlü, 2006).

Healthcare sector requires intensive and self-sacrificing work. The organisations wishing to be superior to their opponents in healthcare sector should have qualified labour force and they should secure continuity in their staff’s organisational commitment.

2.CONCEPTUAL FRAMEWORK

Historically, the records related to quality appeared in Hammurabi Laws in 2150 BC for the first time. The statement in the Laws was formulated as “if a house built by a constructor collapses due to the constructor’s incompetence or due to the fact that he has not done his job duly, he will be killed”. In another article of the Laws, the statement “if a surgeon makes a deep slit and if the patient dies of the slit, the surgeon’s hands are cut off” is available (Şahin, 2012).

Quality is the reflection of the factors or of the degree of perfection which contain several properties to satisfy internal and foreign customers. It is a value which preserves its influence in the process from the production of a good or a service to its consumption beside the properties it has and which involves all the stages (Hatipler and Selvi, 2019). A change from quality to total quality management occurred as a result of increase in competition and changes in customer expectations with globalisation.

Total quality management (TQM) may be defined as the process in which continuous development and improvement occurs, in which customer expectations are met at the maximum with minimum cost and which is possible through all employees’ participation (Bozkurt and Asil, 1995).

Each organisation has its own internal dynamics. Organisations differ in terms of their employees, their technological equipment and infrastructure. There are more than one way to follow in organisations in total quality management. A practice which makes a business successful may not yield the same result in another business. The principles of total quality management function as a guide in businesses. Organisations need to adopt the principles and make regulations accordingly (Dursun, 2019).

TQM aims to win the race against opponents. That is to say, it is an economic struggle an organisation has with its opponents with all the processes. The competition power of the organisations adopting the practices of total quality management and using them fully will increase (Akdağ, 2005). Organisations will remain standing to the extent that they can respond to customer expectations. Resistance against opponents will be possible by using the successful practices of TQM in every process that the organisation goes through.

The quality and accreditation work in healthcare started in 2003 with the programme of transformation in healthcare in Turkey. Ministry of Health conducts effective work in the area with the principle of “quality and accreditation for high quality and effective healthcare service” included in the sixth component of the programme. “Accreditation Standards in Health”, the first accreditation set in Turkey, was prepared in the period between 2012 and 2014 (Kavak, 2018).

Implementing the total quality management in organisations successfully depends on their employees’ motivation, capabilities, participation and their power of roles (Adawiyah et al., 2020). Thus, employees’ job satisfaction and their organisational commitment are important in the success of total quality management implementations.

Job satisfaction is a concept related to employees' positive and negative feelings about their job. Feeling of pleasure or displeasure as a result of work done changes from person to person (Srivatava, 2013). Job satisfaction can be defined as the sum of all the feelings individuals have about their job (Robins, 2005). While the positive feelings employees have as a result of work they do are job satisfaction, the negative feelings they have as a result of work they do are job dissatisfaction. Having high job satisfaction is an indication that an employee likes his/her job (Nal and Nal, 2018). It is a special concept related to the degree to which one is pleased with his/her job. Individuals' expectation and the degree to which their expectations are met by their job will influence their level of job satisfaction.

Job satisfaction is influenced by personal factors such as age, gender, level of education and seniority and by organisational factors such as the quality of the job, wage, system of promotion, working conditions, workmates, management and supervision. Studies analysing the correlations between job satisfaction and age demonstrated that age influenced job satisfaction, that there were positive ties between the two and that job satisfaction also increased in parallel to the advance in age. Job satisfaction is generally low at earlier years in a job due to inexperience, low wages and feeling incompetent. Increase in performance with experience gained over time, feeling of competence and increase in salary will contribute positively to the increase in job satisfaction (Taş, 2012). Yelboğa (2007), on the other hand, found that gender did not have any effects on the level of job satisfaction in general. Clark (1997) found that women had higher job satisfaction than men and that marriage had positive effects on women's job satisfaction. Yet, Çarıkçı (2004) found that women had lower job satisfaction than men. Castillo and Cano (2004) also found that women working in faculties were less satisfied than men. Marital status is another factor positively influential in job satisfaction. Thus, it is thought that marriage provides individuals with more regular life and therefore it increases job satisfaction (Küçükkendirci et al., 2017). Some of the studies demonstrated that individuals with high level of education had higher job satisfaction than those with low level of education. Employees' job dissatisfaction was attributed to not working in positions which are suitable to their level of education and their experience. Besides, expecting employees of more than their competence causes them to have stress and anxiety -which in turn can cause job dissatisfaction (Akşit Aşık, 2010). A study concerning seniority found that individuals' feeling of achievement would increase as the years pass by and correlated meeting the increasing staff need of an organisation better to employees' integration with the organisation and to providing the employees with better opportunities (Güven et al., 2005).

An important issue in total quality management applications is organisational commitment. According to Grusky's (1966) definition, organisational commitment is the power of an individual's ties with his/her organisation. The concept has been one of the most interesting subjects for researchers. Thus, several studies concerning the purpose of employees' behaviours and the factors influential in their commitment can be reached. Organisational commitment is a vital component for organisations to attain their goals because it contributes to the development of a sense of trust between managers and employees, to the progress of organisations in their sector and to their attainment of their goals effectively (Rafiq Namiq, 2020).

A review of the literature related to organisational commitment shows that the subject is analysed in two headings as behavioural commitment and attitudinal commitment. The studies argue that behavioural approach considers commitment as the continuation of what employees have experienced in the past while attitudinal approach considers it as an emotional reaction (Aydın, 2010).

Organisational commitment is influenced by personal and organisational factors. Age, gender, marital status, level of education and the length of serving to an organisation are considered as personal factors whereas level of wage, system of promotion, teamwork, promotion opportunities, organisational justice and the quality of work are considered as organisational factors in organisational commitment. A review of studies concerning organisational commitment and age indicates that there are generally positive correlations between the two variables. Thus, organisational commitment- which increases along with age- is associated with career obtained with increase in the length of time spent in an organisation in the studies in general. Yet, the progress of career is not always related to age today (Işık, 2020). On the other hand, Sezgin (2019) found that organisational commitment did not differ according to gender. It was another finding obtained by Farooq and Zia (2013) that female university lecturers had higher perceptions of organisational commitment than the male ones. The studies examining the correlations

between marital status and organisational commitment found that the employees who were married had higher organisational commitment due to the risks that might be caused by changing their job and that those who were single changed their job more often because they had more courage against risks (Sezgin, 2019). On evaluating the correlations between the level of education and organisational commitment, the employees with higher level of education were found to have lower organisational commitment while the employees with lower level of education were found to have higher commitment (Özevin, 2016). The studies concerning the length of serving to an organisation and organisational commitment found positive correlations between the two variables. Accordingly, employees' commitment to their organisation increased with the increase in their salary, seniority and compensation depending on the length of time they spent in the organisation (Sezgin, 2019). Positive correlations were also found between organisational commitment and job satisfaction. However, diverse views are available as to which concept arose first. The correlations between job satisfaction and organisational commitment were associated with normative commitment. Hence, employees' positive relations with their workmate will raise their job satisfaction and will help the formation of organisational commitment (Tosun and Ulusoy, 2017).

3.METHOD

One of the most important conditions for businesses to keep existing and to sustain competition today is the obligation to produce high quality goods and services. Employees' satisfaction- an indicator of quality- is one of the irrevocable elements in securing that the process continues.

This study analyses the effects of total quality management practices in healthcare institutions on employees' job satisfaction and on their organisational commitment and determines the employees' expectations and needs. Therefore, it aims to examine the effects of total quality management practices available in a private hospital on its employees' job satisfaction and organisational commitment.

The population for the research was composed of 730 healthcare professionals working in a private health facility. Sampling was not made in the research; instead, efforts were made to reach all of the participants. Yet, 462 individuals in total were reached due to Covid-19 pandemic, working hours, employees on the sick leave and due to those who did not wish to complete the survey form. The figure constituted 63% of the population.

Descriptive method, one of the quantitative research methods, was used in this study. The research data were collected in survey method so as to determine the attitudes and approaches of the staff working in a private hospital as the field work. The surveys were done face-to-face.

Part one in the survey contained questions about personal information. Thus, 8 questions about personal information such as gender, age, educational status, marital status, professional experience, the unit to which they belonged and the unit where they worked were included in that part of the survey. Part two contained the 23-item Total Quality Management Scale of 5-pointed Likert type which was used by Goh in 2000 and whose Turkish version was used by Yaman in 2017 so as to evaluate the practice of total quality management. Part three contained the Minnesota Job Satisfaction Scale and Part four contained the Organisational Commitment Scale (Meyer & Allen). The data collected were analysed on SPSS 26 programme and were evaluated. The results to be obtained here cannot be generalised to be reflective of all healthcare institutions due to the fact that the research was done in a private hospital located in Ankara.

3.1. Research Hypotheses

The hypotheses below were made and tested so that the research could attain its goal.

H1: Total quality management implementations in healthcare institutions are influential in and associated with employees' job satisfaction.

H2: Total quality management implementations in healthcare institutions are influential in and associated with employees' organisational commitment.

4.FINDINGS

4.1. The Reliability Analysis

The reliability analysis of the scales used in the survey form of the research was done with Cronbach's Alpha. As a result, the Cronbach's Alpha coefficients were found as 0.951 for the total quality management scale (23 items), 0.951 for the Minnesota job satisfaction scale (23 items), 0.899 for the Allen-Meyer organisational commitment scale (18 items). The figures found in the results indicated that the scales were reliable.

4.2. Demographic Findings

The findings obtained in the study indicated that the rate of female participants was 71.4% while the rate of male participants was 28.6%. Of them 53% were married and 47% were single. 25.8% of the participants were aged 18-24 while 36.8% were aged 25-34, 23.4% were aged 35-44, 11.7% were aged 45-54 and 2.4% were aged 55 and above.

As to the educational status, 12.6% of the participants were primary school graduates, 41.3% were high school graduates, 22.1% held an associate degree, 10.4% held a bachelor's degree, 3.5% held an M.A degree, 0.2% held a doctoral degree and 10.0% were the graduates of a faculty of medicine. The participants' length of work in the organisation was as follows: 42.6% had worked for 0-5 years, 23.8% for 6-10 years, 13.0% for 11-15 years, 9.5% for 16-20 years and 11.0% for 20 years or longer. Of the participants 10.8% were doctors, 17.7% were technicians, 10.6% were cleaners, 24.2% were nurses, 23.4% were administrative staff and 13.2% belonged to other occupational groups.

10.6% of the participants worked in medical service department, 39.6% in nursing service department, 15.6% in head physician department, 16.2% in patient service department, 13.6% in hospitality service department and 4.3% in other departments. Besides, 31.0% worked in serving, 3.7% in emergency service, 4.1% in radiology, 2.2% in the laboratory, 11.7% in the intensive care unit, 7.4% in the operating room, 22.9% in polyclinics and other departments.

Table 1: The Distribution of Participants' Views on the Items of Total Quality Management

	Absolutel y disagree		Disagree		Indecisive		Agree		Absolutel y agree		Mean (\bar{x})	Standa rd deviasi on (s.d.)
	n	%	n	%	n	%	n	%	n	%		
Being appreciated	90	19.5	105	22.7	114	24.7	97	21.0	56	12.1	2.84	1.295
Job security	27	5.8	41	8.9	32	6.9	184	39.8	178	38.5	3.96	1.156
Authority and responsibility	11	2.4	23	5.0	45	9.7	190	41.1	193	41.8	4.15	0.953
Participation in decision-making	14	3.0	33	7.1	77	16.7	189	40.9	149	32.3	3.92	1.022
Sufficient equipment	8	1.7	24	5.2	44	9.5	222	48.1	164	35.5	4.10	0.897
Work environment	31	6.7	54	11.7	67	14.5	186	40.3	124	26.8	3.69	1.179
Taking on responsibilities	16	3.5	37	8.0	72	15.6	181	39.2	156	33.8	3.92	1.059

Managers' motivation	35	7.6	47	10.2	105	22.7	163	35.3	112	24.2	3.58	1.178
Joint goals	13	2.8	43	9.3	79	17.1	204	44.2	123	26.6	3.82	1.017
Responsibility for quality	14	3.0	32	6.9	81	17.5	205	44.4	130	28.1	3.88	0.997
Process improvement	15	3.2	46	10.0	99	21.4	192	41.6	110	23.8	3.73	1.035
Process development	14	3.0	43	9.3	94	20.3	208	45.0	103	22.3	3.74	1.004
Process analysis	21	4.5	41	8.9	82	17.7	203	43.9	115	24.9	3.76	1.065
Process effectiveness	18	3.9	45	9.7	82	17.7	184	39.8	133	28.8	3.80	1.081
Continuous improvement	17	3.7	36	7.8	84	18.2	199	43.1	126	27.3	3.82	1.034
Activities raising quality	21	4.5	38	8.2	93	20.1	185	40.0	125	27.1	3.77	1.076
Attaining the goals	27	5.8	67	14.5	109	23.6	153	33.1	106	22.9	3.53	1.163
Team work	25	5.4	42	9.1	80	17.3	184	39.8	131	28.4	3.77	1.120
Patients demands	13	2.8	22	4.8	61	13.2	175	37.9	191	41.3	4.10	0.990
The concept of internal customer / employee	18	3.9	33	7.1	101	21.9	179	38.7	131	28.4	3.81	1.050
Patients' satisfaction	20	4.3	25	5.4	59	12.8	182	39.4	176	38.1	4.02	1.057
Financial gains	123	26.6	111	24.0	68	14.7	111	24.0	49	10.6	2.68	1.368
promotion/wages	134	29.0	78	16,9	73	15.8	111	24.0	66	14.3	2.78	1.448
										Total quality management	3.70	0.765

Table 1 shows the distribution of the participants' views on the items of total quality management. The statements having the highest average in the total quality management scale were the statements "my superiors assign me the authority and responsibilities for the job I do", "I have the instruments necessary for doing my job duly" and "patients' demands form the basis for quality". The statements with the lowest average, on the other hand, were the statements "my achievements are appreciated and rewarded in front of others who are concerned", "my financial gains as a whole causes me to have satisfaction" and "my salary increases in parallel to promotions and to the increase in my workload". The reason why the above-mentioned statements received the lowest average should be investigated. The average for total quality management in general was found as 3.70. The finding indicated that the employees' perception of total quality management was medium.

Table 2: The Distribution of Participants' Views on the Items of Minnesota Job Satisfaction Scale

	I am not pleased at all		I am not pleased		I am indecisive		I am pleased		I am very pleased		Mean (\bar{x})	Std. deviation (s.d.)
	n	%	n	%	n	%	n	%	n	%		
Making busy	29	6.3	46	10.0	117	25.3	200	43.3	70	15.2	3.51	1.064
Working on one's own	20	4.3	57	12.3	93	20.1	214	46.3	78	16.9	3.59	1.043
A change	25	5.4	41	8.9	112	24.2	203	43.9	81	17.5	3.59	1.047
Prestige	26	5.6	25	5.4	68	14.7	227	49.1	116	25.1	3.83	1.046
Style of management	23	5.0	30	6.5	72	15.6	214	46.3	123	26.6	3.83	1.051
Managers' decision	14	3.0	26	5.6	77	16.7	213	46.1	132	28.6	3.92	0.972
Conscientious responsibility	7	1.5	20	4.3	59	12.8	212	45.9	164	35.5	4.10	0.886
Constant job	12	2.6	19	4.1	70	15.2	223	48.3	138	29.9	3.99	0.922
Doing something for others	11	2.4	18	3.9	42	9.1	196	42.4	195	42.2	4.18	0.923
Telling people what to do	17	3.7	35	7.6	82	17.7	203	43.9	125	27.1	3.83	1.028
Being able to use one's own abilities	10	2.2	25	5.4	61	13.2	220	47.6	146	31.6	4.01	0.928
Implementing the decisions	13	2.8	30	6.5	91	19.7	215	46.5	113	24.5	3.83	0.964
Wages	116	25.1	76	16.5	99	21.4	123	26.6	48	10.4	2.81	1.348
Promotion	55	11.9	65	14.1	112	24.2	151	32.7	79	17.1	3.29	1.244
Freedom to implement the decisions	26	5.6	45	9.7	107	23.2	189	40.9	95	20.6	3.61	1.088
Using one's own methods	18	3.9	32	6.9	78	16.9	229	49.6	105	22.7	3.80	0.994
Work conditions	30	6.5	61	13.2	125	27.1	165	35.7	81	17.5	3.45	1.120
Workmates	14	3.0	29	6.3	67	14.5	196	42.4	156	33.8	3.98	1.004
Being appreciated	28	6.1	44	9.5	105	22.7	185	40.0	100	21.6	3.62	1.107
Feeling of achievement	15	3.2	40	8.7	45	9.7	221	47.8	141	30.5	3.94	1.020
							Job satisfaction scale				3.73	0.710

Table 2 shows the distribution of the participants' views on the items of Minnesota Job Satisfaction Scale. The one-by-one analysis of the items in the scale demonstrated that the statements "in that it gives me the opportunity to have conscientious responsibility" and "in that I have the opportunity to be able to do something for others" had the highest average. On the other hand, the statement "in that I earn my wage in return for the job I do" had the lowest average. The reason for why the statement had the lowest average should be analysed. The average for the Minnesota Job Satisfaction Scale in general was found to be 3.73. The finding indicated that the employees' perceptions of Minnesota Job Satisfaction Scale were medium.

Table 3: The Distribution of Participants' Views on the Items of Allen-Meyer Organisational Commitment Scale

	Never		Rarely		So met ime s		Often		Always		Averag e (\bar{x})	Std. deviatio n (s.d.)
	n	%	n	%	n	%	n	%	n	%		
Continuing working in the organisation	37	8.0	34	7.4	114	24.7	164	35.5	113	24.5	3.61	1.165
Internalising the problems in the organisation	23	5.0	26	5.6	72	15.6	201	43.5	140	30.3	3.89	1.059
Sense of belonging in the organisation	19	4.1	40	8.7	82	17.7	189	40.9	132	28.6	3.81	1.071
Emotional commitment	22	4.8	31	6.7	100	21.6	182	39.4	127	27.5	3.78	1.069
Being a part of a family	21	4.5	40	8.7	102	22.1	174	37.7	125	27.1	3.74	1.087
Meaning a lot to someone	24	5.2	41	8.9	81	17.5	191	41.3	125	27.1	3.76	1.102
working / leaving obligatorily	131	28.4	111	24.0	81	17.5	80	17.3	59	12.8	2.62	1.385
Feeling obliged to work /leaving	113	24.5	116	25.1	68	14.7	104	22.5	61	13.2	2.75	1.387
Being the superior-inferior /leaving	143	31.0	138	29.9	63	13.6	72	15.6	46	10.0	2.44	1.333

Having no alternatives / leaving	128	27.7	106	22.9	83	18.0	81	17.5	64	13.9	2.67	1.401
Things given to the organisation / leaving	66	14.3	95	20.6	101	21.9	124	26.8	76	16.5	3.11	1.302
Job opportunities / leaving	142	30.7	130	28.1	71	15.4	69	14.9	50	10.8	2.47	1.348
Not feeling obliged	48	10.4	80	17.3	99	21.4	145	31.4	90	19.5	3.32	1.257
Not thinking of leaving	37	8.0	53	11.5	90	19.5	182	39.4	100	21.6	3.55	1.180
Feeling guilty / leaving	99	21.4	116	25.1	96	20.8	91	19.7	60	13.0	2.78	1.334
Being loyal	27	5.8	41	8.9	95	20.6	187	40.5	112	24.2	3.68	1.110
Feeling responsible	41	8.9	78	16.9	91	19.7	161	34.9	90	19.5	3.39	1.226
Feeling indebted	59	1.8	67	14.5	97	21.0	165	35.8	73	15.8	3.27	1.256
					Organisational commitment						3.26	0.748

Table 3 shows the distribution of the participants' views on the items of Allen-Meyer Organisational Commitment Scale. It was found through one by one analysis of the items in the scale that the statements "I feel as if the problems in the organisation were my own problems" and "I feel belonging to the organisation I work in" had had highest average. The statements with the lowest average were the statements "I now work in this organisation because I feel obliged rather than my own desire", "if I left the organisation I work in now, everything in my life would be upside down", "I don't think of leaving the organisation I work now because I haven't got many alternatives", "if I left the organisation I work now, I would have limited opportunities to find a job" and "I would feel guilty if left the organisation I work in". It was remarkable that the six items had the low averages. Therefore, they need analysing. The average for the Allen-Meyer Organisational commitment Scale in general was 3.26- which showed that the employees had medium perceptions of the scale.

4.3. Testing the Research Hypotheses

Regression analysis and Anova analysis were done to test the hypotheses.

H1: Total quality management implementations in healthcare institutions are influential in and associated with employees' job satisfaction.

Table 4: The Effects of Total Quality Management Implementations on Job Satisfaction

	Regression coefficients	Standard regression coefficients	t	p
Constant	1.180		10.789	0.000
Total quality management	0.690	0.743	23.841	0.000
R	R square	Corrected R square	F	p
.743 ^a	0.553	0,552	568.392	.000 ^b

Table 4 shows the linear regression model created by using the explanatory variable (independent variable, perceptions of total quality management, explained variable (dependent variable) and job satisfaction. The model was found statistically significant according to the ANOVA test. The coefficient of determination in the model was found as 0.552 (corrected). Accordingly, 55.2% of the variance in job satisfaction is explained by perceptions of total quality management through linear regression model. According to the student-t test, which was done for the significance of the coefficients of regression model, both coefficients were found to be statistically significant. According to the findings, the prediction of the line of regression was JB (job satisfaction) = $1.180 + 0.690 \times TQM$ (total quality management). It is expected according to the standard regression coefficient that 1 unit of increase in the variable of the perceptions of total quality management will cause 0.743 unit of increase in the variable of job satisfaction. H1 was accepted according to the findings obtained.

H2: Total quality management implementations in healthcare institutions are influential in and associated with employees' organisational commitment.

Table 5: The Effects of Total Quality Management Implementations on Organisational Commitment

	Regression coefficients	Standard regression coefficients	t	p
Constant	1.603		10.458	0.000
Total quality management	0.447	0.457	11.027	0.000
R	R square	Corrected R square	F	p
.457 ^a	0.209	0.207	121.586	.000 ^b

Table 5 shows the linear regression model created by using the explanatory variable (independent variable, perceptions of total quality management, explained variable (dependent variable) and organisational commitment. The model was found significant according to ANOVA test. Besides, the coefficient of determination for the model was calculated as 0.207 (corrected). Accordingly, 20.7% of the variance in the variable of organisational commitment is explained by the variable of perceptions of total quality management through linear regression model. Both coefficients were found to be statistically significant according to the student-t test, which was done for the significance of the coefficients of regression model. According to the findings, the prediction of the line of regression was OC (organisational commitment) = $1.603 + 0.447 \times TQM$ (total quality management). 1 unit of increase in the perceptions of total quality management is expected to cause 0.457 unit of increase in the variable of organisational commitment according to standard regression coefficient. Hypothesis H2 was accepted on the basis of the findings obtained.

5. CONCLUSION AND RECOMMENDATIONS

It is possible in today's contemporary conception of management to implement total quality management in organisations effectively with employees who are of high quality and who have high job satisfaction. Job satisfaction and organisational commitment are important in healthcare institutions as in other sectors of service due to the fact that employees' low job satisfaction and low organisational commitment can lead to low performance and can result in leaving their job.

This study includes research conducted in a private hospital so as to analyse the effects of total quality management implementations on employees' job satisfaction and on their organisational commitment.

The responses given by the participants to the items in the scales are as in the following. The data collected from the surveys with 462 participants working in various departments of the hospital were tested with the hypotheses made. The results obtained are described below.

The item "my superiors assign me the authority and responsibilities for the job I do" in the total quality management scale had the highest average while the item "my achievements are appreciated and

rewarded in front of others who are concerned” had the lowest average. The situation indicated that the employees’ achievements were not rewarded sufficiently. It became apparent that their perceptions of total quality management were medium ($\bar{x}=3.70$). analysis of the items in the Minnesota Job Satisfaction Scale demonstrated that the item with the highest average was the statement “in that it gives me the opportunity to have conscientious responsibility” whereas the item with the lowest average was the statement “in that I earn my wage in return for the job I do”. The result indicated that the employees did not have sufficient wage in their job. Thus, the participants had medium perceptions of the Minnesota Job Satisfaction Scale ($\bar{x}=3.73$). On the other hand, the item with the highest average in the Allen-Meyer Organisational Commitment Scale was “I feel as if the problems in the organisation were my own problems”, but the one with the lowest average was “I now work in this organisation because I feel obliged rather than my own desire”. The employees included in the study were found to have medium perceptions of the Allen-Meyer Organisational Commitment Scale ($\bar{x}=3.73$).

The main hypotheses H1 and H2 made in this study were accepted. Thus, it was concluded that total quality management implementations had effects on job satisfaction as well as on organisational commitment. Hsu (2009) also concluded that organisational learning- an element of total quality management- was 55% influential in organisational commitment. Tseng (2010) found that the organisation which learnt had effects on organisational commitment. Another study by Sert (2016, evaluating the correlations between total quality management and organisational commitment, reached the conclusion that the implementations of total quality management had positive effects on organisational commitment because they considered employees’ pleasure. Yaman (2017), on the other hand, concluded that teamwork influenced the increase in ego satisfaction and in performance in positive ways and that the leadership of the top management influenced the increase in employees’ performance in negative ways and employees’ organisational commitment in positive ways.

It was concluded on evaluating the data collected in the study that the implementations of total quality management in organisations affected employees’ levels of job satisfaction and their organisational commitment in positive ways. The analyses also demonstrated that the correlations between total quality management implementations and employees’ job satisfaction were higher than the effects of total quality management implementations on employees’ organisational commitment. In other words, it was found that the implementations of total quality management in organisations influenced employees’ job satisfaction more than they influenced their organisational commitment.

The organisation where the research was conducted was a healthcare institution. The medical staff were the employees who encountered instances Covid-19 pandemic the most often in the period when the study was conducted. They listed the factors influencing their job satisfaction as the conscientious responsibility caused by the job they do and as the opportunity to be able to do something for others. However, the wages they earned were said to be below their expectations.

The organisation where the research was done was a private hospital which occupied an important place in healthcare sector. The employees stated that they worked in the institution obligatorily, that they had no other alternatives or no possibility to find another job, that they felt as if the problems in the organisation were their own problems and that they felt they belonged in the organisation they worked in. The employees with high organisational commitment have great effects on the success of an organisation in healthcare sector-where there is immense competition.

Improvement should be made to groups of employees with lower perceptions of quality management, job satisfaction and organisational commitment than other groups in organisations. Total quality management is a process which will attain success with the participation of all employees. Employees’ job satisfaction and organisational commitment will increase when all of the employees are included in the implementations of total quality management. The hospital administration should take the necessary precautions to raise the employees’ levels of organisational commitment and job satisfaction because they had medium level of organisational commitment and job satisfaction.

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Arastırma Makalesi

The Effects of Total Quality Management in Health Facilities on Employees' Job Satisfaction and on Organisational Commitment: A Case in A Private Hospital

Sağlık Kurumlarında Toplam Kalite Yönetimi Uygulamalarının Çalışan İş Doymu ve Örgütsel Bağlılığına Etkisi: Bir Özel Hastane Örneği

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Genişletilmiş Özet

Teknolojinin ilerlemesiyle sektörlerde müşteri beklentileri farklılık göstermeye başlamıştır. Üretim yoğunluğunun başladığı dönem olan sanayi devriminde firmalar için önemli olan ucuz mal ve hizmet üretmekken zamanla sadece ucuz üretim yapılıyor olması müşteri beklentilerinin karşılanması açısından yeterli olmamaya başlamıştır. Günümüz koşullarında işletmelerin varlıklarının devam ettirebilmelerinin ve rekabete karşı sürdürülebilirliklerinin en önemli koşullarından birisi kaliteli mal ve hizmet üretme zorunluluğudur.

Kalitenin göstergelerinden olan hasta ve çalışan memnuniyetinin sağlanması, bu sürecin devam ettirilmesinde vazgeçilmez öğelerden bir tanesidir. Memnuniyeti yüksek olan çalışanın iş doyum düzeyi yükselecek ve örgütsel bağlılığı artacaktır. Üst yönetimden başlayarak tüm çalışanları içeresine alan bir sistem olan Toplam Kalite Yönetimi son dönemde kurumlarda en sık uygulanan kalite modelidir.

Sağlık hizmetlerinde kalitenin iyileştirilmesi, dünya çapında sağlık sistemlerinin temel önceliklerinden biridir. Sağlıkta kaliteyi iyileştirmeye yönelik ciddi ve yaygın çabalara rağmen, birçok hasta hala her gün önlenebilir nedenlerle zarar görmektedir. Günümüzde sağlık bakım hizmeti veren hiçbir kurum tutarlı bir mükemmelliğe ulaşamamıştır (Chassin ve Loe, 2013).

Günümüz koşullarında rakiplerinden öne çıkaran isteyen işletmelerin ellerindeki en önemli güçlerden biri işletmenin çalışanlarıdır. İşletmelerin rakipleri karşısında başarıya ulaşabilmeleri sahip oldukları iç kaynaklarının etkin ve etkili bir şekilde yönetmesi ile mümkündür. İşletmelerin ellerindeki en önemli iç kaynak kurumun çalışanlarıdır.

İşletmelerde çalışanların performansı aynı zamanda kurumun performansını da yansıyacaktır. Çalışanların yaptıkları işi sahiplenip anlamlı bularak çalışmasıyla çalışanın bireysel iş doymu artacak buda işletmenin başarısını beraberinde getirecektir. Çalışanların iş doyumunun sağlanmasında yöneticilere büyük görev düşmektedir. Kurumlarda iş doyumunun sürekliliğinin sağlayacak olan kişiler yöneticilerdir. İş doymu bir defaya mahsus karşılanıp daha sonrasında göz ardı edilebilecek bir kavram değildir. Çalıştığı işte mutlu olan çalışanın performansı artacak, daha verimli çalışacak ve iş gücü devir

oranı düşecektir. Mutsuz çalışan personel ise düşük performansla çalışacak, işe devasızlığı artacak, verimliliği düşecek yaptığı işi sabote edebilecek ve sonunda işten ayrılacaktır (Taş, 2012).

Sağlık sektörü yoğun ve özverili çalışma gerektirmektedir. Rekabetin hızla arttığı sağlık sektöründe rakiplerine karşı üstünlük yakalamak isteyen kurumlar, nitelikli iş gücüne sahip personeli bünyesinde bulundurmalı ve sahip olduğu personelin örgütsel bağlılığının devamlılığını sağlamalıdır.

Toplam Kalite Yönetimi (TKY), sürekli gelişme ve iyileşme gösteren, mümkün olan en düşük maliyetle müşteri beklentilerinin en üst düzeyde karşılandığı, tüm çalışanların katılımı ile mümkün olan bir süreç olarak tanımlanabilir (Bozkurt ve Asil, 1995).

Her kurumun kendine ait bir iç dinamiği vardır. Kurumların çalışanlarının özellikleri, sahip oldukları teknolojik donanım ve alt yapı birbirinden farklılık göstermektedir. Toplam kalite yönetiminde kurumlarda uygulanacak tek bir yol yoktur. Bir işletmeyi başarıya ulaştıran bir uygulama diğer işletmede aynı sonucu vermeyebilir. Toplam kalite yönetiminin ilkeleri işletmeler için rehber niteliğindedir. Kurumların kendi yapılarına göre bu ilkeleri benimseyip uygulamalarında ona göre düzenleme yapmaları gereklidir (Dursun, 2019).

Toplam Kalite Yönetimi uygulamalarının kurumlarda başarılı bir şekilde yürütülmesi, kurum çalışanlarının motivasyonuna, yeteneklerine, katılımına ve rol gücüne bağlıdır (Adawiyah ve diğerleri, 2020). Bu kapsamda toplam kalite uygulamalarının başarısında çalışanların iş doyumunu ve örgütsel bağlılığı önem kazanmaktadır.

Yapılacak olan çalışma ile sağlık kurumlarında yürütülen toplam kalite yönetimi uygulamalarının, çalışanların iş doyumunu ve örgütsel bağlılığı üzerine etkisi analiz edilecek, beklenti ve gereksinimlerinin hangi yönde olduğu belirlenecektir. Bu bağlamda çalışmanın amacı, özel bir hastanede uygulanan kalite uygulamalarının, çalışan iş doyumunu ve örgütsel bağlılığı üzerine etki durumunu değerlendirmek ve toplam kalite yönetimi uygulamaları ile çalışan iş doyumunu ve örgütsel bağlılığı arasındaki ilişkiyi göstermektir.

Çalışmanın evrenini; Ankara ilinin Çankaya ilçesinde bulunan, özel bir sağlık kurumunda çalışan 730 sağlık çalışanı oluşturmaktadır. Araştırmada örneklem seçilmemiş, çalışanların tamamına ulaşılmaya çalışılmıştır. Ancak Covid-19 pandemisi ve mesai, raporlu personel ve anketi doldurmak istemeyen çalışan nedeni ile 462 kişiye ulaşılmıştır. Bu sayı evrenin %63'ünü oluşturmaktadır.

Çalışmada nicel araştırma yöntemlerinden olan betimleyici (tanımlayıcı) araştırma yöntemi kullanılmıştır. Konuyla ilgili alan çalışması olarak, özel bir hastanede çalışanların tutum ve yaklaşımlarını ölçmek üzere birinci derece veri toplama yöntemlerinden olan anket yöntemi kullanılmıştır. Anketler yüz yüze uygulanmıştır.

Anketin ilk bölümde katılımcıların kişisel özellikleri ile ilgili sorular yer almaktadır. Kişisel bilgilerde cinsiyet, yaş, öğrenim durumu, medeni durum, mesleki tecrübe, meslek, bağlı bulunulan birim ve çalışılan bölümü içeren 8 soru yer almaktadır. İkinci bölümünde Toplam Kalite Yönetimi uygulamalarını değerlendirmek üzere, 2000 yılında Goh tarafından kullanılan ve 2017 yılında Yaman'ın Türkçe olarak çalışmasında kullandığı 5'li likert tipte ve 23 maddeden oluşan Toplam Kalite Yönetimi Ölçeği kullanılmıştır. Üçüncü bölümünde Minnesota İş Doyum Ölçeği ve dördüncü bölümünde Örgütsel Bağlılık Ölçeği (Meyer&Allen) kullanılmıştır. Araştırmada elde edilecek olan verilerin analizleri SPSS 26 programı aracılığıyla gerçekleştirilip, değerlendirilmiştir.

Araştırmanın amacına ulaşması için aşağıda belirtilen hipotezler kurulmuş ve test edilmiştir.

H1: Sağlık Kurumlarında Toplam Kalite Yönetimi Uygulamalarının Çalışan İş Doyumunu üzerinde etkisi vardır.

H2: Sağlık Kurumlarında Toplam Kalite Yönetimi Uygulamalarının Çalışan Örgütsel Bağlılığı üzerinde etkisi vardır.

Elde edilen bulgulara göre; kadın katılımcıların oranı %71,4, erkek katılımcıların oranı %28,6'dır. Ankete katılanların %53,0'ı evli, %47,0'ı bekârdır. Katılımcıların %25,8'i 18-24 yaş arası, %36,8'i 25-34 yaş arası, %23,4'ü 35-44 yaş arası, %11,7'si 45-54 yaş arası, %2,4'ü 55 yaş ve üzeridir.

Katılımcıların %12,6'sı ilköğretim, %41,3'ü lise, %22,1'i ön lisans, %10,4'ü lisans, %3,5'i yüksek lisans, %0,2'si doktora ve %10,0'ı tıp fakültesi mezunudur. Örneklemin toplam çalışma sürelerine göre; %42,6'sı 0-5 yıl, %23,8'i 6-10 yıl, %13,0'ı 11-15 yıl, %9,5'i 16-20 yıl ve %11,0'ı 20 yıl üstü şeklindedir. Katılımcıların %10,8'i hekim, %17,7'si tekniker/teknisyen, %10,6'sı temizlik personeli, %24,2'si hemşire, %23,4'ü idari personel ve %13,2'si diğer meslek alanlarındadır.

Araştırmaya dahil olan deneklerin %10,6'sı hekimlik hizmetleri, %39,6'sı hemşirelik hizmetleri, %15,6'sı başhekimlik, %16,2'si hasta hizmetleri, %13,6'sı otelcilik hizmetleri ve %4,3'ü diğer bölümlerde çalışmaktadır. Katılımcıların %31,0'ı servis, %3,7'si acil servis, %4,1'i radyoloji, %2,2'si laboratuvar, %11,7'si yoğun bakım, %7,4'ü ameliyathane, %22,9'u poliklinik ve diğer bölümlerde çalışmaktadır.

Hipotezlerin test edilmesinde Regresyon ve Anova Analizi kullanılmıştır.

H1: Sağlık Kurumlarında Toplam Kalite Yönetimi Uygulamalarının Çalışan İş Doyumu Üzerinde Etkisi Vardır.

Yapılan ANOVA testine göre model istatistiksel olarak anlamlı bulunmuştur. Ayrıca modelin belirleme katsayısı (düzeltilmiş) 0,552 olarak hesaplanmıştır. Buna göre İş Doyumu değişkenindeki değişkenliğin %55,2'si doğrusal regresyon modeli aracılığıyla Toplam Kalite Yönetimi Algısı değişkeni tarafından açıklanmaktadır. Regresyon modelinin katsayılarının anlamlılığı için yapılan student-t testine göre her iki katsayı da istatistiksel olarak anlamlı bulunmuştur. Bu bulgulara göre Toplam Kalite Yönetimi Algısı TKY ve İş Doyumu ISD olmak üzere regresyon doğrusunun tahmini $ISD = 1,180 + 0,690x TKY$ olarak elde edilir. Standart regresyon katsayısına göre Toplam Kalite Yönetimi Algısı değişkenindeki 1 birim artışın İş Doyumu değişkeninde 0,743 birim artışa neden olması beklenir. Elde edilen bulgulara göre H1 hipotezi kabul edilmiştir.

H2: Sağlık Kurumlarında Toplam Kalite Yönetimi Uygulamalarının Çalışan Örgütsel Bağlılığı Üzerinde Etkisi Vardır.

Yapılan ANOVA testine göre model istatistiksel olarak anlamlı bulunmuştur. Ayrıca modelin belirleme katsayısı (düzeltilmiş) 0,207 olarak hesaplanmıştır. Buna göre Örgütsel Bağlılık değişkenindeki değişkenliğin %20,7'si doğrusal regresyon modeli aracılığıyla Toplam Kalite Yönetimi Algısı değişkeni tarafından açıklanmaktadır. Regresyon modelinin katsayılarının anlamlılığı için yapılan student-t testine göre her iki katsayı da istatistiksel olarak anlamlı bulunmuştur. Bu bulgulara göre Toplam Kalite Yönetimi Algısı TKY ve Örgütsel Bağlılık ORB olmak üzere regresyon doğrusunun tahmini $ORB = 1,603 + 0,447x TKY$ olarak elde edilir. Standart regresyon katsayısına göre Toplam Kalite Yönetimi Algısı değişkenindeki 1 birim artışın Örgütsel Bağlılık değişkeninde 0,457 birim artışa neden olması beklenir. Elde edilen bulgulara göre H2 hipotezi kabul edilmiştir.

Araştırmada belirlenen hipotezlerden ana hipotez olan H1 ve H2 hipotezi kabul edilmiştir. Toplam Kalite Yönetimi uygulamalarının iş doyumuna ve örgütsel bağlılığa etkisi olduğu sonucuna ulaşılmıştır. Toplam Kalite Yönetimi ve örgütsel bağlılık arasındaki ilişkiyi değerlendiren Sert (2015)'in çalışmasında, Toplam Kalite Yönetimi uygulamalarının çalışan memnuniyetine önem vermesi nedeniyle örgütsel bağlılığa da pozitif yönde etki ettiğine dair sonuçlara ulaşılmıştır.

Çalışma sonucunda elde edilen veriler değerlendirildiğinde kurumda yürütülen Toplam Kalite Yönetimi uygulamalarının çalışanın iş doyum düzeyini ve örgütsel bağlılığını olumlu yönde etkilediği verisine ulaşılmıştır. Yapılan analizler sonrasında elde edilen verilerde Toplam Kalite Yönetimi uygulamaları ile çalışanın iş doyum arasındaki ilişki Toplam Kalite Yönetimi uygulamalarının çalışanın örgütsel bağlılık durumuna etkisinden daha yüksek bulunmuştur. Yani kurumda yürütülen Toplam Kalite Yönetimi uygulamaları çalışanın örgütsel bağlılık durumundan daha yüksek oranda iş doyum düzeyine etki etmektedir.