

Determinants of job satisfaction and effectiveness among health information administration professionals in Kuwait

Naser Al Enezi, Makhdoom Ali Shah, Rafiqul Islam Chowdhury and Margret Amatayakul

Abstract

Job satisfaction and organisational effectiveness among health information administration professionals were analysed in relation to selected background, work environment and organisational characteristics. The data comprised a 15% ($n = 171$) random sample of health information administration professionals in Kuwait, of whom 91.2% ($n = 156$) responded. It was found that remuneration compatible with qualifications, opportunity for continuing education, and work experience had a significant and positive relationship to job satisfaction. It was concluded that the provision of continuing education, availability of orientation and job description, effective supervision, and remuneration compatible with qualifications are facilitators of job satisfaction and organisational effectiveness.

Keywords: *organisational effectiveness, health information administrator, health information manager, job satisfaction, medical record department, health information service, work environment*

Introduction

The Medical Record Departments in Kuwaiti hospitals are headed by a Medical Record Director. Regardless of how the department or its director is titled, the Medical Record Department is the gateway to the health care delivery facility. In a properly managed health care facility, no health care services can be provided optimally by a care provider unless the patient medical record file, giving details of all the past episodes and care provided, is available.

A hospital Medical Record Department is called by different names in different countries; for example, the title in North America is Health Information Administration Department, whereas in Australia it is usually Health Information Service. However, in view of the name change of the professional American licensing body from American Medical Record Association (AMRA) to American Health Information Management Association (AHIMA) it is our view that the department head in Kuwaiti hospitals should now be called Health Information Manager (HIM). In Kuwait, Health Information Administrators (HIAs) are graduates of the Faculty of Allied Health Sciences and Nursing at Kuwait University.

Considerable international and some local Kuwaiti research has been undertaken on job satisfaction among allied health professionals such as pharmacists, medical laboratory technologists and nurses, and its effects on their work performance. However, there is limited evidence of such research involving job satisfaction among HIAs or their equivalent (Carter 1997). Job satisfaction is related positively to job retention (Kramer & Schmalenberg 1991; Brunner 1989), while lack of job satisfaction is one of the major reasons for a high staff turnover (Bailey et al 1980; Frisina et al 1988). Research has also established that perceived fair rewards act as a predictor of job satisfaction (Blegen & Mueller 1987). Intrinsic factors such as self-esteem, respect and recognition, autonomy in professional work, use of expertise, and control, have been found to be more important than extrinsic factors such as pay and work load (Conant & Kleiner 1998; Olekno & Blacconiere 1995; Frisina et al 1988). In a Hong Kong study, autonomy, professional status, and pay were valued more than interaction, task require-

ments, and organisational policies (Fung-kam 1998). Muncey (1998) reported that self-esteem was extremely important for coping with job pressures. In another study, personal and professional development needs were considered to be important for the success of care providers (Jasper 1996).

In light of the above findings, it can be inferred that if HIAs are not satisfied with their jobs, the overall quality of their work will be affected negatively. This will have a negative and damaging effect on the quality of medical record services (Rudman & Gumbita 1995; Carter 1997; Selvadurai 1991). Ultimately, the overall quality of health care provided will be affected negatively, as care providers have to rely on a proper medical record.

There have been some studies undertaken in Kuwait on the job satisfaction of physicians, pharmacists, medical laboratory technologists and nurses (Al-Kandari & Ogundeyin 1998; Al-Zaid, Buhamra & Al-Ibrahim 1998; Al-Enzi 1998; Shah et al 2001). However, so far, no study has been undertaken in Kuwait on job satisfaction of HIAs and its effect on their job performance; this research aimed to fill that void.

This paper has two objectives, the first of which is to examine the differences in the reported work environment characteristics of health information administration professionals, according to qualifications. The second objective is to analyse the differences in job satisfaction of four categories of health information administration professionals in relation to specific background, environmental, and organisational characteristics. The four categories of health information management professional in Kuwait are those who have successfully completed (i) a university baccalaureate degree; (ii) an associate degree (diploma); (iii) higher secondary school education; and (iv) a special course in medical record science.

Method

Sample

The study population comprised all health information administration professionals in the four categories employed in the six general and ten tertiary care hospitals, Ministry of Health, Kuwait. There were 1142

1: Characteristics of the study population

Characteristics	n =156*	%
Position		
Director/ Assistant Director	21	13
Supervisor	28	18
Medical record clerk	107	69
Age		
< 30 years	66	44
30 – 34 years	40	27
≥ 35 years	44	29
Sex		
Male	18	12
Female	138	88
Salary		
< KD* 300	33	21
KD 300 – KD 399	61	40
KD 400 – KD 499	27	17
≥ 500 KD 500	32	21
Experience		
< 5 years	40	26
5– 9 years	54	35
≥ 10 years	61	39

*Some of the 'n' do not add to the total because of missing values. One Kuwaiti dinar (KD) = US\$3.27 or A\$5.04

employees in those categories as of June 2000: 31 baccalaureate degree holders; 184 three-year diploma holders; 739 who had completed a one-year special course in medical record science after graduating from higher secondary school; and 188 who had completed only a higher secondary school education. A fifteen percent sample (n = 171) was selected for the purpose of this study. Since the baccalaureate degree

holders represented only 2.7% of the workforce, it was decided to over-sample that segment. The response rate was 91.2%. One hundred and fifty-six questionnaires were completed by 17 baccalaureate degree holders, 24 diploma holders, 72 subjects who had completed special courses, and 43 subjects who had completed only secondary or higher secondary school education.

Procedure

Data were collected through a self-administered questionnaire. After reviewing the literature in this area and a number of instruments used for job satisfaction studies (Shah et al 2001; Abu-Ajemieh et al 1996), six questions on socio-demographic characteristics, work environment and organisational variables were included in the measurement. In addition, eight questions were designed to measure the subjects' professional and organisational job satisfaction and a single question was included to measure their overall job satisfaction. All of the nine outcome variables were measured on a five-point Likert scale: 5 very satisfied; 4 satisfied; 3 neither satisfied nor dissatisfied; 2 dissatisfied; and 1 very dissatisfied. All questions were of closed format, except one in which the respondent could offer additional comments. The questionnaire was pre-tested on ten subjects who were not included in the sample. Minor but warranted changes were made in the language to improve clarity and comprehension. The mean score was derived for each of the nine factors related to job satisfaction and then analysed in relation to professional qualifications. For the purposes of analysis, a valid score to represent a "satisfied" respondent was needed. Since the neutral point in the scale was "neither satisfied nor dissatisfied" and had a score of 3, a score of 3.1 was taken to represent the lowest level of satisfaction.

2: Work environment characteristics of medical record professionals, by professional qualification

Characteristics	Secondary or Higher Secondary		Special course		Diploma		University graduate		Total	
	n	(%)	n	(%)	n	(%)	n	(%)	n	(%)
Remuneration compatible with qualification *										
Yes	21	(50%)	31	(46%)	4	(17%)	2	(12%)	58	(38%)
No	21	(50%)	37	(54%)	20	(83%)	15	(88%)	93	(62%)
Provided proper orientation upon joining **										
Yes	32	(76%)	62	(87%)	20	(83%)	4	(24%)	118	(77%)
No	10	(24%)	9	(13%)	4	(17%)	13	(76%)	36	(23%)
Given job description when joined **										
Yes	32	(74%)	59	(84%)	16	(67%)	2	(12%)	109	(71%)
No	11	(26%)	11	(16%)	8	(33%)	15	(88%)	45	(29%)
Supervisor provides effective supervision and control **										
Yes	35	(83%)	65	(97%)	20	(83%)	11	(65%)	131	(87%)
No	7	(17%)	2	(3%)	4	(17%)	6	(35%)	19	(13%)
Opportunity for continuing education										
Yes	15	(36%)	26	(37%)	4	(17%)	4	(24%)	49	(32%)
No	27	(64%)	45	(64%)	20	(83%)	13	(76%)	105	(68%)
Total#	43	(28%)	72	(46%)	24	(15%)	17	(11%)	156	(100%)

Some of the 'n' do not add to the total because of missing values

* Significant at 5% level. ** Significant at 1% level.

to represent the lowest level of satisfaction. However, the responses were recatergorised for bivariate and multivariate analysis. The variable was converted into a binary variable in which the first three categories of job satisfaction (highly dissatisfied, dissatisfied, and neither satisfied nor dissatisfied) were recatergorised as "dissatisfied" and coded as 0, and the last two categories (satisfied and highly satisfied) were recate-

gorised as "satisfied" and coded as 1 (Shah et al. 2001; McNeese-Smith 1995; Abu-Ajemieh et al. 1996).

Analysis

The data were analysed using SPSS 10.0. Descriptive statistics, bivariate analysis and χ^2 tests were used to

3: Mean job satisfaction score for specific factors among health information professionals, by professional qualification

	<u>Secondary and higher secondary</u>		<u>Special course</u>		<u>Diploma</u>		<u>University graduate</u>		<u>Total</u>	
	Mean	(SD)	Mean	(SD)	Mean	(SD)	Mean	(SD)	Mean	(SD)
Inability to speak English is a barrier *	3.2	(1.2)	3.3	(1.2)	3.4	(1.5)	2.4	(1.6)	3.2	(1.3)
Employees are more satisfied	3.7	(1.5)	3.8	(1.4)	3.7	(1.6)	4.3	(0.8)	3.8	(1.4)
Satisfied with collegiality	4.4	(1.0)	4.4	(0.8)	4.3	(0.8)	4.3	(0.5)	4.4	(0.8)
Satisfied with recognition, appreciation and acknowledgement by supervisor	4.3	(1.0)	4.4	(0.9)	4.3	(0.9)	4.1	(1.1)	4.3	(1.0)
Satisfied with recognition, appreciation and acknowledgement by colleagues	4.2	(0.9)	4.4	(0.9)	4.1	(1.0)	4.4	(0.5)	4.3	(0.9)
Satisfied with autonomy or freedom	3.7	(1.3)	4.1	(1.1)	4.0	(1.0)	4.0	(1.1)	4.0	(1.1)
Satisfied with organisational practices *	3.2	(1.3)	3.8	(1.2)	3.7	(1.0)	3.5	(1.4)	3.6	(1.2)
Satisfied with overall work environment *	3.4	(1.2)	3.9	(1.1)	3.3	(1.1)	2.8	(1.5)	3.5	(1.2)
General satisfaction with job	3.5	(1.3)	3.9	(1.2)	3.3	(1.1)	3.7	(1.3)	3.7	(1.3)

* Significant at 5% level. 3 is the neutral score for all factors.

4: Overall job satisfaction among health information professionals, by selected background characteristics

	<u>Not satisfied</u>		<u>Satisfied</u>		<u>Total</u>	
	<i>n</i> =46		<i>n</i> =110		<i>n</i> =156	
Position						
Director/ Assistant Director	8	(38%)	13	(62%)	21	(100%)
Supervisor	4	(14%)	24	(85%)	28	(100%)
Medical record clerk	34	(33%)	70	(67%)	104	(100%)
Age						
< 30 years	25	(38%)	41	(62%)	66	(100%)
30-34 years	13	(33%)	26	(67%)	39	(100%)
≥ 35 years	7	(16%)	36	(84%)	43	(100%)
Sex						
Male	3	(17%)	15	(83%)	18	(100%)
Female	43	(32%)	92	(68%)	135	(100%)
			$[\chi^2 = 1.74, P > 0.05]$			
Salary *						
< KD 400	35	(37%)	59	(63%)	94	(100%)
≥ KD 400	11	(20%)	45	(81%)	56	(100%)
Experience *						
< 5 years	20	(50%)	20	(50%)	40	(100%)
5 - 9 years	12	(23%)	41	(77%)	53	(100%)
≥ 10 years	14	(24%)	45	(76%)	59	(100%)
Education						
Secondary or higher secondary	14	(33%)	28	(67%)	42	(100%)
Special courses	16	(23%)	54	(77%)	70	(100%)
Diploma	11	(46%)	13	(54%)	24	(100%)
University graduate	5	(29%)	12	(71%)	17	(100%)

Some of the 'n' do not add to the total because of missing values. * Significant at the 5% level. KD = Kuwaiti dinar.

5: Overall job satisfaction of health information professionals by selected work environment characteristics

<u>Characteristics</u>	<u>Not satisfied</u> <i>n</i> =46	<u>Satisfied</u> <i>n</i> =110	<u>Total</u> <i>n</i> =156
Remuneration compatible with qualification *			
Yes	10 (18%)	47 (82%)	57 (100%)
No	36 (39%)	56 (61%)	92 (100%)
Provided proper orientation upon joining			
Yes	32 (28%)	84 (72%)	116 (100%)
No	14 (39%)	22 (61%)	36 (100%)
Given job description when joined			
Yes	29 (27%)	78 (73%)	107 (100%)
No	17 (38%)	28 (62%)	45 (100%)
Supervisor provides effective supervision and control			
Yes	36 (28%)	93 (72%)	129 (100%)
No	9 (47%)	10 (53%)	19 (100%)
Opportunity for continuing education *			
Yes	4 (8%)	44 (92%)	48 (100%)
No	42 (40%)	62 (60%)	104 (100%)

Some of the 'n' do not add to the total because of missing values. * Significant at the 5% level.

examine the association between independent and dependent variables. In addition, logistic regression analysis was used to measure overall job satisfaction.

Results

Box 1 shows the selected background characteristics of the respondents; 13% reported as the title director or assistant director, 18% worked as supervisors, and the remaining 69% were medical record clerks.

The data relating to the relationship between selected work environment characteristics and professional qualifications of health information administration professionals are presented in Box 2.

Among the five variables investigated, compatibility of remuneration with qualifications, provision of proper orientation upon joining the organisation, provision of job description upon joining, and effectiveness of supervision and control had significant association with qualifications. A vast majority of university graduates (88%) and of diploma holders (83%) considered their salary to be incompatible with their qualifications. Two-thirds of university graduates reported that they were not provided with proper orientation upon joining. Furthermore, 88% of university graduates reported that they were not given a job description upon joining.

Box 3 shows the relationship between mean job satisfaction scores for specific factors, according to the professional qualifications of health information administration professionals. As noted above, a score of 3.1 represents the lowest level of satisfaction. Inability to speak English was perceived to be a barrier to job satisfaction, and satisfaction with organisational practices and with the overall work environment had a significant relationship with level of qualification. Among other findings, the university graduates had no difficulty with English (a mean score of 2.4), and professionals in each of the four education categories were satisfied with the organisational practices and with the collegiality, appreciation and acknowledgement by supervisors and colleagues.

Box 4 shows the relationship between overall job satisfaction and selected background characteristics. The level of job satisfaction did not vary significantly in terms of the respondents' administrative position, age, gender, or education. However, large percentages of those in supervisory positions, as well as of the male respondents, reported being satisfied with their jobs. Salary and experience, particularly, were associated with job satisfaction.

The results of the analysis of the respondents' relationship between work environment characteristics and overall job satisfaction are presented in Box 5.

There were five work environment characteristics, and respondents who considered their remuneration to be compatible with their qualifications and those who reported that they were provided the opportunity for continuing education reported significantly greater levels of satisfaction. Eighty-two percent of those who considered their remuneration to be compatible with their qualifications and 92% of those who reported having the opportunity for continuing education were satisfied with their jobs. In comparison, 61% who considered their remuneration to be incompatible with their qualifications and 60% who had not had an opportunity for continuing education were satisfied with their jobs.

Further analysis

Logistic regression analysis

Logistic regression analysis is considered to be a useful technique, in a multivariate phenomenon, for examining the effect of a specific variable or a set of specific variables on a binary dependent variable. In logistic regression, the probability of occurrence of an event is estimated.

Dependent variable

The dependent variable was overall satisfaction with the job.

6: Logistic Regression Analysis of overall job satisfaction (Satisfied = 1)

<u>Characteristics</u>	<u>Coefficient</u>	<u>Odds Ratio</u>
Remuneration compatible with qualification (Yes = 1)	1.68**	5.35
Opportunity for continuing education (Yes = 1)	2.28**	9.79
Monthly salary (in Kuwaiti dinars)	-0.001	1.00
Ministry of Health work experience (in years)	0.16**	1.17
Education		
Secondary or higher secondary	-2.15*	0.12
Special course	-0.91	0.41
Diploma	-1.10	0.33
University graduate	0.00	1.00
Constant	0.23	
R ²	0.26	
Goodness of fit	122.52	

** Significant at 1% level. * Significant at 5% level.

Independent variables

Two background variables and two work environment variables which had significant associations with job satisfaction (see Boxes 4 and 5) were considered as independent variables. In addition, education, which was found to be non-significant in the bivariate analysis, was deemed to be sufficiently important for inclusion in the model, since one of the study objectives was to identify whether job satisfaction differed according to different educational categories. The independent variables were categorised as follows:

- Remuneration compatible with qualification: Yes = 1 and No = 0.
- Opportunity for continuing education: Yes = 1 and No = 0.
- Monthly salary: $\leq 399 = 0$ and $\geq 400 = 1$.
- Ministry of Health work experience: continuous variable.
- Educational level: \leq higher secondary = 1; special courses = 2; diploma = 3; and Baccalaureate (Bachelor of Science) = 4.

The results of logistic regression analysis are presented in Box 6. Compatibility between remuneration and qualifications, and the opportunity for continuing education affected job satisfaction positively and the relationships were significant. The respondents' work experience showed a positive and significant relationship with their job satisfaction: the longer the experience the higher the satisfaction with the job. However, in relation to educational categories, the respondents with only secondary or higher secondary school education showed a significant but negative relationship between lower educational levels and job satisfaction.

Discussion

Sixty-two percent of the respondents reported that they did not consider their remuneration to be compatible with their qualifications. Eighty-eight percent of baccalaureate degree holders and 83% of diploma holders believed that they were getting a lower salary than their qualifications merited. The major reason for this finding stems from the relatively narrow net difference between the salaries of those with only secondary or higher secondary school education and

specialised training as a group, and the associate degree holders and baccalaureate degree holders as another group; hence, the reported lack of compatibility.

Three-quarters of the university graduates reported that they were not provided with any orientation, as opposed to 17% of diploma holders, 13% who had completed special courses, and 24% of respondents with only secondary or higher secondary school education. The findings were similarly striking in relation to lack of provision of a job description: 88% of university graduates reported that they were not provided with a job description. During their formal education, the baccalaureate degree holders had been exposed to a heavy emphasis on the need for proper orientation and a job description.

Only a small proportion of respondents were provided an opportunity of continuing education. Between 63% and 83% of respondents in each of the categories reported that they did not have an opportunity for continuing education (Box 2). This finding was validated through a review of the continuing education reports of the Training Administration, Ministry of Health, Kuwait (Ministry of Health 2002).

The analysis of the relationship between the mean job satisfaction score and professional qualifications indicated that the university graduates reported inability to speak English as constituting a relatively low barrier to job satisfaction. The professionals in each of the four categories were satisfied with organisational practices as they relate to work distribution, control mechanism, quality control, and accountability. The three categories of professionals other than university graduates were satisfied with the overall work environment. The major reason for this finding pertains to the training of university graduates during their tenure at the Faculty of Allied Health Sciences and Nursing at Kuwait University; they have an above-average command of English.

The students at Kuwait University take a number of courses in management; therefore, they expect a work environment which is conducive to involvement in decision-making by people at the supervisory level. Unfortunately, the practice in the Ministry of Health hospitals is such that health information administrators are not involved in the decision-making in gen-

eral, and in the hospital-wide committees in particular. This appears to account for the direction of this finding.

An analysis of the relationship between job satisfaction and selected background characteristics indicated satisfaction of higher proportions of respondents in the following categories: supervisors, those who are relatively older, males, those receiving higher salaries, and those with six years or more experience. However, no meaningful differences were found regarding the educational level of employees and the level of job satisfaction. Older and more experienced employees are comparatively more settled in their jobs, and hence it might be assumed that they are more satisfied than younger and less experienced employees. The relationship between higher salary and higher level of job satisfaction is also expected. The explanation for the higher proportion of males being satisfied in their jobs compared with females is rather complex. The Kuwaiti society has a tribal system and it is expected that a person will always help a fellow tribesperson. Furthermore, Kuwait has more than 100,000 people who do not have a nationality. These people, called "Bedoun" ("without nationality"), are not entitled to health care services except in emergencies, and only offered during the night shift. Such people, when in need of routine care, go to hospitals at night to seek Emergency Room services. However, in order to receive emergency room services, the user needs a treatment paper which is issued by the health information administration staff. The Ministry of Health has a policy under which female health information administration staff members are not assigned to night duty. All of these factors lead to one end-point: the male health information administration staff, who are on duty at night time, oblige the Bedoun by enabling them to receive medical services and that gives a sense of satisfaction. It might be argued that this may explain, in part, the study finding of a higher proportion of males than females who are satisfied in their health information administration jobs. The reasons for a higher proportion of supervisors being satisfied in their jobs also may lie in the explanation given above; the researchers learned that night duties are generally carried out by male supervisors.

It may be recalled that a higher proportion of those who considered their remuneration to be compatible with qualifications (83%), those who reported receiving orientation (72%), those who reported that they were given job description (73%), those who perceived that supervisors provided effective supervision and control (72%), and those who reported availability of opportunity for continuing education (92%) were found to be satisfied. Compatibility of remuneration with qualifications, and supervisors who were considered to provide effective supervision and control, are measures of perception. It is argued, therefore, that no explanations are needed. However, the availability of orientation, job description, and the opportunity for continuing education as the determinants of satisfaction, are noteworthy findings. This is supported by other studies as well (Jasper 1996; Shah et al 2001; AHIMA 1995). Effective supervision implies performance feedback by the supervisor to the staff member. Carter (1997) reported a positive relationship between

performance feedback and job satisfaction, as well as a direct relationship between professional development opportunities and job satisfaction.

Compatibility of remuneration with qualification, opportunity for continuing education, and years of experience were found to be significant predictors of job satisfaction when logistic regression analysis was applied. Based on the findings, it is proposed that the perception of salary being compatible with qualification is important, rather than the level of the salary itself. This has been reported by other researchers (Blegen & Mueller 1987; Fung-kam 1998; Shah et al 2001). The availability of opportunities for continuing education provides the basis and the path for promotion. Experience, we believe, is a surrogate measure for age: relatively older people feel more settled in their jobs and hence are satisfied (Shah et al 2001; Al-Zaid et al 1998). Finally, employees with secondary or higher secondary education reported a lower job satisfaction than those with higher levels of training. In the health information administration departments, those who have only secondary or higher secondary education do not have any chance of being promoted to the rank of a supervisor. Therefore, for them, it may be perceived to be a dead-end career, perhaps leading to a higher level of dissatisfaction.

Recommendations

In view of the above findings, we recommend the following. The remuneration of health information administration staff should be made compatible with their qualifications. Specifically, the differences between the salaries of diploma holders and the baccalaureate degree holders should be compatible with the overall and relative rigour required for achieving a diploma or degree. Similarly, there should be a meaningful difference between the salaries of those who have only secondary or higher secondary school education and those who have successfully completed a special course. Continuing education has proven to be a facilitator for job satisfaction, and therefore staff members should be provided with necessary continuing education on a regular basis. However, employees who have specific work skill or knowledge deficiencies should be provided with compatible continuing education to overcome these. Orientation and a job description need to be provided, as they improve the effectiveness of health information administration professionals. Finally, the health information administration staff members need to be provided with effective supervision; we recommend that the directors and assistant directors of health information administration departments must have a baccalaureate degree. The supervisors should have at least an associate degree.

We understand that the policy makers and administrators in the Ministry of Health are committed to improving the quality of care. Since good quality care cannot be provided in the absence of proper medical records, and many health information administration professionals are dissatisfied, it is imperative that the above recommendations be considered carefully so that the overall performance, and therefore the job satisfaction, of health information administration staff are improved. That, we believe, is bound to facilitate improvement in the quality of care.

The recommendations offered, we believe, are warranted not only for the healthcare delivery system in Kuwait but also for all the other Gulf Cooperation Council countries (Saudi Arabia, Bahrain, Qatar, United Arab Emirates, and the Sultanate of Oman) and other Middle Eastern countries where similar trends of personnel practices are followed. The government hospitals in these countries employ similar practices. Our major reason for this recommendation stems from an assessment by the Regional Advisor, Health Information Management, Regional Office for Eastern Mediterranean, World Health Organization. The medical record systems in the government hospitals in these countries, which account for the bulk of the service provision, are poor and the health information administration professionals face similar problems, as this relates to job satisfaction (Al-Shorbaji 2002).

Finally, our findings in terms of provision of continuing education, availability of orientation and job descriptions, effective supervision, and remuneration that is compatible with qualifications are facilitators for job satisfaction and therefore organisational effectiveness. These, we believe, should be implemented as they will serve as the bases for needed improvements in the organisations where these are not in place.

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Naser Al Enezi PhD

Assistant Professor
Department of Health Information Administration
and
Vice Dean (Student Affairs)
Faculty of Allied Health Sciences and Nursing
Kuwait University, Kuwait.

Makhdoom Ali Shah ScD FASAHP

Chairman, Department of Health Information Administration, and
Vice Dean (Academic Affairs)
Faculty of Allied Health Sciences and Nursing
Kuwait University, Kuwait
and
Chairman, Faculty of Public Health
Kuwait Institute for Medical Specialization
Ministry of Health, Kuwait.
Address for correspondence:
Dr Makhdoom A. Shah
Faculty of Allied Health Sciences and Nursing
P.O. Box 31470, Sulaibikhat
90805, Kuwait
Tel: (965) 483-3563
Fax: (965) 483-0937
E-mail: makhdoom@hsc.kuniv.edu.kw

Rafiqul Islam Chowdhury, MS

Lecturer and Director, Computer Unit
Department of Health Information Administration
Faculty of Allied Health Sciences and Nursing
Kuwait University, Kuwait.

Margret Amatayakul, MBA, RHIA

President, Margret Amatayakul Consulting, LLC,
Schaumburg, IL 60193
United States of America.