A hierarchical model of internal marketing as a reliable program to predict of nurse satisfaction and loyalty (Case Study of Mo'ayyeri Tehran hospital nurses)

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Abstract

The implementation of an internal marketing program can help education, motivation, guidance and lead to a higher level of employee performance and satisfaction. This study aimed to analyze and present a hierarchical internal marketing model and its impact on nurse's satisfaction and loyalty in Mo'ayyeri Tehran hospital.

**Method:** This research is objective and practical, in terms of data collection method. It is a descriptive survey and the type of data that were obtained by questionnaire were quantitative. Populations of study were nurses of Tehran Mo'ayyeri Hospital. Total populations of study were estimated 280 in which 166 were determined based on Cochran formula and census sampling method. In order to determine the internal marketing, we used Forman (1998) Standard Questionnaire and in order to assess the job satisfaction, Minnesota standard questionnaire is used. Insaan Standard questionnaire was used to explore of nurse loyalty. Structural equation modeling was used to data analysis and test hypotheses of the study.

**Result:** results showed that all study hypotheses are confirmed. Internal marketing component includes nurses understanding of career prospects, nurses understanding of improvement. Career development, nurses understanding of job reward had significant impact on job satisfaction and loyalty.

**Conclusion:** Hierarchical internal marketing model can predict job satisfaction and loyalty of nurses.

**Keywords:** Hierarchical internal marketing, nurse satisfaction, loyalty.
1. Introduction

Employee retention is critical to the long-term success of any organization and a committed employee base is especially relevant in the global health care community where the retention of caregivers is increasingly important in light of a world-wide shortage of nurses (World Health Organization, 2008). The global nursing gap is due in part to a widening supply-and-demand chasm caused by a host of macro-level factors including an increase in the total number of health care workers needed around the world. The aging of the nursing population leads to an unprecedented number of nurses retiring in the next ten years, and enrollment caps brought on by a deficiency in the number of nursing school faculty (Buerhaus et al., 2009; Royal College of Nursing).

Beyond these structural supply-side issues, Aiken’s et al. (2001) study of nurses in the US, Canada, England, Scotland and Germany put a spotlight on the high level of job dissatisfaction and burnout that existed within the nursing profession. This trend has continued over the past decade, causing nurses to leave the health care field at an alarming rate (Poghosyan et al., 2010). As a result, the global nursing shortage is approaching a crisis level, with expected shortfalls reaching approximately 260,000 in the US by 2025 (Buerhaus et al., 2009), 60,000 positions in Canada by 2022 (Canadian Nurses Association, 2009), 40,000 in the UK by 2012 (World Health Organization, 2009) and massive shortages in other nations in the European Union and around the world (van der Heijden et al., 2009). The failure to fill vacant nursing positions triggers a host of negative consequences for the nursing staff, the organization, and patients. First, inadequate staffing contributes to job stress due to an increased workload, work schedule inflexibility, and burnout (Lim et al., 2010) and leads to higher levels of nurse dissatisfaction with their job. Second, an under-employed and over-worked nursing staff compromises patient care and leads to more medical errors, increased hospital stays, increased visitations by chronically ill patients, and greater patient mortality (Chaguturu and Vallabhaneni, 2005).

Given that it is hard to increase the supply of new nurses entering the profession, the most logical approach to this crisis is to find ways to increase the job satisfaction and retention of existing nurses (Laine et al., 2009). In response, research is emerging that investigates how “internal marketing” can be utilized to create a loyal nursing staff, one that is fully committed to meeting organizational goals and patient needs (Chang and Chang, 2007; Peltier et al., 2008; Tsai and Tang, 2008). In a recent European Journal of Marketing article, Vasconcelos (2008) noted that broadening the internal marketing construct to investigate workplace satisfaction has value for employers and customers and that the failure to do so could negatively impact the organization’s supply of human capital. Today, limited research exists that has examined the use of internal marketing practices to identify the underlying dimensions of nurse satisfaction and loyalty (Chang and Chang, 2009). Virtually ignored is research that develops and tests comprehensive frameworks of the ordered and sequential relationships between antecedent variables (Peltier et al., 2008). This study is
designed to help fill this gap by developing and empirically testing a theoretical framework of the antecedents of nurse job satisfaction and loyalty.

Background literature: internal marketing, job satisfaction and loyalty internal marketing are based on the principle that organizations that treat their employees as they would “value” customers are likely to impact the satisfaction and loyalty of this key organizational resource (Lings and Greenley, 2005; Mudie, 2003; Bowers and Martin, 1993). Internal marketing is seen as a way to communicate organizational values that can be leveraged to create a positive workplace atmosphere (Naude et al., 2003), leading to organizational and marketing success (Lings and Greenley, 2009, 2010). Within a health care context, internal marketing efforts have been found to increase patient service quality (Tsai and Tang, 2008) and create a sense of belongingness to the organization (Bellou and Thanopoulos, 2006).

2. Direct effects of internal marketing on satisfaction and loyalty

The nursing literature is increasingly investigating how job satisfaction and loyalty are impacted by intra-organizational relationships (Peltier et al., 2008; Willem et al., 2007). Underdeveloped is research that examines how bonding activities are interrelated and how these antecedent variables directly and indirectly impact job satisfaction and loyalty. Based on a review of the literature, we next present our direct and indirect hypotheses related to financial, social and structural bonds.

Figure 1: Model fit measure
3. Methodology

This study is a practical study from purpose view and is a descriptive-survey, one from research methodology perspective. Because the authors seek to determine the casual relationship between research variables, the study is a casual research. The statistical population of this study includes all nurses of Tehran Mo'ayyeri Hospital. Total populations of study were estimated 280 from which 166 were determined based on Cochran formula and census sampling method.

**Sampling and data collection**

In this research, data are collected by field work method. In field work method, questionnaire is one of the most usual methods for collecting data. For collecting data and achieving goals, this research used nameless questionnaire including 15 questions that were filled by nurses. At the beginning of questionnaires, there were questions for recognition of personal features of statistical community. In order to determine internal marketing Forman (1998) questionnaire was used. This questionnaire has 16 items, including the three dimensions of career prospects, develop and reward. Job satisfaction questionnaire with 19 questions designed by the Minnesota and colleagues is used. Job loyalty questionnaire has 20 questions, based on the literature is designed by Insaan and colleagues (2013).

Questionnaire validity was evaluated using confirmatory factor analysis. Cronbachs’ Alpha method was used to determine of validity. Based on the results of Cronbachs’ Alpha coefficient that has been indicated in table 2, the questionnaire has favorable reliability and validity. All in all, it can be concluded from these results that the questionnaire has favorable reliability and validity coefficient for questionnaire was 0.907 which shows very good reliability.

<table>
<thead>
<tr>
<th>Kaiser-Meyer-Olkin Measure of Sampling Adequacy.</th>
<th>Approx. Chi-Square</th>
<th>Bartlett's Test of Sphericity</th>
</tr>
</thead>
<tbody>
<tr>
<td>832</td>
<td>3</td>
<td>54.239</td>
</tr>
<tr>
<td></td>
<td>7</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>001</td>
<td>Sig.</td>
</tr>
</tbody>
</table>
Table 2. Reliability of the Factors Questionnaire

<table>
<thead>
<tr>
<th>Factors Questionnaire</th>
<th>Internal Marketing</th>
<th>Job Perspective</th>
<th>Job Development</th>
<th>Job Reward</th>
<th>Total Factor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cronbachs’ Alpha</td>
<td>0.879</td>
<td>0.797</td>
<td>0.701</td>
<td>0.836</td>
<td>0.907</td>
</tr>
</tbody>
</table>

4. Result

Confirming measurement models of research variables, the conceptual model of research was investigated by structural equation modeling. The reason for using this method is that this model has the capability instead of examining two to two and separate variables, the relations among all variables survey concurrently. SME approach is a comprehensive method for testing the hypothesis about the relations among observed variables. Since the conceptual model of research considers the survey of causative relations, for providing concurrent analysis and possibility of variables relations, we used structural equation method which is used in model analysis of AMOS software that is one of the most famous software's for performing structural equations.

4-1. Structural model results

Normed Fit Index (NFI), Non-Normed Fit Index (NNFI), Root Mean Square Error of Approximation (RMSEA), Goodness of Fit Index (GFI), and Root Mean Square Residual (RMSR) are the main indexes that have been used for examining model fitness. The results of the model fitness and research hypotheses have been indicated in the following section.

Table 3. The main Indicators of model fitting

<table>
<thead>
<tr>
<th>Statistics</th>
<th>Goodness of fit index</th>
</tr>
</thead>
<tbody>
<tr>
<td>23.</td>
<td>CMIN</td>
</tr>
<tr>
<td>8</td>
<td>DF</td>
</tr>
<tr>
<td>1.8</td>
<td>CMIN/DF</td>
</tr>
<tr>
<td>96</td>
<td>NFI</td>
</tr>
<tr>
<td>93</td>
<td>RFI</td>
</tr>
</tbody>
</table>
Figure 2 displayed all of the structural relationships among the studied constructs; path coefficients and their significance, for each dependent construct are also presented in this figure. As indicated in Figure 1, all hypotheses were found to be significant in the proposed directions.

Figure 2. Standard model of a hierarchical model of internal marketing and Job satisfaction and loyalty.
Table 4. Results of research hypotheses test

<table>
<thead>
<tr>
<th>Hypothesis</th>
<th>Statistics t</th>
<th>Regression coefficient</th>
<th>Test result</th>
</tr>
</thead>
<tbody>
<tr>
<td>H1. Nurses understanding of job perspective impacts on job satisfaction.</td>
<td>68</td>
<td>7.05</td>
<td>Co</td>
</tr>
<tr>
<td>H2. Nurses understanding of job perspective impacts on job loyalty.</td>
<td>09</td>
<td>2.06</td>
<td>Co</td>
</tr>
<tr>
<td>H3. Nurses understanding of job development impacts on job satisfaction.</td>
<td>408</td>
<td>7.60</td>
<td>Co</td>
</tr>
<tr>
<td>H4. Nurses understanding of job development impacts on job loyalty.</td>
<td>.368</td>
<td>11.58</td>
<td>Co</td>
</tr>
<tr>
<td>H5. Nurses understanding of job reward impacts on job satisfaction.</td>
<td>008</td>
<td>6.61</td>
<td>Co</td>
</tr>
<tr>
<td>H6. Nurses understanding of job reward impacts on job loyalty.</td>
<td>40</td>
<td>5.83</td>
<td>Co</td>
</tr>
<tr>
<td>H7. Job satisfaction of nurses impacts on their loyalty</td>
<td>81</td>
<td>6.44</td>
<td>Co</td>
</tr>
</tbody>
</table>

Discussion and conclusions

Our findings correlate the work by Laschinger and Finegan (2004) and Nedd (2006) concerning control over care and the findings of Laine et al. (2009) pertaining to job flexibility and job satisfaction. The results also support the previous work of Miller (2006), Rosenstein and O’Brien (2004), and others concerning the impact of the nurses’ perception of their relationships and communications with physicians, nurses and other caregivers on job satisfaction and loyalty. There are worthwhile prospects growing evidence that ensures job satisfaction and commitment to continue to work and keep loyalty (Cooper, 2009; King and Grace, 2006; Laschinger et al., 2004). Financial reward may maintain a person physically but cannot convince spiritually and emotionally. Nurses are providing a service; they want to know how it will be consistent with the wider business operations. They need to fully understand and believe in the goals who will contribute to achieving them. Therefore nurses’ perception of career perspective (internal marketing component) has effect on nurses’ job satisfaction and loyalty.

Result showed that job reward has significant effect on nurses' job satisfaction and loyalty. It is concluded that payment above-average level and according to performance and productivity pay salaries is one of the procedures that can be beneficial. Based on recent studies, employees with salary more than average have more satisfaction and commitment in organization (Lings, 2005). This study also reaffirms and extends earlier findings regarding the importance of job support activities (Chang and Chang, 2007, 2009; Tsai and Tang, 2008) and communications (Chang and Chang, 2007, 2009), and builds on the work of Willem et al. (2007), supporting their findings regarding the significant negative impact of centralization.
(to the degree to which it negatively impacts the nurses’ ability to have a say in care decisions and job flexibility) and importance of autonomy and interactions. However, our results differed from theirs regarding the importance of the dimensions of job satisfaction. While Willem et al. (2007, p. 1016) found that “pay was not important in the study of organizational structures and job satisfaction relationships,” they did report that the nurses in their study, “considered pay as the most important dimension of job satisfaction, followed by autonomy and interaction” (Willem et al., 2007, p. 1015). Our study found that the financial package, though significant, was the least impactful on job satisfaction and loyalty. More research needs to be done in this area.

In summary, this study developed a hierarchical model of internal marketing as a reliable program to predict nurses’ satisfaction and loyalty. It is recommended that the hospital officials provide authority and create space for more activities and enthusiasm for nurses. Also they can to improve the internal market with the fairness and justice in the distribution of rewards among of nurses. Although these relationships need to be investigated across different settings, the results provide insights for both practitioners and academics.
References


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