

**Arab American University
Faculty of Graduate Studies
Department of Health Sciences
Master Program in Quality Management in
Healthcare Institutions**



**The Effect of JCI Accreditation on Employee Satisfaction,
Employee Performance, Burnout, and Organizational
Performance: A Case Study of Al-Istishari Arab Hospital,
Palestine**

Eman Nedal Abdalftah Obaidi

202216567

Supervision Committee: Dr. Sami Sader

Dr. Yousef Abdalhameed Mimi

Dr. Yahya Ahmad Salahat

**This Thesis Was Submitted in Partial Fulfilment of the
Requirements for the Master Degree in Quality Management in
Healthcare Institutions.**

Palestine, 10/2024

© Arab American University. All rights reserved.

Arab American University
Faculty of Graduate Studies
Department of Health Sciences
Master Program in Quality Management in
Healthcare Institutions



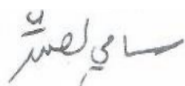


Thesis Approval
The Effect of JCI Accreditation on Employee Satisfaction, Employee
Performance, Burnout, and Organizational Performance: A Case Study
of Al-Istishari Arab Hospital, Palestine

Eman Nedal Abdalftah Obaidi

202216567

This thesis was defended successfully on 5/10/2024 and approved by:

Thesis Committee Members:

Name	Title	Signature
1. Dr. Sami Sader	Main Supervisor	
2. Dr. Yousef Abdalhameed Mimi	Members of Supervision Committee	
3. Dr. Yahya Ahmad Salahat	Members of Supervision Committee	

Palestine, 10/2024

Declaration

I declare that, except where explicit reference is made to the contribution of others, this thesis is substantially my own work and has not been submitted for any other degree at the Arab American University or any other institution.

Student Name: Eman Nedal Abdalftah Obaidi

Student ID: 202216567

Signature:



Date of Submitting the Final Version of the Thesis: 4-12-2024

Acknowledgments

First and foremost, I extend my heartfelt gratitude to God, the Almighty, for giving me various blessings, knowledge, and opportunities and finally allowing me to finish the thesis. Furthermore, I would like to thank Dr. Sami Sader, my supervisor, for his assistance and guidance.

Dr. Sami Sader provided me with excellent knowledge in the field of research and considerable time assisting me in completing my thesis; with his guidance, support, and mentorship, I was able to progress to this point.

In addition, I would like to acknowledge the contributions of all those who have supported me in various ways during my study courses. Their encouragement, insights, and assistance have enriched my research and made this thesis possible.

Finally, I also want to express my sincerest appreciation to my parents, whose constant support and care have been a continuous source of strength and motivation. Their belief in me and encouragement throughout my academic pursuits have been instrumental in my achievements.

The Effect of JCI Accreditation on Employee Satisfaction, Employee Performance, Burnout, and Organizational Performance: A Case Study of Al-Istishari Arab Hospital, Palestine

Eman Nedal Abdalftah Obaidi

Dr. Sami Sader

Dr. Yousef Abdalhameed Mimi

Dr. Yahya Ahmad Salahat

Abstract

The hospital accreditation process is widely recognized as a significant factor in enhancing the quality of healthcare services. Hospital Accreditation is linked to improved employee satisfaction, often leading to better organizational practices and a safer working environment. This study aims to assess the impact of accreditation on employee perceptions of employee satisfaction, employee performance, burnout, and organizational performance regarding international patient safety goal standards in a Palestinian-accredited hospital.

A quantitative, cross-sectional, descriptive study was conducted at Al-Istishari Arab Hospital, Palestine in the Middle of the West Bank. The accessible populations are health care providers who were on duty work at the hospital while collecting data through August - 2024. A convincing sample was composed of (86) participants who met the inclusion criteria with a response rate of 78.89%.

Of the 86 participants, men comprised the majority (70.9%), and 47.7% were between the ages of 30 and 32. The work environment (86% of respondents reported improvement), communication, and teamwork (60.5%) showed improved job satisfaction. On the other hand, conflicting results were noted about fair compensation and work-life balance. Improvements were observed in job performance, namely in skill mastery (93%), and patient care efficiency (83.7% improvement). The findings on burnout were mixed, showing slight improvements in emotional tiredness and job pressure management but with noticeable increases in stress (74.4% of respondents reported higher stress). Strong adherence to JCI standards was demonstrated by organizational performance, especially in the areas of hand hygiene (90.7%) and patient identification (72.1%).

The conversation emphasizes the complex effects of Joint Commission International (JCI) accreditation on the personnel and organizational effectiveness of Al-Istishari Arab Hospital. Although certification has improved job performance, job satisfaction, and organizational performance, it has also brought up new challenges, notably stress and burnout management. These results highlight the necessity of a well-rounded accrediting strategy that promotes well-being and professional growth.

Keywords: job performance, job satisfaction, burnout, organizational performance, international patient safety goal.

Table of Contents

#	Title	Page
	Declaration	i
	Acknowledgments	ii
	Abstract	iii
	List of Tables	viii
	List of Appendices	ix
	List of Definitions of Abbreviations	x
Chapter One: Introduction		
1.1	General background	1
1.2	Hospital Accreditation Status in Palestine	6
1.3	Problem Statement	9
1.4	Significance of the Study	10
1.5	Research Objectives	12
1.5.1	General Objective	12
1.5.2	Specific Objectives	12
1.6	Questions of the Study	12
1.7	Study Variables	12
1.7.1	Dependent Variable	12
1.7.2	Independent Variables	13
1.8	Conceptual and operational definition	13
1.8.1	Job Satisfaction	13

1.8.2	Job Performance	14
1.8.3	Burnout	15
1.8.4	Organizational Performance	15
1.9	Thesis Structure	17
Chapter Two: Literature Review		
2.1	Introduction	18
2.2	Hospital Accreditation	18
2.2.1	Definition of Hospital Accreditation	18
2.2.2	Hospitals Use Accreditation for Different Reasons	20
2.2.3	Accreditation Models	21
2.3	Joint Commission International (JCI) Accreditation	23
2.3.1	Process Followed for Accreditation	23
2.3.2	Requirements to Take Accreditation	23
2.3.3	Fees for Accreditation	24
2.3.4	Burdens on Hospital Employees during Preparation	24
2.3.5	Why Hospitals Seek Accreditation	25
2.4	Review of the Previous Studies	26
2.4.1	Previous Studies on Palestine	26
2.4.2	Job Satisfaction	29
2.4.3	Job Performance	32
2.4.4	Burnout	34
2.4.5	Organizational Performance	37
2.5	Remarks on Previous Studies	43

2.6	Conceptual model	44
2.6.1	Components of the Model	44
2.6.2	Hypothesis to be tested	44
2.7	Conceptual Framework	45
Chapter Three: Methodology		
3.1	Introduction	46
3.2	Study Design	46
3.3	Study Setting	46
3.4	Study Duration	47
3.5	Study Population	47
3.6	Sample and Sampling	47
3.7	Inclusion Criteria	48
3.8	Exclusion Criteria	48
3.9	Sample Size	48
3.10	Study Instrument	49
3.11	Study Validity and Reliability	50
3.12	Pilot Study	50
3.13	Data Collection	51
3.14	Ethical Considerations	51
3.15	Analysis Plan	51
Chapter Four: Results		
4.1	Introduction	52
4.2	Demographics Distribution	52

Chapter Five: Discussion		
5.1	Introduction	61
5.2	Discussion	61
5.2.1	Job Satisfaction Post Accreditation	61
5.2.2	Job Performance Post Accreditation	62
5.2.3	Burnout Post Accreditation	62
5.2.4	Organizational Performance Regarding IPSG Post Accreditation	63
5.2.5	Demographic Characteristic	64
5.3	Study Conclusion	64
5.4	Study Recommendation	65
5.5	Recommendation for Future Studies	66
5.6	Study Limitation	66
References		68
Appendices		73
ملخص		97

List of Tables

Table #	Title of Table	Page
Table 1.1	Palestinian Hospital	6
Table 4.2	Reliability Statistics	52
Table 4.3	Demographics distribution of the taken sample	53
Table 4.4	First filed: Job satisfaction answers distribution	73
Table 4.5	Second field Job performance answers distribution	75
Table 4.6	Third-field burnout answers the distribution	77
Table 4.7	Organizational Performance answers the distribution	79
Table 4.8	All fields mean	58
Table 4.9	Demographics with all fields' means	58
Table 4.10	ANOVA of gender with all fields' means	80
Table 4.11	ANOVA of age with all fields' means	81
Table 4.12	ANOVA of educational level with all fields' means	82
Table 4.13	ANOVA of job title with all fields' means	83
Table 4.14	ANOVA of contract type with all fields' means	84

List of Appendices

Appendix #	Title of Appendix	Page
Appendix One	List of Tables	73
Appendix Two	Study Instrument	85
Appendix Three	IRB Approval	95
Appendix Four	تسهيل المهمة	96

List of Definitions of Abbreviations

Abbreviations	Title
AAUP	Arab American University
ACHE	American College of Healthcare Executives
AHRQ	Agency for Healthcare Research and Quality
CAHME	Commission on Accreditation of Healthcare Management Education
HCWs	Health care worker
HSOPSC	Hospital Survey on Patient Safety Culture
IVF	In vitro fertilization
IAH	Istishari Arab Hospital
ICU	Intensive Care Unit
IPSG	International Patient Safety Goal
IRB	Institutional Review Board
IWPQ	Individual Work Performance Questionnaire
JCI	Joint Commission International
JDI	Job Descriptive Index
JSS	Job Satisfaction Scale
KPIs	Key Performance Indicators
MBI	Maslach Burnout Inventory
MSQ	Minnesota Satisfaction Questionnaire
NNUH	Najah National University Hospital
NPT	Normalization Process Theory

PPE	Personal Protective Equipment
PRCS	Palestine Red Crescent Society
PSC	Psychosocial Safety Environment
PSS-14	Perceived Stress Scale-14
SPSS	Statistical Package for the Social Sciences
STAI	State-Trait Anxiety Inventory
UNRWA	United Nations Relief and Works Agency
WHO	World Health Organization

Chapter One: Introduction

1.1 General Background

The hospital accreditation process is widely recognized as a significant factor in enhancing the quality of healthcare services. Hospital accreditation is linked to improved employee satisfaction, often leading to better organizational practices and a safer working environment (Mosadeghrad, 2020). This improvement in workplace conditions can lead to higher job performance among staff, as employees feel more supported and valued (Al-Sayedahmed et al., 2022).

Overall, organizational performance benefits from accreditation through increased efficiency, improved patient care quality, and higher patient satisfaction scores, fostering a culture of continuous improvement (Algunmeeyn, Alrawashdeh, and Alhabashneh, 2020).

"Hospital Accreditation" refers to evaluating healthcare institutions against predefined standards to ensure quality and safety (Mosadeghrad, 2020). "Job Satisfaction" measures how content employees are with their jobs, affecting their motivation and efficiency (Sastrawan et al., 2022). "Job Performance" assesses how well employees are performing their duties, crucial for organizational success (Kusumawardhani, Adj, and Supriyanto, 2021). "Burnout" describes physical and emotional exhaustion from work stress, affecting employee well-being and productivity (Rhoden et al., 2022). "Organizational Performance" encompasses the effectiveness and efficiency of an organization in meeting its goals (Brooks et al., 2021). These definitions form the foundation for exploring how accreditation influences healthcare settings.

This recognition extends to its impact on employee satisfaction within healthcare organizations. The accreditation process involves a comprehensive evaluation of a hospital's operations and services against established standards, aiming to ensure optimal patient care and safety. The implications of this process for employee satisfaction are multifaceted and have been the subject of various studies and discussions in the healthcare community (Longo et al., 2023).

Research suggests that hospital accreditation contributes to a structured and systematic approach to quality improvement and patient safety, which can positively affect

healthcare workers' morale and satisfaction (Işık et al., 2023; Reigas and Šimanskiene, 2023). A supportive work environment, clear protocols, and a culture of continuous improvement fostered through accreditation, are key drivers of job satisfaction among healthcare professionals (Hamed, 2023). Furthermore, accreditation can enhance professional development opportunities and employee engagement, further contributing to job satisfaction (Seyyedmoharrami et al., 2019).

However, the accreditation process can also present challenges, such as increased workload and stress among staff members, which may temporarily affect employee satisfaction negatively. It's crucial to balance the benefits of accreditation with the need to support staff during the preparation and implementation phases to mitigate these challenges (Shahin, Alshammari and Alabed, 2020). Hospital accreditation is increasingly recognized as a critical factor influencing job performance among healthcare professionals. Accreditation processes involve rigorous evaluation against predefined standards, focusing on improving healthcare quality and patient safety. This systemic approach affects job performance by setting a clear framework and expectations for healthcare delivery (Longo et al., 2023).

In human resource management, job performance is regarded as the most important factor to examine. Its evaluation and analysis are essential for several organizational procedures, including hiring, rewarding employees, and providing training. Organizations want accurate performance ratings regardless of the evaluation's goal, and it is even better if such ratings yield the same outcomes while requiring less time and effort (Ramos-Villagrasa et al., 2019).

Accreditation often leads to enhanced organizational structures, processes, and outcomes, directly influencing the professional environment and, consequently, the performance of healthcare workers Alkhenizan, A., et al. (2021). The implementation of best practices and standards required for accreditation promotes a culture of excellence, accountability, and continuous improvement within healthcare organizations. Such an environment not only fosters professional development but also enhances job satisfaction, which is closely linked to improved job performance (Hussein et al., 2021).

Moreover, accreditation processes can lead to better resource allocation, staff training, and support systems, further enhancing job performance by providing healthcare

professionals with the tools and knowledge they need to perform their roles effectively (Supriadi et al., 2020). However, the pressure and workload associated with meeting accreditation standards may also pose challenges, potentially affecting job performance if not adequately managed (Avia et al., 2019).

Hospital accreditation has a multifaceted impact on job performance, with the potential to significantly enhance healthcare delivery when effectively implemented and supported. The literature suggests that the benefits of accreditation for job performance are substantial, underscoring the importance of these processes in healthcare quality improvement initiatives (Al-Sayedahmed et al., 2021).

Health professionals' job satisfaction and performance have been studied independently, but they are rarely investigated further in tandem, particularly when it comes to nurses working in private hospitals. In a similar vein, a few other factors that influence these aspects are thoroughly investigated. A person's job happiness and performance are influenced by several factors, including working environment, compensation and advancement, job security, equity, and relationships with superiors and coworkers (Supriadi et al., 2020).

The most significant measures of job satisfaction are based on weights, such as the managers' satisfaction weight, the managers' satisfaction weight forms, the managers' work methods' satisfaction weight, the managers' recognition weight, the hours worked's satisfaction weight, and the employees' satisfaction with job security (Singh et al., 2019).

While accreditation is principally focused on improving organizational practices and patient outcomes, it also has significant implications for healthcare staff, particularly concerning job burnout. Burnout among healthcare professionals is a critical issue, characterized by emotional exhaustion, depersonalization, and a diminished sense of personal accomplishment, which accreditation efforts can both positively and negatively influence (Al Sabei et al., 2019).

The relationship between hospital accreditation and burnout is complex. On one hand, accreditation processes can lead to better workplace environments by standardizing practices, improving communication, and ensuring adequate staffing levels, which can mitigate factors contributing to burnout. On the other hand, the rigorous and often demanding nature of

preparing for accreditation can temporarily increase stress and workload for staff, potentially exacerbating burnout symptoms if not managed effectively (Kalantar et al., 2023).

Moreover, studies have shown that hospitals that achieve accreditation status tend to have more supportive environments that prioritize staff well-being, which can be instrumental in reducing burnout rates. This indicates that the impact of accreditation on burnout is mediated by how accreditation processes are implemented and the ongoing support provided to staff (Whoa and Hee, 2017).

Overall, while hospital accreditation has the potential to reduce burnout among healthcare professionals by fostering better working conditions and practices, the stress associated with achieving and maintaining accreditation standards necessitates careful management to ensure that the benefits outweigh the potential drawbacks (Seyyedmoharrami et al., 2018).

The hospital accreditation process is designed to improve organizational performance across various dimensions, including patient care quality, safety, and operational efficiency. The impact of accreditation on organizational performance has been a subject of extensive research, with studies indicating that accreditation can lead to significant improvements in healthcare delivery and outcomes (Kusumawardhani et al., 2021).

However, achieving accreditation requires significant effort, resource allocation, and organizational commitment. Some studies have pointed out the challenges associated with the accreditation process, including the potential for increased workload and stress among staff during the preparatory phase. Despite these challenges, the long-term benefits of accreditation for organizational performance, including enhanced reputation, staff satisfaction, and patient trust, often outweigh the initial hurdles (Ramos-Villagrasa et al., 2019).

Patient safety, which involves minimizing and preventing medical errors that frequently have detrimental effects on health, is a modern healthcare concern in healthcare institutions. With the increased use of new therapies and technologies, health care has become both more complex and efficient. As a result, healthcare organizations must adopt international patient safety goals to improve patient safety, mimic global competition, and boost their competitive advantages both nationally and internationally (Saaid et al., 2020).

Reducing errors in healthcare settings is the purpose of the Joint Commission International, which issued global patient safety goals that can be used to evaluate head nurses' management. Its six objectives are Correct patient identification (a), enhanced communication (b), preservation of high-alert medication safety (c), proper process assurance (d), decrease in healthcare-associated infection risk (e), and decrease in patient injury from falls (f) (Oliveira et al., 2019).

It is expected of hospital administrators, and head nurses, in particular, to adhere to basic patient safety procedures. It's also important to determine whether head nurses have correctly understood the patient safety goal statements. In addition, head nurses need to be competent in creating, explaining, and implementing these patient safety objectives to all nurses and other healthcare professionals who work under their direction. To effectively execute patient safety goals in the unit, head nurses require a tool or approach to lead the process (Avia and Hariyati, 2019).

A patient safety culture is an integrated pattern of behavior exhibited by individuals and organizations, founded on common values and beliefs, with the ongoing goal of reducing patient harm that may arise from care delivery procedures. Establishing a culture that supports and promotes safety begins with evaluating the patient safety culture. The Hospital Survey on Patient Safety Culture (HSOPSC), conducted by the Agency for Healthcare Research and Quality (AHRQ), identified twelve dimensions of patient safety culture (Gunawan & Hariyati, 2019).

The study examines the impact of hospital accreditation on employee outcomes and organizational efficiency, focusing on job satisfaction, performance, burnout, and overall performance metrics within healthcare settings. Hospital accreditation, recognized for promoting high standards of care and safety, is scrutinized for its broader effects on the workforce and institutional success. This exploration is pivotal in understanding accreditation's role in enhancing healthcare quality through employee well-being and operational excellence, highlighting the significance of structured quality assessments in the healthcare sector's dynamic environment.

1.2 Hospital Accreditation Status in Palestine

According to the Palestinian Ministry of Health, Palestine has 93 hospitals, with 58 located in the West Bank, including Jerusalem, and 35 in the Gaza Strip. The total number of hospital beds is approximately 6,900, distributed as 2,614 beds in the Gaza Strip and 4,286 beds in the West Bank (Palestinian Ministry of Health, 2022). Additionally, numerous primary healthcare centers and clinics are spread throughout the Palestinian territories. These hospitals are operated by the Ministry of Health, the United Nations Relief and Works Agency for Palestine Refugees (UNRWA), and various non-governmental organizations (NGOs) (Assembly, 2006). Despite the healthcare system in Palestine encountering significant challenges stemming from political instability and limited resources, there are ongoing efforts to enhance healthcare services and infrastructure. Consequently, numerous hospitals in Palestine are striving to achieve international accreditation or adhere to guidelines set by the World Health Organization (WHO) and other accreditation bodies within care institutions (Mataria et al., 2009).

According to the latest data from 2022, the Ministry of Health oversees 31 hospitals in Palestine, which collectively offer 3,909 beds. This represents 56.7% of the total hospital bed capacity in the region, while there are 15 government hospitals in the Gaza Strip, with a bed capacity of 2,011 beds. (Ministry of Health, 2022). Table (1.1) summarizes the number of Palestinian hospitals.

Table 1.1: Palestinian hospitals

Palestinian City	Number of Palestinian hospitals	Number of Palestinian governmental hospitals	Number of Accredited hospital
Jerusalem	9	-	4
Jenin	6	1	1 Ibn Sina Hospital
Tubas	1	1	
Tulkarem	6	2	

Nablus	13	2	2 An-Najah – JCI Arab Specialized Hospital -ISO
Qalqilya	2	1	
Selfit	1		
Ramallah	13	2	1 Istshari Arab Hospital
Jericho	1	1	
Bethlehem	9	2	
Hebron	17	5	
Gaza Strip	37	15	

As shown in the previous table of Palestinian hospitals, eight hospitals have been accredited, seven of which are accredited by the Joint Commission International (JCI). Al-Makassed Islamic Charitable Society Hospital, Augusta Victoria Compound, Red Crescent Hospital- Al-Quds, St John of Jerusalem Eye Hospital, An-Najah National University Hospital, Istishari Arab Hospital, Ibn Sina Hospital and Arab Specialized Hospital.

Al-Makassed Islamic Charitable Society Hospital, established in 1968, achieved a significant milestone in 2017 when it was awarded accreditation by the Joint Commission International (JCI).

The Augusta Victoria Compound, constructed between 1907 and 1914 by the Empress Augusta Victoria Foundation, it originally served the German Protestant community in Ottoman Palestine. Over the years, its primary role has been that of a hospital, supporting military efforts during both World Wars and under Jordanian administration. Since 1950, it has provided medical care to Palestinian refugees and the general public. Additionally, from 1915 to 1927, the compound functioned as a government or military headquarters. It was the first in Palestine to receive international accreditation in 2013, and it also got the ISO

accreditation (International Organization for Standardization [ISO]) (Augusta Victoria, 2023).

St. John of Jerusalem Eye Hospital is an expert eye care in the Middle East and has hospitals, clinics, and outreach services in the West Bank, Gaza, and the Joint Commission International (JCI) accredited Jerusalem, the hospital in 2013.

Red Crescent Maternity Hospitals was published in Palestine in 1968 (PRCS' Hospital) which is part of the International Red Cross and Red Crescent Movement in Occupied Jerusalem published in 1951 and got JCI accreditation in 2017.

An-Najah National University Hospital was founded in 2013, and it was the first Palestinian Academic Medical Center Accredited by the Joint Commission International for Healthcare Quality (JCI) in late 2020 and renewed in 2023, NNUH officially announced its acquisition of ISO 9001:2015 certification in October 2021, which focuses on developing the hospital's quality management system for operational and support processes (St. John of Jerusalem Eye Hospital, 2020).

The important role Joint Commission International (JCI) plays in improving healthcare quality and safety is the primary reason for selecting JCI accreditation for the study. JCI accreditation guarantees that hospitals adhere to international standards and is widely acknowledged as a benchmark for quality in healthcare services. By looking at how it affects performance, burnout, and job satisfaction Al-Istishari Arab Hospital needs to comprehend these dynamics to assess the effects of its accreditation journey and devise plans to maximize worker productivity and well-being while upholding excellent treatment standards (Istishari Arab Hospital, 2022).

Since IAH is one of Palestine's top medical facilities and is well-known for its dedication to offering top-notch medical care, it was selected as a case study for this study. The hospital is in a perfect position to study how Joint Commission International (JCI) accreditation affects employee burnout, job satisfaction, and organizational performance because of its successful JCI accreditation. A thorough environment for evaluating the impact of JCI accreditation is provided by the hospital's interdisciplinary workforce, proactive attitude to applying international standards, and wide range of medical services. The project intends to get important insights into how international accreditation affects healthcare

organizations in Palestine by concentrating on Al-Istishari Arab Hospital, providing a model that other institutions in the region can follow (Istishari Arab Hospital, 2022).

1.3 Problem Statement

One of JCI's standards is employee satisfaction. Employee satisfaction is an important indicator in the healthcare system to evaluate the effectiveness of the quality program and the impact of accreditation programs on employee performance; however, there is still a gap in accomplishing this goal. That is why healthcare facilities need to increase their knowledge of the methodology of increasing employee satisfaction, change the use of employee satisfaction survey results, and the potential consequences of employee dissatisfaction, including high turnover rate, and burnout, and illustrate how job satisfaction leads to employee satisfaction, and it in turn plays an important role in improving care performance and functionality (Villanova University, 2021).

The research issue further highlights that employee satisfaction is not simply a peripheral concern but a central component to achieving organizational goals, including improving patient care and improving the overall performance of the organization. Conversely, employee dissatisfaction can pose significant risks to patient care and organizational performance, potentially leading to adverse events or serious incidents (Oliveira et al., 2019).

Understanding the complex effects of hospital accreditation on healthcare professionals and organizational performance is the main goal of the study challenge. The impacts of hospital accreditation on job satisfaction, job performance, burnout, and overall organizational performance are still little understood, even though it is widely acknowledged as essential to maintaining high standards of patient care and safety. Workflow and administrative operations are frequently altered as a result of accreditation processes, which necessitate the deployment of substantial organizational resources and adherence to strict requirements.

Given the important role of job satisfaction that leads to employee commitment which is essential for productivity. When employees are satisfied with their duties that means they are more loyal to their workplaces. This commitment can lead to increased productivity, which is why organizations need to study employee satisfaction. It is imperative to systematically address this gap. The research problem was to study how healthcare

organizations, such as Istishari Arab Hospital, can improve employee job satisfaction within the constraints of existing resources. This requires comprehensive consideration of factors such as job descriptions, compensation structures, motivation systems, workload management, employee benefits, and other relevant factors that influence directly employee satisfaction and loyalty to the organization.

This study, which aims to investigate the impact of Joint Commission International (JCI) accreditation on job satisfaction, job performance, burnout, and organizational performance, is the first of its type in Palestine. By offering evidence-based insights into how JCI accreditation affects healthcare workers and organizations within the Palestinian healthcare system, this ground-breaking study seeks to close a gap in the literature. The study lays the groundwork for future research and provides useful insights for hospitals aiming to fulfill or uphold international accreditation requirements by defining these precise goals.

1.4 Significance of the Study

Achieving organizational goals is heavily reliant on job satisfaction. Studies have shown a positive correlation between job satisfaction and patient care quality and safety when employees and organizations share common values. This positive relationship is reflected in indicators such as employee satisfaction rate, turnover rate, task performance, and adherence to clinical protocols (Jehanzeb & Mohanty, 2018).

Employee commitment is crucial for boosting productivity. Enhancing job satisfaction fosters employee commitment, which in turn elevates patient care outcomes, ensuring high quality and safety standards (Sastrawan et al., 2022). This research is of significant importance in the healthcare industry because it directly addresses important issues affecting both employees and patients. Understanding what does influence employee satisfaction, and burnout at Istishari Hospital leads to better care, better patients, and more efficient healthcare services. High levels of employee burnout and dissatisfaction often lead to staff turnover, which can be costly and disruptive for healthcare organizations (Kelly, Gee, and Butler 2021).

This study attempts to provide the necessary information and practical recommendations that can help Istishari Hospital reduce burnout, enhance job satisfaction, and consequently, retain employees' value. More satisfied healthcare providers mean increasing the quality of medical care, which ultimately leads to more favorable outcomes

for patients (Janes et al. 2021). By proactively addressing these important aspects, this research contributes significantly to the hospital's overall mission of providing high-quality healthcare services.

Furthermore, this study is poised to shape strategic decision-making in Istishari Hospital. By revealing the specific effects that influence job satisfaction and burnout, the study informs resource allocation, policy development, and organizational change, offering insights into Evidence-based identity to optimize overall employee well-being and performance. The results of this study can serve as a benchmark not only for Istishari Hospital but also for other healthcare organizations to enhance employee satisfaction and reduce burnout rates.

This research offers the potential for significant cost savings. By reducing staff turnover, absenteeism due to burnout, and recruitment costs, Istishari Hospitals can achieve long-term financial sustainability while improving the well-being of its employees.

The overarching goal is to enhance the work environment at Istishari Hospital. By fostering a work environment that values and supports its employees, hospitals can foster a positive and rewarding work experience that extends beyond the organization itself.

This study has not only local relevance to Istishari Hospital but also broader implications for the healthcare sector as a whole.

Cultural safety and employee satisfaction as a mandatory standard are mentioned in the JCIA 7th edition guide for the hospital (Keiler et al., 2020) as “the following:

4.1 Standard SQE.8.2: The hospital provides a staff health and safety program that addresses staff physical and mental health and safe working conditions.

4.2 Standard GLD.13: Hospital leadership creates and supports a culture of safety programs throughout the hospital.

4.3 Standard GLD.13.1: Hospital leadership implements, monitors, and takes action to improve the program for a culture of safety throughout the hospital.”

1.5 Research Objectives

1.5.1 General Objective

The goal of this study is to assess the impact of accreditation on employee perceptions of job satisfaction, job performance, burnout, and organizational performance regarding International Patient Safety Goals (IPSG) standards in a Palestinian-accredited hospital.

1.5.2 Specific Objectives

1. To evaluate employee job satisfaction after hospital accreditation.
2. To evaluate the employee's job performance after hospital accreditation
3. To evaluate the employee's burnout after hospital accreditation
4. To evaluate the organizational performance regarding IPSG standards after hospital accreditation
5. Identify the demographic characteristics of job satisfaction, job performance, burnout, and organizational performance regarding IPSG standards after hospital accreditation.

1.6 Questions of the Study

1. What is the level of job satisfaction after hospital accreditation at Istishari Arab Hospital (IAH)?
2. What is the level of the employee's job performance after hospital accreditation at IAH?
3. What is the level of employee burnout after hospital accreditation at IAH?
4. What is the level of organizational performance regarding IPSG standards after hospital accreditation at IAH?
5. What are the effects of the demographic characteristics of job satisfaction, job performance, burnout, and organizational performance regarding IPSG standards after hospital accreditation?

1.7 Study Variables

1.7.1 Dependent Variable: job satisfaction after hospital accreditation at IAH, employee's job performance after hospital accreditation at IAH, burnout after hospital accreditation at

IAH, organizational performance regarding IPSP standards after hospital accreditation at IAH.

1.7.2 Independent Variables: Demographic characteristics (Gender, Age, Educational Qualification, Job Title, Years of Experience in the Position, Employment Contract), JCI accreditation.

1.8 Conceptual and Operational Definition

1.8.1 Job Satisfaction

Job satisfaction refers to the level of contentment employees feel about their job, which can affect their performance and overall well-being. It encompasses various factors such as work conditions, compensation, job security, and work-life balance (Bord et al., 2021).

Characteristics:

- Emotional Reaction: Feelings of happiness or dissatisfaction with the job.
- Cognitive Appraisal: Evaluation of the job and job environment.
- Behavioral Response: Willingness to stay with the organization or seek employment elsewhere.

Measurement Tools:

- Job Satisfaction Surveys: Instruments like the Job Descriptive Index (JDI) or the Minnesota Satisfaction Questionnaire (MSQ).
- Employee Feedback: Regular feedback sessions and open communication channels.
- Engagement Scores: Assessing overall engagement and satisfaction levels through periodic surveys.

Impact on Performance:

- Increased Productivity: Higher job satisfaction leads to better job performance and productivity.
- Lower Turnover: Satisfied employees are less likely to leave the organization, reducing turnover rates.

- Improved Morale: A satisfied workforce contributes to a positive organizational culture and higher morale (Janicijevic et al., 2013).

1.8.2 Job Performance

Job performance is a comprehensive assessment of how well a person performs their duties, including the execution of assigned tasks, problem-solving, collaboration, and maintaining work ethics. It involves continuously achieving or surpassing expectations, thereby contributing significantly to the organization's success (Dingel & Maffett, 2023).

Characteristics:

- Task Performance: Efficiency and accuracy in performing job-specific tasks.
- Contextual Performance: Behaviors that contribute to the organizational environment, such as teamwork and initiative.
- Adaptive Performance: Ability to adapt to changes and new demands.

Measurement Tools:

- Performance Appraisals: Regular evaluations of employee performance using structured tools.
- Key Performance Indicators (KPIs): Metrics that track specific performance outcomes.
- Self and Peer Evaluations: Assessments by the employee and their peers to gauge performance.

Impact on Performance:

- Organizational Success: High job performance directly contributes to achieving organizational goals.
- Employee Development: Regular performance evaluations help identify areas for employee development.
- Enhanced Efficiency: Improved job performance leads to more efficient operations and better use of resources (Zawawi & Nasurdin, 2017).

1.8.3 Burnout

Burnout is a state of physical, emotional, and mental exhaustion caused by prolonged and excessive stress at work. It is characterized by emotional exhaustion, depersonalization, and a reduced sense of personal accomplishment (Maslach & Jackson, 1981).

Characteristics:

- Emotional Exhaustion: Feeling drained and fatigued by work demands.
- Depersonalization: Developing a cynical attitude towards work and colleagues.
- Reduced Personal Accomplishment: Feeling ineffective and lacking achievement in one's work.

Measurement Tools:

- Maslach Burnout Inventory (MBI): A widely used tool for assessing burnout levels.
- Burnout Surveys: Questionnaires designed to measure burnout symptoms.
- Work Environment Assessments: Evaluations of workplace conditions contributing to burnout.

Impact on Performance:

- Decreased Productivity: Burnout leads to lower productivity and job performance.
- Increased Absenteeism: Higher levels of absenteeism and turnover among burned-out employees.
- Negative Health Outcomes: Adverse effects on both physical and mental health, impacting overall well-being (Koutsimani et al., 2021).

1.8.4 Organizational Performance

Organizational performance refers to how well an organization achieves its goals and objectives. It encompasses various aspects of an organization's functioning, including

financial performance, operational efficiency, and employee and patient satisfaction (Prodromou & Papageorgiou, 2022).

Characteristics:

1. **Global Standards:** The Joint Commission International (JCI) developed the IPSPG, a collection of rules, to improve patient safety in healthcare facilities all around the world. These objectives can be modified to fit various healthcare environments while remaining broadly applicable.
2. **Patient-Centered Focus:** By focusing on specific areas, such as accurate patient identification, effective communication, safe medication practices, infection prevention, surgery safety, and reducing patient harm associated with falls, the goals aim to significantly reduce the risk of harm to patients.
3. **Continuous Improvement:** To satisfy changing safety standards, healthcare organizations must regularly review and update their practices. This is one of the aims that promotes continuous quality improvement.

Measurement Tools:

1. **Performance Indicators:** To gauge compliance and efficacy, healthcare institutions frequently employ certain indicators associated with each IPSPG. These metrics include rates of prescription mistakes, surgical site infections, and incorrect patient identification.
2. **Surveys and Audits:** To evaluate adherence to IPSPG guidelines, periodic audits and patient safety surveys are conducted. These instruments aid in locating noncompliance gaps and regions in need of development.
3. **Systems for Reporting Incidents:** Systems for reporting incidents are widely used by companies to monitor and evaluate safety-related occurrences. Understanding the success of IPSPG implementations requires these data.
4. **Benchmarking:** Using benchmarking to compare performance with other universities can also be useful in evaluating IPSPG performance. This entails contrasting important safety metrics with industry norms or organizations of peer review.

Impact on Performance:

1. **Enhanced Patient Safety:** Adherence to IPSG leads to a direct improvement in patient safety, reducing the incidence of preventable harm, and fostering a safer healthcare environment.
2. **Accreditation Success:** Successful implementation of IPSG is often a prerequisite for obtaining and maintaining accreditation from bodies like JCI, which enhances the organization's reputation and credibility.
3. **Operational Efficiency:** By minimizing errors and adverse events, organizations can operate more efficiently, reducing the need for corrective actions and lowering associated costs.
4. **Staff Engagement and Training:** IPSG fosters a culture of safety within the organization, encouraging continuous staff education and engagement in safety practices, which can improve overall job satisfaction and performance.

Patient Outcomes and Satisfaction: Improved adherence to patient safety goals translates to better patient outcomes, which can increase patient satisfaction and trust in the HCP^{1.10}

1.9 Thesis Structure

The thesis has multiple essential components that make up its structure. "Chapter One" serves as an introduction to the study, including background data, the problem statement, aims, and significance of the study. A "Chapter Two" Literature Review covering JCI accreditation, pertinent theories, and prior research. "Chapter Three" describes the Methodology, including the population, data-gathering techniques, research design, and ethical considerations. The Results, which display data results and analysis, are given in "Chapter Four". A Discussion is provided in "Chapter Five", wherein the findings are interpreted and juxtaposed with previous research. A summary of the conclusions, implications, and suggestions is presented throughout the study process, coherence and clarity are guaranteed by this structured approach.

Chapter Two: Literature Review

2.1 Introduction

Every successful organization is driven by the desire to have a highly productive and contented team. However, this is particularly true in healthcare environments where worker happiness directly affects patient satisfaction.

This chapter explores how hospital accreditation affects employee job satisfaction, work performance, burnout, and ultimately organizational success. It focuses primarily on the Joint Commission International (JCI) criteria. This section looks at existing studies on the influence of hospital accreditation, specifically Joint Commission International (JCI) standards, on employee satisfaction, emphasizing work performance and burnout among healthcare professionals.

2.2 Hospital Accreditation

2.2.1 Definition of Hospital Accreditation

Hospital accreditation is a procedure in which healthcare institutions are evaluated for adherence to certain criteria that assure quality and safety in patient treatment (Alhawajreh, Paterson, & Jackson, 2023). Accreditation entails a thorough assessment by professional surveyors who examine medical records, monitor patient treatment, and engage with personnel to determine standard compliance (Dissanayake, Dharmasena, & Warnakulasuriya, 2024).

Accreditation is often granted for a specified duration, such as three years for most businesses, except laboratory accreditation, which is usually a two-year award (Alhawajreh, Paterson, & Jackson, 2023). The study by Saleh et al. (2013) examines the impact of hospital accreditation on employee satisfaction in Lebanese hospitals, combining quantitative surveys and qualitative interviews to gather comprehensive data, it finds that accreditation improves organizational practices and safety protocols, enhancing job satisfaction for some staff. However, it also increases stress and workload during the preparation and implementation phases, negatively impacting employee satisfaction. Some staff members report feeling overburdened and pressured to meet accreditation standards.

The studies by Brubakk et al. (2015) and Park et al (2017) investigate how hospital accreditation positively influences organizational culture, they both found that accreditation significantly enhances the culture of safety and quality in hospitals, and promotes adherence to standards, improves communication among staff, and encourages a proactive approach to problem-solving and risk management (Brubakk et al. 2015) and also accredited hospital experienced improved teamwork, leadership commitment to quality (Park et al. 2017)

The study by Greenfield et al. (2012) finds that hospital accreditation enhances clinical practice by standardizing procedures and fostering continuous quality improvement and improves organizational performance, leading to better operational efficiency, reduced error rates, and improved patient outcomes.

The study by Shaw et al. (2014) investigates the impact of hospital accreditation on clinical leadership and patient safety systems. It finds that accreditation enhances clinical leadership by fostering a culture of accountability and continuous improvement, while also improving patient safety systems through better adherence to safety protocols and reduced medical errors. However, the process requires significant training, commitment, and resources. Overall, accreditation improves leadership and safety practices, contributing to higher-quality patient care. The study by Avia & Hariyati (2019) examines how hospital accreditation impacts the quality of healthcare services. It finds that accreditation significantly enhances patient satisfaction, adherence to clinical guidelines, and treatment outcomes. Accredited hospitals also show improved service efficiency, with reduced wait times and streamlined processes. However, sustaining these improvements requires ongoing resource investment and commitment from healthcare teams. Overall, accreditation leads to higher-quality patient care and better service delivery.

The study by Alkhenizan & Shaw (2011) examines the impact of hospital accreditation on the care delivery process, finding that it significantly improves clinical practices, patient management, and workflow efficiency. Accreditation standardizes clinical procedures, enhances coordination and documentation, and streamlines workflows. However, it requires substantial investment in resources and continuous quality improvement efforts. Overall, accreditation leads to better patient outcomes and higher healthcare quality.

The study by Araujo, Siqueira, & Malik (2020) explores the impact of hospital accreditation on operational efficiency. It finds that accreditation improves resource utilization, patient throughput, and cost management by standardizing procedures and enhancing management practices. While achieving accreditation requires significant upfront investments, the benefits include reduced waste, faster patient processing, and better financial management. Overall, accreditation leads to more efficient healthcare delivery.

The study by Jovanovic (2005) highlights two major benefits of hospital accreditation: the standardization of procedures and internal policies, and the establishment of effective management systems. Standardization ensures consistency and adherence to best practices, reducing variability in care delivery. The establishment of robust management systems enhances quality assurance, performance monitoring, and continuous improvement. Although these processes require significant resources, they lead to improved operational efficiency and overall healthcare quality.

The systematic review by Alkhenizan & Shaw (2011) demonstrates that hospital accreditation programs significantly improve clinical outcomes. The review shows that accredited hospitals have better patient outcomes, including lower mortality rates and reduced complications. Accreditation promotes adherence to evidence-based clinical guidelines, enhancing the quality of care and patient safety. However, implementing and maintaining accreditation standards can be resource-intensive. Overall, accreditation programs lead to substantial improvements in patient care practices and outcomes.

Hospital accreditation is essential for enhancing the quality of care (Al-Awa et al., 2011), improving institutional reputation (Sack et al., 2010), and increasing operational effectiveness (Pomey et al., 2010). The accreditation process ensures adherence to high standards, fostering trust and efficiency within healthcare facilities.

2.2.2 Hospitals Use Accreditation for Different Reasons

- **Improve Quality:** Hospital accreditation helps establish and maintain high standards of care, ensuring that patients receive the best possible treatment. According to Al-Awa et al. (2011), hospital accreditation is directly associated with improved patient safety and quality of care.

- **Improve Reputation:** Accreditation serves as a marker of excellence and reliability, enhancing the hospital's reputation among patients and stakeholders. As noted by Sack et al. (2010), accredited hospitals often experience increased patient trust and a better public image.
- **Increase Effectiveness:** Accreditation processes promote efficient use of resources and better management practices, leading to more effective hospital operations. This is supported by Pomey et al. (2010), who found that accreditation can drive improvements in organizational efficiency and patient outcomes.

2.2.3 Accreditation Models

Several accreditation models are available, with the most commonly adopted including:

- **JCI: Joint Commission International (JCI)** accreditation, established in 1994, is aimed at healthcare organizations worldwide to enhance patient safety and care quality. Over 1,000 organizations have been accredited, driven by the pursuit of excellence and global recognition. Arabic hospitals increasingly seek JCI accreditation to improve standards and compete internationally (Shaw et al., 2014; Twigg et al., 2016). The concept of quality in healthcare has spread widely over the years due to increasing awareness and demand for higher standards.
- **The National Committee for Quality Assurance (NCQA):** NCQA established in 1990, accredits healthcare organizations to ensure high standards of quality and performance within the United States, which provides a framework for continuous improvement in healthcare delivery and to enhance their quality of care, gain international recognition, and meet rising patient expectations, it also focus on performance metrics and patient-centered care models Friedberg et al., 2011.
- **Accreditation Canada:** Accreditation Canada, established in 1958, is a non-profit organization providing accreditation services to healthcare organizations worldwide (Accreditation Canada, 2023) Organizations seek Accreditation Canada for its rigorous standards and comprehensive evaluation processes, fostering continuous improvement. Its programs, based on the Quantum certification system, assess quality across eight aspects and are customizable to diverse healthcare institutions. Accreditation Canada continually updates its standards through surveys and

feedback, ensuring accountability and quality improvement (Mitchell, Nicklin, & Macdonald, 2014).

- ISO (9001/45001/14001)

1. ISO 9001: Quality Management Systems

ISO 9001 focuses on establishing a framework for consistent quality management, with an emphasis on meeting customer requirements and achieving continuous improvement. It covers aspects such as process efficiency, customer satisfaction, and regulatory compliance (Marek Šolc, Peter Blaško, Lenka Girmanová, & Juraj Kliment, 2022). Implementing ISO 9001 helps organizations enhance product and service quality, increase customer loyalty, and improve overall operational efficiency (Šolc et al., 2022).

2. ISO 45001: Occupational Health and Safety Management Systems

ISO 45001 addresses workplace health and safety, emphasizing the identification and management of risks and opportunities to prevent work-related injuries and illnesses. It promotes a safe and healthy work environment through hazard control, employee participation, and continuous safety performance improvement (M Šolc, P Blaško, L Girmanová, & J Kliment, 2022). Adopting ISO 45001 can reduce workplace accidents, enhance employee well-being, and demonstrate an organization's commitment to occupational health and safety (Šolc et al., 2022).

3. ISO 14001: Environmental Management Systems

ISO 14001 focuses on environmental management, aiming to minimize an organization's environmental impact through efficient resource use, waste reduction, and compliance with environmental regulations. It encourages sustainable practices and the continual improvement of environmental performance (Marek Šolc, Peter Blaško, Lenka Girmanová, & Juraj Kliment, 2022). Implementing ISO 14001 can help organizations reduce their carbon footprint, enhance regulatory compliance, and improve their reputation as environmentally responsible entities (Šolc et al., 2022).

2.3 Joint Commission International (JCI) Accreditation

Since 1994, the Joint Commission (JCI) has accredited over 1,000 health organizations with its globally recognized "Gold Seal of Approval," symbolizing quality patient care and safety (Mason et al., 2019).

2.3.1 Process Followed for Accreditation

1. Application and Preparation: Healthcare organizations begin by submitting an application, initiating the preparation phase which includes assessing current practices against JCI standards (Shaw et al., 2014).
2. Self-Assessment: Organizations conduct a self-assessment to identify gaps in compliance with JCI standards. This phase involves internal audits and reviews to ensure all areas meet the required standards (Shaw et al., 2014).
3. Implementation: Based on the self-assessment, the organization implements necessary changes, including staff training, updating procedures, and making infrastructural improvements to meet JCI standards (Twigg et al., 2016).
4. Survey Preparation: The organization prepares for the JCI survey by collecting documentation, refining processes, and ensuring all staff are aware of the standards and requirements (Twigg et al., 2016).
5. On-Site Survey: A team of JCI surveyors conducts an on-site evaluation, reviewing documents, interviewing staff, and observing practices to ensure compliance with JCI standards (Shaw et al., 2014).
6. Accreditation Decision: JCI provides a detailed report highlighting areas of compliance and opportunities for improvement. Based on this report, JCI makes an accreditation decision (Shaw et al., 2014).

2.3.2 Requirements to Take Accreditation

- Compliance with Standards: Organizations must demonstrate compliance with JCI's rigorous standards, covering patient safety, care quality, facility management, and administrative processes (Shaw et al., 2014).

- Continuous Improvement: Organizations must show a commitment to continuous improvement through ongoing training and process enhancement (Twigg et al., 2016).
- Documentation and Evidence: Proper documentation and evidence of compliance with JCI standards are crucial (Twigg et al., 2016).

2.3.3 Fees for Accreditation

The fees for JCI accreditation vary depending on the size and type of the healthcare organization. These fees cover the application, on-site survey, and any follow-up evaluations. Specific costs are tailored to each institution's needs and scope (Abolfotouh et al., 2014).

2.3.4 Burdens on Hospital Employees during Preparation

- Increased Workload: Employees face additional responsibilities related to preparing for the accreditation, such as participating in training sessions, updating procedures, and ensuring compliance with standards (Abolfotouh et al., 2014).
- Stress and Burnout: The added pressure to meet accreditation standards can lead to stress and burnout among staff (Abolfotouh et al., 2014).
- Time Management: Balancing regular duties with accreditation preparation tasks can be challenging for employees (Abolfotouh et al., 2014).

Burdens on Patients:

- Reduced Attention: Doctors and healthcare providers may be preoccupied with accreditation preparation, leading to reduced attention to patient care (Abolfotouh et al., 2014).
- Delays and Inconvenience: Patients may experience delays in services or inconvenience due to the focus on accreditation activities (Abolfotouh et al., 2014).

Activities during Preparation:

- Awareness Campaigns: Conduct awareness campaigns to educate staff about JCI standards and the importance of accreditation (Abolfotouh et al., 2014).
- Facility Rehabilitation: Upgrading facilities to meet JCI standards, which may include renovations and purchasing new equipment (Abolfotouh et al., 2014).
- Training and Education: Providing extensive training and education programs for staff to ensure they understand and comply with JCI requirements (Abolfotouh et al., 2014).

Financial Burdens:

- Direct Costs: Fees for the accreditation process, including application and survey costs (Abolfotouh et al., 2014).
- Indirect Costs: Expenses related to staff training, facility upgrades, and implementing new procedures (Abolfotouh et al., 2014).

2.3.5 Why Hospitals Seek Accreditation:

- Quality Improvement: To enhance the quality of care provided to patients (Shaw et al., 2014).
- Reputation Enhancement: To gain recognition as a high-standard healthcare provider (Twigg et al., 2016).
- Operational Efficiency: To improve overall hospital performance and efficiency (Shaw et al., 2014).
- Patient Safety: To ensure patient safety and reduce medical errors (Twigg et al., 2016).
- Competitive Advantage: To stand out in a competitive healthcare market (Shaw et al., 2014).

Despite the significant requirements and burdens, hospitals pursue JCI accreditation because it supports these goals. Hospital management typically provides the necessary

resources to achieve accreditation, demonstrating a commitment to quality and excellence in healthcare. This determination often places additional burdens on medical, supportive, and administrative staff, who must manage accreditation-related tasks alongside their regular duties (Abolfotouh et al., 2014).

2.4 Review of the Previous Studies

2.4.1 Previous Studies on Palestine

A quantitative cross-sectional study design study by Zabin (2024), the purpose of this study is to evaluate how a university hospital's patient safety culture is perceived and investigate the connections between employee demographics, workplace features, and patient safety culture perceptions. The worst sections were determined to be "Staffing and Workplace" (59.5%) and "Response to Error" (51.9%). The two most highly regarded dimensions were "teamwork" (82.5%) and "organizational learning—continuous improvement" (81.1%), with the remaining dimensions also garnering favorable ratings. Compared to other professions, nursing personnel held a more positive perception of the patient safety culture.

In a study conducted by Hamed (2023), a quantitative, cross-sectional descriptive study was carried out to evaluate the performance and job satisfaction of nurses working in two private hospitals in Palestine. The study used two self-administered questionnaires to collect data from 217 nurses, or 53.7% of the 404 target population. For the analysis, SPSS version 28 was used. A strong association between nurses' job happiness and performance levels was seen when comparing hospitals with JCI accreditation and those without it. At both hospitals, nurses expressed a modest level of satisfaction, with an overall mean score of 3.43 and a standard deviation of 0.96. In contrast to the non-accredited hospital, work satisfaction was somewhat greater in the accredited hospital. With an aggregate mean of 3.65 and a standard deviation of 0.84, with an overall mean of 3.65 and a standard deviation of 0.84, both hospitals demonstrated good performance levels. However, the non-accredited hospital's performance was somewhat better than the accredited hospital's. The JCI accreditation status and the nurses' evaluations of their performance and job satisfaction did

not differ statistically. On the other hand, depending on hospital experience and educational level, statistically significant disparities in job performance were noted in JCI-accredited hospitals.

According to a study conducted by Hussein et al (2021), although accreditation is generally seen as a useful instrument for evaluating and raising the standard of healthcare, its influence on results and performance is still unclear. This review aimed to locate and evaluate the data pertaining to hospital accreditation's impact. 76 empirical papers that looked at the effect of accreditation out of 17,830 studies that were examined satisfied our inclusion criteria. The studies used a variety of methods. Our research shows that hospital accreditation consistently improves safety culture, efficiency, performance metrics related to processes, and patient length of stay. It also has a positive influence on healthcare staff, especially in terms of working stress. Nonetheless, there was no correlation between accreditation and staff satisfaction, patient experience and satisfaction, or 30-day hospital readmission rates.

A cross-sectional study design was conducted by Zabin, Abu Zaitoun, and Abdullah (2022), the objectives of this study were to: 1) investigate nurses' perceptions of Patient Safety Culture (PSC) at a university hospital in Palestine and pinpoint areas that needed improvement; 2) evaluate the relationship between PSC dimensions and other outcome dimensions, such as the frequency of reported events and overall safety perceptions; and 3) ascertain the effects of a few selected demographic variables on nurses' perceptions of PSC, including gender, age, hospital tenure, work tenure, profession tenure, and hours worked per week. 107 nurses were included in the convenience sample of this cross-sectional study. Teamwork within units (86%) and organizational learning and continuous development (87%) were the patient safety factors that received the most positive responses. The non-punitive response to error had the lowest positive response rate (22%). The results of multiple regression analysis showed that feedback and communication regarding errors predicted the frequency of reported occurrences, and that communication openness was a predictor of overall safety perceptions. Furthermore, a significant predictor of PSC ($p < 0.05$) was found to be age.

In a study by Barghouthi and Imam (2018), the purpose of this study is to assess patient satisfaction in Palestine's accredited and non-accredited hospitals. Patient satisfaction in two Palestinian hospitals was compared using a quantitative descriptive cross-sectional design. The SERVQUAL tool was used to measure patient satisfaction between October and November of 2016. This tool evaluates five aspects of quality: tangibility, assurance, responsiveness, empathy, and reliability. 332 inpatients were included in the study as a convenience sample. With a standard deviation of 0.70 and an overall mean score of 4.34 out of 5, patients expressed a high degree of satisfaction. The findings revealed statistically significant variations in patient satisfaction based on demographic attributes, except gender. On the other hand, no statistically significant variations concerning hospital attributes were discovered. It's interesting to note that patients in non-certified hospitals reported higher levels of satisfaction on all fronts than in accredited facilities.

A cross-sectional quantitative design was conducted by Hamdan and Saleem (2018), with the introduction of a patient safety program in Palestinian public hospitals between 2011 and 2016, the study sought to assess the shifts in patient safety culture. Data from 1,229 clinical and non-clinical staff members at all public hospitals in the West Bank were gathered using the Hospital Survey on Patient Safety Culture. Positive responses were noted in 10 out of 12 (83.3%) composite categories and 36 out of 42 (86.0%) items in the Hospital study on Patient Safety Culture since the baseline study in 2011, indicating considerable gains in patient safety culture. The percentage of positive replies that increased ranged from 3.8% for "Teamwork across hospital units" to 9.1% for "Frequency of events reported" . In contrast, there was no significant change in the "Organizational learning—continuous improvement" category, despite a 11.4% significant decline in the "Staffing" category . Despite no discernible rise in the number of patient safety incidents, the majority of participants (70.5%) evaluated the patient safety level in their units/hospitals as "Excellent/Very good," showing a 6.3% increase from the baseline.

A cross-sectional descriptive study conducted by Elsous et al (2016), this study set out to quantify and measure the patient safety culture in Palestinian hospitals to create a baseline evaluation. Out of 370, 339 nurses and doctors answered the questionnaire, yielding a 91.6% response rate. Four public general hospitals in the Gaza Strip, Palestine, served as

the study's sites. Proportionate random sampling was used to pick doctors and nurses. The study sought to ascertain the proportion of positive attitudes and evaluate the state of patient safety culture among healthcare providers. The average age was 36.5 years , and the male-to-female ratio was 2.16:1. The Arabic Safety Attitude Questionnaire had a mean score of 68.5 for Job Satisfaction and 48.5 for Working Conditions, on a 100-point scale. Regarding the climates of teamwork, safety, and stress recognition, the percentage of respondents who had a good attitude was 34.5%; for job satisfaction, it was 48.8%; for working conditions, it was 11.3%; and for management perception, it was 42.8%. It was shown that healthcare professionals who had positive views collaborated with their peers more effectively than those who did not.

2.4.2 Job Satisfaction

Job satisfaction is vital to an organization's performance, influencing productivity, engagement, and creativity. Compensation, work-life balance, and opportunities for professional development are all factors that contribute to satisfaction among employees (Bord et al., 2021; Tarieh et al., 2022). According to research, competitive salary, work-life balance, and a pleasant workplace culture all contribute to satisfaction among workers in healthcare settings (Janicijevic et al., 2013). Satisfaction with work among healthcare professionals directly determines the quality of treatment delivered, with factors such as workplace environment and the availability of medical staff strongly influencing job satisfaction levels (Barili et al., 2022; Karaferis et al., 2022). Regularly assessing employee satisfaction levels through surveys and feedback channels is critical for finding areas for development and developing a trust-based workplace where people feel acknowledged and respected (Cantarelli et al., 2023).

In mixed-methods study included a quantitative survey (Index of Work Satisfaction) and qualitative interviews with nurses (n=226) from three hospitals: one private JCI-accredited, one private non-accredited, and one public non-accredited. Nurses at the JCI-accredited hospital expressed better overall job satisfaction compared to the other two institutions. The study reveals that accreditation may be a beneficial factor in professional happiness among nurses (de Oliveira et al., 2019).

In a study conducted by Oliveira et al (2019) in Brazil, the purpose of the study was to investigate how nursing staff members' professional happiness is affected by accreditation. The sequential explanatory mixed-method technique was employed in this multicenter, cross-sectional study. In the first, quantitative phase, 226 nursing professionals from three hospitals—one private and accredited, one private and non-accredited, and one public and non-accredited—were given the validated Brazilian version of the Index of Work Satisfaction. To supplement the quantitative results, a second, qualitative phase was created. It involved 39 participant interviews that were subjected to the Discourse of the Collective Subject method of analysis. The quantitative data were subjected to descriptive and inferential statistical analysis, bolstered by qualitative perspectives. Certain data were also provided in a combined manner. According to the findings, the certified hospital's nursing staff expressed greater levels of overall job satisfaction. Additionally, there were statistically significant correlations between the employees of the private hospitals. The study's two phases' comparison of the three groups revealed that professional satisfaction is positively impacted by accreditation. In contrast, the public hospital did better than the recognized hospital in categories like pay, workload, and interpersonal relationships.

The research investigated the relationship between rewards, recognition, and job satisfaction in the healthcare sector, especially among administrative employees in Saudi Arabia. The researchers used a descriptive and explanatory method to determine the present level of work satisfaction and how these elements impact it. They obtained data from a random sample of 300 administrative staff working in approved tertiary care facilities in Al-Ahsa City accredited institutions. Based on the questionnaires, administrative personnel believed that recognition and awards had a substantial influence on their work satisfaction they also indicated satisfaction with obtaining acknowledgment and awards. Interestingly, the study found a robust link between salary and total job satisfaction. More significantly, recognition appears to have a strong influence on most elements of job satisfaction for these people. The study shows that well-designed recognition and reward systems can significantly increase job satisfaction among administrative professionals in healthcare (Muthuswamy & Almoosa, 2023).

The cross-sectional, analytical study was conducted by Autêntica et al (2021) in Brazil, the purpose of the study was to determine the essential elements of authentic leadership among nurses working in a network of private hospitals and investigate how these elements relate to accreditation and job satisfaction. 282 nurses participated in this cross-sectional analytical study, 94 of them held leadership positions while the remaining 188 had lower-level jobs across 11 hospitals. The job satisfaction survey and the authentic leadership questionnaire were finished by the participants. The findings showed that followers' and leaders' assessments of the elements of authentic leadership differed significantly. Furthermore, a somewhat positive association between genuine leadership and workers' job happiness was discovered. Leaders in Joint Commission International-accredited hospitals were thought to be more approachable by their staff.

In a study conducted by Supriadi et al (2020) in Indonesia, healthcare professionals' job happiness and performance were examined separately, but seldom are these two aspects examined in tandem, especially when it comes to nurses working in private hospitals. The purpose of this study was to investigate the characteristics that affect the performance and job satisfaction of nurses in Samarinda's private hospitals, as well as to assess the direct and indirect effects of these variables. With a total sample size of 515 nurses, the explanatory research was centered on nurses from Samarinda's Dirgahayu Hospital and Amarinda Medika Citra Hospital. For data analysis, structural equation modeling, or SEM, was employed. The study discovered that several factors, such as work attributes, transformational leadership, organizational commitment, and compassion, directly affect nurses' job happiness and performance. To be more precise, job characteristics influence altruism, performance, organizational commitment, and job satisfaction; transformational leadership influences altruism, performance, and organizational commitment; and organizational commitment and altruism both influence performance and job satisfaction. Furthermore, performance is directly influenced by job happiness. The study also found factors that have an indirect impact on performance and work satisfaction. Altruism and performance through organizational commitment influence job characteristics; transformational leadership influences job characteristics through altruism and performance through organizational commitment; organizational commitment influences performance through job satisfaction;

and altruism influences performance through job satisfaction. Improving direct and indirect factors is crucial to improving the job happiness and performance of nurses.

A cross-sectional study was conducted by Singh et al (2019) in India, to determine the main factors impacting the job satisfaction of the different healthcare providers employed by the Punjab government health services and to evaluate their level of job satisfaction. 462 individuals in the study were chosen by multi-stage random sampling and conducted phone interviews. The Job Satisfaction Scale (JSS) items and sociodemographic information were included in the survey instrument. 75.3% of respondents expressed discontent with their working conditions, which was followed by complaints about contingent rewards (23.7%), promotion chances (25.4%), and fringe benefits (34%). On the other hand, the respondents were very satisfied with their supervisory (91.2%), communication (80.6%), nature of the job (93.3%), and relationships with coworkers (97%). There was a range of ambivalence found, from 2.8% in relationships with coworkers to 54.8% in contingent rewards.

2.4.3 Job Performance

Job performance is more than just crossing off items on a to-do list. It is a comprehensive assessment of how well a person performs their duties. At its foundation, it entails executing assigned tasks correctly and on time, but it also includes how an individual contributes to the larger picture. This involves applying their knowledge and abilities to solve challenges, collaborating with coworkers, and maintaining a positive work ethic. Finally, great job performance involves continuously achieving or surpassing expectations in these several areas, contributing significantly to the organization's success (Dingel & Maffett, 2023; Ochoa Pacheco et al., 2023). Job performance is one component of performance at work and refers to the behaviors and actions that have a direct connection to an employee's job requirements and tasks (Zawawi & Nasuridin, 2017).

A quantitative, cross-sectional study conducted by Hamed (2023) in Palestine investigated the relationship between hospital accreditation, work satisfaction, and performance among nurses (n=217). This methodology entailed collecting data at a particular moment in time using self-administered questionnaires delivered to nurses in two private

Palestinian hospitals, one accredited and one not. The researchers analyzed the data with SPSS version 28, comparing nurses' job satisfaction and performance based on the hospital's accreditation level. While nurses in both hospitals expressed moderate satisfaction on average, the recognized facility received somewhat better ratings. Interestingly, there was no discernible difference in overall work performance between the two groups. The study did reveal that a nurse's experience and education were associated with improved performance in certified institutions.

A study conducted by Sastrawan et al (2022) in Indonesia, sought to investigate the relationship between workload, burnout, and employee performance, with job satisfaction acting as a mediating element. Using a simple random sampling technique combined with probability sampling, the study chose 122 participants from the sample out of a total population of 174. The results showed that, although the effect is not great, workload hurts job satisfaction. On the other hand, workload significantly improves worker performance. Job satisfaction was shown to be positively correlated with burnout, however, this correlation was also not significant. On the other hand, performance is severely and badly impacted by burnout. Finally, there is a slight but negative correlation between job happiness and nurses' performance.

In a study conducted by Kusumawardhani, Supriyanto, and Indonesia (2021) in Indonesia. The purpose of the study was to evaluate how the performance and personal traits of medical staff members affected their comprehension of accreditation at Karanganyar District Hospital. One hundred medical personnel at the hospital were the target population for the cross-sectional survey used in this study. The selection of individuals was done using simple random sampling. To test the theories, multiple regression analysis was employed. The results demonstrated that medical staff members' performance and attributes have a substantial impact on their comprehension of hospital accreditation, with an F-value over the crucial threshold ($7.194 > 2.20$) and a significance level. Particularly, with a significance level of 0.000 and a t-value higher than the threshold value ($4.232 > 1.67$), medical staff performance significantly improved accreditation knowledge. Gender and tenure were shown to be the most important individual variables in influencing accreditation understanding. The significance levels were below 0.05 (0.000 and 0.046, respectively), while the t-values were

bigger than the critical values ($3.154 > 1.67$ for gender and $-2.020 > 1.67$ for tenure). However, with significance values over 0.05 (0.415 and 0.445, respectively), age and education level had no discernible effect on accreditation understanding.

In a study conducted by Ramos-Villagrasa et al (2019) in the Netherlands, the usefulness of the Individual Work Performance Questionnaire (IWPQ), an 18-item self-report measure intended to assess important aspects of job performance across a range of job types, is investigated in this study. These components include task performance, contextual performance, and counterproductive behaviors. A total of 368 workers took part by finishing the NEO-FFI, additional performance scales, and the IWPQ. Descriptive statistics, correlation analyses, and exploratory structural equation modeling were all used in the analysis. The results suggest that the IWPQ has a three-dimensional structure with consistent reliability, relevant correlations with other performance measures, and a relationship with personality traits that is similar to previous work performance assessments in terms of both direction and strength.

A Jordanian research conducted by Saif (2015) looked at how hospital certification affected performance in private facilities. Between 2010 and 2011, doctors and nurses were questioned to learn about their perspectives. The study discovered that Jordanian hospitals adopted accrediting requirements and that implementing these criteria was connected to increased hospital performance. While job performance was not explicitly examined, the emphasis on patient outcomes and efficiency shows a possible relationship between accreditation and how effectively medical professionals do their duties. However, the study is based on staff views and does not explicitly assess performance changes. This study reveals a potential favorable association between accreditation and job performance, emphasizing the need for more research to thoroughly investigate this connection.

2.4.4 Burnout

A quantitative, observational, and longitudinal study was conducted by Kalantar et al (2023) in Iran. This study looked at employee anxiety and perceived stress levels in private hospitals in Ahvaz City, Iran, both before and after an accreditation procedure was put in

place. 456 workers from Ahvaz's private hospitals participated in the study; they were chosen via convenience sampling. Participants were given the State-Trait Anxiety Inventory (STAI) and the Perceived Stress Scale-14 (PSS-14) one month before and one month following the introduction of the accrediting program to measure their levels of anxiety and stress. Furthermore, state-trait anxiety was substantially correlated with gender, work experience, and organizational position ($P < 0.05$), whereas perceived stress was significantly correlated with employees' age, gender, and work experience.

Burnout is a phenomenon defined by feelings of emotional exhaustion, depersonalization (Maslach & Jackson, 1981), and a reduced sense of personal accomplishment (Wang et al., 2020). Burnout may have serious consequences, affecting not just an individual's well-being but also the organization's overall effectiveness. Burnout may reduce productivity, increase absenteeism and turnover, and have a detrimental impact on both physical and mental health. Therefore, it is critical to understand the causes of burnout and how to prevent it (Koutsimani et al., 2021). Healthcare accreditation may be attractive to managers and stakeholders, but some argue that it is a demanding activity that raises strain and stress levels among staff members (Amna et al., 2020).

A quantitative, observational, and longitudinal study was conducted by Rhoden et al (2022) in Brazil, to investigate and contrast nurses' stress and resilience levels before and following their hospital's accreditation certification evaluation. 53 nurses from a charitable hospital in Rio Grande do Sul participated in this study, which used a quantitative, observational, and longitudinal methodology. Data were gathered in two stages: in March 2019, before the assessment visit, and in July 2019, sixty days later. Data were gathered using the Bianchi Stress Scale and the Resilience Scale. Both analytical and descriptive statistical techniques were used. The majority of individuals showed typical levels of stress both before and following the evaluation. Domain E, which deals with the coordination of unit activities, and Domain C, which deals with personnel administration duties, were linked to the highest stress levels. Participants' levels of resilience were typically medium to high during both of the studies.

In a study conducted by Glisch et al (2021), a survey focusing on job satisfaction causes contributing to burnout, its impacts, and preventive strategies was undertaken among academic hospitalists at the Medical College of Wisconsin to gauge their perspectives on burnout. There was also a space on the survey for respondents' extra remarks. 43 (83%) of the 52 university hospitalists that were surveyed took part. Sixty-two percent of the responders said they had burned out. The percentages of burnout did not differ much based on gender (58% for men vs. 73% for women), duration of hospitalist employment ($P = 0.28$), or general job satisfaction. The two most commonly cited factors contributing to burnout were an excessive workload (83%) and a high patient census (94%). Mental tiredness (93%) and decreased excitement (95%) were the main effects of burnout. Furthermore, 81% of respondents said that their capacity to instruct medical students was impacted by their heavy clinical workload. The two most frequently recommended changes to reduce burnout were creating a culture of respect, caring, and compassion (88%), and improving work organization (88%).

In a study conducted by Al Sabei et al (2019) in Oman, to determine the variables that influence nurses' intentions to leave their jobs, burnout, and the perceived quality of care they receive in Oman; (b) to investigate if job satisfaction influences the association between nurses' intentions to leave their jobs and the work environment. The cross-sectional design was used in the study. The results showed that staffing levels, a solid foundation for high-quality treatment, and involvement in hospital affairs were all highly significant predictors of burnout and perceived care quality. A favorable work environment was associated with fewer plans to leave, according to logistic regression analysis, although this relationship was only significant when job satisfaction was high.

Alshamsi et al. (2019) conducted a longitudinal study with a sample of 121 healthcare professionals (HCPs) working in the United Arab Emirates public hospitals, investigating the relationship between hospital accreditation and burnout among healthcare personnel. Their findings point to a possible detrimental impact, with increasing accreditation obligations leading to more exhaustion. However, the study adds an intriguing twist: the psychosocial safety environment (PSC). Consider PSC to be a friendly work environment that values trust, open communication, and well-being. The study implies that a strong PSC can operate as a

buffer, mitigating the harmful impact of accreditation obligations on burnout. In layman's terms, a supportive work environment can assist HCWs in dealing with the demands of accreditation and potentially prevent burnout. While the study does not define exactly how PSC helps, it emphasizes its potential value and the need for future research (Alshamsi et al., 2022).

A cross-sectional correlation study design was conducted by Mun et al (2018) in Korea, to investigate the effects of nurses' knowledge of healthcare accreditation on their desire to quit and their level of job stress. 143 nurses from two tertiary hospitals in Seoul and Gyeonggido, South Korea, participated in the study. The findings demonstrated a substantial negative association between job stress turnover intention, and awareness of healthcare accreditation. With this knowledge explaining 38% of the variance, it was determined to be the primary factor influencing job stress. Duty patterns and knowledge of healthcare accreditation were both strong predictors of intention to leave the field, accounting for 32% of the variation.

In a study conducted by Choi, Kim, and Hee (2017) in Korea, Long-term care facilities are now required by law to be accredited, which has an impact on things like nurse burnout resilience and job stress. Investigating the connections between these variables in long-term care facilities was the goal of this study. 88 nurses from J province's long-term care facilities who had recently obtained accreditation participated in the study. The findings showed a substantial positive correlation with burnout resilience and a significant negative correlation with job stress related to acknowledgment of healthcare accreditation. Furthermore, among nurses, there was a noteworthy inverse relationship between burnout resilience and occupational stress.

2.4.5 Organizational Performance

Organizational performance refers to how well an organization achieves its goals and objectives. It includes various aspects of an organization's functioning and health, such as financial performance, operational efficiency, and employee and patient satisfaction (Prodromou & Papageorgiou, 2022). The effect of hospital accreditation on organizational

performance has been extensively researched. According to studies, hospital accreditation can improve organizational performance by increasing patient safety, healthcare quality, and clinical outcomes. Accreditation enhances management quality, staff engagement, and overall organizational procedures, contributing to improved performance within healthcare organizations (Avia & Hariyati, 2019; Mohammed Hussein et al., 2021).

A cross-sectional survey design was conducted by Kwan, Seo, and Lee (2021) in South Korea. The purpose of this study was to assess the following: 1) how general hospital nurses perceived various components of patient safety culture; and 2) how hospital accreditation experience affected nurses' overall perceptions of safety in Korean general hospitals. A convenience sample of six general hospitals' worth of 310 nurses. According to the findings, supervisor/manager expectations for increasing patient safety (69.4%) and the frequency of reported events (90.6%) received the most positive comments. On the other hand, organizational learning/continuous improvement (35.5%) and non-punitive responses to errors (22.9%) had the lowest results. Regression analysis showed that overall perceptions of safety were mostly unaffected by hospital accreditation experience.

Asiri et al. (2020) conducted a systematic review with meta-analysis to investigate the positive associations between accreditation and various performance factors. Hospitals that fulfill accreditation criteria frequently see improvements in safety culture, leading to better patient safety measures. Accreditation can help identify areas for optimizing procedures and resource management, resulting in increased efficiency. Some studies reveal a correlation between accreditation and shorter patient stays, indicating better care delivery. However, the same review found no significant relationship between accreditation and staff or patient satisfaction, and the impact on readmission rates and other clinical outcomes like mortality and infection rates is uncertain. Overall, accreditation can lead to positive organizational outcomes, but the picture is complex and multifaceted.

Savitsky et al., (2021) conducted a comprehensive review and meta-analysis to examine the correlation between nurses' burnout, patient outcomes, and organizational results. The research was undertaken from October 2018 to January 2019, with updates in January and October 2020. The researchers reviewed 20 studies and searched PubMed,

CINAHL, PsychInfo, Scopus, and Embase. They discovered a significant negative correlation between nurse burnout and patient satisfaction, quality of care, nurses' satisfaction, and productivity. Nurses' emotional weariness had an inverse effect on job productivity and performance. Personal success, on the other hand, enhances feelings of accomplishment. Furthermore, they experienced less emotional distress.

Alhawajreh et al (2023) conducted a systematic review that found no clear evidence that accreditation leads to better patient outcomes. Instead, they focused on how hospitals can effectively adopt accreditation using the Normalization Process Theory (NPT). They discovered that strong leadership, staff participation, and a continuous improvement attitude are necessary for accreditation to positively affect quality. However, they noted areas for improvement, such as addressing healthcare professionals' daily tasks, effectively engaging personnel, and providing clear communication about accreditation goals and benefits. Despite the ambiguous cause-and-effect link, accreditation may still be an effective tool for hospitals to improve their performance, particularly in quality treatment.

Avia and Hariyati (2019) reviewed publications published in English and Indonesian from 2008-2018 to examine how hospital accreditation affects care quality. After reviewing 11 publications, they found that hospital accreditation leads to better patient outcomes, management quality, and organizational performance. Job experience was also found to impact the level of care delivered favorably.

Despotou et al (2020) conducted a pilot study to assess nurses' perceptions of JCI accreditation's impact on patient safety in South Korean tertiary care. They employed a cross-sectional survey to collect data from registered nurses working in JCI-accredited Egyptian tertiary care facilities. The study found that nurses view JCI accreditation positively in terms of patient safety and its influence on their workplace. However, the research revealed areas for improvement, including communication.

Savitsky et al (2021) utilized a 28-item questionnaire to examine nurses' working conditions during Covid-19. During the pandemic, nurses working in the community reported better job satisfaction compared to those in hospitals. Working with Covid-19 patients and a lack of personal protective equipment (PPE) led to decreased satisfaction.

There was no link observed between low occupational satisfaction and higher workload due to personnel scarcity. During pandemics, nurses prioritize occupational values such as achievements, variety, job interest, personal growth, professional challenge, and freedom in practice.

Jun et al. (2021) conducted a comprehensive review and meta-analysis to examine the correlation between nurses' burnout, patient outcomes, and organizational results. They discovered a significant negative correlation between nurse burnout and patient satisfaction, quality of care, nurses' satisfaction, and productivity. Nurses' emotional exhaustion had an inverse effect on job productivity and performance. Personal success enhances feelings of accomplishment and reduces emotional distress.

In a study conducted by Al-Sayedahmed et al (2021) in Saudi Arabia, by analyzing adherence to the Joint Commission International's (JCI) International Patient Safety Goals (IPSGs) over four years and its link with patient safety and satisfaction, the study sought to determine the impact of the certification process on healthcare quality. The six JCI IPSGs are used by Johns Hopkins Aramco Healthcare as key performance indicators for a range of services. The study looked at performance trends and how they related to patient experience by analyzing data from January 2017 to the end of 2020. The outcomes showed that every IPSG's performance continuously stayed above the goal range, which was 96% to 100%.

A systematic literature review conducted by Hussein et al (2021) investigated the influence of hospital accreditation on healthcare quality through an extensive review of over 17,000 studies, narrowing down to 76 that met their criteria. The findings suggest that accreditation positively impacts healthcare quality. Accredited hospitals showed improvements in safety culture, adherence to established processes, and efficiency. This study reveals that accreditation offers certain benefits for healthcare quality.

A study conducted by Despotou et al (2020) in South Korea, to investigate how nurses view Joint Commission International (JCI) accreditation, how much they believe it affects patient safety, and how much the International Patient Safety Goals (IPSG) are used in South Korean tertiary care settings. Semi-structured Skype interviews (N = 5) and an online questionnaire (N = 76) were used in a cross-sectional observational study. To guarantee that

a range of experience levels was represented, the study focused on nurses working in South Korean tertiary institutions. Potential correlations were found and responses were interpreted using descriptive statistics and Spearman's rank correlation analysis. The survey discovered that nurses had an overall favorable opinion of JCI accreditation. Experience level and attitude toward certification were shown to be significantly correlated, as was the perceived beneficial impact on safety. All participants concurred that the IPSG had been put into practice. In South Korean tertiary care, JCI accreditation is seen favorably, and nurses have expressed satisfaction with the procedure. Even with the implementation of the IPSG, there is always room for improvement.

A comparative design study was conducted by Tahoun, Safan, and Ahmed (2021) in Egypt, the purpose of the study was to assess how nurses in accredited and non-accredited hospitals carry out global patient safety goals. For this study, a comparative research design was adopted. It was held in Elaraby International Hospital, an accredited hospital, and the general intensive care unit (ICU) at Benha University Hospital, a non-accredited facility. All 112 staff nurses who were employed in these environments were included in the sample; 60 of them were employed by Benha University Hospital and 52 by Elaraby International Hospital. Three instruments were used in the data collection process: an observational checklist for the application of these goals, an international patient safety goals questionnaire, and a questionnaire on personal and professional qualities. According to the findings, 94.3% of the nurses at the recognized hospital applied the safety goals with competence, and 97.8% of them had good knowledge. On the other hand, only 30.1% of the nurses at the non-accredited hospital had a good understanding, and 76.1% of them applied the safety goals incompetently.

In study conducted by Brooks et al (2021) in the USA, higher education institutions and experts in the sector are very interested in the relationship between organizational accreditation in healthcare and the professional certification of leaders in healthcare management. While professional certification attests to an individual's knowledge, skills, and talents, academic program accreditation indicates the caliber of instruction. It is expected that graduates of authorized institutions who also hold professional certifications will benefit their organizations more as leaders than graduates of non-accredited programs who do not hold

professional certifications. The consequences of employing graduates from postsecondary education programs approved by the Commission on Accreditation of Healthcare Management Education (CAHME) were examined in the analysis carried out by the authors. As an independent variable, it also looked at the effect of graduates' membership in the American College of Healthcare Executives (ACHE). The purpose of the study was to determine the perceived value of degrees certified by CAHME and membership in ACHE by evaluating performance measures in healthcare organizations, such as cost, quality, and access. The findings showed that neither ACHE membership nor CAHME accreditation significantly affected the performance outcomes of healthcare organizations. These results emphasize the necessity for more investigation into the features of graduate programs in healthcare administration and the impact of connections with leader development as viewed by industry stakeholders.

A descriptive, cross-sectional, research design was conducted by Shahin, Alshammari, and Alabed (2021) in Saudi Arabia, The study's objective was to assess the critical care nurses at Saudi Arabia's Qassim National Hospital's understanding and compliance with the international patient safety objectives (IPSGs). A self-administered questionnaire was given to each of the hospital's 147 available critical care nurses as part of a descriptive, cross-sectional research design to gather data. The findings showed that nurses understood IPSGs well, suggesting a generally good comprehension. The IPSG3 had the highest mean score out of the six IPSGs, indicating a greater understanding of how to properly manage high-alert drugs. With a mean score of 4.64, compliance with IPSGs was quite high overall; hand hygiene practices scored the highest of all IPSGs.

In a study conducted by Saaid, Abdalla, and Abo Elmagd (2020) in Egypt, the purpose of this study was to assess how a training program centered on global patient safety objectives affected the safety culture at Rajhy Liver Hospital, Assiut University. The research used a quasi-experimental design with $n = 29$ head nurses from different hospital units. Three instruments were used to collect data: a survey on patient safety culture conducted by the hospital, a questionnaire on head nurses' management of patient safety, and a personal data questionnaire. The findings demonstrated a highly statistically significant difference and a strong positive link between the patient safety culture as a whole and the head nurses'

management of international patient safety goals through the use of the PDCA (Plan-Do-Check-Act) model.

2.5 Remarks on Previous Studies

The present investigation departs from earlier studies carried out in Palestine, namely those that address topics like the culture of patient safety, job satisfaction in the healthcare industry, and the influence of certification on healthcare results.

1. **Focus on Work Satisfaction and Performance:** Our study primarily examines the effects of Joint Commission International (JCI) accreditation on job satisfaction, performance, and burnout among healthcare professionals. While several studies, including those by Hamed (2023) and Hussein et al. (2021), evaluate work satisfaction and performance about accreditation, ours focuses on these issues in particular. In contrast to Hamed's study, which just evaluates satisfaction levels, our research places a detailed emphasis on the interaction between these variables and organizational performance.
2. **Comprehensive Assessment of Accreditation Impact:** Without going into great detail, many of the studies that have already been conducted in Palestine focus mainly on how patients perceive patient safety cultures or hospitals' general performance (Zabin et al., 2024) rather than the special effects of JCI accreditation on organizational dynamics and employee well-being.
3. **Longitudinal Perspective:** The majority of earlier research used cross-sectional methods, which limited our knowledge of how accreditation affects outcomes over the long run. Zabin, Abu Zaitoun, and Abdullah (2022), for instance, present a moment in time of nurses' perceptions; in contrast, our study attempts to use a longitudinal approach to monitor changes in job satisfaction, performance, and burnout over time, thereby offering deeper insights into the long-term effects of accreditation. Our study closes this gap by examining the more comprehensive effects of accreditation on work satisfaction, employee burnout, and overall organizational performance. In summary, this study seeks to contribute to the existing body of knowledge by focusing on the multidimensional impact of JCI accreditation in the

Palestinian healthcare context, using a longitudinal design to provide insights that previous studies have not fully explored.

2.6 Conceptual model

The conceptual model shows how the healthcare professionals at Al-Istishari Arab Hospital relate to JCI accreditation, job satisfaction, job performance, burnout, and organizational performance.

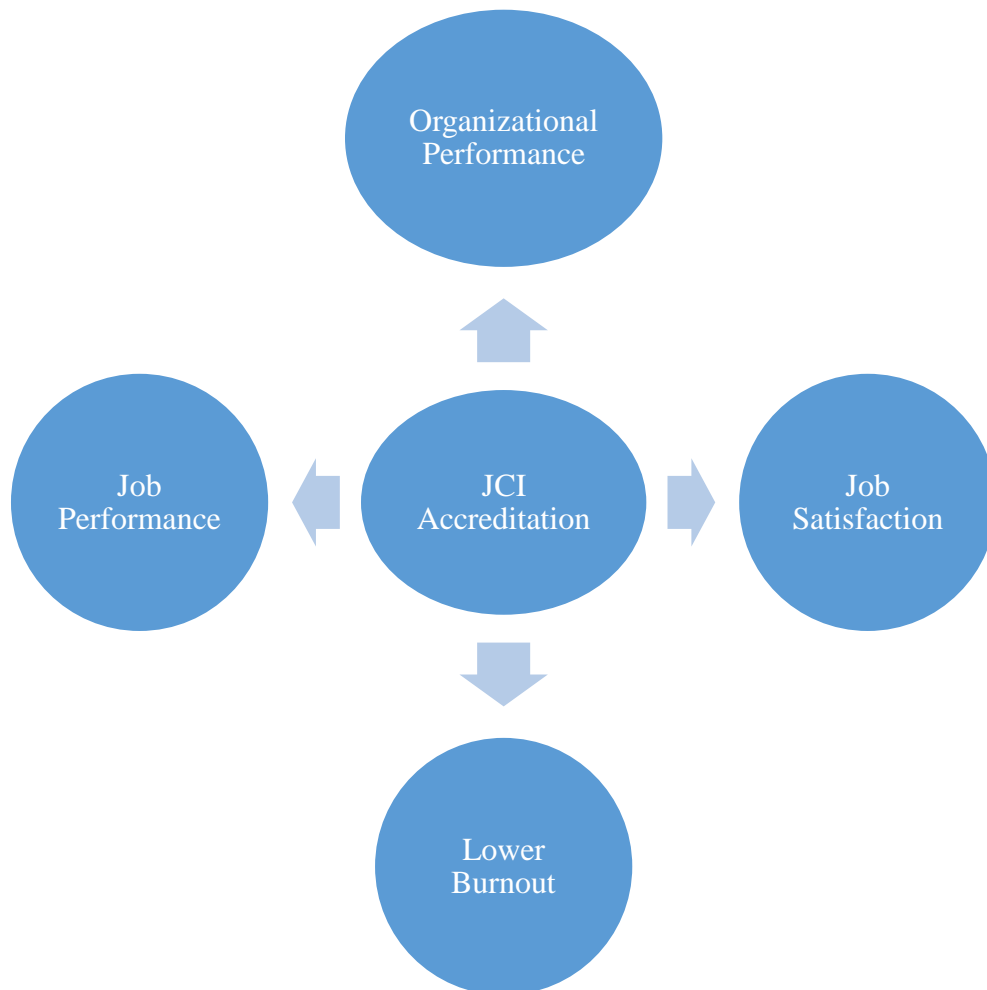
2.6.1 Components of the Model:

1. JCI Accreditation: The independent variable that affects work satisfaction and organizational success.
2. Job satisfaction: Indicates how people feel about their jobs and how it affects how well they perform.
3. Job Performance: Shows how well-suited and productive healthcare personnel are for their positions.
4. Burnout: The degree of physical, mental, and emotional tiredness brought on by ongoing stress and workload.
5. Overall hospital performance metrics that are impacted by the preceding components are included in the organizational performance category.

2.6.2 Hypothesis to be Tested

1. JCI accreditation has a positive impact on employ satisfaction among HCP in IAH
2. JCI accreditation has a positive impact on job satisfaction among HCP in IAH
3. JCI accreditation has a positive impact on burnout among HCP in IAH
4. JCI accreditation has a positive impact on organizational performance among HCP in IAH

2.7 Conceptual Framework



Chapter Three: Methodology

3.1 Introduction

To answer our research questions, we need to choose an appropriate research design that contributes to the following process of data collection and analysis, to check if what we claimed is right or wrong. The following parts clarify the design that used and all other methodology-related questions. It covers the following sections: study design, study setting, study duration, study population, sampling, and sample size, inclusion and exclusion criteria, study instruments, validity of questionnaire, reliability of questionnaire, pilot study, data collection, ethical considerations, and data analysis.

3.2 Study Design

A quantitative, cross-sectional, descriptive study design was conducted to describe the effect of hospital accreditation on job satisfaction, job performance, burnout, and organizational performance: a case study of Al-Istishari Arab Hospital (IAH), Palestine. The researcher chose a private hospital in the Middle of the West Bank as a research setting that has JCI accreditation.

3.3 Study Setting

The study was conducted at the IAH, Palestine in the Middle of the West Bank. IAH is a private hospital located in Ramallah, West Bank, Palestine. Established in 2016, and it's part of the Arab Hospital Group in Palestine, it is one of the largest and most reputable hospitals in the region. The hospital offers a range of medical specialties and services, also there is an I.V.F center, and now 2024 they are publishing an oncology center to help patients get their treatment in Palestine. It also has a 24/7 emergency department and provides ambulance services. IAH is known for its high-quality medical care and state-of-the-art facilities, attracting patients from across the Middle East. IAH was established to provide advanced medical care in the region.

The hospital boasts a capacity of 330 beds and performed over 5,000 surgeries in 2023. 490 staff (Medical and non-medical). Achieving JCI accreditation was critical for the hospital as it underscores its commitment to international standards of quality and patient

safety, enhancing its reputation and operational efficiency, in 2020, IAH was able to successfully obtain the International Quality Certificate (JCIA). This was achieved with hard work and tremendous efforts from every employee in different departments. The organizational goal of IAH is to deliver exceptional healthcare services, ensuring patient satisfaction, safety, and continuous improvement in medical practices and facilities.

3.4 Study Duration

The study was conducted from April- 2024 to August- 2024. The initial phase included preparation and planning, which took place from [April to the end of May -2024. Data collection occurred during August 2024. Followed by data analysis during August-2024. The study was concluded with the final reporting and review completed by August 2024.

3.5 Study Population

The study population is a collection of subjects or departments with certain traits that meet the inclusion requirements, and from whom data can be collected. (Polit& Beck 2014). The study population was IAH employees. The hospital has 490 employees working in both medical and non-medical departments. They are distributed across inpatient wards, outpatient wards, supporting medical departments, and other administrative sections, in addition to executive and operational management.

The accessible populations are health care providers who were on duty work at the hospital while collecting data through August -2024. The total number of employees who met the inclusion criteria was 154 employees.

3.6 Sample and Sampling

A sample was taken from IAH who met the inclusion criteria. Random sample methods were used to select data. Random sampling was used, which is a type of probability sampling method that is also used in quantitative approaches. This approach adheres to the quantitative research methodology by ensuring that every member of the population has an equal chance of being included in the study. The total number of participants who met the inclusion criteria was (154). A convincing sample was composed of (110) participants

according to the sample size calculator. The researcher directly collected data. The interviews began by providing the participants with detailed instructions and explanations about the study, its aims, and the importance of giving accurate responses. All ethical considerations were carefully observed to ensure the comfort of the participants and to avoid any potential discomfort during the interviews.

3.7 Inclusion Criteria

The following are the criteria used for including the participants in the sample:

- ✓ Both male and female employee
- ✓ The Doctor and Nurse
- ✓ All medical department
- ✓ All job title
- ✓ An employee at the hospital since 2019, before the JCI accreditation was obtained

3.8 Exclusion Criteria

The following are the criteria used for excluding the participants in the sample:

- ✓ Any employee hiring after JCI accreditation was obtained.
- ✓ Non-medical employee
- ✓ An allied medical department (Laboratory, Radiology, Pharmacy, Biomedical Engineering, Nutrition, Physiotherapy, Social support)
- ✓ Age below 27 years.
- ✓ Less than five years' experience.

3.9 Sample Size

The sample size for the study is computed from the Steven Thompson equation given below:

$$n = \frac{N * p * (1 - p)}{[(N - 1) * \frac{d^2}{Z^2} + p * (1 - p)]}$$

Where, n = the sample size, N =population size ($N=154$), P =proportion of property offers and neutral ($P=0.5$), d =error margin ($d=10\%$) and z = is the upper $\alpha/2$ of the normal distribution (for 90% confidence level, $z=1.65$). Substituting the aforementioned parameter values in the above equation, the sample size equals $n=110$.

A total of 110 questionnaires were distributed to participants. Of these, nine were returned unfilled, 10 were incomplete, and four participants refused to participate in the study. As a result, the final number of participants during the data collection period was 87, yielding a response rate of 79%.

3.10 Study Instrument

The data collection tool was self-developed, and then specialists and a jury group (Three) of faculty staff with Ph.D. degrees in quality specialties including the supervisor of this thesis evaluated it. All their comments were taken into consideration and adjusted accordingly.

The questionnaire contained five parts. Where section one was the socio-demographic data including five variables (gender, age, educational level, job title, experience years, and employment contract) all of these variables are open-ended questions. Section two was the job satisfaction factor with three dimensions (Work Environment, Professional Development and Training, and Job Security) according to (Bord et al., 2021; Tarieh et al., 2022; Barili et al., 2022) with a total of 9 questions. Section Three was about Job performance factors with five dimensions (Efficiency and Effectiveness in Providing Care, Time Management and Workload, Cooperation and Communication, Resource and Tool Utilization, Commitment, and Discipline) according to (Dingel & Maffett, 2023; Ochoa Pacheco et al., 2023) with a total of 8 questions. Section Four was about burnout with four dimensions (Emotional Exhaustion, Work Pressure, Physical and Cognitive Symptoms, and Work Behaviors) according to (Kalantar et al., 2023) with a total of 8 questions. Section Five was an organizational performance evaluation based on the International Patient Safety Goals (IPSG) according to (Prodromou & Papageorgiou, 2022) with a total of 6 questions. Sections two to five use the Likert scale, which scores (Strongly Agree, Agree, Neutral, Disagree, and Strongly Disagree).

For a better understanding of all four factors of the study the mean was calculated for each domain, and criteria for assessing the level was taken into consideration based on the mean percent to low (<33%), moderate (34%-66%), or high (67%-100%).

3.11 Study Validity and Reliability

The study tools were evaluated by specialists and a jury group (Three) of faculty staff with Ph.D. degrees in Quality specialties including the supervisor of this thesis (Ali Ardah - Certified Professional in Healthcare Quality (CPHQ) from (NAHQ), Quality Officer at Istshari Arab Hospital; Mohammed Hamed -Certified Professional in Healthcare Quality (CPHQ) from (NAHQ), Master in Healthcare Policies and Management (Quality and Patient Safety), Quality Director at Ibn Sina Hospita).

All their comments were taken into consideration and adjusted accordingly. A statistician evaluated the questionnaire to measure reliability (calculating Cronbach's Alpha coefficient). It was validated for including quality departments who worked in hospitals, and experts.

The researcher had feedback on the questionnaire and verified the validity and reliability of the questionnaire; identified areas of vagueness; determined the real time needed to fill the questionnaire; pointed out weaknesses in wording; and got a clear opinion about the questionnaire. The researcher considered that it was a clear questionnaire, without comments regarding information from a Jury group of different specialties who evaluated the questionnaire content. Reliability and internal consistency of the used tool showed very good reliability with a Cronbach alpha of (0.71) in all variables of the used tool.

3.12 Pilot Study

The researcher conducted a pilot study with 15 participants to evaluate the survey's validity and reliability, identify any ambiguities, estimate the time required to complete the survey, predict the response rate, and refine the wording based on the feedback received. The participants considered the questionnaire clear and did not provide additional comments. Due to the limited population size and the need for comprehensive data, these participants were

also included in the actual study. However, their prior exposure to the survey was taken into account when analyzing the results.

3.13 Data Collection

Data collection begins immediately after obtaining the approval to conduct the study from the Arab American University-Palestine Institutional Review Board (IRB), and IAH hospital administrations. Participants were asked to fill out the self-reported questionnaire. The researcher began data collecting by introducing herself to the individuals and creating confidence with them. Participants were then given detailed instructions and explanations about the research, its objectives, and the need to deliver actual responses. Creating a separate space for data collecting offered an acceptable setting. The information collection was done at an appropriate time and adhered to all ethical principles. The researcher helped the participants by explaining and answering their questions if needed. Data collection took place in August- 2024.

3.14 Ethical Considerations

Ethical approval was obtained from Arab American University (AAUP), IRB, and registered under the number (R-2024/A/71/N) as indicated in Appendix Two, and permission for conducting the study in hospitals was taken from their administrative department. All data was kept confidential and only for research purposes, no participant names were mentioned or used, and no other information was used in any context other than this research.

3.15 Analysis Plan

A software program was used in analyzing the data, SPSS v27, and different tests were run to test the significance changes in each independent variable on the dependent variable, including measures of central tendency and inferential statistics, testing questions via T-test, ANOVA was used in the analysis of the gathered data. The correlation test was used to test the significance between categorical variables, and the ANOVA test was employed in testing the significance between the groups of different level measurements and other variables.

Chapter Four: Results

4.1 Introduction

This chapter presents the findings of the study that focused on IAH examining how the hospital's accreditation process influences key aspects of its workforce and organizational outcomes. Data were collected from a total of 86 participants using a structured questionnaire, with the instrument's reliability confirmed by a Cronbach's alpha coefficient of 0.711 in all 38 different variables of the study as shown in (Table 4.2) below, indicating acceptable internal consistency

Table 4.2: Reliability Statistics

Reliability Statistics	
Cronbach's Alpha	N of Items
0.711	38

The results chapter systematically addresses the research questions, beginning with a descriptive analysis of the demographic data of the participants. This will be followed by an in-depth exploration of the relationships between hospital accreditation and each of the variables under study: job satisfaction, job performance, burnout, and organizational performance. Each section presents the findings about the corresponding research question, providing a comprehensive understanding of the impact of hospital accreditation at IAH.

4.2 Demographics Distribution

Table (4.3) shows the distribution demographics of the taken sample which shows that the majority of the participants are male, accounting for 70.9% of the sample, with females making up 29.1%. The age distribution shows that nearly half of the respondents (47.7%) are between 30-32 years old, while 29.1% are aged 33-35 years, and 15.1% are aged 27-29 years.

A smaller proportion (8.1%) are older than 35 years. In terms of educational qualifications, more than half of the participants hold a bachelor's degree (51.2%), while a significant portion are specialists (32.6%), and 14.0% have a master's degree. No participants have a diploma or Ph.D., indicating a highly educated workforce. The job titles reveal that

the largest group consists of registered nurses (41.9%), followed by specialists (20.9%). Consultants make up 11.6% of the sample, while resident doctors and those under specialization programs each account for 9.3%. Interestingly, the entire sample has between 6 to 9 years of experience in their current positions. Regarding employment contracts, most participants (69.8%) are on regular contracts, with 20.9% on service contracts and 9.3% on part-time contracts.

Table 4.3: Demographics distribution of the taken sample

Variable	Levels	Frequency	Percent%
Gender	Male	61	70.9%
	Female	25	29.1%
Age	27-29 years	13	15.1%
	30-32 years	41	47.7%
	33-35 years	25	29.1%
	More than 35 years	7	8.1%
Educational Level	Diploma	0	0.0%
	Bachelor	44	51.2%
	High Diploma	2	2.3%
	Master	12	14.0%
	Ph.D	0	0.0%
	Specialist	28	32.6%
Job Title	Aid Nurse	5	5.8%
	Registered Nurse	36	41.9%
	Head of Nurse Dep	1	1.2%
	Supervisor	0	0.0%
	Resident Doctor	8	9.3%
	Specialist	18	20.9%
	Resident doctor under specialization	8	9.3%
	Consultant	10	11.6%
Years of Experience	From 6 to 9 Years	86	100.0%

Employment Contract	Regular Contract	60	69.8%
	Part-time Contract	8	9.3%
	Service Contract	18	20.9%

As for the different fields of the study answers distribution (Table 4.4) shows answers to the first filed “Job Satisfaction” a five-point Likert scale which shows that the main findings are as follows:

Work Environment: A majority (86%) of the participants believe that JCI accreditation has improved the work environment at the hospital, with 46.5% rating the improvement at level 4 and 39.5% at level 3.

Work-Life Balance: 44.2% of respondents feel that JCI accreditation has moderately improved their work-life balance (level 3), while 23.3% rated it at level 4, showing that nearly two-thirds acknowledge a positive impact.

Working Hours and Flexibility: About 34.9% rated the improvement in working hours and flexibility at level 4, and 26.7% at level 3, indicating a general agreement that JCI accreditation has positively influenced these aspects.

Communication and Teamwork: JCI accreditation is perceived to have enhanced communication and teamwork within departments, with 44.2% rating this improvement at level 4 and 16.3% at level 5.

Autonomy in Decision-Making: Almost half of the participants (48.8%) feel that their autonomy in decision-making has improved significantly, rating it at level 4.

Career Advancement and Growth: Opportunities for career advancement and growth were seen as positively impacted, with 29.1% rating it at level 4 and 22.1% at level 5.

Generating New Ideas: 45.3% of respondents feel that their ability to generate new ideas has been moderately enhanced (level 3), indicating a positive, though varied, impact.

Job Security: Over half of the participants (52.3%) perceive an enhanced sense of job security as a result of the accreditation, indicating a strong sense of stability.

Fairness and Competitiveness of Salary: While 52.3% perceive some improvement in the fairness and competitiveness of their salary (level 3), the overall response is somewhat mixed, with a significant portion still rating it lower.

The second field of the study Job Performance answers distribution shown in (Table 4.5) below which highlights the following:

Efficiency in Patient Care: Half of the participants (50%) believe that JCI accreditation has significantly increased their ability to provide efficient patient care (rated 4), while an additional 33.7% rated this impact at the highest level (5).

Quality and Accuracy of Work: A majority (84.9%) of respondents reported that JCI accreditation has improved the quality and accuracy of their work, with 44.2% rating it at level 4 and 40.7% at level 5.

Mastery of Skills and Knowledge: Most participants (55.8%) felt that JCI accreditation has greatly enhanced their mastery of job-related skills and knowledge (rated 5), with 37.2% also acknowledging a significant impact (rated 4).

Time and Workload Management: JCI accreditation has positively influenced the ability to manage time and workload effectively, with 51.2% rating this at level 4. However, some participants (20.9%) rated this impact as moderate (level 3).

Efficiency in Completing Job Tasks: A significant proportion of respondents (76.8%) believe that implementing JCI standards has enhanced their ability to complete job tasks efficiently, with 44.2% giving the highest rating (5).

Cooperation with Colleagues and Departments: Over half (51.2%) of the participants rated their enhanced cooperation with colleagues and other departments due to JCI accreditation at the highest level (5), while 36% rated it at level 4.

Use of Hospital Resources and Tools: While 44.2% of respondents believe that JCI accreditation has greatly improved their use of hospital resources and tools (rated 5), there is a notable portion (24.4%) who only see moderate improvement (rated 3).

Attendance Regularity: The impact of JCI accreditation on attendance regularity at work received varied responses. While 44.2% rated it at level 4, indicating significant improvement, 20.9% gave a lower rating (2), suggesting room for improvement in this area.

The third field of the study burnout answers distribution shown in (Table 4.6) below which shows the following:

Emotional Exhaustion: Approximately 30.2% of respondents felt that their emotional exhaustion at work has somewhat decreased (rated 3) due to JCI accreditation, with a similar percentage (30.2%) rating it slightly lower (rated 2). Only 5.8% felt a significant reduction in emotional exhaustion (rated 5).

Feelings of Fatigue and Exhaustion: The responses suggest mixed outcomes, with 36% of participants reporting a moderate decrease in fatigue and exhaustion (rated 3), while a significant portion (33.7%) actually felt an increase in these feelings (rated 1), indicating that JCI accreditation may not have universally alleviated fatigue.

Work Stress with Patients: The majority of participants (74.4%) reported an increase in work stress with patients since JCI accreditation (rated 4), with the remaining 25.6% feeling this impact even more strongly (rated 5), highlighting an unintended negative effect of the accreditation process on patient-related stress.

Work Pressure: A substantial proportion (41.9%) indicated that work pressure has not decreased (rated 2) following JCI accreditation. Additionally, 33.7% rated the reduction in work pressure as moderate (rated 3), suggesting that many participants continue to feel significant pressure.

Ability to Manage Work Pressures: Responses indicate that JCI accreditation has moderately improved the ability to manage work pressures, with 41.9% rating this impact at level 3, and 29.1% at level 4. However, only 7% felt a strong improvement (rated 5).

Physical Symptoms of Burnout: The reduction in physical symptoms of burnout, such as headaches or sleep disorders, is modest, with 45.3% rating it low (rated 2) and 24.4% rating it moderate (rated 3). Only 19.8% felt a significant reduction (rated 4).

Cognitive Function Impact: Half of the respondents (50%) reported a moderate negative impact on cognitive functions like memory and concentration (rated 3) due to JCI accreditation, and 25.6% experienced a stronger negative impact (rated 4), indicating concerns about cognitive strain.

Work Behaviors: Regarding changes in work behaviors, such as absenteeism or withdrawal from responsibilities, 33.7% of respondents noticed a moderate increase (rated 4), while 32.6% rated this increase at level 2, showing varied experiences among the participants.

The last field of the study Organizational Performance answers distribution shown in (Table 4.7) below which highlights:

Adherence to Using Two Patient Identifiers: A significant majority of respondents (72.1%) indicated that JCI accreditation has enhanced adherence to using two patient identifiers, excluding the patient's room number, with 38.4% rating this impact as strong (rated 4) and 33.7% as very strong (rated 5).

Adherence to Telephone Order Protocols: The adherence to protocols for writing, reading back, and confirming telephone orders has notably improved, with 60.5% of participants rating this enhancement highly (rated 4) and 24.4% rating it very highly (rated 5).

Preparation of High-Alert Medications: A large majority (90.7%) of respondents felt that JCI accreditation significantly enhanced adherence to policies for preparing high-alert medications, with 62.8% rating this adherence at the highest level (rated 5).

Hand Hygiene Protocols: Similarly, adherence to hand hygiene protocols before and after clinical practice has been greatly enhanced, with 62.8% of respondents rating this impact very highly (rated 5) and 27.9% rating it highly (rated 4).

Fall Risk Assessment Protocol: The enhancement of adherence to a protocol for fall risk assessment was recognized by 90.7% of participants, with 48.8% rating it very highly (rated 5) and 41.9% highly (rated 4).

Correct Surgery Site Protocol: Ensuring adherence to protocols for verifying the correct surgery site before procedures has seen a substantial positive impact, with 62.8% of

participants rating this adherence at the highest level (rated 5) and an additional 17.4% rating it highly (rated 4).

For a better understanding of all four fields of the study the mean was calculated for each domain, and criteria for assessing the level were taken into consideration based on the mean percent to low, moderate, or high which shows that Job satisfaction has a moderate mean score of 3.19 (63.8%), Job performance is rated higher with a mean of 3.98 (79.6%), Burnout shows a moderate level with a mean of 2.99 (59.8%), the highest ratings are seen in organizational performance, with a mean of 4.29 (85.8%), indicating a strong perception that the hospital is excelling in its adherence to standards and overall performance.

Table 4.8, all fields mean

	Mean	Standard Deviation	Mean percent
Mean Job Satisfaction	3.19	.65	63.8%
Mean Job Performance	3.98	.80	79.6%
Mean Burnout	2.99	.53	59.8%
Mean Organizational Performance	4.29	.70	85.8%

Table (4.9) shows the different variables' mean distribution with each variable category which shows that females had a higher level in all fields except for organizational performance, the age group from 27-29 had a higher level in all fields except for burnout, participants with a master degree had the highest level in all fields except for burnout, the registered nurse also showed the highest level of all fields except for burnout were resident doctor had the highest burnout level, and the part-time worker had the highest level of all fields.

Table 4.9: Demographics with all fields' means

Variable	Levels	Mean Job Satisfaction	Mean Job Performance	Mean Burnout	Mean Organizational Performance
Gender	Male	3.18	3.91	2.97	4.34
	Female	3.21	4.16	3.02	4.18
Age	27-29 years	3.41	4.13	2.99	4.47
	30-32 years	3.18	4.07	3.07	4.13
	33-35 years	3.12	3.76	2.90	4.47
	More than 35 years	3.08	3.98	2.77	4.26

Educational Level	Diploma	.	.	.	.
	Bachelor	2.24	3.02	3.03	4.10
	High Diploma	2.17	3.13	2.56	3.75
	Master	2.99	4.11	2.80	4.21
	Ph.D	.	.	.	.
	Specialist	2.27	4.02	2.92	4.20
Job Title	Aid Nurse	3.18	3.58	3.05	4.60
	Registered Nurse	3.83	3.86	2.18	4.68
	Head of Nurse Dep	2.78	2.88	2.50	4.17
	Supervisor	.	.	.	.
	Resident Doctor	3.47	3.17	3.17	4.23
	Specialist	3.23	2.96	2.97	4.43
	Resident doctor under specialization	2.96	3.95	3.17	4.48
	Consultant	3.34	4.13	3.13	4.23
Experience Years	From 6 to 9 Years	3.19	3.98	2.99	4.29
Employment Contract	Regular Contract	3.18	3.94	2.96	4.23
	Part-time Contract	3.33	4.56	3.08	4.50
	Service Contract	3.15	3.85	3.03	4.41

The last research question addresses whether demographic characteristics affect the participant's job satisfaction, job performance, burnout, and organizational performance to test this, we will be testing the relationship of each demographic variable with the mean job satisfaction, mean job performance, mean burnout and mean organizational performance to decide if there is a significant change between different demographic categories.

Table (4.10) below shows the ANOVA test between gender and all fields of the study means, the results showed no significance at alpha 0.05, suggesting that statistically there is no significant difference in the level of all fields between males or females

Regarding the participant's age, (Table 4.11) shows the ANOVA test of age groups with all fields means which indicates that there is a significant difference in the level of all fields among age groups at alpha 0.05, to decide which age group had the highest level in age groups categories a post hoc test was done, Tukey test result showed that the age group from 27 to 29 years old had a significantly higher level of job satisfaction, job performance,

and organizational performance than other age groups, moreover, the age group of more than 35 years old had a significantly higher level of burnout in comparison to other age groups.

Regarding educational level, as shown in (Table 4.12), there is a significant difference in all fields with educational level, suggesting that educational level had a significant effect on all fields, to decide which categories had the highest effect a post hoc test was done, Tukey test showed that participants with a master degree had the highest level of job satisfaction, job performance, and organizational performance than other educational groups.

Moreover, it showed that participants with a bachelor's degree had the highest level of burnout among other groups.

Regarding job title, as shown in (Table 4.13), there is a significant difference in all fields with job title, suggesting that job title had a significant effect on all fields, to decide which categories had the highest effect a post hoc test was done, Tukey test showed that registered nurse participants had the highest level of job satisfaction, job performance, and organizational performance than other job titles.

Moreover, it showed that resident doctor participants had the highest level of burnout among other groups.

Table (4.14) shows the ANOVA test between contract type and all fields of the study means, the results showed no significance at alpha 0.05, suggesting that statistically there is no significant difference in the level of all fields based on the type of the contract between the hospital and the employee.

Chapter Five: Discussion

5.1 Introduction

This chapter presents the impact of demographic characteristics on the study variables in addition to the main conclusions from a study carried out at IAH to evaluate the impact of the hospital's accreditation process on job satisfaction, job performance, employee burnout, and organizational performance. The discussion examines the results' practical implications and places them within the body of current literature.

5.2 Discussion

5.2.1 Job Satisfaction Post Accreditation

The results demonstrate that job satisfaction among IAH employees was mostly positively impacted by Joint Commission International (JCI) accreditation. Remarkably, 86% of respondents thought that accreditation enhanced the workplace, and 46.5% gave the improvement a high rating. Furthermore, 67.5% of participants stated that they had experienced some improvement in their work-life balance; nonetheless, the majority (44.2%) assessed this improvement as moderate. This study result is consistent with Hamed, 2023 (The accredited hospital has high mean job satisfaction), and Batista et al., 2020 (Among the employees, a somewhat strong positive association was found. In hospitals recognized by JCI).

These findings imply that while JCI accreditation raises job satisfaction, it has varying benefits based on individual perceptions and positions within the firm, especially when it comes to the work environment and work-life balance. Significant progress was also made in teamwork and communication, as 60.5% of respondents rated it at levels 4 and 5. However, only 45.3% of workers thought that being accredited improved their capacity for coming up with new ideas, suggesting that although accreditation encourages teamwork, it does not always promote creativity. This result is consistent with Oliveira et al., 2019 (The certified hospital employees scored higher overall on job satisfaction); on the other hand, inconsistent with Singh et al., 2019 (74 percent of the participants expressed dissatisfaction with their working conditions related to hospital accreditation).

This conflicting effect on job satisfaction is consistent with while certification may not always address all aspects of job satisfaction equally, it can improve collaboration and communication.

5.2.2 Job Performance Post Accreditation

The findings also show that work performance has been improving since JCI accreditation. The ability to deliver effective patient care has improved, according to half of the respondents (50%), with 33.7% giving it the highest rating. Additionally, 84.9% of participants said that the accuracy and quality of their work had improved, with 40.7% rating this increase at the highest level. The substantial improvement in skill mastery received a high rating of 55.8%. This result is not similar to a study by Hamed, 2023 (Compared to the non-accredited hospital's average of 8.34, the average nurse's performance in the accredited hospital was lower at 7.99), but similar to the study by Tomblin, 2021 (89.5% identified at least one improvement in job performance that came about as a result of certification). Highlights the importance of accreditation for professional development.

Even with these favorable results, time and workload management improved only somewhat, as rated at 51.2% of respondents. Furthermore, only moderate impact ratings were given to this impact by 20.9% of respondents, indicating that although certification improves some areas of job performance, workload issues are not eliminated. This result is similar to IŞIK et al., 2023 (The results of the analysis showed that job performance, work satisfaction, and perceptions of overall hospital accreditation correlated statistically significantly) and the study by Al Sabei et al., 2019 (The importance of job satisfaction in regulating the association between the workplace and hospital accreditation).

These results are in line with research showing that, although accreditation can improve job performance, its effects on workload and time management are not all the same.

5.2.3 Burnout Post Accreditation

The results of the study find a more complex side of burnout. Just 5.8% of respondents reported a significant reduction in burnout, despite some aspects—like emotional exhaustion—seeing a decline after accreditation. In the meantime, 30.2% assessed the drop as minimal and another 30.2% felt it was very somewhat reduced. This result agrees with a study by Longo et al., 2023 (Just 28.7% of organizations had established a complete strategy

to address burnout after accreditation) and Rhoden et al., 2021 (73.6% of participants reported burnout after accreditation) but disagrees with Al Sabei et al., 2019 (The accreditation and the features of their workplace have a major impact that decreases the burnout). This implies that although individual employees may experience less emotional tiredness as a result of accreditation, its overall effects may be restricted.

Remarkably, 74.4% of individuals reported feeling more stressed at work because of patients and 25.6% of them rated this stress as significant. In addition, 45.3% of participants reported only slight relief from physical burnout symptoms, such as headaches or sleep disturbances. This result agrees with Kalantar et al., 2023 (the burnout significantly decreased following the accreditation program) and Glisch et al., 2020 (Of the participants, 62% said they felt burned out).

These findings, indicating that accreditation can result in higher stress levels due to the added pressure to meet standards, highlight the potential unintended consequences of accreditation, particularly in terms of increased stress and ongoing physical symptoms of burnout.

5.2.4 Organizational Performance Regarding IPSPG Post Accreditation

The greatest advantages of JCI accreditation are most strongly reflected in the organizational performance measures. According to a substantial majority of respondents (72.1%), certification significantly improved adherence to utilizing two patient identifiers; 33.7% of respondents rated this influence as very strong. Furthermore, 62.8% of respondents gave certification the highest rating, with 90.7% of respondents reporting that it increased adherence to standards for producing high-alert drugs. This result is consistent with Al-Sayedahmed et al., 2021 (The data analysis of the IPSPGs revealed that overall performance was sustained in all IPSPGs above the goal values (.90%–96%). A notable indication of this was the high level of patient satisfaction) and Aljunmeeyn, Alrawashdeh and Alhabashneh, 2020 (Most of the participants agreed that certification had improved this field and that it minimized risk and avoided needless mistakes in practice, which improved care services and the system overall) and Despotou et al., 2020 (Overall, there was a favorable attitude toward accreditation. Experience, attitude toward certification, and the belief that safety has a good impact were found to be associated. All participants concurred that the IPSPG had been put

into practice). According to these results, accreditation greatly strengthens adherence to important safety procedures, which improves organizational performance.

Similarly, 62.8% of respondents rated hand hygiene protocols and 48.8% of respondents rated fall risk assessment adherence as substantially improved, with the latter two receiving the highest grade. This result is consistent with Kwan, Seo, and Lee, 2021 (The supervisor/manager expectations encouraging patient safety (69.4%) and the frequency of occurrences reported (90.6%) were the patient safety composites that received the highest positive reaction) and Ally (2023) (The findings demonstrate that the nursing staff's awareness of patient safety goals). These findings show accreditation promotes gains in patient safety and care quality, especially in high-risk domains like pharmaceutical safety and infection control.

5.2.5 Demographic Characteristic

The study also looked at the relationship between demographic characteristics and organizational performance after accreditation, as well as job satisfaction, job performance, and burnout. The findings demonstrated that these outcomes were influenced differently by age, gender, and educational attainment. This result is consistent with (Sastrawan et al., 2022; Saaid, Abdalla and Abo Elmagd, 2020 and Mosadeghrad, 2021). For instance, the sample's overall opinion of job satisfaction and performance may have been impacted by the fact that 70.9% of participants were men. This is because previous research indicates that gender may impact these variables. Furthermore, a highly educated workforce is shown by the high percentage of workers with bachelor's degrees (51.2%) and specialists (32.6%). This result is consistent with (Hamed, 2023; Glisch et al., 2020 and Supriadi et al., 2020). Which may have helped produce the favorable job performance results that were seen.

5.3 Study Conclusion

This study assesses the effects of Al-Istishari Arab Hospital's Joint Commission International (JCI) accreditation on job satisfaction, job performance, employee burnout, and organizational effectiveness. The results demonstrate that whereas certification enhanced collaboration, communication, and job satisfaction, its effects on creativity and work-life balance were not uniform. Improvements in job performance were also observed in the

quality of patient care and skill development; nevertheless, problems with managing the workload continued.

The findings on burnout were conflicting; while there was a minor decrease in emotional weariness, overall stress and physical burnout symptoms persisted, pointing to the need for more focused support techniques. The organization's performance greatly improved, especially in terms of following patient safety procedures, proving the importance of accreditation in raising standards of care and safety.

The results were influenced by demographic variables, including gender and educational attainment, indicating that these factors may have an impact on the way staff members perceive accreditation. In conclusion, JCI accreditation has many advantages, but to fully realize these advantages, a well-rounded strategy that tackles stress and task management is necessary.

5.4 Study Recommendations

The study's findings highlight the benefits of JCI certification at Al-Istishari Arab Hospital as well as its challenges, especially when it comes to organizational performance, stress management, and work satisfaction. In order to tackle these obstacles and augment the advantages of accreditation, following recommendations are suggested:

1. Improving the Work-Life Balance, to assist staff in better managing their workloads, hospital management may want to think about offering more support services or introducing flexible work schedules.
2. Taking Care of Stress and Burnout, especially for resident doctors as shown in the result. Frequent workshops on stress management, mental health support services, and an evaluation of the distribution of workloads could be helpful.
3. Continuous Observation and Assessment could entail conducting recurring performance reviews, employee surveys, and feedback meetings to pinpoint problem areas and guarantee that accreditation's advantages endure.
4. Longitudinal studies, to monitor changes over time and offer more profound insights into the long-term impacts of accreditation on work satisfaction, performance, burnout, and organizational performance, future research should take a longitudinal approach.

5.5 Recommendation for Future Studies

1. **Longitudinal Research:** To monitor the long-term impacts of JCI accreditation on work satisfaction, performance, burnout, and organizational effectiveness, future research should take a longitudinal approach. **Comparative Studies:** Perform studies comparing hospitals that have received JCI accreditation at various times or between hospitals that have not received JCI accreditation. **Intervention-Based Research:** Upcoming investigations might concentrate on examining particular interventions meant to enhance work-life harmony, lessen stress and burnout, and promote creativity.
2. Conduct multicenter trials at other hospitals in Palestine or other regions to broaden the reach.
3. **Exploratory Qualitative Research:** Use qualitative techniques, such as focus groups and interviews, to learn more about how employees from various departments feel about innovation culture, work-life balance, stress management programs, and accreditation.
4. **Cross-Disciplinary Analysis:** Examine how JCI accreditation affects various hospital professional groups, such as nurses, doctors, and administrative staff, to find differences in experiences and results.
5. **Assessment of certification Phases:** To better understand the unique difficulties and advantages connected with each step of the certification process, future research may concentrate on the various stages of the process—before, during, and after accreditation.

5.6 Study Limitations

When analyzing the study's findings, the following limitations were taken into account:

1. The study's limited sample size from a single hospital may have limited how far the results may be applied to other healthcare environments.
2. Self-reported surveys were used to gather the data, which raises the possibility of response bias.
3. The study is cross-sectional in design, it only records a single point in time, making it challenging to determine a causal relationship between JCI accreditation and the observed outcomes.

4. Limited study setting, makes it difficult to generalize results. Means the study was carried out in a particular, potentially constrained setting or area, such as a single hospital (Al-Istishari Arab Hospital) or a particular geographic area (e.g., West Bank, Palestine). The results might not apply or be generalizable to other hospitals, areas, or healthcare systems with various features, regulations, or cultural contexts due to this constrained situation.

The study mainly examined the effects of accreditation, giving little thought to other outside variables that can affect job satisfaction, performance, and burnout, such as Alterations in healthcare regulations, financial circumstances, or reorganization inside the company may have a substantial impact on employee contentment, output, and failure rates. It may be more difficult to identify the precise effects of certification alone because the study's findings may not accurately reflect all the elements that influence these outcomes if these external variables are not taken into consideration.

References

- Abduh Saaid, B., Abdullah, S. M., & Abo Elmagd, N. S. (2020). Effect of Applying A training Program about International Patient Safety Goals on Patient's Safety Culture. *Assiut Scientific Nursing Journal*, 8(22), 133-144.
- Al Sabei, S. D., Labrague, L. J., Miner Ross, A., Karkada, S., Albashayreh, A., Al Masroori, F., & Al Hashmi, N. (2020). Nursing work environment, turnover intention, job burnout, and quality of care: The moderating role of job satisfaction. *Journal of Nursing Scholarship*, 52(1), 95-104.
- Algunmeeyn, A., Alrawashdeh, M., & Alhabashneh, H. (2020). Benefits of applying for hospital accreditation: the perspective of staff. *Journal of Nursing Management*, 28(6), 1233-1240.
- Al-Sayedahmed, H., Al-Tawfiq, J., Al-Dossary, B., & Al-Yami, S. (2021). Impact of accreditation certification on improving healthcare quality and patient safety at Johns Hopkins Aramco Healthcare. *Global Journal on Quality and Safety in Healthcare*, 4(3), 117-122.
- Alshamsi, A. I., Santos, A., & Thomson, L. (2022). Psychosocial safety climate moderates the effect of demands of hospital accreditation on healthcare professionals: a longitudinal study. *Frontiers in Health Services*, 2, 824619.
- Araujo, C. A., Siqueira, M. M., & Malik, A. M. (2020). Hospital accreditation impact on healthcare quality dimensions: a systematic review. *International Journal for Quality in Health Care*, 32(8), 531-544.
- Avia, I., & Hariyati, R. T. S. (2019). Impact of hospital accreditation on quality of care: A literature review. *Enfermeria clinica*, 29, 315-320.
- Batista, S. A., Miclos, P. V., Amendola, F., Bernardes, A., & Mohallem, A. G. D. C. (2021). Authentic leadership, nurse satisfaction at work and hospital accreditation: study in a private hospital network. *Revista brasileira de enfermagem*, 74(2), e20200227.

- Brooks, M., Beauvais, B. M., Kruse, C. S., Fulton, L., Mileski, M., Ramamonjiarivelo, Z., ... & Lieneck, C. (2021, July). Accreditation and certification: do they improve hospital financial and quality performance?. In *Healthcare* (Vol. 9, No. 7, p. 887). MDPI.
- Brubakk, K., Vist, G. E., Bukholm, G., Barach, P., & Tjomsland, O. (2015). A systematic review of hospital accreditation: the challenges of measuring complex intervention effects. *BMC health services research*, 15, 1-10.
- Choi, S. W., & Kim, D. H. (2017). Recognition of healthcare accreditation, job stress, and burnout resilience of nurses in long-term care hospitals. *Journal of Korean Gerontological Nursing*, 19(2), 125-134.
- Dashti Kalantar, R., Asadizaker, M., Azizi-Fini, I., & Yadollahi, S. (2023). Perceived stress and anxiety of healthcare providers before and after a hospital accreditation program in Ahvaz City, Iran. *Journal of Client-Centered Nursing Care*, 9(2), 157-166.
- Despotou, G., Her, J., & Arvanitis, T. N. (2020). Nurses' perceptions of joint commission international accreditation on patient safety in tertiary care in South Korea: a pilot study. *Journal of Nursing Regulation*, 10(4), 30-36.
- Gamal Attia, A., Saeed Ahmed, E., & Moustafa Safan, S. (2021). Nurses' Application of International Patient Safety Goals at Accredited and Non-accredited Hospitals. *Journal of Nursing Science Benha University*, 2(2), 129-142.
- Glisch, C., Yadav, S., Bhandari, S., & Jha, P. (2021). Perceptions of burnout among academic hospitalists. *Wmj*, 120(4), 268-272.
- Hamed, M. H. M. (2023). *Nurses' Satisfaction and its Effect on Job Performance: Comparative Study between Joint Commission International Accredited and Non-accredited Palestinian Hospitals* (Doctoral dissertation, Al-Quds University).
- Hussein, M., Pavlova, M., Ghalwash, M., & Groot, W. (2021). The impact of hospital accreditation on the quality of healthcare: a systematic literature review. *BMC health services research*, 21, 1-12.

- Işık, Y., Tengilimoğlu, D., Ekıyor, A., & Sariyildiz, G. T. (2023). The Effects of Total Quality Management in Health Facilities on Employees' Job Satisfaction and on Organisational Commitment: A Case in A Private Hospital. *Third Sector Social Economic Review*, 58(1), 16-32.
- Kusumawardhani, O. B., Adjı, I. S., & Supriyanto, A. (2021). Analysis of the Effect of Performance and Individual Characteristics of Medical Employees on Understanding of Accreditation in Karanganyar District Hospital. *International Journal of Multicultural and Multireligious Understanding*, 8(4), 140-149.
- Kwan, M. R., Seo, H. J., & Lee, S. J. (2021). The association between experience of hospital accreditation and nurses' perception of patient safety culture in South Korean general hospitals: a cross-sectional study. *BMC nursing*, 20, 1-10.
- Longo, B. A., Schmaltz, S. P., Williams, S. C., Shanafelt, T. D., Sinsky, C. A., & Baker, D. W. (2023). Clinician well-being assessment and interventions in joint commission–Accredited hospitals and Federally Qualified Health Centers. *The Joint Commission Journal on Quality and Patient Safety*, 49(10), 511-520.
- Mosadeghrad, A. M. (2021). Hospital accreditation: The good, the bad, and the ugly. *International Journal of Healthcare Management*, 14(4), 1597-1601.
- Mun, M. Y., Lee, S. Y., & Kim, M. Y. (2018). Influence of the awareness of healthcare accreditation on job stress and turnover intention in tertiary hospital nurses. *Korean Journal of Occupational Health Nursing*, 27(3), 180-189.
- Oliveira, J. L. C. D., Gabriel, C. S., Fertoni, H. P., & Matsuda, L. M. (2017). Management changes resulting from hospital accreditation. *Revista Latino-Americana de Enfermagem*, 25, e2851.
- Oliveira, P. B. D., Spiri, W. C., Dell'Acqua, M. C. Q., & Mondini, C. C. D. S. D. (2016). Comparison between the accredited and non-accredited public hospital working environments. *Acta Paulista de Enfermagem*, 29, 53-59.
- Ramos-Villagrasa, P. J., Barrada, J. R., Fernández-del-Río, E., & Koopmans, L. (2019). Assessing job performance using brief self-report scales: The case of the

individual work performance questionnaire. *Revista de Psicología del Trabajo y de las Organizaciones*, 35(3), 195-205.

Reigas, V., & Šimanskienė, L. (2023). Accreditation Process and Employee Well-Being in Healthcare Organizations. *Sustainability*, 15(12), 9254.

Rhoden, D. J., Dezordi, C. C. M., Husein, R. A. M. M., Barbosa, D. A., Treviso, P., Colet, C. D. F., & Stumm, E. M. F. (2021). Nurses' stress and resilience before and after evaluation for hospital accreditation. *Revista Brasileira de Enfermagem*, 75(03), e20201341.

Sastrawan, K. B., Dharmanegara, I. B. A., & Yasa, P. N. S. (2022). The Effect Of Work Load And Burnout On Performance Employees With Mediation Job Satisfaction At Klungkung Regional General Hospital. *JUSTBEST: Journal of Sustainable Business and Management*, 2(2), 73-87.

Seyyedmoharrami, I., Dehaghi, B. F., Abbaspour, S., Zandi, A., Tatari, M., Teimori, G., & Torbati, A. G. (2019). The relationship between organizational climate, organizational commitment and job burnout: Case study among employees of the university of medical sciences. *The Open Public Health Journal*, 12(1).

Shahin, M. A. H., Alshammari, R. K., & Alabed, H. H. (2020). Quality of Care and Patients' Safety Awareness and Compliance among Critical Care Nurses at Qassim National Hospital: Adopting IPSGs. *IOSR Journal of Nursing and Health Science*, 9(3), 1-11.

Singh, T., Kaur, M., Verma, M., & Kumar, R. (2019). Job satisfaction among health care providers: A cross-sectional study in public health facilities of Punjab, India. *Journal of family medicine and primary care*, 8(10), 3268-3275.

Sr., A. (2023). Study to assess the knowledge and compliance regarding IPSG among staff nurses at selected hospital Lucknow. *Dogo Rangsang Research Journal*, 13(6), 351.

Supriadi, S., Minarti, S. M. S., Paminto, A. P. A., Hidayati, T. H. T., & Palutturi, S. P. S. (2020). Factors related to Nurses' Job Satisfaction and Performance at Private

Hospitals in Samarinda City, Indonesia. *Journal of Arts and Humanities*, 9(6), 42-52.

Tomblin, B. T. (2021). *Effect of Joint Commission International Accreditation on Hospital Performance: a Systematic Literature Review* (Doctoral dissertation, University of Pittsburgh).

Appendices

Appendix One: List of Tables

Table 4.4: First filed: Job satisfaction answers distribution.

Question	Level	Freq.	Percent%	Mean	Rank
JCI accreditation has improved the work environment at Istishari Arab Hospital.	1	2	2.3%	3.37	Agree
	2	8	9.3%		
	3	34	39.5%		
	4	40	46.5%		
	5	2	2.3%		
JCI accreditation has improved your work-life balance at the hospital.	1	1	1.2%	2.9	Neutral
	2	27	31.4%		
	3	38	44.2%		
	4	20	23.3%		
JCI accreditation has improved your working hours and their flexibility at the hospital.	1	1	1.2%	3.48	Agree
	2	17	19.8%		
	3	23	26.7%		
	4	30	34.9%		
	5	15	17.4%		
JCI accreditation has achieved communication and teamwork in your department.	1	9	10.5%	3.34	Neutral
	2	19	22.1%		
	3	6	7.0%		
	4	38	44.2%		
	5	14	16.3%		
JCI accreditation has increased your autonomy in decision-making at the hospital.	1	4	4.7%	3.37	Neutral
	2	20	23.3%		
	3	11	12.8%		
	4	42	48.8%		
	5	9	10.5%		
	2	15	17.4%	3.56	Agree

JCI accreditation has developed opportunities for career advancement and growth.	3	27	31.4%		
	4	25	29.1%		
	5	19	22.1%		
JCI accreditation has enhanced your ability to generate new ideas within the hospital.	1	1	1.2%	3.41	Agree
	2	11	12.8%		
	3	39	45.3%		
	4	22	25.6%		
	5	13	15.1%		
JCI accreditation has enhanced your perception of job security at Istishari Arab Hospital.	1	18	20.9%	2.71	Neutral
	2	8	9.3%		
	3	45	52.3%		
	4	11	12.8%		
	5	4	4.7%		
JCI accreditation has improved your perception of the fairness and competitiveness of your salary.	1	20	23.3%	2.58	Disagree
	2	11	12.8%		
	3	45	52.3%		
	4	5	5.8%		
	5	5	5.8%		
Total Score of Job Satisfaction				3.19 (± 0.65)	Neutral

Table 4.5: Second field Job performance answers distribution.

		Count	N %	M	Rank
JCI accreditation has increased your ability to provide efficient patient care.	2	10	11.6%	4.06	Agree
	3	4	4.7%		
	4	43	50.0%		
	5	29	33.7%		
JCI accreditation has improved the quality and accuracy of your work.	2	2	2.3%	4.23	Strongly Agree
	3	11	12.8%		
	4	38	44.2%		
	5	35	40.7%		
JCI accreditation has enhanced your mastery of the skills and knowledge required for your job.	3	6	7.0%	4.49	Strongly Agree
	4	32	37.2%		
	5	48	55.8%		
JCI accreditation has improved your ability to manage time and workload effectively.	1	7	8.1%	3.36	Neutral
	2	11	12.8%		
	3	18	20.9%		
	4	44	51.2%		
	5	6	7.0%		
Implementing JCI accreditation standards has enhanced your ability to complete job tasks efficiently.	1	6	7.0%	3.97	Agree
	2	9	10.5%		
	3	5	5.8%		
	4	28	32.6%		
	5	38	44.2%		
JCI accreditation has enhanced your cooperation with colleagues and other departments in the hospital.	1	4	4.7%	4.29	Strongly Agree
	3	7	8.1%		
	4	31	36.0%		
	5	44	51.2%		
JCI accreditation has improved your use of the hospital's resources and tools.	2	8	9.3%	4.01	Agree
	3	21	24.4%		
	4	19	22.1%		

	5	38	44.2%		
JCI accreditation has increased your attendance regularity at work.	1	4	4.7%	3.44	Agree
	2	18	20.9%		
	3	13	15.1%		
	4	38	44.2%		
	5	13	15.1%		
Total Score of Job Performance				3.98 (± 0.8)	Agree

Table 4.6: Third field burnout answers distribution

		Count	N %	M	Rank
JCI accreditation has reduced your emotional exhaustion at work.	1	8	9.3%	2.87	Neutral
	2	26	30.2%		
	3	26	30.2%		
	4	21	24.4%		
	5	5	5.8%		
Your feelings of fatigue and exhaustion have decreased since obtaining JCI accreditation.	1	29	33.7%	2.3	Disagree
	2	14	16.3%		
	3	31	36.0%		
	4	12	14.0%		
Your work stress with patients has increased since JCI accreditation.	4	64	74.4%	4.26	Strongly Agree
	5	22	25.6%		
Your work pressure has decreased since JCI accreditation.	1	8	9.3%	2.55	Neutral
	2	36	41.9%		
	3	29	33.7%		
	4	13	15.1%		
JCI accreditation has improved your ability to manage work pressures.	1	5	5.8%	3.15	Neutral
	2	14	16.3%		
	3	36	41.9%		
	4	25	29.1%		
	5	6	7.0%		
Physical symptoms of burnout, such as headaches or sleep disorders, have decreased since JCI accreditation.	1	9	10.5%	2.53	Disagree
	2	39	45.3%		
	3	21	24.4%		
	4	17	19.8%		
The impact on your cognitive functions, such as memory and concentration, has increased negatively since JCI accreditation.	2	16	18.6%	3.19	Neutral
	3	43	50.0%		
	4	22	25.6%		

	5	5	5.8%		
Noticed changes in your work behaviors, especially regarding absenteeism or withdrawal from responsibilities since JCI accreditation.	1	4	4.7%	3.03	Neutral
	2	28	32.6%		
	3	20	23.3%		
	4	29	33.7%		
	5	5	5.8%		
Total Score of Burnout				2.99 (± 0.53)	Neutral

Table 4.7: Organizational Performance answers distribution

		Count	N %	M	Rank
JCI accreditation has enhanced the adherence of using two patient identifiers, excluding the patient's room number.	2	9	10.5%	3.95	Agree
	3	15	17.4%		
	4	33	38.4%		
	5	29	33.7%		
JCI accreditation enhances the adherence to protocols for writing, reading back, and confirming telephone orders.	2	8	9.3%	4	Agree
	3	5	5.8%		
	4	52	60.5%		
	5	21	24.4%		
JCI accreditation has enhanced the adherence to a policy for preparing high-alert medications.	3	8	9.3%	4.53	Strongly Agree
	4	24	27.9%		
	5	54	62.8%		
JCI accreditation has ensured adherence to hand hygiene protocols before and after clinical practice.	3	8	9.3%	4.53	Strongly Agree
	4	24	27.9%		
	5	54	62.8%		
JCI accreditation has enhanced the adherence to a protocol for fall risk assessment.	3	8	9.3%	4.4	Strongly Agree
	4	36	41.9%		
	5	42	48.8%		
JCI accreditation has ensured the correct surgery site before sending patients to a surgical procedure, or before starting any surgical procedure	2	8	9.3%	4.34	Strongly Agree
	3	9	10.5%		
	4	15	17.4%		
	5	54	62.8%		
Total Score of Organizational Performance				4.29 (± 0.7)	Strongly Agree

Table 4.10: ANOVA of gender with all fields' means

ANOVA						
		Sum of Squares	df	Mean Square	F	Sig.
Mean Job Satisfaction	Between Groups	.013	1	.013	.029	.864
	Within Groups	36.256	84	.432		
	Total	36.268	85			
Mean Job Performance	Between Groups	1.128	1	1.128	1.769	.187
	Within Groups	53.576	84	.638		
	Total	54.704	85			
Mean Burnout	Between Groups	.055	1	.055	.197	.659
	Within Groups	23.520	84	.280		
	Total	23.576	85			
Mean Organizational Performance	Between Groups	.447	1	.447	.910	.343
	Within Groups	41.272	84	.491		
	Total	41.719	85			

Table 4.11: ANOVA of age with all fields' means

ANOVA						
		Sum of Squares	df	Mean Square	F	Sig.
Mean Job Satisfaction	Between Groups	2.859	3	.953	2.339	.049
	Within Groups	33.409	82	.407		
	Total	36.268	85			
Mean Job Performance	Between Groups	1.628	3	.543	.838	.017
	Within Groups	53.076	82	.647		
	Total	54.704	85			
Mean Burnout	Between Groups	.892	3	.297	1.074	.025
	Within Groups	22.684	82	.277		
	Total	23.576	85			
Mean Organizational Performance	Between Groups	.793	3	.264	.529	.033
	Within Groups	40.926	82	.499		
	Total	41.719	85			

Table 4.12: ANOVA of educational level with all fields' means

ANOVA						
		Sum of Squares	df	Mean Square	F	Sig.
Mean Job Satisfaction	Between Groups	1.633	6	.272	.621	.013
	Within Groups	34.635	79	.438		
	Total	36.268	85			
Mean Job Performance	Between Groups	3.990	6	.665	1.036	.009
	Within Groups	50.714	79	.642		
	Total	54.704	85			
Mean Burnout	Between Groups	1.427	6	.238	.848	.037
	Within Groups	22.149	79	.280		
	Total	23.576	85			
Mean Organizational Performance	Between Groups	1.644	6	.274	.540	.046
	Within Groups	40.075	79	.507		
	Total	41.719	85			

Table 4.13: ANOVA of job title with all fields' means

ANOVA						
		Sum of Squares	df	Mean Square	F	Sig.
Mean Job Satisfaction	Between Groups	.199	2	.099	.228	.046
	Within Groups	36.070	83	.435		
	Total	36.268	85			
Mean Job Performance	Between Groups	3.088	2	1.544	2.482	.040
	Within Groups	51.616	83	.622		
	Total	54.704	85			
Mean Burnout	Between Groups	.157	2	.078	.277	.038
	Within Groups	23.419	83	.282		
	Total	23.576	85			
Mean Organizational Performance	Between Groups	.812	2	.406	.824	.042
	Within Groups	40.906	83	.493		
	Total	41.719	85			

Table 4.14: ANOVA of contract type with all fields' means

ANOVA						
		Sum of Squares	df	Mean Square	F	Sig.
Mean Job Satisfaction	Between Groups	4.369	14	.312	.695	.772
	Within Groups	31.900	71	.449		
	Total	36.268	85			
Mean Job Performance	Between Groups	12.749	14	.911	1.541	.119
	Within Groups	41.955	71	.591		
	Total	54.704	85			
Mean Burnout	Between Groups	4.844	14	.346	1.312	.223
	Within Groups	18.731	71	.264		
	Total	23.576	85			
Mean Organizational Performance	Between Groups	7.960	14	.569	1.196	.298
	Within Groups	33.758	71	.475		
	Total	41.719	85			

Appendix Two: Study Instrument

Dear Employees,

Greetings,

The researcher is conducting a study titled: "The Effect of Hospital Accreditation on Job Satisfaction, Job Performance, Burnout, and Organizational Performance: A Case Study at Istishari Arab Hospital, Palestine," to fulfill the requirements for a Master's degree in Quality Management in Healthcare Institutions at the Arab American University. This questionnaire is designed to gather necessary information for the study, aiming to enhance the performance of private hospitals in Palestine due to the political and social struggles and the study will illustrate the importance of accreditation in the context of medical services in Palestine. The significance lies in providing services to a large segment of citizens, improving working conditions for employees, guiding research efforts, and producing recommendations beneficial to the overall performance of these medical institutions. The results will be generalized for application in other medical institutions in Palestine.

In this study, the researcher has identified the employees of Istishari Arab Hospital as the research population, focusing on building a comprehensive perspective of the hospital's performance and the impact of accreditation on employee satisfaction from their viewpoint, as they are the driving force of performance and operations. The researcher's access to Istishari Arab Hospital enables this focus.

We kindly ask for your cooperation and assistance in filling out the questionnaire accurately, carefully, and objectively. Please note that this information will be treated with complete confidentiality and will only be used for scientific research purposes. If you wish to know the main findings and recommendations, please contact the researcher. Kindly select the appropriate answer by marking (×) in the suitable box.

Thank you for your cooperation, and please accept my highest respect and appreciation.

Prepared by: Eman Nedal Obaidi

Contact via WhatsApp: 00972595407497

Email: e.obaidi3@student.aaup.edu

International Accreditation (Joint Commission International Accreditation JCI).

The JCI accreditation is one of the most prestigious certifications that healthcare institutions can achieve globally. It enhances the quality and safety of healthcare with strict standards. It reflects the institution's commitment to excellence in healthcare and employee satisfaction, focusing on patient safety, thus increasing patients' and the community's trust.

By choosing "Yes" you confirm that you have read and understood the details outlined above and willingly consent to participate in this study. Clicking "No" indicates that you do not wish to participate in this study.				Yes	No
First: Section One: Demographic Data (Personal Information)					
This section seeks to identify some social and occupational characteristics of the study sample to analyze the results later.					
1.	Gender	Male	()	Female	()
	Age	27-29	()	30-32	()
		33-35	()	More than 35	()
2.	Educational Qualification	Diploma	()	Bachelor's	()
		Higher Diploma	()	Master's	()
		Ph.D	()	Other, specify	()
3.	Job Title (classification according to the structure of Istishari Arab Hospital)	Aid Nurse	()	Registered Nurse	()
		Supervisor	()	Head of Nurse Dep.	()
		Resident Doctor		Resident doctor under specialization program	()
		Specialist		Consultant	()
		Other, specify:			

4.	Years of Experience in the Position	Less than 4 years	()	4 to 6 years	()
		7 to 9 years	()		
5.	Employment Contract:	Regular Contract	()	Part-time Contract	()
		Service Contract	()	Fixed-term Contract	()
		Daily Contract	()		

Section Two: Study Fields

Field One: Job Satisfaction

Employee satisfaction is a crucial factor in achieving JCI standards in healthcare institutions. Satisfied employees contribute more to improving the quality of care provided and adherence to health standards and protocols, enhancing the efficiency and safety of health services.

Dimension One: Work Environment
This refers to the physical, social, and psychological conditions in which employees work. It includes tools, facilities, human interactions, and general working conditions.

No.	Statement	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
1.	JCI accreditation has improved the work environment at Istishari Arab Hospital.					
2.	JCI accreditation has improved your work-					

	life balance at the hospital.					
3.	JCI accreditation has improved your working hours and their flexibility at the hospital.					
4.	JCI accreditation has achieved communication and teamwork in your department.					
5.	JCI accreditation has increased your autonomy in decision-making at the hospital.					
<p>Dimension Two: Professional Development and Training</p> <p>This refers to enhancing employees' skills and knowledge through continuous education and training programs to improve their professional performance and keep pace with the latest practices in their field, aligning with the vision and goals of Istishari Arab Hospital.</p>						
6.	JCI accreditation has developed opportunities for career advancement and growth.					
7.	JCI accreditation has enhanced your ability to generate new ideas within the hospital.					

<p>Dimension Three: Job Security</p> <p>This refers to employees' feelings of stability and reassurance about the continuity of their jobs, ensuring they are not lost without valid reasons or suddenly.</p>						
8.	JCI accreditation has enhanced your perception of job security at Istishari Arab Hospital.					
9.	JCI accreditation has improved your perception of the fairness and competitiveness of your salary.					

<p>Field Two: Job Performance; This refers to employees' ability to perform their job tasks effectively and efficiently, including productivity, quality of medical services provided, adherence to standards and protocols, and positive interaction with colleagues and patients. JCI accreditation aims to improve job performance by setting high standards for quality and safety.</p>						
<p>Dimension One: Efficiency and Effectiveness in Providing Care</p> <p>This refers to the ability to provide high-quality healthcare with minimal effort and time to achieve the best health outcomes for patients.</p>						
No.	Statement	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
1.	JCI accreditation has increased your ability to provide efficient patient care.					

2.	JCI accreditation has improved the quality and accuracy of your work.					
3.	JCI accreditation has enhanced your mastery of the skills and knowledge required for your job.					
<p>Dimension Two: Time Management and Workload</p> <p>This refers to the ability to organize time and distribute tasks effectively to achieve maximum productivity and reduce work stress.</p>						
4.	JCI accreditation has improved your ability to manage time and workload effectively.					
5.	Implementing JCI accreditation standards has enhanced your ability to complete job tasks efficiently.					
<p>Dimension Three: Cooperation and Communication</p> <p>This refers to the ability to work harmoniously with colleagues and other departments through effective communication and collaboration to achieve the hospital's common goals.</p>						
6.	JCI accreditation has enhanced your cooperation with colleagues and other departments in the hospital.					

<p>Dimension Four: Resource and Tool Utilization</p> <p>This refers to the ability to use available resources and tools efficiently to achieve maximum benefit and improve work quality.</p>						
7.	JCI accreditation has improved your use of the hospital's resources and tools.					
<p>Dimension Five: Commitment and Discipline</p> <p>This refers to the extent to which an employee adheres to work attendance, meetings, and compliance with the institution's policies and procedures.</p>						
8.	JCI accreditation has increased your attendance regularity at work.					

<p>Field Three: Burnout; Burnout is a state of physical, mental, and emotional exhaustion due to continuous work pressures, leading to loss of enthusiasm and effectiveness. JCI accreditation aims to reduce burnout rates by improving the work environment and providing continuous training and support programs for employees, thus enhancing their well-being and increasing job satisfaction.</p>						
<p>Dimension One: Emotional Exhaustion</p> <p>This refers to the employee's feeling of psychological and emotional fatigue resulting from constant dealing with work pressures and negative emotions.</p>						
No.	Statement	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
1.	JCI accreditation has reduced your emotional exhaustion at work.					

2.	Your feelings of fatigue and exhaustion have decreased since obtaining JCI accreditation.					
3.	Your work stress with patients has increased since JCI accreditation.					
<p>Dimension Two: Work Pressure</p> <p>This refers to the feeling of stress and pressure resulting from large amounts of tasks and responsibilities that exceed the employee's capacity.</p>						
4.	Your work pressure has decreased since JCI accreditation.					
5.	JCI accreditation has improved your ability to manage work pressures.					
<p>Dimension Three: Physical and Cognitive Symptoms</p> <p>Physical symptoms such as headaches and sleep disorders, and cognitive symptoms such as memory and concentration problems, resulting from severe psychological stress.</p>						
6.	Physical symptoms of burnout, such as headaches or sleep disorders, have decreased since JCI accreditation.					
7.	The impact on your cognitive functions, such as memory and concentration, has					

	increased negatively since JCI accreditation.					
<p>Dimension Four: Work Behaviors</p> <p>The actions employees take in the work environment, such as absenteeism and withdrawal from responsibilities.</p>						
8.	Noticed changes in your work behaviors, especially regarding absenteeism or withdrawal from responsibilities since JCI accreditation.					


<p>Field Four: Organizational Performance; The institution's ability to achieve its goals efficiently and effectively by improving service quality, managing resources effectively, and enhancing employee satisfaction. JCI aims to strengthen quality and safety foundations, increase operational efficiency, and motivate employees through compliance with high international standards, leading to increased competitiveness and organizational commitment within the institution.</p>						
Organizational Performance will be evaluated based on the International Patient Safety Goals (IPSG).						
No.	Statement	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
1.	JCI accreditation has enhanced the adherence of using two patient identifiers, excluding the patient's room number.					

2.	JCI accreditation enhances the adherence to protocols for writing, reading back, and confirming telephone orders.					
3.	JCI accreditation has enhanced the adherence to a policy for preparing high-alert medications.					
4.	JCI accreditation has ensured the adherence to hand hygiene protocols before and after clinical practice.					
5.	JCI accreditation has enhanced the adherence to a protocol for fall risk assessment.					
6.	JCI accreditation has ensured the correct surgery site before sending patients to a surgical procedure, or before starting any surgical procedure					

Thank you for your cooperation.

Appendix Three: IRB Approval

Arab American University
Institutional Review Board - Ramallah



الجامعة العربية الأمريكية
مجلس أخلاقيات البحث العلمي - رام الله

IRB Approval Letter

Study Title: "The Effect of Hospital Accreditation on the Job Satisfaction, Job Performance, Burnout, and Organizational Performance: A Case Study of Al-Istishari Arab Hospital, Palestine"

Submitted by: Eman Nedal Abdalfatih Obaidi


Date received: 14th May 2024

Date reviewed: 15th May 2024

Date approved: 15th May 2024

Your Study titled "The Effect of Hospital Accreditation on the Job Satisfaction, Job Performance, Burnout, and Organizational Performance: A Case Study of Al-Istishari Arab Hospital, Palestine" with the code number "R-2024/A/71/N" was reviewed by the Arab American University Institutional Review Board - Ramallah and it was approved on the 15th of May 2024.

Sajed Ghawadra, PhD
IRB-R Chairman
Arab American University of Palestine



General Conditions:

1. Valid for 6 months from the date of approval.
2. It is important to inform the IRB-R with any modification of the approved study protocol.
3. The Board appreciates a copy of the research when accomplished.

رام الله - فلسطين

Tel: 02-294-1999

E-Mail: IRB-R@aaup.edu

Website: www.aaup.edu

95

تسهيل المهمة: Appendix Four

Arab American University Faculty of Graduate Studies		الجامعة العربية الأمريكية كلية الدراسات العليا
--	---	--

2024/7/24

حضرة الدكتور عاطف الريماوي المحترم

المدير التنفيذي للمستشفى الاستشاري العربي

تسهيل مهمة بحثية

تحية طيبة وبعد،

تُهدىكم كلية الدراسات العليا في الجامعة العربية الأمريكية أطيب التحيات، وبالإشارة إلى الموضوع أعلاه، تشهد كلية الدراسات العليا في الجامعة العليا أن الطالبة إيمان نضال عبد الفتاح عبيدي والتي تحمل الرقم الجامعي 202216567 هي طالبة ماجستير في برنامج إدارة الجودة في المؤسسات الصحية وتعمل على رسالة الماجستير الخاصة بها بعنوان:

"دراسة تأثير شهادة اعتماد المستشفيات على الرضا الوظيفي، الأداء الوظيفي، الاحتراق الوظيفي، والأداء المؤسسي: دراسة حالة مستشفى الاستشاري العربي في فلسطين"، تحت إشراف د. سامي صدر. نأمل من حضرتكم الإيعاز لمن يلزم لمساعدتها للحصول على المعلومات اللازمة للدراسة، علماً أن المعلومات ستستخدم لغاية البحث فقط وسيتم التعامل معها بغاية السرية، وقد أعطيت هذه الرسالة بناءً على طلبها.

وتفضلوا بقبول فائق الاحترام

عميد كلية الدراسات العليا

د. نوار قطب



Page 1 of 1

Jenin Tel: +970-4-2418888 Ext.:1471,1472 Fax: +970-4-2510810 P.O. Box:240
Ramallah Tel: +970-2-2941999 Fax: +970-2-2941979 Abu Qash - Near Alrehan
E-mail: FGS@aaup.edu ; PGS@aaup.edu Website: www.aaup.edu

تأثير اعتماد اللجنة الدولية المشتركة على رضا الموظفين وأدائهم والاحتراق النفسي والأداء التنظيمي: دراسة حالة مستشفى الاستشاري العربي، فلسطين

إيمان نضال عبد الفتاح عبيدي

د. سامي صدر

د. يوسف عبد الحميد ميمي

د. يحيى احمد صلاحات

ملخص

تُعد عملية اعتماد المستشفيات عاملاً مهماً في تعزيز جودة الخدمات الصحية. بحيث يرتبط اعتماد المستشفيات بتحسين رضا الموظفين، مما يؤدي غالباً إلى ممارسات تنظيمية أفضل وبيئة عمل أكثر أماناً. تهدف الدراسة الى تقييم تأثير الاعتماد JCI على تصورات الموظفين لرضا الوظيف والأداء الوظيفي والإرهاق والأداء التنظيمي فيما يتعلق بمعايير IPSC في مستشفى معتمد فلسطينياً.

تم إجراء تصميم دراسة كمية ومقطعية ووصفية في المستشفى الاستشاري العربي، فلسطين في وسط الضفة الغربية. السكان الذين يمكن الوصول إليهم هم مقدمو الرعاية الصحية الذين كانوا في الخدمة في المستشفى أثناء جمع البيانات حتى أغسطس -2024. تألفت العينة من (86) مشاركاً استوفوا معايير الإدراج بمعدل استجابة بلغ 78.89%.

من بين 86 مشاركاً، شكل الرجال الأغلبية (70.9%)، وكان 47.7% منهم تتراوح أعمارهم بين 30 و32 عاماً. أظهرت بيئة العمل (أفاد 86% من المستجيبين بتحسين)، والتواصل، والعمل الجماعي (60.5%) تحسناً في رضا الوظيفة. من ناحية أخرى، لوحظت نتائج متضاربة حول التعويض العادل والتوازن بين العمل والحياة. لوحظت تحسينات في أداء الوظيفة، وخاصة في إتقان المهارات (93%)، وكفاءة رعاية المرضى (تحسن بنسبة 83.7%). كانت النتائج المتعلقة بالإرهاق مختلطة، حيث أظهرت تحسناً طفيفاً في التعب العاطفي وإدارة ضغوط العمل ولكن مع زيادات ملحوظة في الإجهاد (أفاد 74.4% من المستجيبين بارتفاع مستويات الإجهاد). وقد ثبت الالتزام القوي بمعايير JCI من خلال الأداء التنظيمي، وخاصة في مجالات نظافة اليدين (90.7%) وتحديد هوية المريض (72.1%).

تؤكد الدراسة على التأثيرات المعقدة لاعتماد JCI على فعالية الموظفين والمنظمة في مستشفى الاستشاري العربي. وعلى الرغم من أن الاعتماد أدى إلى تحسين الأداء الوظيفي والرضا الوظيفي والأداء التنظيمي، إلا أنه أثار أيضًا صعوبات جديدة، ولا سيما إدارة الإجهاد والإرهاق. تسلط هذه النتائج الضوء على ضرورة وجود استراتيجية اعتماد شاملة تعزز كل من الرفاهية والنمو المهني.

الكلمات الرئيسية: اعتماد المستشفى، الأداء الوظيفي، الرضا الوظيفي، الإرهاق والأداء التنظيمي، هدف سلامة المريض الدولي.