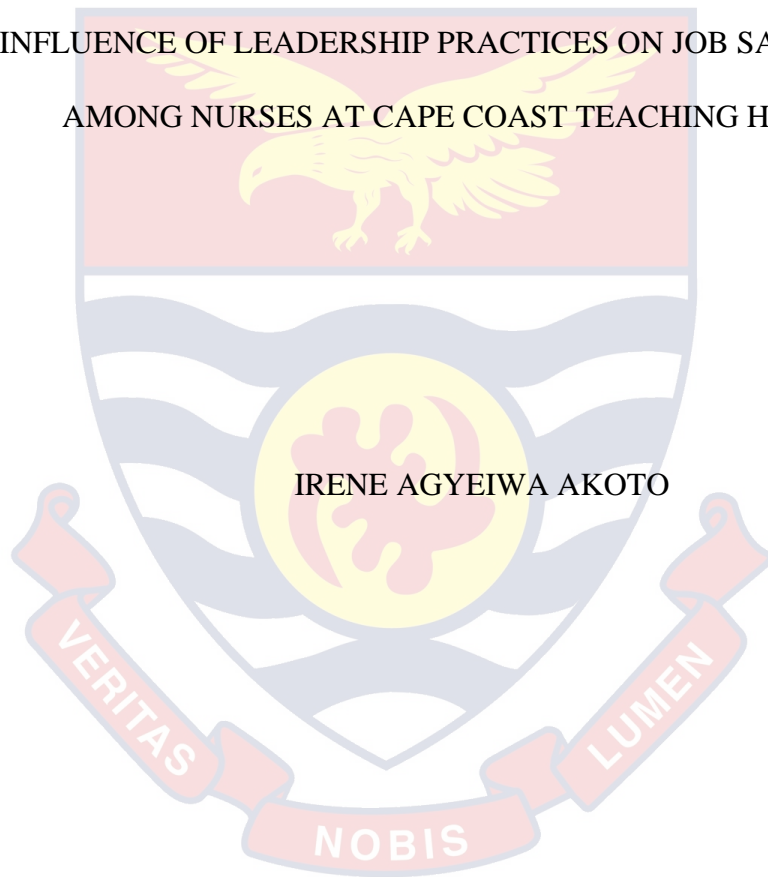UNIVERSITY OF CAPE COAST

INFLUENCE OF LEADERSHIP PRACTICES ON JOB SATISFACTION

AMONG NURSES AT CAPE COAST TEACHING HOSPITAL
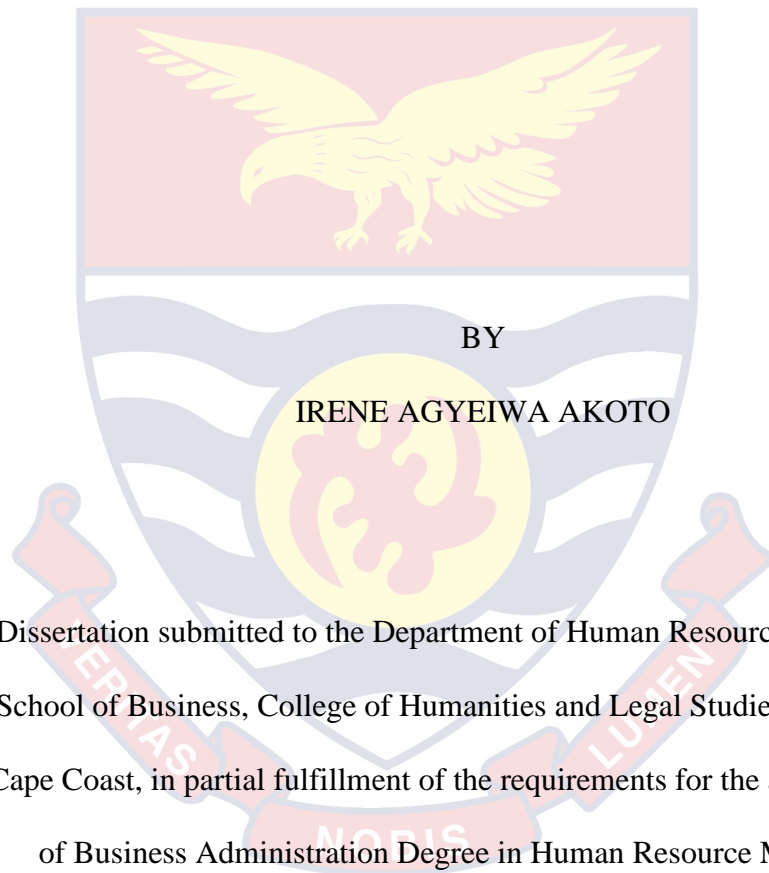
IRENE AGYEIWA AKOTO

2021

UNIVERSITY OF CAPE COAST

INFLUENCE OF LEADERSHIP PRACTICES ON JOB SATISFACTION

AMONG NURSES AT CAPE COAST TEACHING HOSPITAL

BY

IRENE AGYEIWA AKOTO

Dissertation submitted to the Department of Human Resource Management,

School of Business, College of Humanities and Legal Studies, University of

Cape Coast, in partial fulfillment of the requirements for the award of Master

of Business Administration Degree in Human Resource Management

AUGUST 2021

DECLARATION

Candidate's Declaration

I hereby declare that this dissertation is the result of my own work and that no part of it has been presented for another degree of this university or elsewhere.
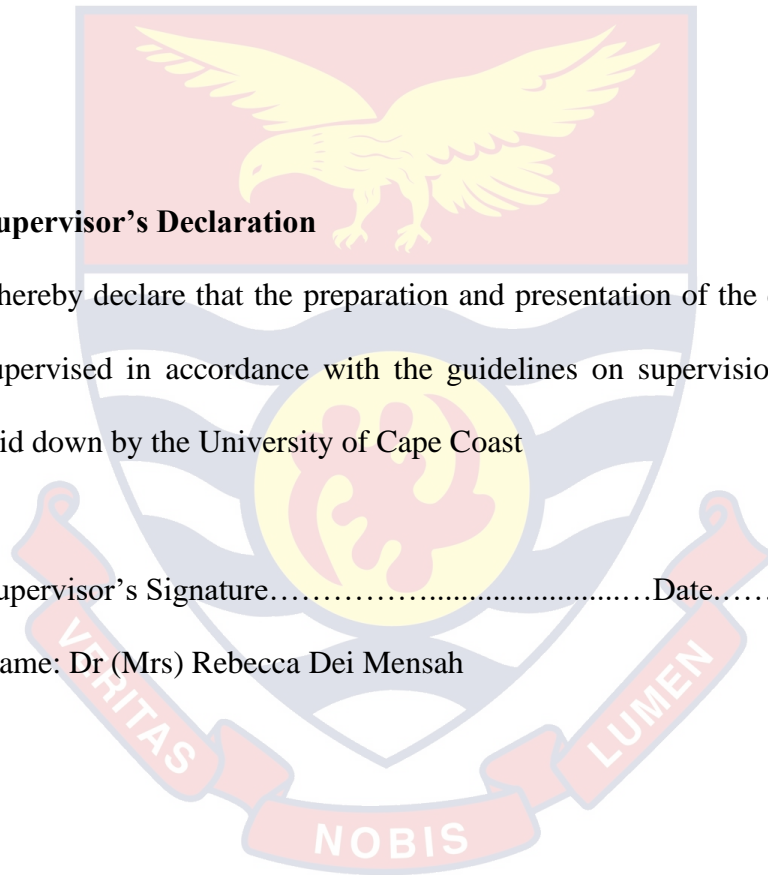
Candidate's Signature………………. Date…………………………

Name: Irene Agyeiwa Akoto

Supervisor's Declaration

I hereby declare that the preparation and presentation of the dissertation were supervised in accordance with the guidelines on supervision of dissertation laid down by the University of Cape Coast

Supervisor's Signature……………....................…Date………..………

Name: Dr (Mrs) Rebecca Dei Mensah

ABSTRACT

This study examined the role of nurse managers/unit heads leadership styles on nursing staff job satisfaction. Using the Kouzes and Posner Transformational Leadership Practices and Paul Spector Job Satisfaction Survey as an organizing framework. A cross-sectional quantitative design was used to conduct the research among subordinate nurses at Cape Coast Teaching Hospital in the Central Region for the study. A total of 144 participants were involved in the study and the SPSS version 25 was used to analyze the data. Mean, standard deviation and linear regression was performed to determine the relationship between leadership practices and job satisfaction. The study found that leadership practiced by the unit heads is favourable such that leaders foresee the future by conspiring up exciting and dignifying possibilities. It was also found that subordinate nurses at CCTH are to some extent satisfied with their job in the form of promotion in their workplace, recognition they receive for work done well, and interest supervisors show in them. Lastly, the study found that though there is a statistically positive relationship between leadership practices and job satisfaction of subordinate nurses, little variation in the job satisfaction is explained by leadership practices. The study concludes that among others, shared vision, collaboration, trust building and clarifying values to subordinates help satisfy subordinate on the job. However, depending on the magnitude of these indicators, the level of satisfaction derived. It was recommended that management should provide the benefits they deserve and be paid an amount which is equivalent to the work they do so as to boost their level of satisfaction and performance in turn.

ACKNOWLEDGEMENTS

I extend my utmost gratitude to my supervisor; Dr (Mrs) Rebecca Dei Mensah for her support throughout this project work. I would also want to extend my appreciation to all those who in diverse ways have supported my education to this high level. Also, to Mr. Isaac Tetteh Kwao for his support for me. Again, to all my post graduate lecturers who taught me.

Further, to my brothers and sisters who in diverse ways contributed towards the realization of this noble dream. I say God bless you all. Finally, to my family for the support given me during those hard time.
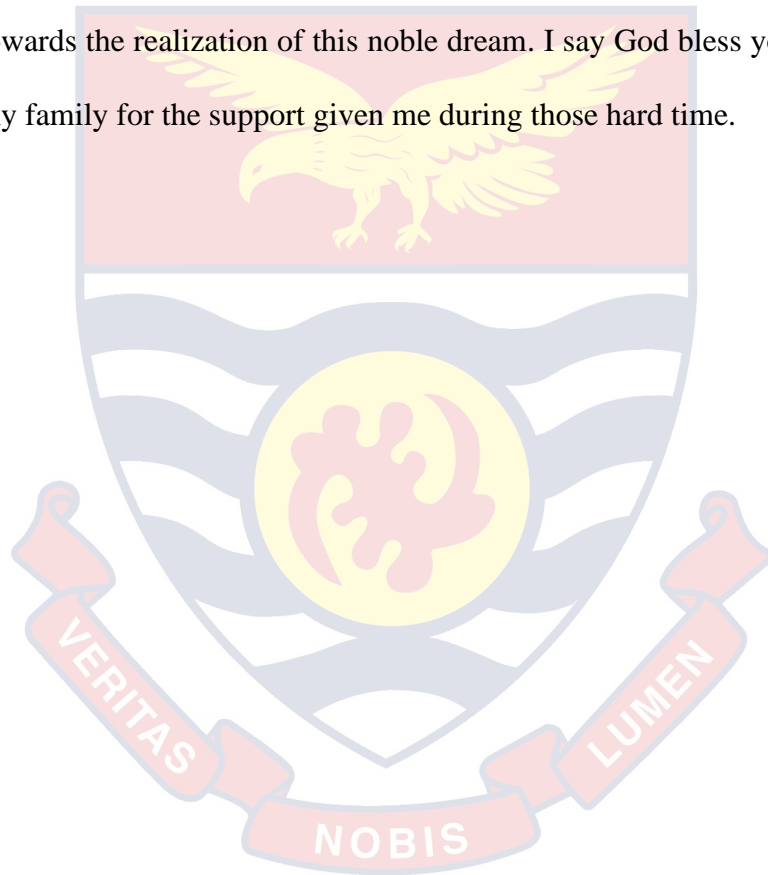
DEDICATION

To my parents Mr. and Mrs. Akoto; my sister-Ms Loretta Owusuwa Akoto;

and all my loved ones
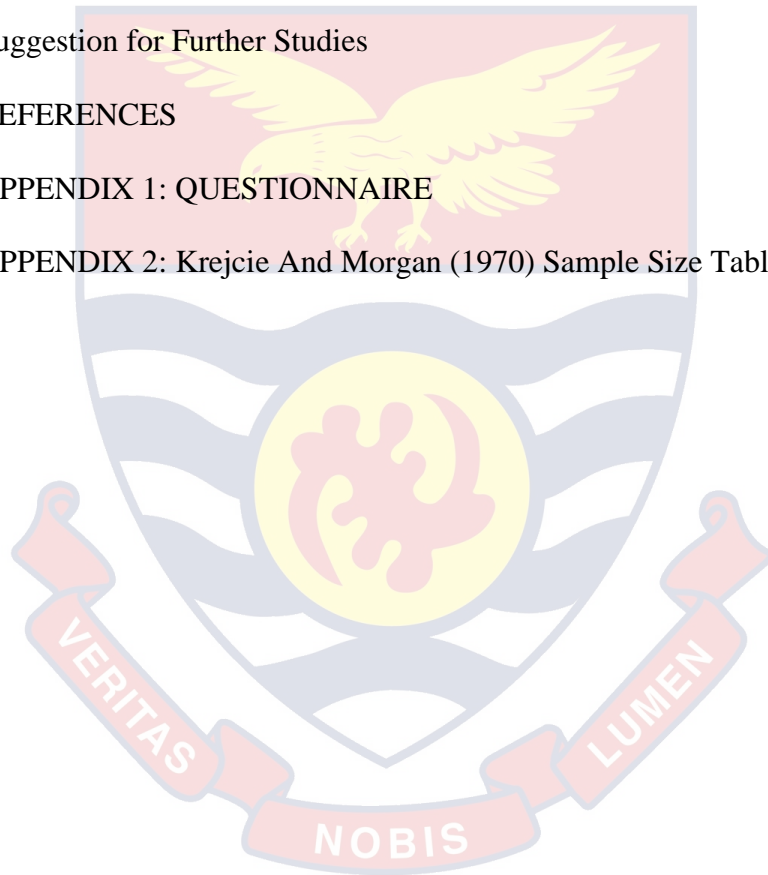
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CHAPTER ONE

INTRODUCTION

The study's most significant aspect is an examination of the concept of leadership. It establishes criteria by which field leaders can be identified, as research into the idea literature might lead to questions about the definition of leadership, the procedures used to define a person as a leader, and, to name a few, their unusual positions. The phrase has numerous meanings and classifications at any given time. There are around 350 different types of leadership concepts (Bass, 1990). As a result, embracing a single definition is challenging (Cheng, 2003). Both of these ideas are aimed at illustrating what leadership should be or what it means to be a leader.

Background of the Study

As it is fundamental to the happiness and well-being of the populace and also contributes significantly to the economic growth of the country, the healthcare industry is one of the key sectors for national development of each country (WHO, 2008). Job satisfaction, as stated by Spector (2008), is the level at which workers are more relevant in the health sector, as it has a positive or negative effect on the delivery of services among nurses (Shah, Ali, Dahri, Brohi, Maher & Hameed, 2018). Nursing is characterized as a human-focused career with an emphasis on humanism (Azaare & Gross, 2011) and the idea of work satisfaction is therefore crucial in achieving nursing objectives.

Job satisfaction has been shown to be a key factor affecting the outcomes of nurses (service delivery and decision to leave / stay) and this view of the world is not different from the findings of a study by McDowell,

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Matthews, Matthews, Aaron, Edmondson and Ward (2019), who shown that health workers ' job satisfaction and quality of care are positively associated. This suggests that the higher the satisfaction of health staff, the more patients receive quality care. Another, Janicijevic, Seke, Djokovic and Filipovic (2013), research concluded that the satisfaction of healthcare staff influences patient satisfaction. Alam and Mohammad (2010) described job satisfaction as a multifaceted term that involves elements of employee satisfaction with the management practices of their boss, compensation, career opportunities, rewards, organizational processes and employee experiences.

Leadership, as described by WHO (2010), is one of the key building blocks of the health sector with the provision of care, health financing, health staff, the health information system, and access to essential medicines (Alam & Mohammad, 2010). Health leadership is seen as a crucial theme in the growth agenda as it acts as a core agency for achieving every health goal, and this explains why it is part of the six building blocks. Many researchers and scholars have clarified the meaning of leadership (Asamani, Naab, & Ofei, 2016; Cummings, MacGregor, Davey, Lee, Wong, Lo & Stafford, 2010) and realized that leadership is not just about having the power to command, but also a process of seeking ways to achieve organizational goals through inspiration, providing support, influencing subordinates, sharing ideas and putting into practice what the leader wants the subordinates to do.

Several studies have shown a significant correlation between nursing employee leadership styles and outcomes (Kean, & Haycock-stuart, 2012; Cummings et al., 2010). In their report, Azaare and Gross (2011) revealed that it was uncertain to understand the type of leadership style used by nursing

executives, but it was asserted that the style of management of nursing executives was one of aggression and lordship. A research conducted by Sojane, Klopper, and Coetzee (2016) found that nurse executives leadership styles substantially predicted work satisfaction for nurses. They further claimed that the levels of work satisfaction also associated with the intent of the nurse to remain or leave.

Mosadeghrad and Ferdosi (2013) have found that leadership styles play an important role in employee work satisfaction in supporting research on leadership and job satisfaction in healthcare. They also noted that leaders should not only use their organization's participatory leadership style, but must display the best style that suits the given situation. The WHO has described leadership as a building block for helping to improve the world's health system (WHO, 2010). The WHO's support of a global study and others unique to Ghana both affirm and involve the need for leadership studies in the Ghanaian health system.

Leadership activities contribute to the happiness of followers at work (Ahmad et al., 2017), which, depending on the style of a leader, may be increased or decreased. Leadership styles or behaviours have been reported by researchers in developing countries to facilitate beneficial outcomes in which the style of transition leadership has also been used to enhance nursing outcomes (Cummings et al., 2010). A study conducted by Mcbee (2013) among educational leaders in the non-health setting also concluded that leadership activities affected student outcomes. Job satisfaction has also been proven to have its effect on a lot of outcomes in the health sector.

A research by Sojane, Klopper and Coetzee, (2016) demonstrated that work satisfaction was strongly associated with the intention of nurses to leave. The lower the work satisfaction level of the nurse, the more the nurse wants to leave the profession, and vice versa. Janicijevic, et. al. (2013) have found that patient satisfaction was also significantly influenced by the satisfaction of health staff. The standard of nursing care was also found in a study by Aron (2015) to be determined by nurse satisfaction.

Statement of the Problem

The need of excellent leadership in the successful delivery of health care does not need to be emphasized. Effective leadership is both a necessary and vital part of any successful health-care system. In the preface to the 2018 Ghana Health Service Annual Report, the Director General of the Ghana Health Service (GHS) described a lack of leadership and management skills, as well as team building and teamwork, as two critical factors impeding the delivery of successful health services in the country, including Cape Coast Teaching Hospital. This is a major wake-up call for all health professionals at the Cape Coast Teaching Hospital, as well as the entire country. This highlights the health-care industry's leadership crisis. The global lack of transformative, visionary, and servant leadership in healthcare is real, and strong leaders in Ghana's health sector changes must be a top focus.

Despite the fact that leadership has been shown to improve work satisfaction in the studies, leadership in Ghana and Africa as a whole has received less investment and research in comparison to Europe, America, and portions of Asia (Azaare & Gross,2011; Cummings et al., 2010). According to the Global Equity Initiative, Ghana also risks future depletion or worsening of

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human resource difficulties (nurses) due to a lack of study on leadership practices and other factors affecting job satisfaction (2018). As a result, this research is necessary in order to identify potential risks to nurse dissatisfaction, quality of care, and patient satisfaction, as well as to capitalize on any strengths uncovered. As a result, the purpose of this study is to look into the effects of leadership activities on job satisfaction among nurses at the Cape Coast Teaching Hospital.

Purpose of the Study

The general purpose of the study was to assess the influence of leadership practices on job satisfaction among nurses.

Objectives of the Study

The specific objectives of the study were:

1. To identify the leadership practices demonstrated by the unit heads.

2. To assess the job satisfaction levels of subordinate nurses.

3. To determine the effect of leadership practices of unit heads on job satisfaction of subordinate nurses.

Research Questions

The study was guided by the following research questions:

1. What leadership practices are demonstrated by unit heads?

2. What is the level of job satisfaction among subordinate nurses?

3. What is the effect of leadership practices and job satisfaction among subordinate nurses?

Significance of the Study

The findings of this study will be of crucial contribution to the understanding of nursing in the field of nursing management and their effect on nurses ' job satisfaction in Ghana as it appears to have a few studies in the local context. This research will also provide healthcare leaders with opportunities to examine their own management styles as well as focus on how they influence the job satisfaction of their subordinates. Findings from this research may also form the basis for the creation of structured in-service training sections for current and future leaders in healthcare.

Delimitation

The study is delimited to only Cape Coast Teaching Hospital and all other teaching hospitals are excluded. However, these other hospitals can adopt the recommendations from this study. The variables under this study are leadership practices as the independent variable and job satisfaction as the dependent variable. The target population are the subordinate nurses and excludes nurses who hold positions.

Definition of Terms

The practice of *leadership* as used in this study encompasses all a leader 's instructions, plans and programs and how plans and programs are executed and how workers are empowered to do their job.

Job satisfaction as used applies to the meaning of job satisfaction, which serves as an incentive to work. In other words, the amount of satisfaction that workers feel with their jobs.

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Organization of the Study

This study was structured under five chapters. The background of the study, the problem statement, research questions, objectives, significance, delimitation and the organization of the study are addressed in Chapter one. Chapter two reviews theories of management practices, the definition of leadership practices and literature on job satisfaction. The specifics of the research techniques and methods used are discussed in chapter three. The presentation of the findings and the discussion of them are included in chapter four, while the review, conclusions and recommendations are discussed in chapter five.

Chapter Summary

The chapter provided the overview of leadership practices from broad to specific indicating how leadership practices are done in the western world through to Africa and Ghanaian environment. The chapter also discussed satisfaction of employees as a result of leadership received. The problem of leadership in the healthcare and specifically Cape Coast Teaching Hospital. The objectives and how relevant the study is were discussed in the study. Delimitation as welle as limitations were also discussed in this chapter.

CHAPTER TWO

LITERATURE REVIEW

Introduction

The purpose of this section is to review the relevant literature on the main constructs; job satisfaction and leadership practices. The study examines theoretical as well as empirical findings from numerous studies based on leadership as the key constructs of the analysis. In order to classify associated research, a literature review is performed on work satisfaction. Finally, it explores and incorporates the relationship between the two constructs, leadership and job satisfaction.

Transformational Leadership Theory

There are several leadership theories, but the Transformational Leadership theory of Kouzes and Posner (2012) is about how leaders make subordinates do the things they least imagined they could do. This theory is about behaviours that transform ideals into actions, realities, inventions, unity, and incentives into leadership. In this research, the operationalization of leadership practice is based on Kouzes and Posner's transformational leadership theory. Their research over nearly twenty years has described leadership as a set of activities and behaviors rather than just a role. These practices provide leaders with advice on achieving their accomplishments or "getting exceptional things done" (Kouzes & Posner, 2012). These practices provide leaders with advice. These activities seem to be core elements of the idea of transformative leadership.

Kouzes and Posner (2012) have been created through extensive research on current leadership practices and have been accepted by many

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researchers as genuinely reflective of highly successful leadership practices. Such approaches include questioning the procedure, encouraging a shared vision, allowing others to behave, modeling the way, and fostering the heart (Kouzes & Posner, 2012). Challenging the process is a way of life for transformational leaders. By developing new ideas or finding and promoting new ideas. Transformational leaders often demonstrate their ability to question the system in order to put the ideas they have into motion in order to implement new ideas, processes and services (Kouzes & Posner, 2012).

This strategy among transformational leaders aims to create passion for others' visions. They believe that each person must be committed to a common future that they strive to create in order to be able to bring people together in any organization (Bass & Avolio, 1993). Also, one important factor in any company that encourages teamwork, devotion, and encouragement is allowing other individuals the chance to act. This encourages followers to do their job and therefore to understand their full ability or strengths by doing so. This practice helps build an environment of integrity and competence and also encourages supporters to feel confident (Kouzes & Posner, 2012). Modeling the course means taking the first step as a leader. In all they do, leaders that are transformative set a precedent in order to build momentum and also act as a standard for followers. These leaders tell their followers to live by the ideals they promote by setting examples (Bass & Riggio, 2006).

Again, they need to be supported and empowered for individuals to be able to meet goals or objectives set by their organization. Transformative leaders agree that leaders must honor and appreciate the success of their employees by influencing employee motivation. It helps them feel like they

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are of something important and also enhances the sense of belonging when followers are celebrated for the job they do (Dionne, Yammarino, Atwater & Spangler, 2004).

Concept of Leadership

The researcher started to look at the most common concepts of leadership in order to get an understanding of the idea of leadership. The researcher thought during this review that there had to be a link between the problems and the idea of leadership. A study and review of common leadership concepts shows that most concepts appear to concentrate on individual characteristics and features. Eminent personalities had their own viewpoints and leadership was thus established. Leadership is an effort to control the behaviors of followers through the contact process and towards achieving certain goals or objectives, according to Yahaya and Ebrahim (2016).

Leadership is a mechanism of control that helps managers to get their people to do what needs to be done happily, do what needs to be done well (Cribbin, 2018). Similarly, leadership was described by Rauch and Behling (2017) as the process of influencing an organized group 's activities towards goal achievement. Leadership finds and has the confidence to seek the company's destiny (Tannenbaum, Weschler & Massarik, 2017; Jaworski, 2015). To Anderson and Sun (2017), leadership is an interpersonal influence, exercised in a situation and directed towards achieving a defined goal or goals through the communication process.

An analysis of the concept of leadership is most important to the report. It provides criteria within which leaders in the field can be defined, as

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the examination of the concept literature can generate inquiries into areas such as the meaning of leadership, methods adopted to define a person as a leader, and, to list only a few, their peculiar positions. At any given moment, the term has multiple meanings and classifications. There are more than 350 leadership concepts (Bass, 1990). Therefore, accepting only one definition is difficult (Cheng, 2003). Both of these concepts are geared towards painting a picture of what leadership should be or what it means to be a leader. Mihelic, Lipicnik and Tekavcic (2010) suggest that society has long been fascinated by leadership and has for centuries been the focus of extensive literature. Leadership is seen as a mechanism by which a individual influences others to achieve a goal and guides the organization in a manner that makes it more unified and coherent (Northhouse, 2018; Rowe, 2007).

Smith and Malcolm (2010) claim that leadership is a mechanism in which a person or group is motivated by efforts to achieve a goal. In his opinion, Bass (1990) defines leadership as a process of interaction between people and groups that involves a structured and restructured situation, participants, expectations and perceptions. Robbins, Bradley and Spicer (2011) propose that leadership is an individual's ability to manipulate a group's actions to accomplish organizational objectives. Indeed, leadership has been described as a social impact process in which one individual may enlist the help and support of others in the performance of a common task (Haycock, 2010).

On the evidence that underlies the position of a leader, the researcher delved into literature. It came to light in the previous review of the concept of leadership that the key terms that characterize leadership are: transformation,

vision, communication, constructive, high risk, aligning and motivating individuals. To lead is to provide instructions in a more concise context. Leaders set the course and get individuals to follow them. Leadership is about empowering people to give their best to achieve a desired outcome, obtaining their determination and encouraging them to achieve set goals (Carson, Tesluk & Marrone, 2017). Leaders have three critical functions, as simplified by Schultz (2010). In order to ensure that the function of the group is accomplished, they must identify tasks, make known what the group is supposed to do and to accomplish the mission.

On the other hand, management is a collection of well-known processes such as planning, budgeting, job structuring, performance assessment, rationality and control, reactive and risk averse, and problem solving that allows an organization to do what it knows to do well predictably (Konopaske, Ivancevich & Matteson, 2017). Therefore, management helps to deliver products and services as promised, of consistent budget standard, day after day, and week after week. This is an incredibly difficult job in organizations of any scale and complexity, as indicated by (Kotter, 2013).

Transformational Leadership Practices

The transformative leadership style relies on high levels of contact from management to achieve goals, according to the study on transformative leadership. Via collaboration and high visibility, leaders inspire workers and increase productivity and performance. This leadership style includes management 's participation in order to accomplish goals. Leaders concentrate within an organisation on the big picture and assign smaller tasks to the team to achieve objectives. This kind of management is highly noticeable and uses

the command chain to get the job done. Transformation leaders concentrate on the big picture, having to be surrounded by individuals who take care of the facts. The leader often searches for solutions that drive the organization to achieve the vision of the business.

Leadership is seen to have a nuanced notion and scholars of diverse perspectives have paid a great deal of attention to make it have a number of theories that aim to understand the definition (Cummings et al, 2010). The World Health Organization defines leadership as a term that seeks to provide effective oversight, accountability, and alliance among organizations with strategic policy frameworks (WHO 2010). Despite the numerous theories of numerous scientists and academics, their results suggest that leadership is fundamentally about impacting people's lives to achieve their set goals or do exceptional things (Grimm, 2010; Asamani, Naab, Maria, & Ofei, 2017)). Nevertheless, regardless of their numerous ideas and reasons, leaders or individuals seeking to influence others show leadership in different patterns.

The follower feels trust, appreciation, loyalty and reverence for the leader with a transition leader, and he / she is inspired to do more than what he / she was originally supposed to do (Bass, 2009; Carson, Tesluk & Marrone, 2007). The leader of transformation inspires followers to think critically and look for new ways to approach their work, leading to intellectual stimulation (Bass, 2002). As a result, their level of satisfaction and dedication to their organization's objectives are growing (Podsakoff, Bommer, Podsakoff & MacKenzie, 2006). A leader who is strong in transformative behaviour will gain optimal output from his followers because he or she can motivate

followers to increase their success standards and improve creative problem-solving abilities (Bass, 2002; Yammarino & Bass, 1990).

Abu-Tineh, Khasawneh, and Al-Omari (2018) considered the principals in the Jordanian schools to illustrate the methods of transformative leadership. These researchers have claimed that this model should be given more consideration because many researchers have recognized that it is genuinely reflective of extremely effective procedures and can also serve as a framework for school teachers to determine their management strengths and weaknesses. The findings of this study were not different from Anderson's (2011) use of this model in the nursing setting, and he discovered that nurse managers who exhibited transformative leadership strategies were able to improve their subordinates' job satisfaction levels. The findings of Anderson (2011) were also supported by Moneke & Umeh (2014) by concluding that transformational leadership strategies were mainly seen by nursing managers and found to be a strong predictor of the job satisfaction of nurses in the critical care unit by subordinates.

Despite the detailed findings of the above studies, it was realized that a particular method was mostly displayed at each stage by the leaders under review, explaining why Kouzes & Posner (2012) claimed that leadership practices were used based on the situation faced by the leaders (Kedir & Geleta, 2017; Moneke & Umeh, 2014; Zagorsek, Jaklic & Stough, 2004; Clavelle, Drenkard, 2017; This research also revealed in Loke (2008) that the Kouzes and Posner Leadership Model was followed by hospital managers. The research concluded that if all executives are educated and retrained to integrate their leadership strategies into their management skills, it would be

of value. The researcher 's analysis in Maitra (2007) established that women leaders were found to practice the Kouzes and Posner Leadership Model. In allowing others to act, the female leaders scored high, followed by modeling the way, motivating the spirit, questioning the process, and inspiring a common vision.

Musinguzi, Namale, Rutebemberwa, Dahal, Nahirya-Ntege and Kekitiinwa (2018) in Uganda also verified the claim of Kouzes and Posner in using the Path-Goal Leadership Styles when they discovered in their research that health workers were transformative compared to being transactional or laissez-faire in preferred leaders. Compared to those who exhibited transactional abilities or laissez-faire styles, leaders who displayed the transformative leadership style were found to positively predict engagement, job satisfaction, and teamwork among subordinates. In a research by Chang & Lee (2007) to examine the relationship between leadership, organizational culture, the activity of learning organization and the work satisfaction of employees, transformational leadership styles were also found to be dominantly exhibited by managers.

Another study by Thisera & Sewwandi, (2018), which used the Multifactor Leadership Model to find the relationship of transformative leadership and employee involvement, found that when their leaders displayed the style of transformative leadership, workers were more involved and championed the activities of organizations. A different finding from that of Thisera & Sewwandi (2018) was the findings of another researcher (Koppula, 2008), who also used the Multifactor Leadership Questionnaire to investigate the relationship between transformational leadership and employee

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engagement. In addition, the researcher noted that the analysis obviously lacked the ability to precisely delineate the essence of this relationship between the different subscales of transformative leadership and employee engagement subscales.

Job Satisfaction

Job satisfaction, according to Vroom (1964), is an orientation of the emotion's workers have towards the role they play at work. The basic component of employee motivation and incentive for improved results is job satisfaction. Through the years, many individuals have identified job satisfaction. Job satisfaction is described by Matthews, Daigle and Houston (2018) as an interconnected collection of psychological, physiological and environmental factors that enable workers to acknowledge that they are satisfied or happy with their employment. In addition, the position of employees in the workplace is emphasized by the impact of various elements on an occupation. Clark (2017) argues that if employees are not happy with the role assigned to them, factors such as their rights are not certain, working conditions are dangerous, co-workers are not cooperative, managers are not valued and are not taken into account in the decision-making process, causing them to feel separate.

In addition, he emphasized that businesses cannot tolerate disgruntled workers in current times, when they will not meet their supervisor 's requirements or expectations, they will be dismissed, resulting in increased costs for hiring new employees for businesses. It is also advantageous for organizations to provide workers with a flexible working atmosphere where they feel like their views are respected and they are part of the organization.

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Employee morale should be high as it will be expressed in their results because they will make smaller attempts to progress with low morale.

Employee job satisfaction has gained a lot of attention both theoretically and empirically in management and human resources literature with contradictory results about whether workers were happy with their employment because of the context, nature of work, compensation where the study is conducted. It is assumed that organizations that provide the satisfaction of their workers not only enhance the organization's reputation, but continue to improve the morale and efficiency of all workers as the performance of every business or institution depends more on the employee's quality. Such statements support that of Kavitha, Kavitha and Arulmurugan (2012), which claimed that employees are the core forces of industry and that a company can only shift to success with their effectiveness. The business will only contribute to success with a group of happy workers. They further claimed that the institution must have appropriate welfare programs to respond to their needs in order for an employee to be satisfied.

Studies (Asamani et al., 2015; Cummings et al., 2010, etc.) have shown over time that the efficiency, stay / leave intent of employees is highly dependent on employee satisfaction levels. In a study by Ahmed & Azumah (2010) that examined the influence on overall job satisfaction of the elements of work satisfaction. They discovered that workers were pleased with overall job satisfaction in the survey and their satisfaction was correlated with the salary they earned and their workload.

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Spector (2012) Job Satisfaction Survey

Job satisfaction as leadership has many theories, but Spector's Job Satisfaction Survey is often used because the Job Satisfaction Survey (JSS) is focused on the nine most widely recorded metrics (pay, promotion, supervision, benefits, appreciation, working conditions, co-workers, work itself, and communication) that are common in any organization. The JSS is one of the most commonly used methods for work satisfaction, built on the basis of samples from community health facilities, state psychiatric hospitals, state social service agencies and nursing homes. Thirty-six items further describe the nine aspects that serve as indices of job satisfaction in order to measure employee satisfaction. These nine facets are defined below:

Pay/ Salaries

Pay satisfaction refers to the consideration by workers of compensation for the services provided (Spector, 2012). As quoted by Thamrin, 2018, workers who are fairly paid appear to feel compelled to reciprocate (Meyer & Allen, 2017).

Promotion

Promotion is a common phenomenon that increases workers' satisfaction (Spector, 1985). A positive and substantial association between job satisfaction (promotions, personal relationships, and favorable conditions at work) was documented by Eslami and Gharakhani (2012).

Supervision

For all workers, supervision is a very significant consideration. Where there is a stronger relationship with the boss, satisfaction with supervision

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emerges. Experienced and older staff want less scrutiny than less employees with experience (Spector, 2012).

Co-workers

Co-workers play a significant role in employee engagement and success. Employees want colleagues to support, appreciate and acknowledge each other. From collegiality and interactions between colleagues, satisfaction with co-workers emerges (Spector, 2012).

Working conditions/environment

Working conditions relate to the climate under which an individual operates in an organization. Working environments such as logistics enable workers to do their job better and are likely to create a strong organizational commitment association (Spector, 2012).

Work itself

Human beings like fascinating things that are difficult. A rise in job satisfaction can be caused by jobs that are exciting and complicated (Spector, 2012).

Recognition

Recognition is the recognition and gratitude that a person gets after a hard or excellent job done by his supervisor or colleagues (Spector, 2012).

Benefits

In addition to their regular wages, this entails different kinds of non-wage benefits given to workers (Spector, 2012).

Communication

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This is clarified as the transmission between employers and employees of knowledge (Spector, 2012).

With his research, which examined leadership styles and job satisfaction in the State University System of Florida, Bateh (2011) also contributed to empirical studies on job satisfaction. This research also added to the current results that showed that the employees were pleased with their jobs and their satisfaction was due to the good supervision determined by Paul Spector as a factor that defines the degree of subordinate employee satisfaction. In a study by Chou, Fu, Kröger and Ru-Yan (2011), Job satisfaction levels were found to be poor for home care staff, justifying that the key factors that dictated the satisfaction of these employees were their wage, promotion, and their working climate, but in this case the employees were not happy with any of these, thus contributing to overall job dissatisfaction.

In a research on job satisfaction and motivation of health workers using the JSS, Peters, Chakraborty, Mahapatra, & Steinhardt (2010), it was shown that their analysis was consistent with previous studies that used the JSS to evaluate the degree of job satisfaction among health workers, but the indices for which the instrument was used were not exactly the same. Their study showed that employees in the public health sector valued "healthy job opportunities" and "superior who recognizes jobs" higher than private sector workers. This research also found that job satisfaction is proportional to the occupation and workplace, so the JSS's facets / determinants must be a consideration to which health workers should relate.

Conceptual Framework

Figure 1 demonstrates how the independent variable (leadership practices) assessed by questioning the procedure, motivating the common vision, allowing others to act, modeling the way, fostering the heart, affects nurses ' job satisfaction. Working atmosphere factors, as described by Muhammad & Jamilha, (2010), are also seen as variables influencing the job satisfaction of subordinate nurses. Communication, promotion, supervision, appreciation, co-worker relationship, compensation, job itself, and benefits were other things used to assess nurses' satisfaction. In Figure 1, the relationship between leadership and job satisfaction is shown diagrammatically.

Leadership Practices　　　　　　　　**Job Satisfaction**

Challenging the process		Pay/Salary
Inspiring the Shared Vision		Promotion
Enabling Others to Act	→	Benefit
Modeling the Way		Recognition
Encouraging the Heart		Work Itself
		Supervision
		Working Conditions
		Co-Workers
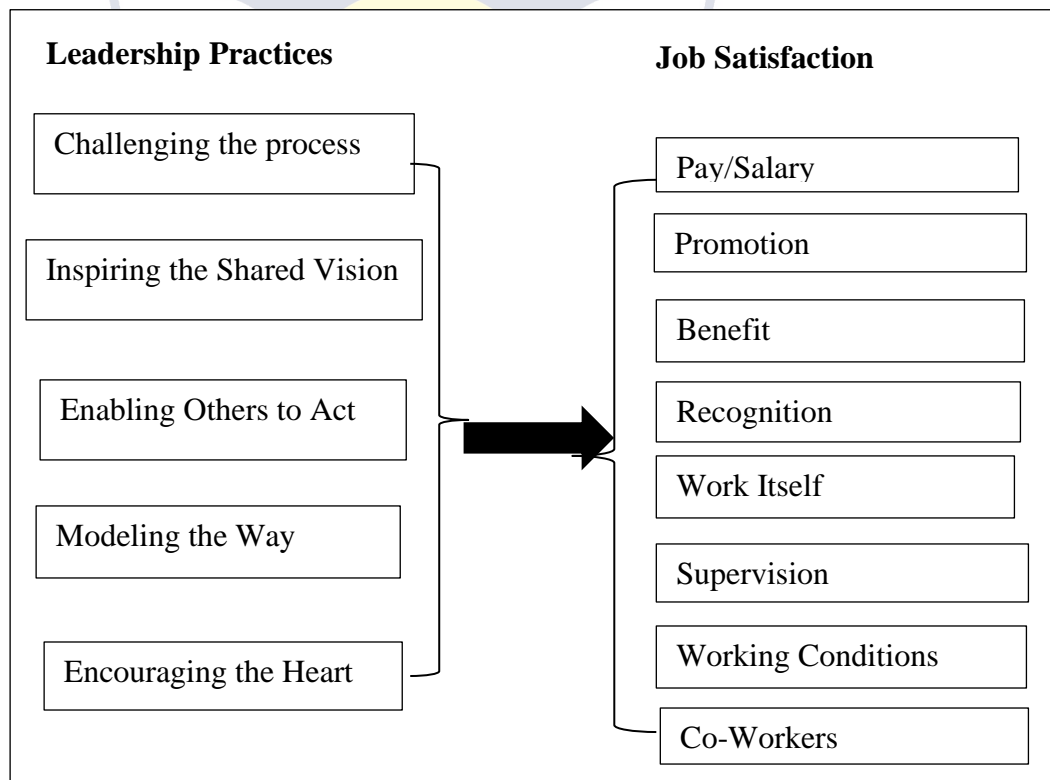
Source: Authors Construct (2020)

Figure 1: Conceptual Framework

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Empirical Studies on Leadership and Job Satisfaction

Many studies have been done on the correlation between leadership behaviors and job satisfaction (Topp, & AlYami, 2018; Boamah, Spence Laschinger, Wong, & Clarke, 2018; Andrews, Richard, Robinson, Celano, & Hallaron, 2012; Nguni, Sleegers, & Denessen, 2007) and have shown that leadership style affects job satisfaction at different levels of organizations. The style of transformational leadership focuses on the need to sustain a high-quality relationship with followers that leads to job satisfaction (Walumbwa, Avolio, Gardner, Wernsing, & Peterson, 2008), while the emphasis of transactional leadership is on social exchange between leaders and followers (Tracey & Hinkin, 1998). A study by Walumbwa (2004) showed that transformational leadership can enhance subordinate staff efficiency by raising consciousness of the significance of expected outcomes, making them value others over themselves, and transforming the level of needs of subordinates.

Ling & Sing (2011) found in a study conducted in Malaysia that both transactional and transformational leadership styles have direct relationships with the work satisfaction of employees. In other studies, similar findings have been published. Thamrin (2012) confirmed that transformational leadership has a major positive effect on work satisfaction. Furthermore, in a systematic study, Brady Germain & Cummings (2010) found that out of 53 studies analyzed, 24 (45.3 percent) recorded that leadership styles centered on people and experiences such as supporting or transformational leadership were associated with higher job satisfaction for nurses. On the other hand, another 10 (18.9 percent) of the examined research showed that management styles

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based on roles and achievements were correlated with decreased job satisfaction among nurses.

While Azaare & Gross (2011) also discovered that Ghanaian staff nurses were unhappy with the autocratic (directive) management style of their nurse managers, it was not obvious that they were not happy with their jobs. Therefore, a decreased level of satisfaction with executives' leadership style could not inherently indicate a decreased level of job satisfaction.

Chapter Summary

In summary, the study found that there is no particular style or technique of leadership that fits all circumstances. Many studies; Musinguzi, Namale, & Kekitiinwa, 2018) have commonly found the style of leadership (transformative, transactional, authoritative, etc.) to be overlooked by these leaders' activities. A lot of research and debates on leadership and work satisfaction have been carried out. It is evident from the reviewed literature that leadership plays an important role in assessing employee work satisfaction (Asamani, Naab, & Ofei, 2015; Azaare & Gross, 2011). In numerous studies (Anderson, 2011; Loke, 2008), leadership activities (modeling the way, allowing others to act, inspiring a common vision, motivating the heart and questioning the process) have also been shown to predict employee job satisfaction.

There have been only a few studies based on the Kouzes and Posner leadership practices model and job satisfaction in the health sector and in the African context to serve as a basis for health workers and policymakers to use in Ghana and Africa as a whole to correct mistakes in leadership practices and job satisfaction. Not many studies have centered on the question of how

leadership activities impact the work satisfaction of nurses, as acknowledged by literature. There is, therefore, an empirical void that serves as a basis for an examination of the impact on job satisfaction among nurses of leadership practices.

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CHAPTER THREE

RESEARCH METHODS

Introduction

This chapter entails the methods that were used in carrying out this research. It provides information on the research design, study area, study population, sample and sampling procedure, data collection instrument, data collection procedures and data processing and analysis.

Research Approach

In conducting research, there are two main approaches, namely quantitative and qualitative approaches (Yates, 2014). A quantitative methodology was adopted by this study. This method is appropriate for the analysis because it facilitates the identification and testing of relationships as well as the review of cause and effect interactions between variables in a structured, objective and systematic process (Grove, Gray & Burns, 2015). According to Leedy and Ormrod (2010), if the object of the study is to clarify, confirm and validate or to test the theory, the quantitative analysis method is more acceptable. If data analysis needs deductive reasoning and objectivity is keen, a quantitative approach is needed (Creswell, 2009).

Research Design

In order to ensure an accurate account of the characteristics of the sample population, this research used descriptive survey design. Descriptive survey design is defined by Quartey and Awoyemi (2002) as the process of gathering data in order to address research questions or test hypotheses concerning the current status of a phenomenon. According to them, this form

of survey aims to provide an accurate and objective overview of an image of a circumstance or real-life circumstance that is ongoing. In the opinion of Fraenkel, Wallen and Hyun (2013), descriptive surveys are used to collect data on prevailing conditions such as attributes, skills, interests, happiness and actions of a person or physical environment (workplace) or improvements in either of these overtimes, as in historical studies.

Aggarwal (2018) adds that for the purpose of description and analysis, descriptive survey design is devoted to the collection of information regarding prevailing circumstances or situations. According to him, this form of research design does not merely collect and tabulate information, but requires proper study, interpretation, comparison, pattern and relationship recognition. For this research , descriptive survey is considered suitable because, as Fraenkel and Wallen (2003) and Gay (2002) believed, it has the advantages of (a) producing a large number of responses from a wide range of people; (b) presenting a meaningful picture of events and trying to understand the opinion and actions of people on the basis of data collected at a time point; and (c) it can be used with greater contention.

Study Area

The research area covers Cape Coast Metropolitan Hospital situated in the Cape Coast Metropolitan Assembly. The Cape Coast Metropolitan Assembly is one of the seventeen (17) districts of the Central Region of southern Ghana. The capital is Cape Coast, which is also the capital of the Central Region. Cape Coast Metropolitan Assembly district is bordered by the Gulf of Guinea to the south, Komenda/Edina/Eguafo/Abirem Municipal District to the west, Abura/Asebu/Kwamankese District to the east and

Twifo/Heman/Lower Denkyira District to the north. The study assessed the effectiveness of human resource succession planning at the Cape Coast Metropolitan Hospital. The Cape Coast Metropolitan Hospital is a primary hospital owned by the government and is located at Cape Coast, central region.

Population

Babbie, Halley and Zaino (2007) claim that the population of the sample is the group or community that a researcher wants to research for generalization purposes. Kotzab (2005) refers to the entire community of respondents or elements related to a sample as the research population. The nurses of the Cape Coast Teaching Hospital staffing situation for December, 2019 are the population for this report. Two hundred and twenty-one (221) is the total population number.

Sampling Procedure

A sampling frame is a collection of elements from which the sample is actually taken from and is closely linked to the population, according to Etikan, Musa, and Alkassim (2016). The sample represents a certain portion of the population or universe, and the process of sampling refers to the approach taken by the researcher to pick objects from the population or universe for the sample (Sekaran & Bougie, 2016). Bambale (2014) stressed that this proportion of the number of units chosen for investigation consists of a population sample. Sampling was defined by Lim and Ting (2012) as the intentional choice of a number of individuals who are to provide the data from which conclusions can be drawn about those individuals.

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Simple random sampling technique is the sampling techniques used in this study. In particular, the table of random number was used to pick the respondents. This gave all the nurses an equal chance of being chosen and also increased the study's reliability and validity. The simple random sampling approach is suitable, according to Hair, Bush and Ortinau (2003), since it is easy to understand and the data results of the survey can be generalized with a pre-specified margin of error to the given population. It helps the researcher to obtain unbiased estimates of the characteristics of the population. It ensures that every sampling unit of the population has an equal chance of being selected, regardless of the sample's actual size, resulting in a true representation of the target population identified.

By using the Krejcie and Morgan (1970) table of sample size determination, the sample size was obtained. The table has population estimates ranging from 10 to 1,000,000. Sample size selection only requires the exact matching of the appropriate cell in the column of the sample size to the corresponding cell in the column of the population. Thus, a total of 144 sample size was drawn from a population of 221 nurses.

Data Collection Instrument

Any type of written or physical instrument that is used to measure variables is a research instrument (Thomas, Silverman & Nelson, 2015). The type of data collection method used depends on the data and the type of data to be obtained. A choice of tool will depend on several variables, including validity and reliability, ease of administration, ease of answer acquisition, and ease of interpretation (Engel & Schutt, 2012). A self-constructed questionnaire was the key instrument used to collect information. It was composed of

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closed-ended questions only. Therefore, the key data source for the analysis was the primary data source. For this analysis, Questionnaire was the best data collection method because it not only allows for larger sample data collection at a minimal cost, but also greatly protects the privacy of respondents. According to Zikmund (2003), in addition to its cost effectiveness, the questionnaire is a basic but effective research instrument.

Data Collection Procedures

If decision-making is to be taken from it, collected questionnaires must be properly treated (Hair, Wolfinbarger, Money, Samouel & Page, 2015). It is therefore critical that raw data is properly treated in order to turn it into information for decision-making purposes (Van Der Aalst, La Rosa & Santoro, 2016). First, the questionnaires that were retrieved were sorted out to classify those that were not answered and to search for documenting quality, clarification and accuracy. The purpose of the research was explained to the respondents and paved the way for the respondent's questionnaires to be collected without difficulty.

Data was collected through questionnaire administration. The questionnaires were developed and administered by the researcher to the different respondents in order to seek information on the leadership activities and job satisfaction of Cape Coast Teaching Hospital's subordinate nurses. Due to the fact that it is the most convenient instrument to use to obtain the necessary information from a literate sampled population, this approach was selected. The collection of data was carried out during working hours over a span of one month (excluding weekends).

Data Processing and Analysis

To evaluate data gathered from the field, this analysis used both descriptive and inferential statistics. First, the gathered information was sorted and arranged. The information was then coded to allow the researcher to recognize codes that pertained to possible responses on the questionnaire for each object. Using SPSS version 22, the data was encoded. This programme was used because it is the most suitable information coding kit. In addition, the benefits of the program include (a) it is user-friendly, (b) it can be conveniently used to analyze multi-response queries, analyze cross-section and time series and cross-tabulation; (i.e., two sets of variables) and (c) it can also be used in combination with Microsoft Excel and Word (Gravetter & Wallnau, 2004). The studies were conducted in compliance with the basic goals of this report. Descriptive statistics were employed to tackle objectives one and two, as well as linear regression analysis for objective three.

Reliability and Validity

A scale 's reliability provides an indication of how free it is from random error (Pallant, 2020) or the degree to which, if repeated steps are taken, the scale produces reliable results (Kent & Kongsted, 2012). Cronbach Alpha has been used to calculate internal consistency and it tests the degree to which an underlying construct is evaluated by all objects on a scale (Pallant, 2020). The individual reliability of consistency should be 0.7 or higher. From Table 1, the Cronbach alpha ranged from 0.960 to 0.922 for the variables; leadership practices and job satisfaction. This indicates that all the constructs and scales used to measure the studied variables were reliable.

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Table 1: Reliability Statistics of Subscales

Variable	Cronbach's Alpha
Overall	.960
Leadership practices	.922
Job satisfaction	.926

Source: Field survey (2020)

An instrument's validity relates to how well the instrument tests the specific concept it was intended to test (Saunders, Lewis & Thornhill, 2009). They also argue that before it can be true, an instrument must be accurate, meaning that an instrument must be reliably reproducible; and that after this has been done, the instrument can then be scrutinized to determine whether it is what it claims to be. The researcher checked other related literature to ensure the validity of the questionnaires, and the literature endorsed the development of the instrument. Scientifically validated items were some of the items on the scale. In addition, before distributing it to the respondents, the crafted questionnaire was presented to the research supervisor for vetting, correction and approval.

Ethical Consideration

Ethical Considerations are moral principles that guide researchers to conduct and report research without deception (Bryman & Bell, 2015). In the data collection process, the researchers found several ethical concerns. First, the researcher introduced herself to the Cape Coast Teaching Hospital management and told them of the study's intent and permission to collect data from their employees. The introductory letter from the Department of Human Resource Management, School of Business, College of Humanities and Legal

Studies, UCC, indicating the researcher 's name and the intent of the report, made this simple.

Again, before asking for information, the researcher obtained the consent of the respondents. Respondents were permitted, without any coercion, to express their willingness to participate. The respondents were made aware of the type of questions to be anticipated, the intent of the information being gathered and how the information would directly or indirectly impact them. Respondents were also informed of the secrecy of their answers. Increased anonymity associated with questionnaires is critical for respondents to be accessible and willing in their answer to the questions, according to Kumekpor (2002). The questionnaires were issued to the respondents and collected after a period of one week in order to ensure that the respondents' privacy was not breached.

Chapter Summary

In this chapter, attention was paid to the research methodology, including the area of the study, design of the study, population of the study, sampling procedure and sample size, data source, instrument for data collection, procedure for data analysis and measurement of variables. It also touched on ethical aspects. This chapter is of particular significance since it includes a description of how the research outcomes will be accomplished.

CHAPTER FOUR

RESULTS AND DISCUSSION

Introduction

The findings emanating from the data obtained from the self-administered questionnaires are discussed in this section of the study. In comparison to previous findings and theories, the discussions included the analysis of the findings. The chapter is organized into two key parts. The first section deals with the background features of respondents and covers areas such as the gender, age, and number of years served at the institution by respondents. In accordance with the intent of the study, the second part is devoted to responses provided by the respondents. It discusses the basic goals of research centered on collected data. One hundred and forty-four (144) questionnaires were distributed to Cape Coast Teaching Hospital workers and collected from them.

Demographic Characteristics of Respondents

Before the main analysis, information relating to age, number of children and marital status of respondents were captured. These are discussed in Table 2. Table 2 shows that, out of 144 respondents, 68 (47.8%) of the respondents are male while 76 (52.8%) are female. Table 2 also shows the age profile of the respondents in years, 86 respondents representing 59.7% were below 30 years, 54 representing 37.5% were aged between 30-39 years, 2 representing 1.4% were aged between 49-50 years and 2 representing 1.4 % aged 50-59 years. With respect to number of years served at the institution, Table 2 revealed that, 13 (9.0%) had spent less than 1 year, 77 (53.5%) had

had spent 1-3 years and 54 (37.5%) had spent 4-6 years. This presupposes that

the workforce is competent since at majority had spent more than a year.

Table 2: Demographic Characteristics of Respondents

Variables	Sub-scale	N	%
Gender	Male	68	47.8
	Female	76	52.8
		144	**100**
Age range	Below 30 years	86	59.7
	30-39 years	54	37.5
	40- 49 years	2	1.4
	50-59 years	2	1.4
		144	**100**
Number of years in service	less than 1 year	13	9.0
	1-3 years	77	53.5
	4-6 years	54	37.5
		144	**100**

Source: Field survey (2020)

Leadership Practices Demonstrated by the Unit Heads

The first objective sought to determine the leadership practices

demonstrated by the unit heads of CCTH. Nine indicators were used to

measure the leadership practices demonstrated by the unit heads and the

assessment was done using means and standard deviations. The responses

were measured numerically such that the higher the scores, the higher the

agreement on each indicator. The relevant mean values presented in Table 3

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were interpreted using mean values obtain from five-point Likert scale items. The mid-point for the scale to an item was 2.9 (Dess, Lumpkin & McFarlin, 2005). Thus, any mean score below 2.90 indicated a low agreement to the item while any score above 2.90 indicated high agreement to the item.

According to Wan, Wang, Liu & Tong (2014) anytime measures of central tendencies are computed, there is the need to also compute the measure of variation. In this result, the central tendency is the mean while the variation is the standard deviation. Standard deviation (SD) provides an indication of how far the individual responses to a question vary or deviate from the mean. It tells the researcher how spread out the responses are -- are they concentrated around the mean, or scattered far & wide? Did all of your respondents' rate question or item in the middle of your scale, or did some agree it and some disagree it? However, there is no threshold for acceptable variation but each variation can be compared with the variations of other items under the same construct. Table 3 therefore presents the respondents view on the leadership practices demonstrated by the unit heads. From Table 3, the respondents revealed that, their leader constantly learning from experience by taking risk (M = 3.70; SD = .95). This was followed by them indicating that their leader envisions the future by imagining exciting and ennobling possibilities (M= 3.70; SD = .99). Again, the respondents indicated that their leader enlists others in a common vision by appealing to shared aspirations (M =3.65; SD = 1.20). This was also followed by the respondents asserting that their leader fosters collaboration by building trust and facilitating relationships (M = 3.58; SD = 1.17).

Table 3: Leadership Practices Demonstrated by the Unit Heads of CCTH

Leadership practices	Mean	SD
My leader takes risks by constantly learning from experience	3.70	.95
My leader envisions the future by imagining exciting and ennobling possibilities.	3.70	.99
My leader enlists others in a common vision by appealing to shared aspirations	3.65	1.20
My leader fosters collaboration by building trust and facilitating relationships	3.58	1.17
My leader strengthens others by increasing self-determination and developing competence	3.58	1.32
My leader clarifies values by finding your voice and affirming shared values	3.65	1.27
My leader sets the example by aligning actions with shared values.	3.78	1.18
My leader recognizes contributions by showing appreciation for individual excellence	3.93	.77
My leader celebrates the values and victories by creating a spirit of community	3.94	.83

Source: Field survey (2020)

Again, the respondents agreed that their leader strengthens others by increasing self-determination and developing competence ($M = 3.58$; $SD = 1.32$) and as such their leader clarifies values by finding their voices and affirming shared values ($M = 3.65$; $SD = 1.27$). Further, the respondents

showed that their leader sets the example by aligning actions with shared values (*M* = 3.78; *SD* = 1.18). It was by the respondents that their leader recognizes contributions by showing appreciation for individual excellence (*M* = 3.93; *SD* = .77).

The results presented demonstrate that leadership is an interpersonal influence, exercised in a situation, and directed, through the communication process, toward the attainment of a specified goal or goals (Anderson & Sun, 2017). The result also imply that the leadership style practiced the unit heads influences the subordinate nurses to accomplish their tasks and directs the organisation in a way that makes it more cohesive and coherent (Northhouse, 2015; Robbins, Bradley & Spicer, 2011; Rowe, 2007). The result further indicates that unit heads at CCTH inspires subordinate nurses to give of their best to achieve a desired result, gaining their commitment and motivating them to achieve defined goals (Carson, Tesluk & Marrone, 2017).

It could be said that due to the leadership style practiced by the unit heads at CCTH, the followers (nurses) feel trusted, admired, loyal and respected by their leaders, and their leader is motivated as well (Bass, 2008; Carson, Tesluk & Marrone, 2007). Since all the indicators are favourable, it implies that leaders at CCTH encourage their subordinate to think critically and seek new ways to approach their jobs, resulting in intellectual stimulation (Bass, 1999). As a result, there is an increase in their level of satisfaction, and commitment to the goals of their organisation (Podsakoff, Bommer, Podsakoff & MacKenzie, 2006). The result is therefore in line with Anderson (2011) whose result found out that nurse managers who demonstrated the

transformational leadership practices were able to increase the job satisfaction levels of their subordinates. Again, Moneke & Umeh (2014) also confirmed the results of Anderson (2011) by concluding that transformational leadership practices were mostly demonstrated by nursing managers and found it to be a good predictor of subordinates' job satisfaction of nurses in the critical care unit.

Job Satisfaction Levels of Subordinate Nurses

The second objectives sought to assess the job satisfaction levels of subordinate nurses at CCTH. Again, nine indicators were used to measure the job satisfaction levels of subordinate nurses and the measurements were done using means and standard deviations. Again, the responses were measured numerically such that the higher the scores, the higher the agreement on each indicator. The relevant mean values presented in Table 4 were interpreted using mean values obtain from five-point Likert scale items. Similarly, the mid-point for the scale to an item was 2.9 (Dess, Lumpkin & McFarlin, 2005). Thus, any mean score below 2.90 indicated a low to the item while any score above 2.90 indicated high to the item. The measure of variation was standard deviation. Table 4 therefore presents the respondents view on the job satisfaction levels of subordinate nurses at CCTH.

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Table 4: Job Satisfaction Levels of Subordinate Nurses at CCTH

Items	Mean	SD
I feel I am being paid a fair amount for the work I do.	2.50	.86
Those who do well on job stand the fair chance of being promoted.	3.57	1.01
The benefit I receive is as good as most other organizations offer.	2.11	1.27
When I do a good job, I receive the recognition for it that I should receive	3.93	.43
My supervisor shows interest in the feelings of subordinates	3.32	1.02
Many of our rules and procedures make doing a good job less difficult.	3.98	.90
I like the people I work with.	3.83	.93
I like doing the things I do at work.	3.67	1.06
Communications seem good within this organization.	3.95	1.20

Source: Field survey (2020)

From Table 4 the respondents revealed that, those who do well on job stand the fair chance of being promoted and they satisfied with that (M = 3.57; SD = 1.01). This was followed by them indicating that they are satisfied with the recognition they receive (M= 3.93; SD = .43). Again, the respondents indicated that they satisfied with their supervisors' interest in their feelings (M =3.32; SD = 1.02). This was also followed by the respondents asserting that they satisfied with the rules and procedures that make doing a good job less difficult. (M = 3.98; SD = .93). Lastly, the respondents asserted that they satisfied with the communications within the organization (M = 3.95; SD = 1.20). However, the respondents were not satisfied by the benefit they receive as most other health care organizations offer (M = 2.11; SD = 1.27). Likewise,

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they were dissatisfied with their salary as the amount being paid is unfair comparing the work they do ($M = 2.50$; $SD = .88$).

Job satisfaction is an   orientation   of   emotions   that employees possess towards role they are performing at the work place (Eslami & Gharakhani, 2012; Vroom, 1964).   The result indicates that promotion, recognition, supervision, working conditions, co-workers, work itself and communication are elements of job satisfaction that effect on overall job satisfaction construct (Chou, Fu, Kröger & Ru-Yan, 2011; Peters, Chakraborty, Mahapatra, & Steinhardt, 2010; Ahmed & Azumah, 2010). The results further imply that over the time employees' productivity would increase, intention to stay would be high (Asamani et al., 2015; Cummings et al., 2010). However, the dissatisfaction of respondent on benefits and salary could make them feel neglected as they will not perform up to the standards or the expectations of their supervisor, they will be fired, resulting firms to bear additional costs for recruiting new staff (Clark , 2017). Again, the subordinate nurses who are adequately compensated would tend to feel obliged to reciprocate (Meyer & Allen, 2017 as quoted by Thamrin, 2018) which would be a negative or counterproductive ((Spector, 2012).

Checking for Assumption of Regression

It is imperative to check another assumption of linearity. That is, there should be linear relationship between the independent and dependent variable. The linearity assumption can best be tested with a histogram where it should be a bell shaped. It can be observed that the data is a bell-shaped hence a linear relationship between the dependent and independent variable. Also, the

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measurement scale should be a continuous one. The scale for measurement was

Histogram
Dependent Variable: JSC
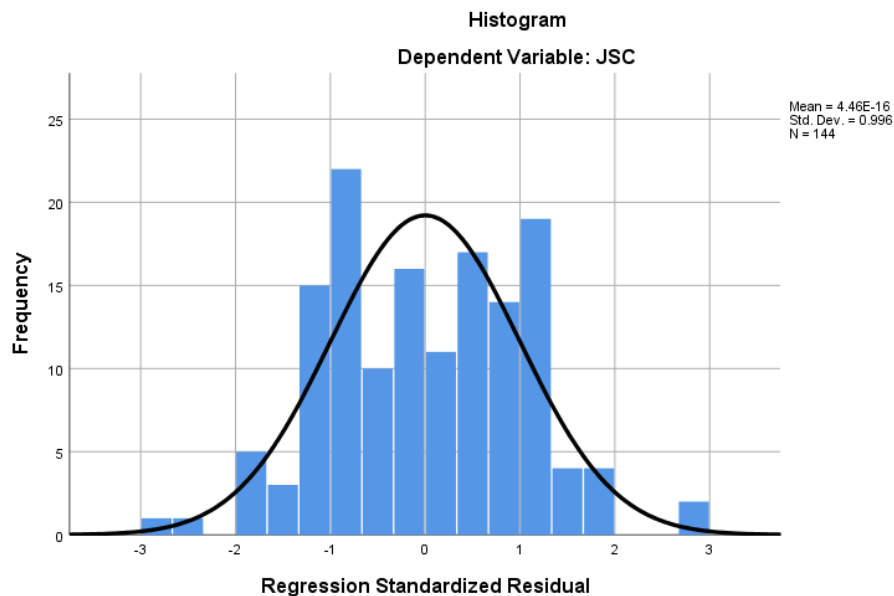
Figure 2: Histogram on linearity of the dependent Variable

Effect of Leadership Practices and Job Satisfaction Among Subordinate Nurses

The objective three looked at the effect of leadership practices and job satisfaction among subordinate nurses. Regression analysis was done where linearity and the relationship between the two variables were analysed with leadership practices as the independent variable and job satisfaction as the dependent variable. Table 5 gave the model summary of the output and it displayed the R, R squared, adjusted R squared, and the standard error. R is the Pearson product moment correlation coefficient which indicates the strength and direction of the linear relationship between the dependent variable (job satisfaction) and the independent variable (leadership practices).

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Hence from Table 5, leadership practices and job satisfaction are positively correlated, and the strength of the relationship is weak at (.308).

The R Square explains the amount of variation that exists in the dependent variable (job satisfaction) caused by the independent variable (leadership practices). Therefore, the result indicates that 9.5% variation in the job satisfaction (as dependent variable) is explained by the independent variable (leadership practices) and the remaining (90.5%) is explained by the residual (other factors not captured by the model). The implication is that, an increase in leadership practices would result in a weak increase in job satisfaction and as such, leadership practices alone cannot influence the job satisfaction at CCTH.

Table 5: Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.308[a]	.095	.088	4.67999

a. Predictors: (Constant), Leadership Practices

b. Dependent Variable: Job Satisfaction

Source: Field survey (2020).

Table 6 is the ANOVA table which provides the test significance for R and R^2 using the F-statistic. The F statistic is the regression mean square (MSR) divided by the residual mean square (MSE). If the significance value of the F statistic is small (smaller than say 0.05) then the independent variables do a good job explaining the variation in the dependent variable. In this analysis, the ρ-value is well below .05 (ρ = .000). Therefore, it can be concluded that, the R and R^2 between leadership practices and job satisfaction is statistically significant.

Table 6: ANOVAª

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	325.869	1	325.869	14.878	.000[b]
	Residual	3110.124	142	21.902		
	Total	3435.993	143			

a. Dependent Variable: Job Satisfaction

b. Predictors: (Constant), Leadership Practices

Source: Field survey (2020)

The Table 7 also provides information that is useful for understanding the regression equation. Under the column marked unstandardized coefficient and sub-column B, the numerical value for the first row, labelled (constant), is the value for the intercept (a) in the regression equation. The numerical value on the second row, labelled as leadership practices in this case (representing the independent variables), is the value for the slope (b) for the regression equation. Based on these results, the researcher can report the following regression equation, predicting job satisfaction based on the available leadership practices.

Y (Job Satisfaction) = 21.532+ 0.247X (Leadership Practices)

Hence, taking the values for the slope and the intercept in the resulting regression equation, the researcher can make the following assertions: According to the intercept, when there are no leadership practices, job satisfaction of nurses will be at 23.209, and according to the slope, for any leadership practices, there will be an increase in job satisfaction by (99%). Therefore, leadership practices at CCTH has a weak significant influence on job satisfaction.

Table 7: Coefficients[a]

Model	Unstandardized Coefficients		Standardized Coefficients		
	B	Std. Error	Beta	t	Sig.
1 (Constant)	21.532	2.132		10.097	.000
LPA	.247	.064	.308	3.857	.000

a. Dependent Variable: Job Satisfaction

Source: Field survey (2020)

The findings confirm may studies. For instance, the findings confirm Topp and AlYami, (2018)   Boamah, Spence Laschinger, Wong and Clarke, (2018) and Andrews, Richard, Robinson, Celano, and Hallaron (2012) whose study revealed that leadership style affects job satisfaction in organizations at different levels and leadership style focuses on the need to maintain a high-quality relationship with followers which results in job satisfaction. The study further conforms to Walumbwa, Avolio, Gardner, Wernsing and Peterson (2008) who asserted that leadership emphasis is on the social exchange between the leaders and follower. It could be implied that the leadership practices at CCTH can improve the performance of subordinate staff by raising awareness on the importance of expected results, making them prioritize others over self, and transform subordinates' level of needs (Walumbwa, 2004).

The result is in line with Ling and Sing (2011) who found that leadership styles have direct relationships with the employees' job satisfaction. Similar results have been reported in other studies, for instance Thamrin (2012) reported that leadership has a positive significant influence on job satisfaction. In addition, the result is consistent with Germain and Cummings (2010) who also discovered in a systematic review that leadership styles

concentrated on individuals and interactions such as supporting or transformational leadership were correlated with greater job satisfaction for nurses.

Chapter Summary

The study discovered that unit-heads leadership is beneficial in that it foresees the future by conjuring up exciting and dignified possibilities. In addition, by appealing to shared objectives, you might join others in a common vision. Again, these positive leadership methods were thought to motivate subordinate nurses to give their allin order to accomplish a desired result, thereby winning their commitment and inspiring them to meet set objectives. The nurses are delighted with the work approaches since they make their jobs easier, according to the report. Furthermore, communication within the institution was discovered to play a role in their satisfaction. However, the study discovered that the compensation for subordinate nurses is not proportional with the labour they undertake, and this also applies to the perks they receive. Finally, the study discovered that, though there is a statistically significant link between leadership practices and subordinate nurse job satisfaction, little variance in job satisfaction is explained by leadership practices.

CHAPTER FIVE

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

This chapter presents the summary, conclusions and recommendations of the study. The summary and conclusions are based on the findings captured in chapter four. The chapter also presented the recommendations of the study based on the study's conclusions. The chapter concluded with suggestions for further research.

Overview

The general purpose of the study was to assess the influence of leadership practices on job satisfaction among nurses. The specific objectives of the study were:

1. To identify the leadership practices demonstrated by the unit heads.
2. To assess the job satisfaction levels of subordinate nurses.
3. To determine the effect of leadership practices of unit heads on job satisfaction of subordinate nurses.

This study adopted a quantitative approach and descriptive survey design to ensure an accurate account of the characteristics of the study population. For a population of 221 nurses, a total of 144 sample size was drawn. The sample size was obtained by using the Krejcie and Morgan (1970) table of sample size determination. The research instrument used was questionnaire and descriptive statistics (meand and standard deviation) was used to tackle objectives one and two and linear regression analysis for objective three.

Summary of Key Findings

The study found that leadership practiced by the unit heads is favourable such that leaders foresees the future by conjuring up exciting and dignifying possibilities. As well as enlist others in a common vision by appealing to shared aspirations. It was also found that leaders at CCTH fosters collaboration by building trust and facilitating relationships with subordinate nurses and strengthen them by increasing their self-determination and developing competence. These among others were implied to foster subordinate nurses to accomplish their tasks and directs the organisation in a cohesive and coherent way. Again, these favourable leadership practices were considered to inspires subordinate nurses to give of their best to achieve a desired result, gaining their commitment and motivating them to achieve defined goals.

Again, the study found that subordinate nurses at CCTH are to some extent satisfied with their job in the form promotion in their workplace, recognition they receive for work done well and interest supervisors show in them. The study again found that the nurses are satisfied with the work methodologies as it makes work easier for them. Further, it was found that communication in the institution had a role in their satisfaction. The study however found that salary received by the subordinate nurses does not commensurate the work they do and applies to the benefits they receive.

Lastly, the study found that though there is a statistically positive relationship between leadership practices and job satisfaction of subordinate nurses, little variation in the job satisfaction is explained by leadership practices. Thus, the correlation or effect is a weak one. It was indicated that

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major variations of the nurses' job satisfaction level are explained by other factors not captured by the model. The implication is that, an increase in work life balance practices would result in a weak increase in leadership practices.

Conclusions

Based on the findings, the study concludes that enlisting others in a common vision, collaborating, building trust and facilitating relationships, strengthening others by increasing their self-determination and clarifying values are good indicators for favourable leadership. Similarly, based on the findings, it can also be concluded with confirmation with Spector (2012) that promotion, recognition, supervision, working, conditions, co-workers, work itself, and communication are suitable items to measure job satisfaction of nurses. However, as opposed to Spector, benefits and salary do not predict satisfaction among nurses at CCTH. Further, the study concludes that among others, shared vision, collaboration, trust building and clarifying values to subordinates help satisfy subordinate on the job. However, depending on the magnitude of these indicators, the level of satisfaction derived.

Recommendations

Based on the study's conclusions, the following recommendations were hereby made.

1. Since it has been discovered that subordinate nurses are dissatisfied with their pay and benefits, it is suggested that management provide the benefits they deserve and pay them an amount that is commensurate with the work they do in order to increase their level of satisfaction and, as a result, their performance.

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2. In addition, while CCTH leadership practices are positively associated to nurse job satisfaction, the link is weak. As a result, it is suggested that management improve their leadership practices in order to increase subordinate satisfaction.

Suggestion for Further Studies

Only subordinate nurses at CCTH in the Central Region were included in this study. As a result, future research might be expanded to include other healthcare institutions in the region or Ghana as a whole, broadening the breadth of management practices and how they affect subordinate satisfaction. Furthermore, the study suggests that future research could perform comparable investigations utilizing either a qualitative or mixed methodology, as the method used overlooked additional and important perspectives of respondents.
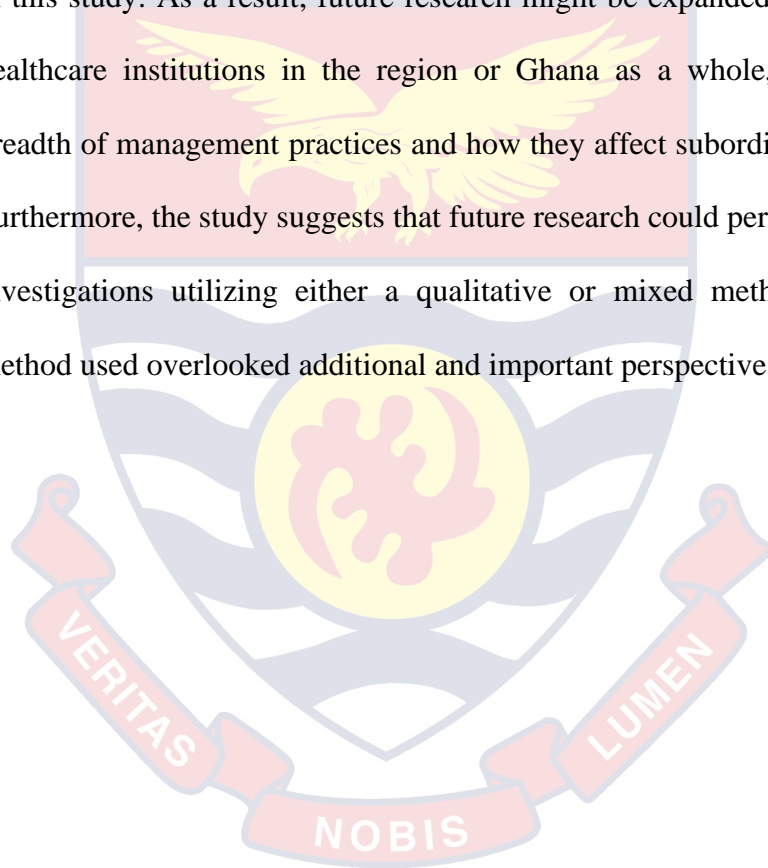
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APPENDIX 1: QUESTIONNAIRE

DEPARTMENT OF HUMAN RESOURCE MANAGEMENT

COLLEGE OF HUMANITIES AND LEGAL STUDIES

UNIVERSITY OF CAPE COAST

I am a student from the University of Cape Coast, Department of Human Resource Management undertaking a research on "examining the effect of leadership practice on job satisfaction at Cape Coast Teaching Hospital. I would be grateful if you could provide answers to the following questions. All information provided will be strictly treated as confidential.

Section A: Background Information:

1. Gender: [ ] Male   [ ] Female

2. Age   [ ] 20 – 30   [ ] 31 – 40   [ ] 41 – 50   [ ] 51 – 60   [ ] 61+

3. Highest level of education: [ ] PhD [ ] Master's Degree [ ] First Degree [ ] HND   [ ] SSCE/WASSCE [ ] Other (please specify) ………………………..

4. How many years have you spent in this institution? [ ] < 5 [ ] 5 – 10   [ ] 11 – 20 [ ] 20 – 30 [ ] >30

Section B: Leadership Practices

From the statements below indicate your level of agreement with respect to information on leadership practices at your institution. Your responses shall be measured such that 1 denotes least agreement and 5 denotes strongest agreement.

Leadership practice	1	2	3	4	5
My leader takes risks by constantly learning from experience					
My leader envisions the future by imagining exciting and ennobling possibilities.					
My leader enlists others in a common vision by appealing to shared Aspirations					
My leader fosters collaboration by building trust and facilitating relationships					
My leader strengthens others by increasing self-determination and developing competence					
My leader clarifies values by finding your voice and affirming shared values					
My leader sets the example by aligning actions with shared values.					
My leader recognizes contributions by showing appreciation for individual excellence					
My leader celebrates the values and victories by creating a spirit of community					

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Section B: Job Satisfaction

From the statements below indicate your level of agreement with respect to information on the satisfaction you derive as a result of leadership practices at your institution. Your responses shall be measured such that 1 denotes least agreement and 5 denotes strongest agreement.

Facets	Meaning of the Facets	1	2	3	4	5
Pay/Salary	I feel I am being paid a fair amount for the work I do.					
Promotion	Those who do well on job stand the fair chance of being promoted.					
Benefit	The benefit I receive is as good as most other organizations offer.					
Recognition	When I do a good job, I receive the recognition for it that I should receive					
Supervision	My supervisor shows interest in the feelings of subordinates					
Working Conditions	Many of our rules and procedures make doing a good job less difficult.					
Co-Workers	I like the people I work with.					
Work Itself	I like doing the things I do at work.					
Communication	Communications seem good within this organization.					

Thank you!!

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APPENDIX 2

Krejcie And Morgan (1970) Sample Size Table

Table 3.1

Table for Determining Sample Size of a Known Population

N	S	N	S	N	S	N	S	N	S
10	10	100	80	280	162	800	260	2800	338
15	14	110	86	290	165	850	265	3000	341
20	19	120	92	300	169	900	269	3500	346
25	24	130	97	320	175	950	274	4000	351
30	28	140	103	340	181	1000	278	4500	354
35	32	150	108	360	186	1100	285	5000	357
40	36	160	113	380	191	1200	291	6000	361
45	40	170	118	400	196	1300	297	7000	364
50	44	180	123	420	201	1400	302	8000	367
55	48	190	127	440	205	1500	306	9000	368
60	52	200	132	460	210	1600	310	10000	370
65	56	210	136	480	214	1700	313	15000	375
70	59	220	140	500	217	1800	317	20000	377
75	63	230	144	550	226	1900	320	30000	379
80	66	240	148	600	234	2000	322	40000	380
85	70	250	152	650	242	2200	327	50000	381
90	73	260	155	700	248	2400	331	75000	382
95	76	270	159	750	254	2600	335	1000000	384

Note: N is Population Size; S is Sample Size   Source: Krejcie & Morgan, 1970

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