

Identifying Key Factors Influencing Nursing Care Quality: A Systematic Literature Review

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Abstract: Objective: This literature review evaluates the factors that influence the quality of nurses' service to patients, with the aim of increasing their overall well-being, work experience and creating a more supportive and satisfying work environment in the field of nursing.

Methods: A systematic review was conducted following Preferred Reporting Items for Systematic Reviews. Electronic databases including Scopus, PubMed, SAGE Journal were searched for scientific articles on factors influencing the quality of nursing care. After review and removal of duplicates, we analyzed the full text of articles to identify potentially relevant studies for eligibility and then extracted data from matched articles.

Results: The literature search resulted in 20 articles, that met all inclusion criteria were included systematic review after full text review.

Conclusion: The literature shows that the quality of work life of nurses is influenced by three main factors: personal (socio-demographic), professional and psychological. Identifying the factors is critical for finding the right solution to improve the quality of service at work and to overcome the factors that reduce the quality of service in nursing care.

Keywords: Factors influencing the quality of nursing care, Hospital, Patient, Quality, Nursing care.

1 Introduction

The quality of health care in the environments where health services are provided depends on the nurses and affects their quality of life at work. The quality of life at work is the parameter that evaluates the ability of nurses to meet personal needs through experience in the workplace, achieving work goals [1]. Nowadays, the quality of life at work is a key factor, on which many studies are being conducted and different conclusions are drawn on how to improve the quality of life at work. With the increase of the geriatric age, the workload of nurses almost all over the world has increased, leading directly to the occurrence of burnout in nurses and affecting the nurse-patient relationship. These have become important factors affecting the construction and development of nursing disciplines [2] [3]. Quality Work Life is a multidimensional concept that encompasses an employee's feelings about various aspects of their work environment. These aspects include job content, working conditions, fair and adequate compensation, opportunities for career advancement, autonomy in decision-making, involvement in decision-making processes, occupational health and safety, workplace safety, job security, workplace relationships, personal relationships, and the stability of life at work [4] [5] [6] [7]. The quality of life at work is expected to be the key element in the sustainability of the nursing staff, which directly affects the provision of the necessary number of nurses in every institution where health services are offered. To address the problems, a wide range of issues must be taken into consideration, such as: workload, professional leadership and clinical support, continuous training for professional growth, facilities, planning and decisions, professional recognition, provision of insurance for diseases caused in the workplace and higher wages to increase motivation for work [8].

Various studies concluded that more than half of employed nurses, especially nurses of intensive care units, are very dissatisfied with the quality of their work life [9] [10].

As far as the findings are concerned, the most frequently influencing work factors are experience in years of work and night shifts, which have a direct impact on the quality of work life among nurses. [11] [12] [13] [14]. Some other studies showed that monthly income is another factor that directly affects the quality of work life [15][16]. Additional bonuses, recognition in the workplace, increase in duties have an impact on the quality of work life of nurses [11][17]. Regarding the findings regarding the factors that reduce the quality of nurses' work: work overload, failure to maintain balance between work and family, lack of vacations and lack of nursing staff are the most frequently encountered factors that have a negative impact on the quality of the work of nurses [18]. Support, opportunity for promotion, continuing professional education and work department also affect the quality of nurses' work [19] [1] [20].

2 The aims and objectives

The purpose of this study is to provide a comprehensive analysis of the various factors that influence the nursing care of patients. Identification of challenges and deficiencies that affect the provision of non-quality nursing care. Giving recommendations for improving the working conditions of nurses.

The main objective of this systematic review is: to evaluate the effectiveness and quality of the factors that affect the quality of work of nurses.

3 Methodology

As a first step, to conduct this systematic review, we identified and retrieved relevant research studies from various academic databases including Scopus, PubMed, SAGE Journal, Elsevier and Google Scholar, to identify relevant articles. Only peer-reviewed articles were included to ensure the reliability and validity of the findings. Relevant articles published within the last ten years were considered for inclusion. Selection criteria included studies that examined factors affecting the quality of nursing care, nurses' job satisfaction, staffing levels, resource availability, and the impact of policies and regulations on nursing care delivery.

The method of data analysis consisted in the content analysis of each study included in the literature review to identify the common factors that influence the quality of nursing care in terms of the purpose of the study, objectives, results and conclusions. The data collection instrument consisted of two parts. The first part consisted of questions on demographic information that affect the quality of work of nurses (including gender, age, education, marital status, type of hospital, monthly salary). The second part was information on other factors that affect the quality of work of nurses, such as Work-Related Predictors, Psychological Predictors. We then synthesized the findings to identify common themes and patterns across the studies. This allowed us to draw significant conclusions and identify the main factors that influence the quality of nursing care provided to patients.

The following table provides detailed information on the studies included in this literature review, the authors of the study, the date of publication, the journal where it was published and the size of the sample included in each study. In addition, the factors influencing the quality of nursing care in each analyzed study were analyzed and presented in tables, and these factors were classified into three groups (demographic factors, work-related factors and psychological factors).

4 Results

Initially, 213 articles resulted from the systematic search. After careful review of each article, only 20 met all inclusion criteria and were ultimately included in the

systematic review. The study selection process is schematized in Figure 1. This selection process ensures that the final set of articles closely matches the research objectives and inclusion criteria, increasing the reliability and relevance of the systematic review.

Table 1 presents the findings from the 20 articles selected for the systematic review, all of which discussed socio-demographic factors. The most prevalent factors influencing the quality of work life for nurses included differences in education level, age, and marital status. Other influential factors were nationality, area of residence, religion, gender, and family situation.

Income or salary was identified as a decisive factor affecting nurses' quality of work life. Inequities in compensation led to dissatisfaction and stress, negatively impacting the quality of their work.

The department in which nurses worked also played a significant role in their quality of life. Studies indicated that nurses in intensive care units were generally dissatisfied with their work life quality, while those working in ambulatory settings reported a better quality of life.

Overall, a good quality of nursing work life was associated with higher nursing positions and factors such as work department, educational status, the availability of safe rest periods, and the inclusion of small breaks in work schedules. Additionally, nurses reported higher levels of burnout and stress compared to other human and health service professionals, including social workers and hospital staff.

Conclusions

Based on the articles included in the study, several key conclusions can be drawn. First, there is a clear need for the development of policies that support nurses in their work, specifically addressing factors that impact the quality of their performance. Additionally, workplace inequality must be tackled, as it significantly affects the psychological well-being of nurses. Measures to reduce this inequality are essential.

Particularly for nurses working in tertiary health care, there is a pressing need for supportive policies. This sector reported higher instances of issues such as inequality, emotional burden, job dissatisfaction, and concerns about salary. Therefore, targeted interventions in tertiary care are crucial.

Moreover, it is evident that more research is needed in Albania to understand the factors affecting the quality of nurses' work. The literature review highlighted a significant gap in comprehensive studies in this area within the country. Addressing this gap through further research will provide valuable insights and inform future policy decisions.

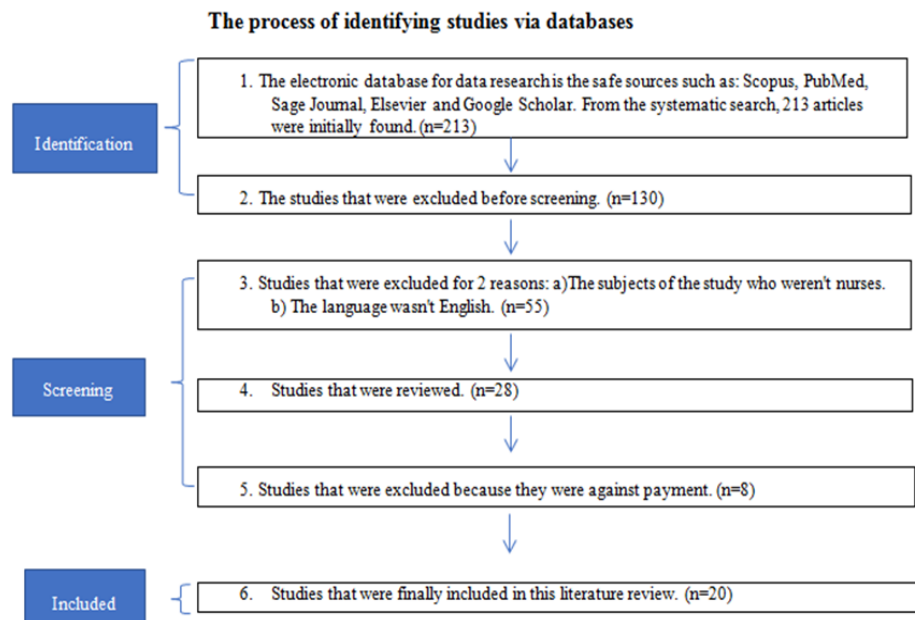


Figure 1
The process of identifying studies via databases

	Authors	Participants Gender	Demographics Factors	Work- Related Factors	Psychological Factors	Journal
1	Suleiman et al. 2019[21]	186 nurses Male:48.4% Female:51%	Age, Marital status, Educational status,	Working hours, Night shift; Payment per month	Job Stress	Journal of Occupational Health
2	Biresaw et al. 2020 [22]	461 nurses Male:51% Female 49%	Age, Marital status,	Current nursing position; Working department;	Job stress	International Journal of Africa Nursing Sciences (IJANS)

			Educational status, Religion	Receive risk allowance; Shift of your work; Working hours per week		
3	Alzoubi et al. 2024 [23]	250 nurses Male:50%; Female:50%	Age, Marital status; Educational status	Type of shift; Workplace noise; Smoking status	Job burnout	Frontiers in Public Health
4	Akter et al. 2017 [24]	288 nurses Male12.5% Female 87.85%	Age, Marital status; Educational status	Salary, Work environment	Stress level	International Nursing Review
5	Al-Maskari et al. 2020 [25]	374 nurses Male:9.3% Female:90.7%	Age, Marital status, Educational status,	Work Satisfaction, Workload	Stress level	Sultan Qaboos University Medical Journal (SQUMJ)
6	Teixeira et al. 2019 [26]	109 nurses Male 24.8% Female75.2%	Age group, Marital status, Educational status,	Working positions, Working status, Working service,	Job Satisfaction Level	SciELO Brazil Scientific Electronic Library Online
7			Age,		Stress level	

	Almalki et al. 2012 [9]	508 nurses Male 32.7% Female 67.3%	Marital status; Educational status, Nationality,	Shift type, Nurse position, Workload intensity, Workload predictability, Salary		Human Resources for Health
8	Komjakraphan et al. 2017 [16]	102 nurses Male 5.9% Female 94.1%	Age group, Marital status, Educational status,	Nurse position, Workload intensity, Workload predictability, Salary Years of experience	Job satisfaction, Burnout,	Quality of Work Life among Nurse Practitioners
9	Jin et al. 2021 [27]	167 nurses Male: 54.5% Female: 45.5%	Age, Educational status, Religion			Child Health Nursing Research
10	Galan et al. 2019 [28]	346 nurses	Age, Marital status, Educational status,			International Nursing Review
11	Szentirmai et al. 2020 [29]	135 nurses	Age, Marital status, Educational status,		Job burnout	Value in Health
12	Abd El Rahman et al. 2021[30]	160 nurses	Age group, Marital status, Educational status,	Morning shift, Night shift, Evening shift		Menoufia Nursing Journal

		Male 18.8% Female 81.2%		Years of experience,		
13	Hernández-Cruz et al. 2017[31]	71 nurses Male 22.5% Female 77.5%	Age group, Marital status, Educational status,	Years of experience		Revista Latino-Americana de Enfermagem
14	Mutair et al. 2022 [32]	860 nurses Male 7.2% Female 92.8%	Age, Nationality, Marital status, Educational level,	Hours shift, Job nature, Years of experience		Nursing Reports
15	Gabrani et al. 2016 [33]	246 nurses	Age, Marital status, Educational status,	Nature of work, Salary satisfaction, Quality supervision	Job Stress	International Journal of Healthcare Management
16	Podgorica et al. 2024 [34]	20 nurses Male 45%	Age, Educational status,	Inadequate physical environment, Insufficient material resources, Constraints related to time and staff. Years of experience	Mental stress	PLOS ONE

		Female 55%				
17	Van et al. 2020 [35]	160 nurses Male 8.8%; Female 91.2%	Age, Marital status, Educational level,	Type of staff, Nurse position, Salary Years of experiences		Central European Journal of Nursing and Midwifery
18	Casida et al. 2019 [36]	104 nurses Male 17% Female 83%	Age, Marital status, Educational level, Religion	Current nursing position; Working department;	Job Burnout	Progress in Transplantation (PIT)
19	Kelbiso et al. 2017 [15]	253nurses Male: 47.8% Female 52.2%	Age, Marital status, Educational status,	Work environment, Institution, Working department; Salary Years of experiences		Nursing Research and Practice
20	Hemanathan et al. 2017 [37]	100 nurses Male:2% Female: 98%	Age, Marital status; Educational status; Type of family;	Night shift; No. of breaks; Principal nursing position; Area of working;		JOJ Nurse Health Care

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