Capstone Paper

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Abstract

The purpose of this paper is to provide an overview of the unique individual motivating factors that play a role in healthcare personnel’s job satisfaction, engagement as well as explore the leading causes of burnout. Prior to the Covid-19 pandemic and presently, healthcare workers nationally and internationally have been experiencing burnout. Determining what factors motivate and demotivate employees is equally critical in ensuring that these skilled healthcare individuals continue to provide high quality, effective, and productive healthcare services especially during a global pandemic. In this paper, motivational theories are explained, evaluated, and explored. Both qualitative and quantitative research methods from existing studies are used to reveal the top motivational rewards. Suggestions for incentives, rewards, and the organizational roles are recommended. The leader’s commitment to engage healthcare employees toward sustainable motivational behavior is presented.

Keywords: motivation, engagement, job satisfaction and leadership
What Factors Play a Role in Healthcare Personnel’s Engagement and How Can Leaders Increase Their Follower’s Motivation?

The purpose of this paper is to acknowledge and learn about the motivating factors that play a role in health care employees/personnel both prior to the Covid-19 pandemic and presently and how leaders can increase motivation and decrease burnout. Healthcare personnel (HCP) as defined by the Centers for Disease Control and Prevention (CDC) as

All paid and unpaid persons serving in healthcare settings who have the potential for direct or indirect exposure to patients or infectious materials, including body substances (e.g., blood, tissue, and specific body fluids); contaminated medical supplies, devices, and equipment; contaminated environmental surfaces; or contaminated air. These HCP may include, but are not limited to, emergency medical service personnel, nurses, nursing assistants, physicians, technicians, therapists, phlebotomists, pharmacists, students… potentially exposed to infectious agents that can be transmitted among from HCP and patients (2019, para. 2).

For this literature review, an emphasis will be placed on healthcare personnel that are employed in hospital organizations leading up to and currently during the Covid-19 pandemic. It is important to note that the term motivation could be enhanced and referred to throughout this paper as job satisfaction and job engagement. Satisfaction is defined as “a subjective feeling of how well one’s needs are being met by their job, or as the extent to which people like their jobs” (Ge et al., 2021, p. 2). Whereas engagement is defined as “a positive, fulfilling, work-related state of mind characterized by vigor, dedication, and absorption” (Ge et al., 2021, p.2).
It is equally important to understand the definition of motivation. Defining motivation can be described by Saseanu and Toma (2019) as “the correlation of needs, aspirations, and interests of human resources within the organization with the achievement of the objectives and the exercise of the tasks and responsibilities within the organization” (p. 518). Also, employee motivation refers to the internal drive one brings to his/her place of employment (Clark & Wood, 2021, p. 9). Finally, motivation can also be defined as an individual’s degree of willingness to exert and maintain an effort towards organizational goals (Thanh et al., 2021, p. 1114). For the purpose of this paper, the final definition by Thanh et al., (2021) the degree of willingness to exert and maintain an effort towards organizational goals will be utilized (p. 1114).

There were two types of motivation studied in my research including intrinsic and extrinsic motivation. Internal motivation can be affected by both intrinsic (internal) and extrinsic (external) factors. Intrinsic motivation is "the process of engaging the person in a sustained effort, because of the feeling of accomplishment, fulfillment, which one feels after fulfilling his tasks" (Saseanu and Toma, 2019, p. 520). Some examples of intrinsic motivation may include self- fulfillment, self-growth, and a sense of duty. Whereas, extrinsic motivation “has external motivating factors and involves undertaking certain actions to avoid punishment or receive rewards” (Saseanu and Toma, 2019, p. 520). Extrinsic motivation typically involves partaking in an activity that is not fulfilled for your own satisfaction, but to receive something in return. Therefore, some examples of extrinsic motivation may consist of monetary gains, extra benefits and recognition.

Prior to the sudden occurrence of the international Covid-19 pandemic, healthcare workers were experiencing lack of motivation and burnout. Recently, “there are shortages of some healthcare professionals” (Caldas, et al., 2021, p. 40). Currently, research focuses on the
well-being of healthcare employees and how their involvement with Covid-19 patients increases or depletes the healthcare worker’s resources (Caldas et al, 2021, p. 30). Determining what factors motivate and demotivate employees is equally critical in ensuring that these skilled healthcare individuals continue to provide high quality, effective and productive healthcare services especially during a global pandemic.

Leadership plays a critical role in monitoring, communicating, and sustaining motivation in the healthcare setting. According to one article “Leadership is a concrete activity by which an individual or more exert an influence on others by which they try and sometimes succeed motivation and change which facilitate the achievement of group or organizational goals” (Saseanu & Toma, 2019, p. 519). Both motivating and demotivating factors and the leader’s role in increasing motivation are examined in this paper.

A total of four key topics are posed in the literature review:

- The predictors of motivation
- The types of rewards and incentives and their effectivity on motivation
- Organizational ideas that may increase employee motivation
- Leaderships involvement in their employee’s motivation in the workplace

The high stress roles of healthcare workers coupled with the unique demand of the Covid-19 pandemic have placed healthcare workers at additional risk for “mental health problems, with early reports from around the world indicating elevated rates of depression, anxiety, post-traumatic stress disorder and suicidality” (Billings, et al., 2021, p. 2). This is important research since it is a present-day issue facing healthcare organizations, employees, and patients globally.
Predictors of motivation in the workplace

The complexities of motivation can be analyzed and examined by the framework of the hierarchical model of motivation. One of the most common ideas for motivation is based on Maslow’s 1943 theory, Hierarchy of Needs. This theory introduced the basic needs in relation to the individual. The theory can be attributed to the work environment and life in general. The five classifications of Maslow’s theory consist of: physiological needs, safety and security needs, social and belongingness needs, ego, status, and self-esteem need, and self-actualization needs (Maslow, 1943). Maslow states “We are motivated by the desire to achieve or maintain the various conditions upon which these basic satisfactions rest and by certain more intellectual desires” (Maslow, 1943, p. 394). Related to the Covid-19 pandemic, themes developed around sense of safety and security. For example, “the predominant concern across most staff groups, was becoming infected with the virus themselves” (Billings et al., 2021, p. 5). One example specific regarding safety and security needs was lack of volume and access to essential resources such as personal protective equipment (PPE).

The hierarchical model of motivation permits consideration of underlying intrinsic and extrinsic incentives in any performance situation (Clark, 2021, p. 10). Therefore, this model focuses specifically on esteem and self-actualization as internal factors. Employees seek a sense of community and acceptance in the workplace while pursuing the approval, acceptance, and recognition of both coworkers and supervisors (Clark, 2021, p. 12). Employees also seek meaningfulness, preference, competence, and advancement in the workplace (Clark, 2021, p. 12). Additionally, external driving factors consist of acknowledgment, appreciation, and
identification (Clark, 2021, p.12). Typically, monetary rewards and benefit advancements fall under this type of extrinsic motivation category.

The second well-known theory is Herzberg’s 1968 theory made of two primary factors: hygiene factors and development factors (Herzberg, 1968). Hygiene factors refer to the context of work and the environment in which work is carried out and include wage, job security, and interpersonal relationships. Development factors refer to the nature of the work, responsibility, recognition, advancement and personal development. It is important to note that hygiene factors have no motivating potential, but help to avoid dissatisfaction (Saseanu & Toma, 2019, p. 519). More importantly, “development factors are those that lead to motivation and satisfaction of employees” (Saseanu & Toma, 2019, p. 519). This literature review focuses on whether or not there is a correlation between job satisfaction and motivation in healthcare workers.

Job satisfaction and motivation are terms that have been used interchangeably throughout the literature review articles studied. Job satisfaction was researched in nurses and as Diana et al., noted “Job satisfaction has a significant influence on work motivation. If job satisfaction increases, work motivation will also increase, and vice versa” (Diana et al., 2021, p. 93). The following assumption regarding job satisfaction from (Diana et al., 2021) has been developed: Job satisfaction has a significant effect on employee (nurse) commitment….and performance and work motivation has a significant effect on employee (nurse) performance” (Diana et al., 2021, p. 93). A study conducted by Ge et al., (2021) identified that job satisfaction depends on the degree of disparity between the reward that employees actually receive and the reward that they expect. This study also suggested that “lower than expected psychological or economic reward’s for one’s efforts might cause job dissatisfaction” (Ge et al., 2021, p. 7). Therefore, this research illustrated that job satisfaction and healthcare worker motivation are proportional.
In contrast to motivation, demotivating contextual reasons related to lack of motivation were researched. One study conducted using qualitative research to determine the motivating and demotivating factors for community health workers concluded that “lack of recognition, rude behavior, and inadequate remuneration were some of the demotivating factors for community health workers” (Niraula, 2020, p. 6). Literature demonstrated that patient interactions also are a cause for demotivation and burnout in healthcare workers. Therefore, it is critical that rewards and individualistic motivators are evaluated and researched in order to glean a clearer understanding of what does motivate healthcare personnel.

Types of rewards and incentives and their effectivity on motivation

The types of rewards and incentives that influence motivational factors in healthcare personnel are specific to the individual healthcare worker. A healthcare worker that is intrinsically motivated is passionate about what they do and is motivated by their work. These individuals that are motivated by their work feel a sense of fulfillment when they are passionate about their job. To this point, intrinsic motivators include humanitarian, medical ethics, and the desire to help others. “These were the most common motivations among the participants, who felt they had a moral obligation, duty, and skills to help people” (Kallstrom, 2022, p.8). In addition, a study by Phipps-Taylor & Shortell, concluded that the money was an important element in increasing motivation, however most noteworthy of this study was “people’s intrinsic interest in contributing, being part of something, knowing they’re making a difference” (Phipps-Taylor & Shortell, 2016, p.15). Intrinsically motivated employees who are employed in the healthcare field enjoy helping people and are motivated by the simple act of providing assistance to a patient when there is a need.
On the contrary, an extrinsically motivated employee relies on external factors such as monetary rewards. Although, economic motivators are not always accessible for healthcare organizations who rely primarily on hospital profit or private funding. Instead, non-monetary extrinsic motivators may include preferred parking, service awards, special recognition, serving lunches, Christmas parties etc., (Clark, 2021, p. 10). According to one article by Lee, “Introjection is a type of extrinsic satisfaction in which people are motivated to take certain actions mainly because they anticipate that such actions will bring them the benefit of being approved, recognized, and respected by themselves and others” (Lee, 2021, p. 94). This type of motivation differs from extrinsic motivation based on the nature of the rewards being intangible, rather than monetary. Focusing on the public service type of reward, “Numerous scholars define public service motivation broadly as something beyond monetary interest, embracing the emphasis on a sense of accomplishment and a feeling of self-worth” (Lee, 2021, p. 95).

Healthcare workers are similar in that they expect the outcome to be one of a positive nature and outcome for the patient and find that in itself to be the motivating factor in working in healthcare.

There are several ideas and recommendations to increase and improve motivation and work commitment. The first is the monetary reward. According to Parjoleanu, “Using high salary levels can prove to be an effective method of attracting a highly skilled workforce” (Parjoleanu, 2020, p. 299). Although, extrinsic financial rewards may lower the level of intrinsic motivation in some people. Another category is flexible work schedule. This type of incentive, also called telecommuting or remote work became a global norm in 2020 with the onset of the Covid-19 pandemic. A Forbes magazine article published in May noted that working from home was a success due to savings on both the employee and employer’s end. Healthcare administrators have
been able to work from home and may have a better work-life balance since telecommuting (Parjoleanu, 2020, p. 299). According to De Klerk, Jobert & Mosca (2021)

Flexible working arrangements have been associated with improved employee health and well-being, improved management of work and family role conflicts, increased engagement, greater job autonomy and psychological resources, and improved commitment. Similarly, remote work has been correlated with outcomes, such as higher productivity, as employees are willing to recommit part of the time saved by not having to commute, improved, fewer work interruptions, better ability to coordinate work and non-work commitments, greater job satisfaction and commitment less role stress and work–family conflict and increased work–life balance (De Klerk et al., 2021, p.2).

Monetary rewards, telecommuting, and flexible work schedules are some ideas for incentives that provide a desired work/life balance that could increase employee motivation.

**What organizational factors may increase employee motivation?**

Healthcare personnel typically have a focused skill, therefore, factors that decrease motivation and coincide with burnout may be worth evaluating from an organizational perspective since these factors are relative to employee motivation in an organization. According to Passmore (2018) “The six primary influences on burnout include: manageable workload, autonomy, reward and recognition, community in the workplace, fairness and common values within the organization (p. 47). A study created to hone in on these six influences of burnout by Passmore noted “When patient volume increases, the frontline staff feel the repercussions of workload balance most acutely” (Passmore, 2018, p. 47). Time constraints cause unnecessary stress and do not provide ample opportunity for healthcare personnel to focus on the moment and
direct patient care as it occurs. This is only one example of potential burnout in healthcare personnel there are many.

Another cause for burnout or demotivation that can be evaluated from an organizational perspective is environmental working conditions. Physicians experience burnout in their careers similar to allied health and nursing careers and one may assume that organizations can intervene. According to Smith, “recent research finds that interventions implemented at the organizational level are more effective than those directed at individuals” (Smith, 2017, para. 2). A study conducted by *JAMA Internal Medicine*, was based on a systematic review and meta-analysis of 20 controlled interventions involving more than 1,500 physicians from various specialties in primary, secondary and intensive care settings. The results demonstrated “both physician-directed and organization-directed interventions were associated with statistically significant reductions in burnout, but the strongest evidence for effectiveness was found in those that modified resources, the working environment or work tasks to decrease stress” (Smith, 2017, para 2). These measures included:

- Scheduling changes.
- Reductions in the intensity of workload.
- Improved teamwork.
- Changes in work evaluation.
- Supervision to reduce job demand and enhance job control.
- Increasing the level of participation in decision-making (Smith, 2017, para 2.)

A correlation was found showing that according to Smith “Those that combined several elements such as structural changes, fostering communication between members of the health
Another reason for burnout in healthcare employees is related to the amount of trauma involved with the career. Burnout negatively impacts almost every aspect of work culture and a healthcare worker’s ability to care for patients. Burnout has been associated with many areas of quality and safety, including poorer relationships with patients, medical errors, infections, hospital admissions, mortality, and patient dissatisfaction (Rehder, 2021). In order to address burnout from trauma-type scenarios, the solutions may be numerous, and likely will not resolve burnout immediately (Parks, 2017, para 12). One idea organizations could implement include creating a reset room, where physicians and other health professionals can retreat if they need a moment to recover from a traumatic event or just to get away for a moment (Parks, 2017, para 12). To address burnout and increase motivation, healthcare organizations can make adjustments to schedules, workload demands, promote teamwork and allow opportunities for team decision making. Healthcare personnel may find the reset room a valuable resource to re-charge prior to returning to their stressful work scenario.

Another significant reason for burnout involves the amount of time spent at a computer. According to a recent time-motion study conducted by the AMA and Dartmouth-Hitchcock Health Care System and written by Parks, “Almost one-half of the physician workday is spent on electronic health record (EHR) data entry and other administrative desk work” (Parks, 2017, para 14). “Only 27 percent of a physician’s time is spent on direct clinical care, the study points out” (Parks, 2017, para 14). Another key finding in the study is that for every hour of face-to-face time with patients, physicians spend nearly two additional hours on their EHR and clerical desk work (Parks, 2017, para 15). In conclusion, this result demonstrates the lack of time that
physicians actually spend with patients versus the enormous amount of time they spend on patient data entry instead.

Finally, organizations could provide a few helpful motivational stages, according to Herzberg’s theory on motivation and hygiene. “Any organization that wants to have motivated employees must take certain steps: providing appreciation and support; providing meaningful feedback; path for career growth” (Parjoleanu, 2020, p. 296). Herzberg’s theory also entails hygiene factors. According to one author, “the employer should provide the best possible working conditions and fair wages that reflect the employee’s responsibilities” (Parjoleanu, 2020, p. 296). Organizations and leadership together play a vital role in creating, maintaining and evaluating the employee’s performance as well as monitoring the employee’s motivation.

**Leadership’s involvement in assisting employees towards sustainable motivational behavior**

Leadership in the healthcare setting have an enormous responsibility and role related to healthcare employee motivation. Performance appraisals between the supervisor and employee may impact an employee’s performance and motivation. One study reported by Kamphorst, evaluated the role of performance appraisals on employee motivation. The results from this study were as follows: cheap-talk statements about the worker's performance contain relevant feedback for the worker (Kamphorst, 2018, p. 262). Next, supervisors tend to give positive appraisals (Kamphorst, 2018, p. 262). Third, positive appraisals motivate a worker more than a negative appraisal (Kamphorst, 2018, p. 262). Fourth, the effect of appraisals on a worker's future performance depends on how it affects the supervisor's reputation for being able to assess a worker's performance (Kamphorst, 2018, p. 262). This study was concluded based on many assumptions about both the supervisor and the employee. Performance appraisals and job
motivation are connected and may be based on the leader’s ability to articulate and accurately assess the healthcare worker’s abilities during the performance evaluation.

Whereas, another study by Karahan and Kurtulumus relative to the employee evaluation, denoted that “all efforts for conducting a performance appraisal are done for the following reasons: motivate employees and increase their commitment, appropriate measurement of performance and skills, appropriate reward and incentives, and provision of career opportunities” (Karahan & Kurtulumus, 2017, p. 3). Another important reason is for motivational causes. “The idea is to conduct the evaluation and communicate the results to the employees to help them encourage and improve themselves” (Karahan & Kurtulumus, 2017, p. 3). Therefore, employee evaluations may be considered a part of employee motivation.

Another idea that leaders can implement includes adding mentoring, coaching and conferences for their employees. Mentoring, coaching programs, and interactive social conferences provide healthcare personnel the chance to connect with their leaders, increase interactions with colleagues and relate to one another. Leaders can “inspire by their own example, offer psychological support through acceptance, confirmation and counseling” (Parjoleanu, 2020, p. 307). Conferences that allow healthcare workers to discuss social and emotional issues they are facing is another idea that provides healthcare providers a regularly scheduled time during their fast-paced work lives to discuss the social and emotional issues they face when caring for patients and families. In addition, “healthcare workers who have attended these social and emotional conferences report reduced stress, improved interactions with colleagues, improved ability to deal with psychosocial aspects of care, and increased sense of shared purpose, with likely dose effect for repeat attendance” (Rehder, Adair & Sexton, 2021, p.1011). Based on this literature review, healthcare personnel benefit from increased interactions
with colleagues when they take the time to meet, discuss their challenges, and openly engage in conversation about their social and emotional issues with their patients.

Finally, for healthcare workers to feel engaged according to Rehder, Adair & Sexton, “it is important that they have a voice in decisions that are made in their work area, as well as a degree of autonomy concerning their work schedule or environment” (2021, p.1100). According to research reported by Passmore (2018) “There is a positive association between perceived autonomy and job satisfaction” (p.48). One study examined whether autonomy or wealth was more important to people and “the findings suggested that the sense of autonomy, regardless of any financial aspects, had a consistently positive effect on the well-being of an individual and reduced negative psychological symptoms of stress” (Passmore, 2018, p.49).

Based on this literature review, there are several theories, motivational rewards and ways that both organizations and leaders can increase motivation and decrease burnout. In conclusion, several case studies are evaluated and support the specific key points demonstrated in this literature review.

**Methods/Framework**

Numerous research articles, journals and studies have been evaluated, compared and have been presented as methods. Articles from well-known peer-reviewed sources such as the International Journal of Healthcare Management, Journal of Applied Psychology, BMC Health Services Research etc. have been included. In addition, Maslow’s Theory of Motivation and Herzberg’s Motivation and Innovation are used in defining motivation. Case studies in the form of questionnaires and surveys are the primary means of research sources from within these journals and articles. The purpose of this paper using this research is to provide individuals, organizations and leaders with a better understanding regarding their role related to motivation,
types of motivators and de-motivators as well as to include sustainable practices that assist with increasing motivation in healthcare personnel in the hospital setting.

**Results/Data**

A significant portion of an organization and healthcare leader’s responsibility is to evaluate their employees and to determine what motivates each employee and how to achieve a sustainable level of motivation and in turn increase productivity, engagement and job satisfaction while decreasing burnout. Therefore, results from the research that I conducted are explained.

One survey study of healthcare employees comprised of 12 questions and sampling 98 total people was given to determine motivation as a factor influencing employee’s activity in the workplace.

Results were:

- 14 said motivation was somewhat important, 58 said it was important and 26 it was very important (Saseanu, 2019, p. 521).
- 59% of respondents consider motivation as an important factor that influences their work (Saseanu, 2019, p. 521).

The second survey study focused on the mean prevalence of physician burnout in the United States. This survey estimated that burnout is as high as between 40% and 50%. (Rehder, 2021). The rate of burnout in US physicians is about 1.5 to 2.5 times higher than it is for US workers in other professions (Rehder, 2021). This survey included physicians from 27 specialties and graded the level of their burnout on a scale of one to seven in the survey with one being that it does not interfere, and seven indicating thoughts of leaving medicine. The results showed:
• All but one specialty selected a four or higher with the top specialty of burnout being Emergency medicine (Parks, 2017). A total of 60% of Emergency medicine physicians state that they feel burned out, up from half in 2013 (Parks, 2017).

• Fewer data exists for the prevalence of burnout in other health care professions; however, available evidence suggests burnout is not substantially different for other roles, such as therapists or technologists (Rehder, 2021).

The third survey study in the form of a questionnaire using motivation as an important factor that influences healthcare employees work and if they are satisfied with the way they are valued at work. The results are:

• 59% of the respondents consider motivation an important factor influencing their work (Saseanu, 2019, p. 521).

• 31 employees replied they were motivated to a small extent, 11 to some extent, 36 to a large extent and 20 to a very large extent (Saseanu, 2019, p. 521). The average answer given by respondents to this question is 3.47, which shows they are appreciated, but only to a certain extent by the leaders of the companies they work for (Saseanu, 2019, p. 521).

The fourth case study demonstrates research results related to job satisfaction and its influence on motivation. The study was conducted on 62 nurses via a questionnaire and the results demonstrated:

• Job satisfaction has a significant influence on work motivation. If job satisfaction increases, work motivation will also increase, and vice versa (Diana et al, 2021, p. 90).
The results show that job satisfaction has a significant role to foster motivation, commitment, and performance of nurses in the hospital (Diana et al, 2021, p. 90).

The fourth study research included qualitative interviews on 41 people including physicians and leaders that focused on hygiene factors and its relation to motivation. The results were as follows:

- The presence of hygiene factors reduces demotivation and dissatisfaction but does not directly motivate behavior. Improving hygiene factors can make the aggregated effect of motivators more positive; for example, by helping reduce workplace stress, employee turnover, and burnout (Phipps & Shortell, 2016, p. 21).

A fifth case study included focus group discussions and interviewed 90 individuals about which intrinsic and extrinsic rewards ranked highest for community health workers. The results were:

- Intrinsic factors included patient outcomes, community respect and recognition by formal healthcare workers, which enabled performance (Ndambo et al., 2022, p. 10).
- Extrinsic factors included position scope and workload, work relationships, workplace environment, and accessibility (Ndambo et al., 2022, p. 10).

Finally, the last case study related to employee motivation was a qualitative study consisting of interviews on 20 total people including: 13 physicians, 3 pharmacists, 2 health service managers, 1 nurse and 1 dentist. The study showed:
• Intrinsic motivations included humanitarian and medical ethics. These were the most common motivations among the participants, who felt they had a moral obligation, duty, and skills to help people (Kallstrom et al., 2022).

• Extrinsic motivations included salary, career advancement and to maintain medical skills (Kallstrom et al, 2022).

**Limitations**

The current research presented in this literature review is limited for several reasons. One major limitation is the small amount of available research focusing on the current Covid-19 pandemic and healthcare workers due to the recent timeframe. Most of the research and studies included in this literature cover studies from that past five years, but do not include Covid-19 relevance related to healthcare personnel motivation. Another limitation is the availability of nationally recognized peer reviewed articles on healthcare workers and motivation. Many studies have been researched outside of the United States. Most of the gaps in the research and literature revolved around the consistency of only healthcare worker motivation. A significant amount of research focused on motivation, but not all of it specifically on motivation on healthcare personnel. Many of the studies around motivation in the workplace involved educators, hospitality professions and other careers not related to healthcare. Some of the research used the terms satisfaction engagement or burnout instead of motivation. Therefore, the inconsistencies in terminology, although somewhat similar, can be confusing and misleading at times. In summary, there were several case studies that were utilized for this research, however, in the future more research on the impact of Covid-19 and healthcare personnel motivation is suggested.

**Recommendations**
Further exploration could focus on exhaustion and depression in healthcare workers. These studies could be used to support further evidence as a demotivating factor. One article focuses on this subject specifically on healthcare workers during the Covid-19 crisis (Caldas, 2021). In this study, examination of healthcare workers intensely involved in the Covid-19 pandemic are experiencing negative psychological and emotional outcomes, and investigates if helping related factors (prosocial motivation and perceived prosocial impact) exacerbate and mitigate relationships to negative outcomes (Caldas, 2021). My recommendation is to create more studies on healthcare personnel’s perception, value of their hierarchy of needs and level of commitment during the Covid-19 pandemic. This research would be intriguing to gather and reveal.

**Conclusion**

In conclusion, healthcare workers are skilled individuals motivated by unique individual factors. Some are intrinsically motivated while others are more motivated by extrinsic factors. The top intrinsic motivation factors included: helping others and moral obligation. The top extrinsic motivational factors included: salary and career advancement followed by workplace environment and relationships. Maslow’s hierarchy of needs and Herzberg’s Hygiene and Development theories are closely connected and correlate to healthcare employee’s motivation in the hospital setting. An organization’s culture, leaderships contributions, employee attitudes, rewards received, and the amount of recognition among other factors all play a role in motivation. In addition, research showed that satisfaction is directly related to motivation and that when satisfaction increases, motivation increases and vice versa. Noticeably, burnout is clearly prevalent in physicians and healthcare personnel. Approximately 40-50% of all healthcare employees report burnout. Leaders can implement and sustain motivational tactics...
once they know their individual employees, the organization’s goals and the opportunities for intrinsic and extrinsic rewards alike.

Healthcare worker motivation is a complex topic that is deserving of attention since healthcare employees greatly impact our society and communities by preventing, aiding in the diagnosis of pathologies, emergent and hospice type of care for nearly everyone at some point. Finally, if healthcare workers are not motivated, engaged or satisfied, they will not perform to the best of their ability and this may directly impact the patient and the communities we reside in.
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