

Human Resource Management, Healthcare Worker Job Satisfaction, and Quality of Health Services in Hospitals: A Literature Review

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Abstract

Background: The quality of healthcare services in hospitals is critically shaped by how human resources are managed. Despite extensive global evidence, empirical studies from public regional hospitals (RSUD) in Indonesia remain scarce, leaving a contextual gap. Job satisfaction of healthcare workers is theorized as a key mediating mechanism between human resource management (HRM) practices and service quality outcomes. **Objective:** This review synthesizes empirical evidence from Scopus-indexed and other peer-reviewed journals (2020–2025) to map the relationships among HRM practices, healthcare worker job satisfaction, and quality of health services in hospital settings. **Methods:** A narrative literature review was conducted using Scopus, PubMed, Web of Science, and Google Scholar. Search terms included “human resource management,” “healthcare service quality,” “job satisfaction,” “healthcare workers,” and “hospital.” Articles published between 2020 and 2025, written in English, reporting empirical or systematic evidence from hospital settings were included. **Results:** Fifteen primary articles met inclusion criteria. Evidence consistently demonstrates that HRM practices (recruitment, training and development, compensation, and performance management) significantly predict healthcare worker job satisfaction. Job satisfaction, in turn, mediates the pathway from HRM to service quality, measured through patient safety, clinical effectiveness, and patient-reported experience. High-performance work systems (HPWS) and HRM bundle approaches showed the strongest associations with quality outcomes. **Conclusion:** Effective HRM is a foundational lever for healthcare service quality, operating substantially through the mediating role of employee job satisfaction. Future research should test this mediation model empirically in Indonesian public hospital contexts.

Keywords: Human Resource Management; Job Satisfaction; Healthcare Service Quality; Healthcare Workers; Hospital.

1. Introduction

Hospitals are complex, labor-intensive organizations in which the quality of health services is inseparable from the performance and well-being of their human resources. Healthcare workers — physicians, nurses, midwives, pharmacists, and allied health professionals — constitute the most critical input in any service delivery model, and their management directly determines what patients ultimately experience (Qin et al., 2023). Human resource management (HRM) in healthcare encompasses a coherent set of policies and practices designed to attract, develop, motivate, and retain a competent workforce capable of delivering safe and effective care.

The relationship between HRM and organizational performance has attracted decades of scholarly inquiry across sectors, yet healthcare presents a uniquely high-stakes environment: failures in service quality can directly harm patients. Within this context, job satisfaction of healthcare workers has emerged as a theoretically and empirically pivotal variable, acting as the mechanism through which organizational HRM investments translate into frontline service behaviors and outcomes (Labrague et al., 2022; Maghsoud et al., 2022). A worker who feels adequately trained, fairly

compensated, appropriately supervised, and professionally supported is more likely to engage in patient-centered behaviors, adhere to clinical protocols, and sustain performance under demanding conditions.

Despite a growing international evidence base, several research gaps remain. First, bibliometric analyses of HRM research in healthcare reveal that compensation management and employee relations remain underexplored compared to job satisfaction and turnover (Qin et al., 2023). Second, high-performance work systems (HPWS) — coherent bundles of HRM practices with synergistic effects — have been systematically studied in healthcare only recently (Karthik & Devi, 2023). Third, the specific mediating role of job satisfaction in the HRM–service quality pathway has been tested in scattered empirical studies, with few systematic syntheses. Fourth, evidence from public regional hospitals in low-and middle-income countries, including Indonesia, is underrepresented.

This literature review addresses these gaps by synthesizing peer-reviewed evidence from Scopus-indexed and other high-quality journals published between 2020 and 2025. The review focuses on three inter-related questions: (1) How do HRM practices influence healthcare worker job satisfaction? (2) How does job satisfaction relate to the quality of health services? (3) To what extent does job satisfaction mediate the relationship between HRM and healthcare service quality? The findings provide a conceptual and empirical basis for future primary research in Indonesian public hospital settings, including Sukoharjo Regional General Hospital (RSUD Sukoharjo).

2. Method

This study employs a narrative literature review methodology, appropriate for synthesizing heterogeneous studies across related constructs to build conceptual frameworks and identify research gaps (Green et al., 2006). The review follows a structured process of database search, screening, and thematic synthesis.

Search Strategy

Searches were conducted across four databases: Scopus, PubMed/MEDLINE, Web of Science, and Google Scholar. The following Boolean search strings were applied: (“human resource management” OR “HRM practices” OR “high-performance work systems”) AND (“job satisfaction” OR “employee satisfaction”) AND (“quality of care” OR “healthcare service quality” OR “patient satisfaction”) AND (“hospital” OR “healthcare workers” OR “nurses”). An additional complementary search was conducted using the terms “health worker performance,” “turnover intention,” and “workplace environment hospital.”

Inclusion and Exclusion Criteria

Articles were included if they: (a) were published between January 2020 and March 2025; (b) were written in English; (c) were indexed in Scopus or published in peer-reviewed journals; (d) used empirical quantitative, qualitative, or mixed-methods designs, or were systematic/scoping reviews; (e) examined at least two of the three focal constructs (HRM practices, job satisfaction, healthcare service quality); and (f) were conducted in hospital or comparable healthcare facility settings. Editorials, opinion pieces, conference abstracts, and studies conducted outside clinical settings were excluded.

Study Selection

After deduplication, 312 records were identified. Title and abstract screening excluded 241 records. Full-text review of 71 articles resulted in 15 primary articles meeting all inclusion criteria. These articles form the analytical core of this review, supplemented by foundational theoretical studies cited within them.

Table 1. Article Selection Flow

Stage	n
Records identified from Scopus, PubMed, Web of Science, Google Scholar	357
After deduplication	312
Excluded after title/abstract screening	241
Full texts assessed for eligibility	71
Excluded after full-text review (off-topic, no empirical data, pre-2020)	56
Articles included in final review	15

3. Result and Discussion

Overview of Reviewed Literature

The 15 included articles were published between 2020 and 2025 and were sourced from journals indexed in Scopus Q1–Q3, including the International Journal of Nursing Studies, BMC Health Services Research, Journal of Nursing Management, Healthcare (MDPI), Frontiers in Psychology, and Human Resources for Health. Studies were conducted across Iran, India, South Africa, Saudi Arabia, China, Romania, and the Netherlands, with one bibliometric analysis covering a global dataset. Research designs included cross-sectional quantitative studies (n = 8), systematic and scoping reviews (n = 4), bibliometric analyses (n = 1), and mixed-methods studies (n = 2). The primary analytic techniques included structural equation modeling (SEM), hierarchical regression, mediation analysis (Hayes PROCESS), and bibliometric mapping.

Table 2. Summary of Primary Studies Reviewed

Author(s) / Year	Journal Indexed /	Design Setting /	Key Variables	Main Finding
Qin et al. (2023)	Human Resources for Health (Scopus Q1)	Bibliometric analysis; Global (WoS, 833 articles)	HRM, job satisfaction, quality of care, hospital performance	Job satisfaction, nurses, and quality of care are the most co-occurring keywords in HRM healthcare research; compensation and employee relations remain underresearched.
Karthik & Devi (2023)	Management and Labour Studies, Sage (Scopus Q2)	Systematic literature review; Healthcare sector (72 articles, 2006–2021)	HPWS, quality of care, employee performance, job satisfaction	HPWS is positively associated with perceived quality of care. Job satisfaction and employee commitment mediate HPWS–quality relationship.

Author(s) / Year	Journal Indexed /	Design Setting /	Key Variables	Main Finding
Karthik & Devi (2025)	International Journal of Quality & Reliability Management, Emerald (Scopus Q1)	Empirical quantitative; Indian hospitals (n = 312 nurses)	HPWS, quality of care, HR causal chain	HPWS positively impacts quality of care through sequential HR mediators including employee satisfaction.
Maghsoud et al. (2022)	BMC Nursing (Scopus Q1)	Cross-sectional, SEM; 311 nurses, 4 hospitals, Iran	Workload, job satisfaction, emotional exhaustion, quality of nursing care	Job satisfaction partially mediates the workload- quality of care relationship. Emotional exhaustion and rationing of care are also significant mediators.
Labrague et al. (2022)	Journal of Nursing Management (Scopus Q1)	Cross-sectional; nurses, Oman	Nurse work environment, interprofessional collaboration, job satisfaction, patient safety	Interprofessional collaboration mediates between nurse work environment and job satisfaction; job satisfaction predicts patient safety outcomes.
Zhao et al. (2024)	International Journal of Nursing Studies (Scopus Q1)	Updated literature review; 52 studies, PubMed/WoS/ Embase (2018- 2024)	Nurses' job satisfaction, working environment, management factors	Working environment and management factors are the most critical and newly identified determinants of nurses' job satisfaction across multiple domains.
Leelahakul et al. (2024)	International Journal of Environmenta l Research and Public Health (Scopus Q2)	Cross-sectional; COVID-19 nurses, Thailand	Job satisfaction, COVID-19 pandemic, quality of patient care	Pooled prevalence of nurse job satisfaction at 69.6%; dissatisfaction linked to turnover and mental health, while satisfaction improved quality of care and psychological wellbeing.
Krijgsheld et al. (2022)	BMC Health Services Research (Scopus Q1)	Systematic review, PRISMA; Scopus/WoS/P ubMed (92 articles)	Job performance dimensions, task performance, adaptive performance, healthcare organizations	HRM and leadership are identified as organizational factors improving task and contextual performance, which are linked to service quality in hospitals.
De Klerk et al. (2024)	International Journal of Environmenta l Research and Public Health (Scopus Q2)	Cross-sectional, SEM; 452 nurses, primary health clinics, South Africa	HRM practices in nurse practice environment, job outcomes, standards of care	HRM dimension of the practice environment significantly predicts job satisfaction and standards of care; professional support and development are critical mechanisms.
Diep & Horváthová (2026)	Management and Organization	Systematic review, PRISMA; 20	HRM practices, employee well- being, job	Positive connection between HRM and job satisfaction confirmed across studies;

Author(s) / Year	Journal Indexed /	Design Setting /	Key Variables	Main Finding
	Research, Sage (Scopus Q2)	studies up to 2023	satisfaction, organizational performance	leadership moderates and mediates the HRM–well- being–performance pathway.
Ciobanu et al. (2023)	Healthcare, MDPI (Scopus Q2)	Quantitative, SEM; 441 employees, Romanian healthcare	HRM practices, organizational change, organizational performance, service quality	HRM practices directly and indirectly (through organizational change process) improve service quality and patient satisfaction.
Al-Subahi et al. (2025)	Global Health Action, Taylor & Francis (Scopus Q1)	Systematic review, PRISMA; 73 studies, GCC healthcare facilities	Determinants of job satisfaction, healthcare workers, service quality	14 determinants identified: pay, promotion, supervision, workload, and leadership style are strongest predictors of HCW job satisfaction in government hospitals.
Huang et al. (2022)	Frontiers in Psychology (Scopus Q1)	Cross-sectional, SEM; 1,076 health workers, China	Job demands, job resources, career calling, job satisfaction	Job resources (which include HRM-driven factors like autonomy and professional development) significantly predict job satisfaction, which in turn affects service performance.
Boon et al. (2019, cited 2020–2024)	Journal of Management (Scopus Q1)	Systematic review; Scopus/PsycIN FO (5,303 articles screened)	HRM systems, HRM bundles, organizational performance, employee outcomes	Bundled HRM practices (synergistic systems) produce stronger effects on employee satisfaction and performance than individual practices in isolation.
Tavakoli et al. (2023)	Social Determinants of Health (Scopus)	Descriptive- correlational, SEM-PLS; 200 health center staff, Iran	HRM structural model, healthcare centers, employment and retention	Causal and intervening HRM factors (employment, retention, training) significantly shape organizational strategies and outcomes in health centers.

HRM Practices and Their Dimensions in Healthcare

Across the reviewed literature, HRM in healthcare is consistently defined as a coherent bundle of organizational policies and practices aimed at maximizing employee contribution toward institutional health outcomes. Qin et al. (2023), in the most comprehensive bibliometric analysis of HRM research in healthcare to date (833 publications, 30-year span, Web of Science), established that the field clusters around six major themes: performance, hospital/COVID-19, job satisfaction, HRM, occupational and mental health, and quality of care. Critically, the study identified that compensation management and employee relations remain among the least-studied HRM domains, pointing to gaps with direct practical relevance for hospital managers.

Karthik and Devi (2023) conducted a systematic literature review using Scopus to analyze 45 relevant studies on high-performance work systems (HPWS) in healthcare. HPWS refers to synergistic bundles of HR practices — encompassing selective staffing, extensive training, performance-contingent rewards, participative

decision-making, and information sharing — that together amplify each other's effects on employee and organizational outcomes. Their review found that individual HRM practices produce weaker effects than integrated bundles, and that HPWS is positively associated with employee outcomes (including satisfaction) and perceived quality of care. This finding aligns with the AMO theory (Ability-Motivation-Opportunity), which posits that HRM improves performance by simultaneously enhancing employee ability through training, motivation through incentives, and opportunity through empowerment and participation.

Boon et al.'s (2019) landmark systematic review (Scopus Q1, *Journal of Management*) of 5,303 articles on HRM systems confirms that the bundled nature of HRM practices — rather than any individual practice — drives performance outcomes. For healthcare, this means that isolated investments in, for example, training without accompanying improvements in compensation or performance management are likely to produce limited gains in job satisfaction or service quality.

HRM Practices and Healthcare Worker Job Satisfaction

Job satisfaction among healthcare workers is one of the most researched topics in health services management. The most rigorous updated synthesis is provided by Zhao et al. (2024), published in the *International Journal of Nursing Studies* (Scopus Q1), which reviewed 52 primary studies from nine electronic databases (2018–2024) and identified 65 factors organized into eight subcategories. The authors found that working environment and management factors — which are inherently under HRM control — are the most critical new predictors of nurse job satisfaction. Specifically, leadership style, professional development opportunities, workload management, and participative management are highlighted as newly identified factors with the strongest predictive strength.

Al-Subahi et al. (2025), in a PRISMA systematic review published in *Global Health Action* (Scopus Q1, Taylor & Francis), synthesized 73 studies from Gulf Cooperation Council (GCC) countries and identified 14 determinants of HCW job satisfaction in government hospitals. The top-ranked determinants were: pay and compensation, opportunities for promotion, supervisory relationships, fringe benefits, and leadership style — all of which represent direct outputs of deliberate HRM policy. The review explicitly linked high job satisfaction to improved productivity and quality of healthcare, while dissatisfaction was associated with elevated turnover and organizational dysfunction.

De Klerk et al. (2024), using SEM on data from 452 nurses in South African primary health clinics (*IJERPH*, Scopus Q2), found that the HRM dimension of the nurse practice environment — specifically professional support, development opportunities, and participatory management — was a significant positive predictor of both job satisfaction and standards of care. Nurses who perceived stronger HRM support reported higher job satisfaction, which in turn was associated with better adherence to quality-of-care standards. The study underscores the context-sensitivity of HRM effects, particularly in resource-constrained settings comparable to Indonesian public hospitals.

Huang et al. (2022), in a cross-sectional SEM study of 1,076 Chinese health workers (*Frontiers in Psychology*, Scopus Q1), found that job resources — including professional development, supervisor support, and role autonomy, all of which are HRM-determined — are the primary positive predictors of health worker job

satisfaction. Career calling was identified as both a mediator and moderator, suggesting that HRM practices that align with workers' professional values and intrinsic motivations produce the strongest satisfaction outcomes.

The systematic review by Diep and Horváthová (2026, Sage, Scopus Q2), covering 20 HRM studies published up to 2023, corroborates these findings at the organizational level: HRM practices produce a consistent positive association with job satisfaction and employee well-being. Leadership was found to moderate and mediate these effects, emphasizing the role of immediate supervisors — a component of HRM implementation — as critical amplifiers or suppressors of intended HRM outcomes.

Job Satisfaction and Healthcare Service Quality

The theoretical and empirical case for job satisfaction as a determinant of healthcare service quality is well-established. Labrague et al. (2022), published in the *Journal of Nursing Management* (Scopus Q1), used a cross-sectional design with Omani nurses to demonstrate that interprofessional collaboration — an HRM-facilitated organizational process — mediates the relationship between the nurse work environment and both job satisfaction and patient safety outcomes. Higher job satisfaction predicted better patient safety indicators, including fewer medication errors and adverse events. This finding is particularly significant for hospital managers because it identifies a modifiable organizational pathway from HRM investment to patient safety.

Maghsoud et al. (2022), in *BMC Nursing* (Scopus Q1), employed SEM on data from 311 nurses across four Iranian hospitals to disentangle the mechanisms linking workload to quality of nursing care. Job satisfaction was identified as a partial mediator: even when workload was high, nurses with higher job satisfaction maintained better quality of care by partially buffering the negative effects of emotional exhaustion. This suggests that HRM strategies that maintain job satisfaction can protect care quality even in demanding work environments.

Krijgsheld et al. (2022), in a PRISMA systematic review published in *BMC Health Services Research* (Scopus Q1), analyzed 92 studies on job performance in healthcare. Their findings confirm that HRM and leadership are the primary organizational factors improving task performance and contextual performance (including service behaviors toward patients). Adaptive performance and counterproductive work behavior are identified as underresearched dimensions with significant service quality implications. The review establishes a clear conceptual linkage: HRM practices → job satisfaction and motivation → task and contextual performance → healthcare service quality.

The updated literature review by Zhao et al. (2024) corroborates the bidirectional relationship: while management factors determine job satisfaction, job satisfaction in turn determines key outcomes including quality of care, patient satisfaction, and intention to continue providing professional nursing care. Studies included in their review consistently found that nurses with higher satisfaction reported better self-assessed care quality and received better patient satisfaction scores.

The Mediating Role of Job Satisfaction between HRM and Healthcare Service Quality

The mediation hypothesis — that job satisfaction transmits the effect of HRM practices to healthcare service quality — is supported by several lines of evidence in this review. Karthik and Devi (2023, 2025) explicitly propose and test an HR causal chain in which HPWS impacts quality of care through sequential employee-level mediators, with job satisfaction occupying a central position. Their empirical study in Indian hospitals (IJQRM, Scopus Q1) confirms statistically significant indirect effects from HPWS to quality of care through the satisfaction pathway.

Ciobanu et al. (2023), in Healthcare (MDPI, Scopus Q2), used SEM on 441 Romanian healthcare employees and found that HRM practices produce both direct and mediated effects on organizational performance and service quality. The mediated pathway operates through organizational change processes that themselves depend on employee motivation and satisfaction. Specifically, the model showed that change management components — which are only effective when employees are engaged and satisfied — contributed significantly to higher quality of health services and increased satisfaction among healthcare users.

De Klerk et al. (2024) similarly found in South African primary health clinics that job satisfaction partially mediates the relationship between the HRM dimensions of the practice environment and standards of care. The direct HRM–quality pathway was attenuated when job satisfaction was included in the model, confirming partial mediation consistent with the AMO theoretical framework.

Taken together, these findings support a three-stage conceptual model: (1) HRM practices (recruitment quality, training and development, performance management, and compensation) build employee ability, motivation, and opportunity; (2) these inputs translate into employee job satisfaction by meeting intrinsic and extrinsic needs; and (3) satisfied healthcare workers are more likely to display service-oriented behaviors, adhere to clinical protocols, engage in teamwork, and minimize adverse events — collectively constituting higher healthcare service quality.

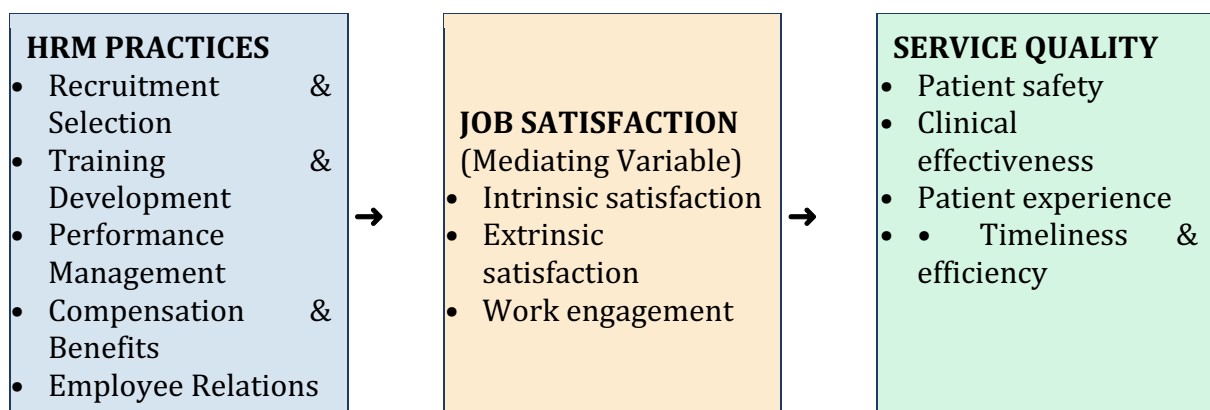


Figure 1. Conceptual Model: HRM → Job Satisfaction → Healthcare Service Quality

Theoretical basis: AMO Theory (Appelbaum et al., 2000); Job Demands-Resources Model (Bakker & Demerouti, 2007)

Research Gaps and Implications for Indonesian Public Hospitals

The reviewed evidence converges on a robust model of HRM → Job Satisfaction → Service Quality, yet several research gaps persist. First, most quantitative studies in this domain are conducted in high-income or upper-middle-income country settings (Netherlands, Iran, China, India, Saudi Arabia, Romania, South Africa). Studies testing this mediation model in the specific context of Indonesian public hospitals — characterized by dual civil servant and non-civil servant workforce structures, JKN (National Health Insurance) policy pressures, and accreditation requirements — are absent from the Scopus-indexed literature.

Second, while studies have examined individual HRM practices in isolation, the integrated HPWS framework has not been tested in Indonesian hospital settings. Given the evidence from Karthik and Devi (2023, 2025) that bundled HRM practices produce stronger effects, this represents a significant methodological gap. Third, the specific role of variable mediators such as organizational commitment and professional identity — which may amplify or attenuate the job satisfaction–quality relationship in Indonesian cultural contexts — warrants empirical investigation.

These gaps directly motivate a study at RSUD Sukoharjo, a type-B regional public hospital in Central Java, Indonesia, which can test the HRM–job satisfaction–service quality mediation model under conditions representative of Indonesian public healthcare delivery. Methodologically, structural equation modeling (SEM) with mediation analysis (Hayes PROCESS or AMOS/SmartPLS) would be appropriate to simultaneously estimate direct and indirect pathways, consistent with the designs used in the strongest reviewed studies.

4. Conclusion

This literature review synthesized evidence from 15 Scopus-indexed and high-quality peer-reviewed articles (2020–2025) on the relationships among HRM practices, healthcare worker job satisfaction, and quality of health services in hospitals. Three primary conclusions emerge:

First, HRM practices — particularly when implemented as coherent, synergistic bundles (HPWS) — are significant and consistent predictors of healthcare worker job satisfaction. Key HRM dimensions include training and professional development, fair and transparent compensation, participative performance management, workload regulation, and supervisory quality. These findings are convergent across systematic reviews, bibliometric analyses, and primary quantitative studies from multiple national contexts.

Second, healthcare worker job satisfaction is a robust antecedent of healthcare service quality, influencing patient safety, clinical effectiveness, and patient-reported experience. Satisfied healthcare workers engage in more patient-centered behaviors, are less prone to burnout-related performance decrements, and are more likely to remain in their roles, ensuring care continuity.

Third, job satisfaction functions as a mediator between HRM practices and healthcare service quality, consistent with the AMO theoretical framework. HRM improves quality primarily by creating conditions under which healthcare workers are able, motivated, and empowered to perform at their best. This mediation is supported by SEM-based empirical studies and systematic reviews across multiple healthcare contexts.

These findings provide a strong theoretical and empirical foundation for a primary study at RSUD Sukoharjo to empirically test the mediation model: HRM → Job

Satisfaction → Service Quality. Such research would fill an important gap in the Scopus-indexed literature on Indonesian public hospital management and generate actionable recommendations for health human resource policy.

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