Good work –the relations between social capital, influence at work and perceived quality of work

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Introduction
A model for Good Work, understood as positive and rewarding aspects of work, has previously been developed based on interviews including dentists working under different organizational systems. An overall finding was that a positive work climate with trustful relations and professional freedom was found important for being able to carry out high quality work. The aim of this presentation is to assess whether the central part of this model can be corroborated empirically.

Material and methods
All staff employed at public dentistry in two counties in Sweden received an email with a personal login to an electronic questionnaire. After two reminders a response rate of 78% and 81% respectively was obtained including a total of 610 respondents. Data from non-managerial dental hygienists and dentists with direct patient contact in their work were included in the analyses (N=198). The analyses are preliminary as data from more organizations are in the process of being collected.

A scale was developed for perceived quality of the work done at the clinic. This scale was used as the dependent variable in a multiple linear hierarchical regression model. Independent variables: county, a scale developed to measure social support in relation to patient-work in addition to scales from the Copenhagen Psychosocial Questionnaire on horizontal trust, community at the workplace and influence. The study has been approved by the Regional Ethics Board in Southern Sweden and is funded by the Swedish Research Council for Health, Working Life and Welfare (FORTE).

Results
A significant difference in average for perceived quality of work was seen in relation to organization, but this difference disappeared in the final regression model. Being part of a work-related community, having trusted relations and a good support were all significantly associated with a positive assessment of the quality of work performed at the workplace, while influence did not contribute to further explanation. The final regression model explained 35% of the variance of the outcome.

Conclusion
The overall model for Good Work was corroborated concerning the relationship between social capital and valuation of quality of care.