

Analysis of the Relationship between Performance and Commitment in Health Professionals: A Systematic Review

INPLASY202380087

doi: 10.37766/inplasy2023.8.0087

Received: 20 August 2023

Published: 20 August 2023

Corresponding author:

Carla Pimenta

carla.vicente.pimenta@gmail.com

Author Affiliation:

Physiotherapist, Centro Hospitalar Universitário Lisboa Central. Portugal; Assistant Professor, Department of Therapy and Rehabilitation Sciences, Escola Superior de Tecnologia da Saúde de Lisboa, Instituto Politécnico de Lisboa. Portugal; PhD student in Public Administration (specialization in Health Administration), Instituto Superior de Ciências Sociais e Políticas, Universidade de Lisboa. Portugal.

Pimenta, C¹.

ADMINISTRATIVE INFORMATION

Support - This research received no specific grant from any funding agency in the public, commercial, or not-for-profit sectors.

Review Stage at time of this submission - Formal screening of search results against eligibility criteria.

Conflicts of interest - None declared.

INPLASY registration number: INPLASY202380087

Amendments - This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 20 August 2023 and was last updated on 20 August 2023.

INTRODUCTION

Review question / Objective Review question: What is the relationship between performance and commitment in health professionals?

Main objective: To explore the extent and nature of the relationship between performance and commitment in health professionals, including the factors that influence this relationship.

Specific objectives:

1. To systematically review the existing literature about the relationship between performance and commitment in health professionals.
2. To identify and analyze the factors influencing the relationship between performance and commitment in health professionals.
3. To assess the methodologies used to measure performance and commitment in health professionals.

Rationale This systematic review will allow to understand the relationship between performance and commitment, through the analysis and synthesis of several studies.

Performance and commitment of healthcare providers are crucial factors influencing the quality of healthcare delivery (Baird et al., 2019). The effectiveness and efficiency of healthcare services depend on the competence, motivation, and dedication of the professionals involved. Understanding the relationship between performance and commitment can provide valuable insights into improving healthcare outcomes and optimizing the healthcare resources. Healthcare organizations strive to provide high-quality care to patients while managing limited resources effectively (World Health Organization et al., 2018). Performance is a fundamental aspect of delivering quality healthcare. It directly affects patient safety, treatment outcomes, and overall patient satisfaction. On the other hand, a high level

of commitment is associated with increased job satisfaction, retention, and engagement, which ultimately impact the quality of care provided. Furthermore, the review will explore the various factors that influence the relationship between performance and commitment in health professionals.

High-performing and committed health professionals are more likely to provide evidence-based, patient-centered care, resulting in improved patient outcomes, reduced medical errors, and increased patient satisfaction (Engle et al., 2021). Conversely, a lack of performance and commitment may lead to suboptimal care quality, compromised patient safety, and increased healthcare costs.

Additionally, this review will analyze the methodologies employed in previous studies to measure performance and commitment in health professionals.

Condition being studied The condition being studied in this systematic review is the relationship between performance and commitment in health professionals. Performance refers to the clinical skills, knowledge, and technical abilities of healthcare providers, while commitment relates to their psychological and emotional attachment to their work, organization, and patients. Understanding the dynamics between performance and commitment is essential for optimizing healthcare outcomes, patient safety, and overall quality of care. The review will explore the factors influencing this relationship and the methodologies used to measure performance and commitment in health professionals.

METHODS

Search strategy To conduct this comprehensive systematic review, the Preferred Reporting Items for Systematic Reviews and Meta-Analysis (PRISMA) protocol will be followed (Shamseer, 2015) and the combination of terms - Performance, Commitment and Health professionals - will be considered in the electronic databases - PubMed, Web of Science and Scopus, as show:

PubMed: ((performance[Title/Abstract]) AND (commitment[Title/Abstract])) AND (health professionals[Title/Abstract])

Web of Science: (health professionals (Topic) AND performance (Topic) AND commitment (Topic))

Scopus: (TITLE-ABS-KEY (health AND professionals) AND TITLE-ABS-KEY (performance) AND TITLE-ABS-KEY (commitment)).

Participant or population The systematic review will address studies involving various types of

healthcare professionals, as medical doctors, nurses, physiotherapists, etc...It is important to note that the review may include studies with participants from different healthcare settings, such as hospitals, clinics, primary care centers, long-term care facilities, and community-based healthcare organizations.

Intervention In the context of the relationship between performance and commitment in health professionals, the systematic review may explore various interventions or group of interventions that have been evaluated in the included studies.

Comparator In the context of the systematic review on performance and commitment in health professionals, the comparative interventions applied to the target population will depend on the specific studies included in the review.

Study designs to be included To address the objective of this systematic review it will be included primary and empirical studies with various study designs that provide relevant evidence, from different research approaches. The specific study designs to be included may be, for example, Randomized Controlled Trials (RCTs), Quasi-Experimental Studies, Cross-sectional Studies, Longitudinal Studies, Cohort Studies, Qualitative Studies, Mixed-Methods Studies.

Eligibility criteria It is important to clearly define inclusion and exclusion criteria to ensure the selection of relevant studies and maintain the rigor of the systematic review process. These criteria should be applied consistently during the screening and selection of studies to maintain the integrity and validity of the review. Inclusion Criteria: 1. Type of documents: Articles published in peer-reviewed journals, to ensure inclusion of robust and validated research findings (who passed for a rigorous evaluation process with scrutiny and assessment by experts in the field). 2. Publication Date: A time period will not be defined to analyze the evolution of the literature over time. 3. Language: Studies published in English and Portuguese. 4. Study Setting: Studies conducted in various healthcare settings, including hospitals, clinics, primary care centers, long-term care facilities, and community-based healthcare organizations. This criterion allows for a diverse representation of health professionals across different practice environments. 5. Participants: Studies involving health professionals from various disciplines, including physicians, nurses, allied health professionals, dentists, psychologists, administrators, and managers. This criterion ensures the inclusion of a wide range of health

professionals to capture a comprehensive understanding of performance and commitment. Exclusion Criteria: 1. Irrelevant Topics: Studies that do not directly address the relationship between performance and commitment in health professionals or lack sufficient relevance to the research question. 2. Non-Original Research: Editorials, commentaries, opinion pieces, and systematic review articles will be excluded. 3. Low-Quality Studies: Studies with a high risk of bias or methodological limitations that may significantly affect the validity and reliability of the findings will be excluded. The methodological quality will be evaluated using a checklist as employed by Fernandes et al. (2022). This checklist encompasses an assessment of six key criteria: objectives, context, methods, instruments/scales, findings, and limitations. Studies failing to meet all these criteria will be categorized as low-quality.

Information sources To gather the necessary information for the systematic review, a variety of academic databases will be used as information sources, namely PubMed/MEDLINE, Web of Science, and Scopus. These databases are widely recognized and cover a broad range of scientific disciplines, providing access to a vast collection of peer-reviewed articles.

Main outcome(s) The possible outcomes of the systematic review on performance and commitment in health professionals can include various findings and insights derived from the synthesis of the included studies. These outcomes can be related with the relationship between performance and commitment, the factors influencing performance and commitment and the methodologies and measurement tools used in the included studies.

Additional outcome(s) Not applicable.

Data management To manage records and data for the systematic review on performance and commitment in health professionals, a data management plan will be employed. This mechanism aims to ensure efficient organization, storage, and retrieval of relevant records and data throughout the review process. The plan should include details on data sources, data extraction methods, data storage formats, and data security measures.

Quality assessment / Risk of bias analysis The methodological quality will be evaluated using a checklist employed by Fernandes et al. (2022). This checklist encompasses an assessment of six

key criteria: objectives, context, methods, instruments/scales, findings, and limitations. Studies failing to meet all these criteria will be categorized as low-quality.

Strategy of data synthesis The strategy of data synthesis is crucial to ensure transparency, accuracy, and consistency throughout the data analysis process. Detailed documentation of the analysis methods, decisions made, and any limitations or challenges encountered will be provided to enhance the credibility and replicability of the findings.

The analysis of data in this systematic review on performance and commitment in health professionals involves several steps to synthesize and interpret the findings from the included studies.:

1. **Data Extraction and Tabulation:** Initially, data from the included studies will be extracted and tabulated systematically. This involves extracting relevant information such as study characteristics, sample size, study design, measurement tools, outcome measures, and key findings. The extracted data will be organized in a standardized format, allowing for easy comparison and synthesis.

2. **Descriptive Analysis:** Descriptive analysis involves summarizing the characteristics and findings of the included studies. This will include calculating summary statistics (e.g., means, frequencies) for relevant variables, such as performance and commitment measures, and presenting them in tables or figures to provide an overview of the data.

3. **Interpretation and Conclusion:** Finally, the synthesized findings will be interpreted in light of the research question, objectives, and the quality of the included studies. The strengths, limitations, and implications of the findings will be discussed, and conclusions will be drawn regarding the relationship between performance and commitment in health professionals, factors influencing them, and any gaps or areas for further research.

Subgroup analysis In this systematic review will be assessed the feasibility of conducting subgroup analysis to gain a deeper insight into how various factors may affect the relationship between performance and commitment among health professionals in specific subgroups. This consideration will be contingent upon the sample size and the accessibility of data within each subgroup identified during the analysis, with the objective of uncovering potential subgroup-specific patterns or trends.

Sensitivity analysis To assess the robustness and reliability of the results of this systematic review, will be conducted a sensitivity analysis. This analysis will involve identifying factors of interest and defining different scenarios to examine their impact on the overall findings.

Language restriction The search will be refined by language: English and Portuguese.

Country(ies) involved Portugal.

Keywords Performance; Commitment; Health professionals; Job performance; Work performance; Work commitment; Job commitment; Employee performance; Employee commitment; Organizational commitment.

Dissemination plans Publication and/or presentation at meetings, conferences, congresses and seminars.

Contributions of each author

Author 1 - Carla Pimenta.

Email: carla.vicente.pimenta@gmail.com

References

Baird, K. M., Tung, A., & Yu, Y. (2019). Employee organizational commitment and hospital performance. *Health care management review*, 44(3), 206–215. <https://doi.org/10.1097/HMR.000000000000181>.

Engle, R. L., Mohr, D. C., Holmes, S. K., Seibert, M. N., Afable, M., Leyson, J., & Meterko, M. (2021). Evidence-based practice and patient-centered care: Doing both well. *Health care management review*, 46(3), 174–184. <https://doi.org/10.1097/HMR.000000000000254>.

Fernandes, A., Santinha, G., & Forte, T. (2022). Public Service Motivation and Determining Factors to Attract and Retain Health Professionals in the Public Sector: A Systematic Review. *Behavioral Sciences*, 12, 95. <https://doi.org/10.3390/bs12040095>.

World Health Organization, Organization for Economic Co-operation and Development, & The World Bank. (2018). *Delivering quality health services: a global imperative for universal health coverage*. OECD ISBN 978-92-64-30030-9.

Shamseer, L., Moher, D., Clarke, M., Ghersi, D., Liberati, A., Petticrew, M., Shekelle, P., & Stewart, L. A. (2015). Preferred reporting items for systematic review and meta-analysis protocols (PRISMA-P) 2015: Elaboration and explanation. *BMJ*, 349, g7647. <https://doi.org/10.1136/bmj.g7647>.