

## Organizational Variables Influencing Nurses' Performance at Quena General Hospital

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**Abstract:** Nurses' performance is essential in order to accomplish health care in an effective manner. **Study aim:** To determine organizational variables influencing performance of nurses at Quena General Hospital. **Study design:** A descriptive explorative research design was used. **Setting:** The study was conducted in (medical, surgical, pediatrics, ICU, OR, maternal and gynecological departments) at Quena General Hospital. **Subjects:** The study included all available nurses' who were working in selected departments (n=166). **Tools of the study:** A self-administered questionnaire was used for data collection it consisted of two parts: **The First part** included the personal characteristics of studied nurses. **The second part**, factors affecting the nurses' performance questionnaire. It consisted of (67) items divided into eight subscales: knowledge and skills, performance appraisal and utilization of results, remuneration, benefits, reward and recognition, staff development, work space and environment, organizational mission and goal, commitment and satisfaction and leadership and management style. **Results:** It showed that highest variable that influencing nurses' performance was knowledge and skills while, the lowest one was the organizational mission and goal. There were statistically significant relationships between organizational variables influencing performance of nurses, and personal characteristics. **Conclusion:** The most important variables that have influencing the nurses' performance were the knowledge and skills, remuneration, benefits, reward and recognition. **Recommendation:** Nursing managers should develop; strategies for improvement of nurse's knowledge and competencies, performance management system, and policies for improvement of nurses' leadership and management abilities.

**Key Words:** Variables, Influencing, Nurses, Performance

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### I. Introduction

All health care settings and their workers face extraordinary challenges and many pressure as technological explosion, the increasing of health care prices, a variety of the care requirements, and the new kind of disease (**Business Wire, 2005**). Therefore the improvement of health provider performance becomes a need for the goal attainment of healthy organization in all developing countries (**Dieleman, 2009 & WHO, (2011)**).

Performance in any health care settings hinge on the staff knowledge abilities, experience and motivation. Managers must work to improve the working environments which enrich the employee's performance. The performance of the nurses are especially important in accomplishing health care in a continuous and effective way (**Awases, et al., 2013**).

According to **Awosusi, and Jegede, (2011)** job performance defined as "the way and the process how the nurses serve nursing for the patients and other people". Also, **TOP, (2013)** similarly suggests that "the job performance as the way and process of serving". Thus, the common point of these two definitions is that job performance is regarded as the way the job is performed and its process.

**Winch, et al., (2008)** stated that "completes function, achieve something or do an action or task" is the meanings of the performance. Definition of performance can be "to accomplish a task or activities to encounter duties on the basis of specific standard". Performance tells about what was done, and how much it was good.

The performance improvement is the goal of allover the world health care system(**WHO, 2006**). Nurses are the major health care providers within governmental hospital; they provide care to patients, families, and societies. Nurses work in all specialties at a different setting, where they work autonomously and as a team member. So it is very important to highlight organizational variables that affect their performance.

**Thulth and Sayej, (2015)** stated that the organizational variables which affected the level of nurses performance include but not limited to; organizational vision and mission, obtainability of resources, work load, education and training development and manager support which ultimately affects patient's satisfaction. **Yaghoubi, et al., (2013)** mentioned that there are many factors that have effect on the human power production, these factors are education, motivation, management and, human resources, communication, workplace management, and performance feedback.

**Weinberg, et al., (2010)** added that inadequate training could lead to the malpractice of employees performance, furthermore may lead to miss self-trust, anxieties, lack of motivation, and job stress. while, the training of the job-related competencies is essential for effective job performance.

According to **Jones and George, (2009)** applying justices and management principles, is very important aspect for development of workers spirit of oneness in an organization. From **Noe & Hollenberg (2010)** point of view, the performance of employee can be improve and upgrading by; kindly and close partners, supportive culture, fair remuneration rewards and recognition, and sufficient facilities. Several investigators stated that productivity of the workers markedly affected by their job skills, levels of job satisfaction supervision, and training. others see that, the workers who have a tendency to develop their knowledge and skills will positively influence human performance (**Werner and De Simone, 2009**).

Good communication and relationships between nurse and their managers have impact on the organizational effectiveness as well as on nurses performance especially, when management provide support to nurses and introduce essential resources to provide quality patient care (**Brunetto and Farr-Wharto, 2006**).

Moreover **Sullivan and Decker, (2009)** mentioned that a performance related behavior is directly associated with job tasks and the need to be accomplish to achieve jobs objectives. Performance evaluation is a nonstop process which search for the problem and tries to solve it. Performance assessment is necessary for improvement in health care by focusing on what the health workers actually do. **Haghi, et al., (2011)** revealed that evaluation of nurses' performance had markedly effect on productivity. While, **Grosskopf, (2010)** found that the productivity of new employee were improved after attained training programs. **Al-Ahmadi, (2009)** added that the job satisfaction and the organizational commitment had a positive correlation with nurses job performance.

### **Significance of the study**

A review of literature revealed that the performance of nurses is very important issue because of its effect on many outcomes in healthy organizations; as patient safety and satisfaction, teamwork, length of stay and quality of care (**Needleman, et al., 2007, Terzioglu, et al., 2016**). So it's time to determine the variables which essential for promoting nurses' performance. This study is focused on determine organizational variables influencing nurses' performance.

**Aim of the study:** This study aimed to determine organizational variables influencing performance of nurses at Quena General Hospital.

### **Research Questions:**

1. What are the variables that influence performance of nurses at Quena General Hospital?
2. What is relationship between personal characteristics and variables that influence performance of nurses at Quena General Hospital?

## **II. Material and Method**

### **Research design:**

The present study was carried out using an explorative descriptive research design.

### **1-Technical design:**

The technical design for the study will include: Setting of the study, subject and tools for data collection.

**Setting:** The study was conducted in (medical, surgical, pediatrics, ICU, OR, maternal and gynecological departments) at Quena General Hospital

**Subject:** Subject of the study was all available nurses who agreed to participate in the study (166) nurses from previous selected setting.

### **Tools of the study:**

A self-administered questionnaire was used for data collection it consisted of two parts:

**First part:** personal characteristics of studied nurses such as (Age, sex, marital status, qualification, and years of experience).

**The second part:** Factors affecting the nurses' performance questionnaire. It was developed by **Awases et al., (2013)** to identify factors affecting the performance of nurses. It consists of (67) items divided into eight subscales; knowledge and skills (15 items), performance appraisal and utilization of results (7 items), remuneration, benefits, reward and recognition (12 items), staff development (8 items), work space and environment. (8 items), organizational mission and goal (4 items), commitment and satisfaction (6 items) and leadership and management style (7 items).

### **Scoring system:**

The score response for questions were as follows; include strongly disagree (1) disagree (2) uncertain (3) agree (4) and strongly agree (5) for agreement levels. Or poor (1) fair (2) good (3) very good (4) and excellent (5) to measure their opinions, reactions and attitudes in relation to given statements. Restricted to three responses was done.

The study tool was translated into Arabic using the translate-re-translate process. Its validity was measured by five experts in nursing administration department reviewed the study tool, the content validity index was (0.83). The reliability of the study tools were assessed in a pilot study by measuring their internal consistency using Cronbach-alpha method. This turned to be ( $\alpha = 0.86$ ), thus indicating a high degree of reliability.

### **2-Operational design:**

This included the preparatory phase, pilot study, and data collection phase

#### **Preparatory phase:**

This phase took about three months from December 2016 to February 2017. The researchers spent this time in reviewing the available literature pertinent to the study topic. Additionally, Arabic translation and back translation of the study tool was done, and they were checked by experts for validation.

#### **Pilot study:**

A pilot study applied on a sample of 10 % of nurses from different inpatient departments in Quena General Hospital to test the applicability and the clarity of data collection tools as well as to estimate the time needed to answer it. It also helped to test the feasibility and suitability of the study settings. The pilot study sample was included into total sample. Data obtained from the pilot were analyzed and no modifications were done.

**Data collection phase:**

- Data were collected from nurses in the study setting at Quena General Hospital. The questionnaire sheet was self-administered filled, purpose and benefits of the study were explained to the participant, one of the researchers was present all the time to clarify any item that needed interpretation to the participants. The researchers informed the participants that their participation is voluntary; also, confidentiality and anonymity of subjects were assured by the researchers. The data collection took about 25 minutes for each participant. The whole duration for data collection took about two months from March 2017-to April 2017.

**3-Administration design:** Letters were issued from the dean of faculty of nursing and the researchers to the manager of Quena general Hospital, nurse manager, the heads of departments, and the head nurses, explaining the purposes of the study, and asking for permission to conduct the study.

**Ethical considerations**

An official permission to carry out the study was obtained from the responsible authorities. Oral agreements were taken from nurses who participated in the study. Confidentiality of gathered information and privacy of the participants was assured. Study subject have the right to refuse to participate or withdrawal from the study without any rational at any time.

**4-Statistical design**

Data entry and analysis were done using SPSS version 19. Program statistical soft were package for social sciences. Data were presented using descriptive statistics in the form of frequencies and percentages also mean and standard deviation was calculated. Mann-Whitney test was used to compare quantitative variables between two groups and Kruskal Wallis Test for more than two groups in case of non-parametric data. Spearman correlation was done to measure correlation between quantitative variables. P-value considered statistically significant when  $P < 0.05$ .

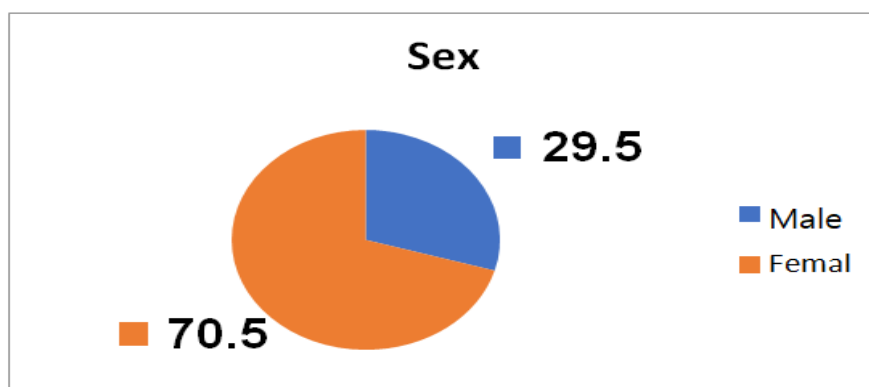
**III. Results**

**Table (1):** Percentages distribution of studied nurses according to their personal characteristics (N= (166))

Items	No. (N= 166)	%
<b>•Age: (years)</b>		
< 24	60	36.1
24 – 26	68	<b>41.0</b>
> 26	38	22.9
<b>•Mean ± SD (Range)</b>	<b>24.75 ± 3.49 (19.0 – 41.0)</b>	
<b>Marital status:</b>		
Single	106	<b>63.9</b>
Married	54	32.5
Divorced	6	3.6
<b>•Years of experience:</b>		
< 5	48	28.9
5 - < 10	82	<b>49.4</b>
≥ 10	36	21.7
<b>•Mean ± SD (Range)</b>	<b>6.70 ± 3.52 (1.0 – 21.0)</b>	

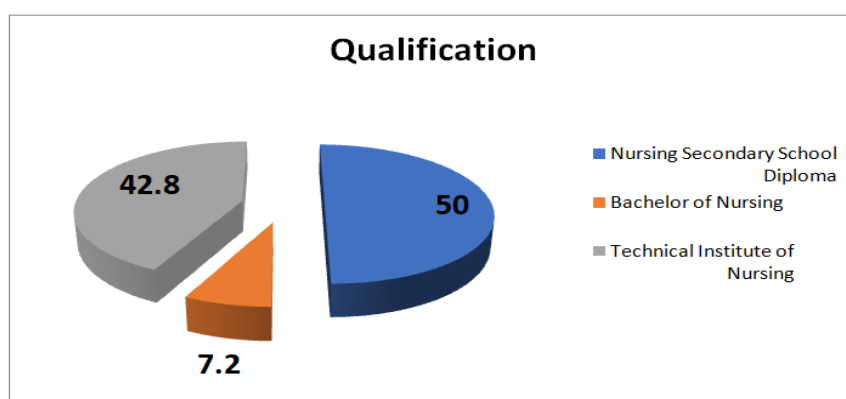
**Table 1:** Reveals that the studied nurses were 166, about (41.0%) of them had aged from 24 to 26 years, .Nearly two thirds of them (63.9%) were single, about (50.0%) half of them have had nursing secondary school diploma. It was noticed that about (49.4%) of them had from 5 - < 10 years of experience in nursing

**Figur 1:** Percentages distribution of studied nurses according to their sex (N= (166)



**Figur1 :** The pie chart shows that about the majority of the studied nurses were female, and about (29.5%) of them were male

**Figur 2:** Percentages distribution of studied nurses according to their qualification (N= (166)



**Figur 2 :** The pie chart shows that about (50%) of the studied nurses had nursing secondary school diploma, (42.8%) were holders of technical institute of nursing, and only (7.2%) were holders of bachelor degree of nursing.

**Distribution of organizational variables that influencing performance of nurses at Quena General Hospital:**

**Table (2):** Distribution of nurses' perception about their knowledge and skills at Quena General Hospital N=(166)

Items	Poor		Average		Good	
	No.	%	No.	%	No.	%
<b>1-Knowledge and skills:</b>						
1. Planning of nursing care	74	44.6	54	32.5	38	22.9
2. Implementing nursing care plans	76	45.8	30	18.1	60	36.1
3. Nursing audit	79	47.6	46	27.7	41	24.7
4. Implementing of nursing performance standards	85	51.2	33	19.9	48	28.9
5. Health education	79	47.6	39	23.5	48	28.9
6. Clinical competencies	67	40.4	43	25.9	56	33.7
7. Interpersonal relations	76	45.8	30	18.1	60	36.1
8. Patient counseling skills	67	40.4	42	25.3	57	34.3
9. Self-assessment with regard to outcome of performance	86	51.8	39	23.5	41	24.7
10. Supervision of nursing care	71	42.8	44	26.5	51	30.7
11. Supervising student nurses	68	41.0	50	30.1	48	28.9
12. In-service training	72	43.4	46	27.7	48	28.9
13. Management of time	76	45.8	43	25.9	47	28.3
14. Improvement of quality	78	47.0	47	28.3	41	24.7
15. Maintaining facilities, equipment and supplies	62	37.3	43	25.9	61	36.7

**Table 2:** This table shows studied nurses knowledge and skills. The data in this table revealed that slightly more than half or less of studied nurses' perceived their knowledge and skills as poor in the following items, self-assessment with regard to outcome of performance (51.8%), followed by implementing of nursing performance standards (51.2%), and finally with health education, and nursing audit (47.6%). The data in table also illustrates that less than third of studied nurses perceived their knowledge and skills as average in the following items, planning of nursing care (32.5%), supervising student nurses (30.1%), and improvement of quality (28.3%). While more than third of studied nurses' rated themselves as good in implementing nursing care plans, interpersonal relations (36.1%) and maintaining facilities, equipment and supplies (36.7%).

**Table (3):** Distribution of organizational variables that influence performance of nurses at Quena General Hospital N= (166)

Items	Disagree		Uncertain		Agree	
	No.	%	No.	%	No.	%
<b>2-Performance appraisal and utilization of results:</b>						
1. Objectives to be achieved are known by individuals to be assessed	100	60.2	36	21.7	30	18.1
2. Performance standards expected from staff are clear and understood by all	86	51.8	37	22.3	43	25.9
3. Constructive feedback on performance appraisal results is provided on a regular basis	80	48.2	37	22.3	49	29.5
4. Feedback on how staff is performing is provided throughout the year	97	58.4	31	18.7	38	22.9
5. Prompt action is taken when performance falls below acceptable standards	83	50.0	33	19.9	50	30.1
6. My manager or supervisor inspires me to do my best	94	56.6	30	18.1	42	25.3
7. Staff are given opportunity to make comments on the results of their performance	97	58.4	27	16.3	42	25.3
<b>3-Remuneration, benefits, reward and recognition:</b>						
1. Your remuneration is competitive compared to other similar hospitals	122	73.5	33	19.9	11	6.6
2. Remuneration is in accordance with your experience	119	71.7	36	21.7	11	6.6
3. Remuneration is in accordance with your job responsibility	103	62.0	24	14.5	39	23.5
4. Fringe benefits are known to you	90	54.2	34	20.5	42	25.3
5. You are satisfied with your fringe benefits	99	59.6	32	19.3	35	21.1
6. Opportunities exist for career advancement	86	51.8	44	26.5	36	21.7
7. Hardworking nurses are recognized	76	45.8	49	29.5	41	24.7
8. I receive prompt acknowledgement and recognition for doing a good job	78	47.0	34	20.5	54	32.5
9. I find my work rewarding	79	47.6	40	24.1	47	28.3
10. The work I do gives me a feeling of personal achievement	75	45.2	43	25.9	48	28.9
11. When I retire I will receive a reasonable pension from this hospitals.	62	37.3	35	21.1	69	41.6
12. My pay is competitive with other, similar hospitals.	68	41.0	55	33.1	43	25.9
<b>4-Staff development:</b>						
1. Opportunities exist for career development	74	44.6	40	24.1	52	31.3
2. Good opportunities for continuing education are available	65	39.2	31	18.7	70	42.2
3. The necessary training is given to ensure job effectiveness	71	42.8	31	18.7	64	38.6
4. Job specific refresher courses are available	70	42.2	51	30.7	45	27.1
5. In-service training adequately addresses the skill gap	66	39.8	51	30.7	49	29.5
6. Incompetent nurses are identified and provided with the necessary support	74	44.6	42	25.3	50	30.1
7. Good leadership or management training available	86	51.8	31	18.7	49	29.5
8. Professional nurses participate in identifying their staff development needs	61	36.7	59	35.5	46	27.7

**Table (3):** Declares that more than half of studied nurses (60.2%) indicated that their performance were not reviewed by individuals to be assessed and about (58.4%) of them don't perceived feedback on how they perform throughout the year and not given opportunity to make comments on the results of their performance. It was found that more than two third of studied nurses (73.5%) were disagreed that their remuneration is

competitive compared to other similar organizations, about (71.7%) of them disagreed that their remuneration is in accordance with their experience and about (62.0%) of them indicated that their remuneration is not in accordance with their job responsibility and about (59.6%) of them were dissatisfied with their fringe benefits. The table points also that about (51.8%) of studied nurses disagreed that good leadership or management training available and about (44.6%) of them disagreed that opportunities exist for career development.

**Table (4):** Distribution of organizational variables that influence performance of nurses at Quena General Hospital N= (166)

Items	Disagree		Uncertain		Agree	
	No.	%	No.	%	No.	%
<b>5-Workspace and environment:</b>						
1. My work environment is safe and free from hazards	100	60.2	46	27.7	20	12.0
2. Good workplace layout	69	41.6	58	34.9	39	23.5
3. Comfortable temperature	82	49.4	47	28.3	37	22.3
4. Necessary instruments are available	99	59.6	33	19.9	34	20.5
5. Instruments in working condition	83	50.0	42	25.3	41	24.7
6. Materials and supplies sufficient	99	59.6	35	21.1	32	19.3
7. Antiseptic hand solution for protection of staff and patients is available	85	51.2	36	21.7	45	27.1
8. Infection control strategy guidelines available	80	48.2	42	25.3	44	26.5
<b>6-Hospital mission and goal:</b>						
1. Most people here know how their work contributes to this hospital's mission	81	48.8	52	31.3	33	19.9
2. This hospital mission is understood by everyone who works here	81	48.8	37	22.3	48	28.9
3. I am clear about the objectives I need to achieve	73	44.0	39	23.5	54	32.5
4. People in this hospital have shared sense of purpose	82	49.4	49	29.5	35	21.1
<b>7-Commitment and satisfaction:</b>						
1. I am proud to tell people that I work for this hospital	61	36.7	33	19.9	72	43.4
2. I do not like the way this organization operates	46	27.7	63	38.0	57	34.3
3. This hospital provides me with skills and knowledge that will benefit my future career.	87	52.4	33	19.9	46	27.7
4. Doing this job makes me feel good about myself	59	35.5	50	30.1	57	34.3
5. I am subject to personal criticism or abuse at work	35	21.1	42	25.3	89	53.6
6. I am constantly seeking out new challenges at work	68	41.0	46	27.7	52	31.3
<b>8-Leadership and management style:</b>						
1. My manager or supervisor inspires me to do my best	87	52.4	46	27.7	33	19.9
2. When changes are made in the way things are done, management always first informs the people who will be affected	88	53.0	40	24.1	38	22.9
3. If I have an idea for improving the way we do our work, my supervisor or manager will usually listen to me	81	48.8	56	33.7	29	17.5
4. My manager or supervisor gives me regular, timely feedback that helps me improve my performance	83	50.0	45	27.1	38	22.9
5. I am afraid to openly express my ideas and opinions	38	22.9	60	36.1	68	41.0
6. Senior managers in this organization are open to new ideas and suggestions	83	50.0	49	29.5	34	20.5
7. I trust and respect my immediate supervisor	66	39.8	49	29.5	51	30.7

**Table (4):** Reveals that more than half of studied nurses (60.2%) disagreed that their work environment is safe and free from hazards, about (59.6%) of them disagreed that necessary instruments are available and materials and supplies sufficient. It was noticed that about (49.4%) of nurses disagreed that people in this hospital have shared sense of purpose, about (48.8%) of nurses disagreed that most people here know how their work contributes to this hospital's mission and that hospital's mission is understood by everyone who works here. The data also indicated that more than half of studied nurses (52.4%) disagreed that hospital provides them with skills and knowledge that will benefit their future career while about (53.6%) of them agreed that they subjected to personal criticism or abuse at work. In addition about (52.4%) of nurses disagreed that manager or supervisor inspires them to do the best and (53.0%) of them indicated that the management don't inform affected people about changes

**Table (5):** Mean and standard deviation of organizational variables that influencing nurses' performance N=(166)

Items	Max. score	Mean ± SD	Range
1. Knowledge and skills	75	<b>43.25 ± 14.96</b>	15.0 - 75.0
2. Performance appraisal and utilization of results	35	18.28 ± 7.34	7.0 - 35.0
3. Remuneration, benefits, reward and recognition	60	<b>30.39 ± 10.34</b>	12.0 - 54.0
4. Staff development	40	22.54 ± 8.32	8.0 - 39.0
5. Workspace and environment	40	20.62 ± 7.45	8.0 - 40.0
6. Hospital's mission and goals	20	<b>10.75 ± 3.73</b>	4.0 - 18.0
7. Commitment and satisfaction	30	18.22 ± 3.02	10.0 - 25.0
8. Leadership and management style	35	19.16 ± 5.18	10.0 - 31.0

**Table (5):** Displays that the highest mean score (43.25 ± 14.96) was related to knowledge and skills; followed by remuneration, benefits, reward and recognition while lowest mean score (10.75 ± 3.73) was related to hospitals mission and goals.

**Table (6):** The relationship between organizational variables influencing nurses' performance by age N=(166)

Items	Age (years)			P-value
	< 24	24 – 26	> 26	
	Mean ± SD	Mean ± SD	Mean ± SD	
1. Knowledge and skills	<b>49.87 ± 12.93</b>	41.41 ± 13.18	36.11 ± 16.94	<b>0.000*</b>
2. Performance appraisal and utilization of results	20.98 ± 5.82	16.72 ± 7.23	16.82 ± 8.54	<b>0.000*</b>
3. Remuneration, benefits, reward and recognition	35.02 ± 9.61	30.25 ± 9.75	23.34 ± 8.49	<b>0.000*</b>
4. Staff development	25.13 ± 7.91	22.47 ± 7.71	18.58 ± 8.59	<b>0.000*</b>
5. Workspace and environment	22.55 ± 8.12	19.97 ± 7.38	18.74 ± 5.74	<b>0.039*</b>
6. Hospital's mission and goal	12.02 ± 3.28	10.21 ± 3.59	9.74 ± 4.18	<b>0.004*</b>
7. Commitment and satisfaction	19.43 ± 3.23	17.85 ± 2.91	16.97 ± 2.12	<b>0.001*</b>
8. Leadership and management style	19.98 ± 4.62	19.18 ± 5.53	17.84 ± 5.23	0.055

Mann-Whitney test

**Table (6):** Shows that the highest mean score and standard deviation was related to less than 24 years age group. There are highly statistically significant difference between all organizational variables and age (P-value=0.000\*,0.039\*,0.004\*,0.001\*) respectively except leadership and management style.

**Table (7):** The relationship between organizational variables influencing nurses' performance by sex N=(166).

Items	Sex		P-value
	Male	Female	
	Mean ± SD	Mean ± SD	
1. Knowledge and skills	32.65 ± 10.30	<b>47.69 ± 14.39</b>	<b>0.000*</b>
2. Performance appraisal and utilization of results	14.76 ± 5.75	19.76 ± 7.44	<b>0.000*</b>
3. Remuneration, benefits, reward and recognition	25.00 ± 8.44	32.65 ± 10.26	<b>0.000*</b>
4. Staff development	17.61 ± 6.25	24.61 ± 8.22	<b>0.000*</b>
5. Workspace and environment	15.86 ± 5.65	22.62 ± 7.21	<b>0.000*</b>
6. Hospital's mission and goal	8.00 ± 2.88	11.91 ± 3.44	<b>0.000*</b>
7. Commitment and satisfaction	16.27 ± 2.09	19.04 ± 2.98	<b>0.000*</b>
8. Leadership and management style	16.24 ± 3.98	20.38 ± 5.15	<b>0.000*</b>

Kruskal Wallis Test

**Table (7):** Shows that the highest mean score and standard deviation was related to female groups also, this table revealed that there is highly statistically significant difference between all organizational variables and sex (P-value =0.000\*).



**Table (8):** The relationship between organizational variables that influence nurses' performance and their qualification N= (166)

Items	Qualification			P-value
	Secondary School of Nursing	Bachelor of Nursing	Technical Institute of Nursing	
	Mean ± SD	Mean ± SD	Mean ± SD	
1. Knowledge and skills	39.02 ± 14.03	47.00 ± 11.19	47.56 ± 15.32	<b>0.001*</b>
2. Performance appraisal and utilization of results	16.78 ± 7.62	20.50 ± 5.09	19.66 ± 7.02	<b>0.009*</b>
3. Remuneration, benefits, reward and recognition	27.89 ± 8.38	31.42 ± 9.74	33.14 ± 11.83	<b>0.021*</b>
4. Staff development	20.55 ± 7.43	25.08 ± 7.19	24.44 ± 8.99	<b>0.015*</b>
5. Workspace and environment	18.66 ± 6.48	22.83 ± 10.20	22.54 ± 7.49	<b>0.007*</b>
6. Hospital's mission and goal	10.33 ± 3.50	10.42 ± 4.01	11.31 ± 3.93	<b>0.255</b>
7. Commitment and satisfaction	17.37 ± 2.17	18.92 ± 2.02	19.10 ± 3.70	<b>0.020*</b>
8. Leadership and management style	18.30 ± 4.97	21.42 ± 5.48	19.79 ± 5.24	0.100

Mann-Whitney test

**Table (8):** Reveals that there is statistically significant difference between all organizational variables and qualification except leadership and management style item.

**Table (9):** The relationship between organizational variables that influence nurses' performance by Years of experience N= (166)

Items	Years of experience			P-value
	<5	5-10	>10	
	Mean ± SD	Mean ± SD	Mean ± SD	
1. Knowledge and skills	<b>50.60 ± 10.87</b>	43.00 ± 14.73	34.03 ± 15.23	<b>0.000*</b>
2. Performance appraisal and utilization of results	21.35 ± 5.49	17.41 ± 7.51	16.17 ± 7.96	<b>0.000*</b>
3. Remuneration, benefits, reward and recognition	32.27 ± 9.31	32.07 ± 10.70	24.06 ± 8.38	<b>0.000*</b>
4. Staff development	25.79 ± 7.51	22.35 ± 8.41	18.64 ± 7.51	<b>0.000*</b>
5. Workspace and environment	23.29 ± 7.92	20.01 ± 7.70	18.44 ± 4.96	<b>0.015*</b>
6. Hospital's mission and goal	12.17 ± 3.51	10.48 ± 3.89	9.50 ± 3.09	<b>0.004*</b>
7. Commitment and satisfaction	18.92 ± 2.76	18.37 ± 3.41	16.97 ± 1.92	<b>0.010*</b>
8. Leadership and management style	21.15 ± 5.07	18.89 ± 5.40	17.14 ± 3.84	<b>0.003*</b>

Mann-Whitney test

**Table (9):** Reveals that the highest mean of all organizational variables are related to less than 5 years of experience. There are highly statistically significant difference between all organizational variables and years of experience (P-value = **0.000\***, **0.015\***, **0.004\***, **0.010\***, and **0.003\***) respectively.

#### IV. Discussion

This study attempted to shed light on an important matter for nursing which is nursing performance. This study aimed to determine organizational variables influencing performance of nurses at Quena General Hospital. The finding of the present study revealed that half of the studied nurses have had nursing secondary school diploma. This may be signal that nurses at Egypt do not recognize the incentive of advancing their education because it does not bring back extensive rewards. Also, the finding indicated that more than two thirds of the study sample were female, representing that nursing is still a females profession this finding is supported by (Nandi-Ndeitwa, 2008) who stated that women prevail in care-related work as teaching, domestic work, and nursing.

The highest present of the study sample perceived their knowledge and skills as poor on a number of items. Self-assessment with regard to outcome of performance was the highest one followed by implementing of nursing performance standards, and finally with nursing audit and health education. less than one third of studied nurses perceived their knowledge and skills as average in the following items, planning of nursing care,

supervising student nurses, and improvement of quality. This may be because the health organization in the developing country like Egypt have not the culture of self-evaluation or the system that stress on the implementing of nursing performance standards this results were inconsistent with **Roux and Halstead, (2009)** who mentioned that nursing as a job depending on the processes of binding the different knowledge and skills to provide a comprehensive nursing care to her patient. This ability is vital to improving the quality of care, directing student and to overcome the practical deficiency in hospital by in-service training.

More than half of studied nurses indicated that their performance were not reviewed by individuals to be assessed and they did not received feedback on how they perform throughout the year and also they did not given the opportunity to make comments on the results of their performance. It may be because the managers in Quena general hospital have not the knowledge that the receiving feedback on performance has effect on the performance. These results were different from the view point of **Roussel and Swansburg, (2009)** who indicated that observing of performance improve commitment and efficiency. Also, the performance of those who working hard can stimulates and reinforces by continuous evaluations process.

As regard to remuneration, benefits, reward and recognition it was found that more than two thirds of studied nurses were disagreed that their remuneration is competitive compared to other similar organizations, or is in accordance with their experience or with their job responsibility and about two thirds of them were dissatisfied with their fringe benefits. This is in the same line with the results of **Awases, et al.,(2013)** who found in their study that more than half of the participants were dissatisfied with their fringe benefits. This is consistent with the finding of **Samad, (2007)** who found that salary, incentives and the work conditions have positive effect on the employee performance.

More than half of the studied nurses disagreed that good leadership or management training available or that opportunities exist for career development, this may be justified by the fact that there is no continuous education unit in the Quena general hospital. This is consistent with **Alexis, et al.,(2006)** who found that the nurses in their study were not satisfied with their salaries as well as opportunity for promotion. and that the studied nurses experience inadequate chances in job advanced and skill development.

The finding of the present study revealed that more than half of the studied nurses were disagreed that their work environment is safe and free from hazards, and about half of them were disagreed that necessary instruments are available and materials and supplies sufficient this may be because of insufficiency of resources that face all the governmental hospitals in our country. This results were in the same line with the results of **Kamati, et al.,(2014)** who stated that about three quarters of the studied nurses found their hospital without adequate resources and equipment which they need to effectively perform their work.

Results of the present study depicted that nearly to half of nurses disagreed that people in this hospital have shared sense of purpose, and that most people know how their work contributes to this hospital's; mission and that hospital's mission is understood by everyone who works here. This may be due to the nurse manager in Quena general hospital do not give attention to the staff nurses and do not make any interpretation about the hospital's mission or goals. Also, the staff nurse are not participate in any committee, so they don't share in any decision making this results in agreement with **Werner and De Simone, (2009)** who stated that nurses managers should have a basic role in the organizational goal achievement by supervising the employee' performance. Also this is in the same line with **Rawat, (2012)** who found that the health worker face a deficiency of management capacity.

The results of this study indicated that more than half of studied nurses disagreed that hospital provides them with skills and knowledge that will benefit their future career while they agreed that they subjected to personal criticism or abuse at work. This may be because the staff nurses are overloaded by extra work in governmental hospitals as a result of sick leaves, annual leaves, and maternity leaves so they become exhaustion leading to improper performance. In the same line **Bhaga, (2010)** said that the nurses who work in governmental

hospitals experience increase in their working hours which leading to emotional and physical stress, and inappropriate performance.

As regard to the leadership and management style the present finding indicated that more than half of study nurses indicated that the management don't inform affected people about changes, or inspires them to do the best, also half of them were disagree that their supervisor gives them regular, timely feedback that helps to improve performance. This may be because the head nurses always overwhelming by unit management skills on the expense of staff management. This is consistent with **Thulth and Sayej, (2015)** who founded that the nurses' performance is always affected by the quality of relationships including communication between nurses and their supervisors and managers, the author added that the performance also affected the effectiveness of the organization.

As regard to the organizational variables influencing nurses' performance the highest mean was related to knowledge and skills followed by remuneration, benefits, reward and recognition; while lowest mean score was related to hospital mission and goals. This is not consistence with **Green lade and paddock, (2007)** who stated that the nurses need to be aware and to accomplish the organization mission and goals to become satisfied with their performance.

The results of this study indicated that the highest mean score for all organizational variables was related to less than 24 years age group, there were highly statistically significance difference between mean of all organizational variables by age. This results were not agreement with the results of **Thulth and sayej, (2015)** who found that there were no statistically significance difference between means of organizational variables to age.

The finding of this study revealed that there were highly statistically significance difference between all means of all organizational variables by sex, this is not congruent with **Elkahlout and Algaed, (2008)** who stated that there were no statistically significant difference between all means of the organizational variables which influence the nurses' performance and gender.

Lastly, the finding of the present study revealed that there were highly statistically significance difference between all means of all organizational variables by their years of experience and qualification except leadership and management style item. This is not consistence with **Thulth and sayej, (2015)** who found that there were no statistically significance difference between organizational variables and nurses' years of experience, and educational qualification.

## **V. Conclusions**

**The following conclusions were drawn based on findings of the present study:**

- The major organizational variables that influencing nurses' performance was knowledge and skills followed by remuneration, benefits, reward and recognition; while the minor one was related to hospital mission and goals.
- The studied nurses had poor knowledge and skills and they perceived their remuneration uncompetitive compared to other similar organizations, the leadership and management training was unavailable and the opportunity for career development was not exist. Also, it was concluded that the work environment was not safe or free from hazards, the necessary instruments were unavailable, and the materials and supplies were insufficient.
- Nurse's performance were not reviewed, and nurses did not received feedback, also they did not shared hospital purpose and hospital did not provide them with skills and knowledge that will benefit their future career and they were subjected to personal criticism and abuse at work.
- It was found that Quena general hospital had deficiencies in implementing a performance appraisal system, staff development, and maintaining staff commitment and satisfaction.
- There were highly statistically significance differences between all organizational variables that influencing nurses performance and personal characteristics.

## VI. Recommendations

1. Nursing managers should develop strategies for improvement of nurse's knowledge and competencies through; continuing education and training professional development.
2. Nursing managers must work to conduct a performance management system which includes a regular performance reviews with feedback and use this system to; reward good performers, and to identify poor performance and take corrective actions. Also, it should be used to motivation, remuneration and incentives, recognition and rewarding of professional nurses and to improve the work conditions and environment.
3. Authorities personnel at Quena general hospital must work to engage the government and corporate companies for assistance in the acquisition of new equipment to address the challenge of equipment shortage.
4. Nursing managers must develop policies for improvement of nurses' leadership and management ability through leadership development and management programs, courses in communication and supportive supervision and shared governance.

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