

Selected Organizational Factors Affecting Performance of Professional Nurses in North West Bank Governmental Hospitals

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Abstract

Background: Organizational factors are considered to be the cornerstone in achieving psychological and professional security at work, which in turn are positively reflected in job performance both quantitatively and qualitatively. **Aim of the Study:** The study aimed to assess of selected organizational factors (workload, available recourses and manager support) affecting nurses performance in northern region of the West Bank governmental hospitals to improve its current and future performance of professional nurses. **Subjects and methods:** A quantitative descriptive study utilized stratified random sampling of 185 nurses. A self administered questionnaire was developed with a response rate of 97%. The questionnaire was validated by experts, and reliability was obtained by Cranach's alpha coefficient was (0.863) Data were analyzed using SPSS. **Results:** The overall level of selected organizational factors affecting performance of professional nurses was high (74.6 %); the workload rated the highest (79.2 %) among the study dimensions as perceived by nurses, manager support (72.0%), and resources availability (69.8%) . Also it was found that there are significant differences at $\alpha = 0.05$ between the total score due to workplace between Thabet Thabet hospital and Rafedia hospital, in favor Rafedia hospitals. **Conclusion and recommendation:** The findings of this study provide recommendations and suggestions to improve the performance of professional nurses in governmental hospitals such as: managers should ensure adequate number of staff and qualification according to work condition and sufficient number of professional nurse's in the hospital at all times and shifts.

Keywords: organizational factors, professional nurse, resources availability, Manager support, Performance.

1. Introduction

Within Palestinian health care many employees perform quality health care that helps to maintain or restore patient's health; however, far too many do not. Performance problems are reflected in a wide variation, like the effect of organizational factors that negatively affect the patient's satisfactions. A health care quality improvement is to maintain what is good about the existing health care system while focusing on the areas that need improvement. Improving the quality of care and reducing medical errors are priority areas for the Palestinian governmental hospitals (MOH report, 2011). There are many variations of health care system around the world; the goal for health care system according to the world health organization report (2011) is to improving performance and responsiveness to the expectation of the population. Health care systems are organizations established to meet the health needs of target populations; it is the diagnosis, treatment, and prevention of disease, illness, injury, and other physical and mental impairments in humans. Health care is delivered by practitioners in medicine, physicians, nursing, pharmacy, allied health, and other care providers. It refers to the work done in providing primary care, secondary care and tertiary care, as well as in public health (WHO report, 2011). Health care system in Palestine is a combined entity of all resources actors and institutions related to the financing regulation and provision of all activities whose primary intent is to improve or maintain health; it is an arrangement in which health care system is delivered (MOH report, 2011).

Nurses are health care professionals who focus on the care of individuals, families, and communities so they may attain, maintain, or recover optimal health and quality of life from conception to death WHO health report (2011). Nurses in the occupied Palestinian territory, work in a large variety of specialties where they work independently and as part of a team to assess, plan, implement and evaluate care (MOH report, 2011).

According to MOH Report (2011) nurses are the largest health care providers within governmental hospital, constituting (332) of those 24% professional nurses, in the north part of West Bank where they work in a variety of settings. Therefore it is important to highlight factors that affect their performance and most importantly the

organizational factors. Organizational factors are linked to –day to- day environment where health workers carry on their duties (Awases, 2006) and their level of nursing performance may be affected by the following but not limited to; organizational factors work load, night shift work, availability of resources, education and training development and manager support which ultimately affects patient's satisfaction, organizational vision and mission and the health care situation in Palestine. Some of these factors are identified and selected for assessing their effect on nurses' performance. These factors were selected based on previous studies and literature review was found that more focus was on these factors in addition to the political situation in Palestine plays a large role in these factors, such as increasing the demand for health insurance and dependence on international aid.

1.1 Work load: means the amount of work assigned to or expected from a nurse in a specified time period, a common measure of workload is the number of patients that a nurse oversees, indexed as the ratio of nurse to patients (Page, 2004), it results due to the shortness in the nurse's staff working in the governmental hospitals; it could be due to absenteeism due to the sick leaves, maternity leaves, annual leaves, turnover and retirements. The shortage of staff makes the work very difficult to provide a high standard of work (Bhaga, 2010), that what make the staff to increase their work hours during the week, leading to psychological stress and physical exhaustion staff, leading to improper performance. Petterson and Arnets (1998) study in South African found that, nurses' work load has steadily increased since the restructuring of health care services. There is now more pressure to treat patients more cost effectively with much briefer stays in hospitals. Increased workloads can improve short term productivity, but it can increase long term-costs, as stress and illness among nurses lead to poor judgment and low productivity.

McConnell (2003) suggested that, a major potential stress producer for nursing staff is work overload. Schabracq (2003) added that burnout is also a consequence of an excessive work load, and the potential to reduce burnout by lessening the work load is a matter more for the employer in the health sector rather than for the employee. Nurse supervisors are realizing that nurses' stress and high absenteeism resulting from work overload is significantly increasing the hospital's operational cost. Many different approaches to nurse staffing and scheduling are being tried in an effort to satisfy the needs of employees and to meet work load demands for patient care.

Mc Connell (2003) further elaborated on the practical differences between staffing is determine how many people with specific skills are needed, making them available, and assigning them is determined by name and skills will do what work and when (for a specific time period).

Bancsek (2007) suggested that, hospitals are service institutions that provide nursing services on a 24-hour basis with nurses being the largest group of employees. The nurse manager is responsible and accountable for the daily unit operations. Bancsek defined staffing as a function of planning for hiring qualified human resources to meet the needs of patient care and services.

Wilkins et.al (2007) argues that nurses work load condition affect the health and wellbeing of individual nurse report that high work load, poor working Relationships with other staff contribute to poor general and mental health among nurse. Schommbie et.al. (2005) agree that when nurses are exposed to stress full working conditions, they are likely to suffer from high levels of stress and are at an increased risk of burnout.

Liebler and Mc Connel (2004) add that burnout is a dynamic process, related to stress and caused by a combination of high work load and low coping resources It is characterized by feeling of emotional exhaustions in which, the workers develops depersonalizing attitudes toward service recipients and experiences feeling of reduced personal accomplishment. The work load can generate both a cut & chronic stress which can lead to employee distress, decrease motivation and the development of dysfunctional attitudes and behaviors are work. Greens lade and paddock (2007) infer that increasing work load and over time hours put a strain on personal and social relationships and reduces the capacity to cope with the emotional and physical stress encountered by nurse in their work and family roles. The researcher agrees that if an employee is having difficulties getting work goals accomplished, it can lead to tension, in their homes.

1.2 Availability of resources: in any organization the professional nurses should be in the position to perceive that the resources at their disposable are adequate to meet their work demand. If there are not adequate resources the nurse will find it difficult to get their work done, and will experience dissatisfaction (Bhaga, 2010).

There must be adequate resources in term of space, equipment and staff for any organization to function effectively. Lewy (1991) asserted that the equipment must be adequate and appropriate specific jobs and must be fitted for individual workers. Employees must be given clear instructions on how to use the equipment. There must also be sufficient allocation of resources for the maintenance of the appliances and equipments, many hospitals in marginal financial conditions defer maintenance of equipment. Ultimately, the employees should be in the position to perceive that the resources at their disposal are adequate to meet their work demands. Gerber et al (1998) explain that the availability of adequate equipment and appliances facilitate productivity. Failure to provide equipment, appliances and adequate protective clothing make it difficult for employees to carry out their jobs in an easy non- obstructive way. Employers have the responsibility to provide employees with optimal conditions to carry out tasks for which they have been trained.

Hospitals have a responsibility to ensure its patients safety and well-being during hospitalization, to satisfy this duty a hospital must not only select and retain competent staff, but must also provide a reasonable care in maintaining safe and adequate facilities and equipment. According to Lewy (1991) when patient injury occur because of equipment , the issue become one of whether the patient was injured due to a defect, due to the misuse or improper maintenance of the equipment . Manager should learn to lessen potential liability by ensuring that equipment is maintained properly and to ensure that storage of the equipment follow manufacturers written guidelines.

According to Bezuidenhout (1994) working conditions refers to the interaction of an employee with the physical work environment and working conditions include physical conditions such as working tools, equipment, material and schedules. Gerber et al. (1998) argued that, the physical working condition include the availability of facilities like equipment, appliance and protective clothing, encourage the employees to perform their work in an easier manner. These make health care workers to have the responsibility to provide a safe and healthy workplace for their employees and a safe environment for the patients and visitors.

1.3 Manager support on professional nurses' performance:

Ellis & Hartley (2012) stated that management refers to activities such as planning, organizing, directing, and controlling with the purpose of accomplishing specific goals and objectives within an organization P427. Essentially, management involves coordination and integration of resources to accomplish specific tasks. further, management position commend that are roles to which one is appointed or hired after competitive job application and interview that grants the manager power to direct others and the responsibility to ensure that certain tasks within the organization are completed effectively and efficiently. In other words, the authority to act is gained by virtue of the position one hold within the organization Ellis & Hartley (2012).

Wagner (2006) commented that the primary factor in professional nurses satisfaction and loyalty to workplace and the professional nurse relationship with his or her immediate supervision is that health care administrators to be concerned with their satisfaction. Curran's (2001) found that nurses management that is out of touch with the realities of patient care lead to lower nurses satisfaction and loyalty. Brunetto and Farr-Wharto (2006) found the quality of relationships including communication between managers and professional nurses not only impacts the nurses themselves but also has an impact on organizational effectiveness by affecting productivity, when management helps professional nurses feel engaged and offers them the support and resources necessary to provide quality patient care.

1.4 Performance: Means the actual conduct of activities to meet responsibilities according to standards. It is an indication of what is done and how well it is done (Awases, 2006). According to WHO health report (2006), the performance is a combination of staff being, available, competent, productive and responsive; poor performance of service providers leads to inaccessibility of care and in appropriate care, which thus contribute to reduced health outcomes as people are not using services or are mistreated due to harmful practice, it results from too few staff or from staff not providing care according to standards and not being responsive to the patients need. As Hughes et al. Stated "most performance problems can be attributed to unclear expectations, skills deficits, resource or equipment shortages or a lack of motivations" (Hughes et al., 2002)

The term "performance" is used to focus attention on the total behavior of person including his or her organization, the use of specialized knowledge, his/her attitude acquired through training, as well as organization and integration of practice (Bargagliotti, 1999).

A performance related behavior is directly associated with job tasks and the need to be accomplish to achieve jobs objectives (Sullivan and Decker, 2009). Performance evaluation is a continuous process with little psychological risk to the employee. It is that constant feedback from one human being to another, which accept the problem and tries to solve them (Young, 1992). Performance assessment is an essential requirement for the evaluation of existing health services, and thus is necessary for improvement in health care by focusing on what the health workers actually do (Jurnm, 1996).

Al-Ahmadi, (2009) study about factors affecting performance of hospital nurses in Riyadh Region, Saudi Arabia, the study objectives were to estimate self-reported performance, and determine whether differences in employee demographics, job satisfaction, and organizational commitment, influenced performance. The study found that job performance was positively correlated with organizational commitment, job satisfaction personal and professional variables. and strong predictors of nurses' performance. Job performance is positively related to some personal factors, including years of experience, nationality, gender, and marital status, while the level of education is negatively related to performance. This study concluded that it fulfilled a research gap in the area of nursing performance, and its relationship with work attitudes and highlighted the impact of national culture on job performance and work attitude among nurses in Saudi Arabia.

Hong Lu, et. al (2004), argues that the current nursing shortage and high turnover is of great concern in many countries because of its impact upon the efficiency and effectiveness of any health-care delivery system. Recruitment and retention of nurses are persistent problems associated with job satisfaction. This paper analyses the growing literature relating to job satisfaction among nurses and concludes that more research is required to understand the relative importance of the many identified factors to job satisfaction. It is argued that the absence of a robust causal model incorporating organizational, professional and personal variables is undermining the development of interventions to improve nurse retention.

1.5 Professional nurse: means a person registered with the nurse regularity and registering authority of their

country. Professional nurses are trained at higher education level with the training period between 3-4 years and above. Professional nurses are also called registered nurses working in clinical, nursing services and educational institutions (Awases, 2006). Their functions include assessing and educating patients, administering treatments and supervising and coordinating care (Bureau of labor statistics, 2008).

2. Subjects and Method

2.1 Aim of the study: The study aimed to assess selected organizational factors (workload, available resources, and manager support) affecting nurses performance in North West Bank governmental hospitals.

2.2 Objectives of the study

1. Assess the extent of workload on the performance of professional nurses.
2. Determine the effects of the availability of resources as an organizational factor on the performance of professional nurses.
3. To assess how manager support affect professional nurses performance.
4. To identify the differences in the organizational factors (workload, available resources, and manager support) affecting nurses performance in North West Bank governmental hospitals due to Age, Gender, Years of experience, Academic degree and Workplace variables.

2.3 Research hypothesis

1. There is no significant differences at the level of ($\alpha \leq 0.05$) between the means of selected organizational factors affecting professional nurses performance due to age variable.
2. There is no significant differences at the level of ($\alpha \leq 0.05$) between the means of selected organizational factors affecting professional nurses performance due to gender variable.
3. There is no significant differences at the level of ($\alpha \leq 0.05$) between the means of selected organizational factors affecting professional nurses performance due to workplace variable.
4. There is no significant differences at the level of ($\alpha \leq 0.05$) between the means of selected organizational factors affecting professional nurses performance due to the years of experience variable.
5. There is no significant differences at the level of ($\alpha \leq 0.05$) between the means of selected organizational factors affecting performance of professional nurses due to the academic degree variable.

2.4 Study design: Descriptive cross sectional explorative study was used for conducting the study.

2.5 Study Setting: This study was conducted on the governmental hospitals of the north part of West Bank, these were Dr. Khaleel Suleiman hospital (Jenin Governmental hospital), Dr. Thabet Thabet hospital (Tulkarim Governmental hospital), Dr. Darweesh Nazal hospital (Qalqelia Governmental hospital), Alwatani medical hospital (Nablus governmental hospital), Rafedia surgical hospital, and Yasser Arafat hospital (Sulfeet governmental hospital).

2.6 Study period: The study was conducted from 1 June 2012 to August 2012.

2.7 Study Sample: A stratified random sample was selected, the sample of the study consisted of (185) professional nurses with response rate 97% who were selected as a stratified random sample from the whole population (315).

2.8 Inclusion criteria

Participants included in this study were stratified random sample of professional nurses (3 years and above) working in governmental hospitals in North part of West Bank, while practical nurses were excluded from this study.

2.9 Tool of the study: The study questionnaire was designed by the study investigator after scanning related studies and literature. The questionnaire consisted of two sections: The first section consisted of personal data about nurse's age, gender, work place, years of experience and academic degree. The second section consisted of (4) domains and (29) statements to identify the organizational factors affecting performance of professional nurses in North West Bank governmental Hospitals. The domains of the study are ; Workload with (10) statements, resources availability (8) statements, manager support (11) statements. The questionnaire items were constructed using a 5-point likert –scale Accordingly, the scores of responses of the nurses to each statement were calculated according to the five-point-scale, “Likert scale”, in which strongly agree = 5 points, agree = 4 points, uncertain = 3 points, disagree = 2 points, strongly disagree = 1 point.

3. Validity and reliability of the study: The content validity of instruments was censured including all the key concepts relevant to the research topic. The questions were formulated to cover selected organizational factors and professional nurses' performance. This instrument was approved and evaluated by different experts including, researcher, nursing educators and other experts in the faculty of educational sciences to evaluate initial contents for validity, and the researcher's thesis adviser also assesses the instrument for wording, adequacy, and coverage of items of the standard of nursing performance. After revising the items in questionnaire and summarizing the expert's suggestions, modifications were made in wording and content. Some items were added but some others were dropped. The Cronbach's alpha obtained from this questionnaire reliability was 0.863 which is considered high and suitable for research purpose.

4. Pilot study: Before starting the actual data collection process, a pilot study was conducted, as a pretest for the questionnaire in order to assess the appropriateness of the instrument and to detect if there is need for any modification to be done. A sample consists for 10 professional nurses were made to ensure the validity of the study where no changes or modification was needed. Each questionnaire took 15-20 minutes to be filled.

5. Data analysis: The quantitative data were entered and analyzed using the SPSS (Statistical Package for Social Sciences version 17.0), and the level of significance (α) was set at 0.05. Descriptive and inferential statistical tests were used. Demographic and baseline variables were analyzed using Means, frequency, percentage, and standard deviations. Hypothesis were tested and analyzed by using t. test and Anova one way test.

6. Ethical considerations: The title and research methods were approved by the higher studies and nursing committee of the faculty of health professions at Al-Quds University. Permission obtained to access the MOH hospitals when approval of the director of hospital services was granted. The study participant received an explanation about the purpose of the study, confidentially and sponsorship of the study. In addition, the participants were informed about his/her right to refuse or to withdraw at any time during the study through the informed consent attached with each questionnaire

7. Results: The results indicated a high level of agreement among study participants on the means of the domains affecting performance of professional nurses in a descending form; work load (79.2%), manager support (72.2%), and a moderate level of agreement on the domains of resources availability (69.8%). (Table 1)

Table(1): Total Score of Selected Organizational Factors Affecting Performance of Professional Nurses in Descending Form

No.	Domain	M	SD	%	Level
1	Work load	3.96	0.50	79.2	High
2	Manager support	3.81	0.65	72.2	High
3	Resources availability	3.49	0.74	69.8	Moderate

Hypotheses 1: There are no significant differences at the level of ($\alpha \leq 0.05$) between the means of organizational factors affected professional nurses performance, which may be attributed to age variable(Table 3).

Table (2): Frequencies, means, and standard deviations of selected organizational factors affected performance of professional nurses at North West Bank governmental hospitals due to age variable

Domain	Age	Frequency	Mean	S.D
Work load	Less than 25	20	3.82	0.55
	25 - 29	60	3.99	0.56
	30 - 34	35	3.98	0.49
	35 - 39	39	3.98	0.45
	40 and above	31	3.97	0.47
	Total	185	3.96	0.50
Resources availability (disposable)	Less than 25	20	3.57	0.61
	25 - 29	60	3.58	0.81
	30 - 34	35	3.35	0.73
	35 - 39	39	3.41	0.74
	40 and above	31	3.49	0.73
	Total	185	3.49	0.74
Manager support	Less than 25	20	3.85	0.76
	25 - 29	60	3.86	0.57
	30 - 34	35	3.84	0.64
	35 - 39	39	3.67	0.77
	40 and above	31	3.83	0.56
	Total	185	3.81	0.65

For the testing of this hypothesis, One Way ANOVA Test revealed no significant differences at the level of ($\alpha \leq 0.05$) between the means of organizational factors affected professional nurses performance, attributed to age variable (table 3)

Table (3): Results of One Way ANOVA to test the differences between the means of selected organizational factors affected professional nurses' performance due to age

Domain	F	Sig.*
Work load	0.481	0.750
Resources availability (disposable)	0.708	0.587
Manager support	0.570	0.685

Hypothesis 2: There are no significant differences at the level of ($\alpha \leq 0.05$) between the means of selected organizational factors affected professional nurses performance, attributed to gender variable. For the testing of this hypothesis, T-Test statistical analysis for independent samples was performed. It was found that there were no significant differences at the level of ($\alpha \leq 0.05$) between the means of selected organizational factors affected professional nurses performance, attributed to gender variable (Table 4) shows the results.

Table (4): Results of T-Test for independent samples T-Test used as the gender variable contains TWO groups (male & female)

Domain	Gender	Frequency	Mean	S.D	T- value	Sig
Work load	Male	72	3.95	0.51	0.213	0.831
	Female	113	3.97	0.50		
Resources availability (disposable)	Male	72	3.40	0.60	1.255	0.211
	Female	113	3.54	0.82		
Manager support	Male	72	3.80	0.58	0.122	0.903
	Female	113	3.81	0.69		

Hypothesis 3: There are no significant differences at the level of ($\alpha \leq 0.05$) between the means of selected organizational factors affecting professional nurses performance attributed to the workplace variable (Table 6)

Table (5): Frequencies, means, and standard deviations of selected organizational factors affected performance of professional nurses at North West Bank governmental hospitals due to workplace variable

Domain	Hospital	Frequency	Mean	S.D
Work load	Dr. Khaleel Suleiman Hospital	37	3.94	0.48
	Dr. Thabet Hospital	29	3.55	0.48
	Dr, Nazal Hospital	18	4.17	0.47
	Al-Watani Hospital	29	4.11	0.41
	Rafedia Hospital	51	4.16	0.40
	Arafat Hospital	21	0.73	0.56
	Total	185	3.96	0.50
Resources availability (disposable)	Dr. Khaleel Suleiman Hospital	37	3.56	0.68
	Dr. Thabet Hospital	29	3.53	0.50
	Dr, Nazal Hospital	18	4.01	0.75
	Al-Watani Hospital	29	3.07	0.67
	Rafedia Hospital	51	3.49	0.86
	Arafat Hospital	21	3.39	0.63
	Total	185	3.49	0.74
Manager support	Dr. Khaleel Suleiman Hospital	37	3.98	0.50
	Dr. Thabet Hospital	29	3.71	0.34
	Dr, Nazal Hospital	18	2.97	1.20
	Al-Watani Hospital	29	3.81	0.61
	Rafedia Hospital	51	3.99	0.39
	Arafat Hospital	21	3.94	0.56
	Total	185	3.81	0.65

For the testing of this hypothesis, One Way ANOVA was used. The results revealed significant differences at the level of ($\alpha \leq 0.05$) between the means of selected organizational factors affecting professional nurses performance attributed to the workplace variable.

Table (6): Result of One Way ANOVA to test the differences between the means of selected organizational factors affected professional nurses' performance attributed to the workplace

Domain	F	Sig.*
Work load	8.994	0.0001
Resources availability (disposable)	4.089	0.002
Manager support	9.430	0.0001

Hypothesis 4:

There are no significant differences at the level of ($\alpha \leq 0.05$) between the means of selected organizational factors affected professional nurses performance attributed to the Years of experience variable. (table 8).

Table (7): Frequencies, means, and standard deviations of organizational factors affected professional nurses performance at North West Bank governmental hospitals due to years of experience

Domain	Years of experience	Frequency	Mean	S.D
Work load	Less than one year	12	3.82	0.48
	1 - 5	62	3.92	0.57
	6-10	48	4.06	0.49
	11-15	39	3.90	0.44
	16 and above	24	4.05	0.45
	Total	185	3.96	0.50
Resources availability (disposable)	Less than one year	12	3.40	0.70
	1 - 5	62	3.53	0.76
	6-10	48	3.41	0.76
	11-15	39	3.46	0.74
	16 and above	24	3.60	0.75
	Total	185	3.49	0.74
Manager support	Less than one year	12	3.68	0.89
	1 - 5	62	3.92	0.53
	6-10	48	3.82	0.60
	11-15	39	3.69	0.64
	16 and above	24	3.77	0.87
	Total	185	3.81	0.65

For the testing of this hypothesis, the researcher conducted One Way ANOVA Test. The result of this analysis showed that there are no significant differences at the level of ($\alpha \leq 0.05$) between the means of selected organizational factors affected professional nurses performance, which might be attributed to the Years of experience variable (Table 8).

Table (8): Results of One Way ANOVA to test the differences for years of experience

Domain	F	Sig.*
Work load	1.042	0.387
Resources availability (disposable)	0.380	0.823
Manager support	0.965	0.428

Hypothesis 5: There are significant differences at the level of ($\alpha \leq 0.05$) between the means of selected organizational factors affecting performance of professional nurses attributed to the Academic degree variable (10)

Table (9): Frequencies, means, and standard deviations of selected organizational factors affected professional nurses performance at North West Bank governmental hospitals according to academic degree variable

Domain	Academic degree	Frequency	Mean	S.D
Work load	Diploma (three years)	24	3.99	0.53
	Bachelor degree (four years)	33	3.97	0.49
	Postgraduate diploma	115	4.01	0.51
	Master degree	13	3.73	0.62
	Total	185	3.96	0.50
Resources availability (disposable)	Diploma (three years)	24	3.36	0.90
	Bachelor degree (four years)	33	3.51	0.70
	Postgraduate diploma	115	3.82	0.57
	Master degree	13	3.06	0.88
	Total	185	3.49	0.74
Manager support	Diploma (three years)	24	3.83	0.53
	Bachelor degree (four years)	33	3.84	0.63
	Postgraduate diploma	115	3.67	0.91
	Master degree	13	3.66	0.70
	Total	185	3.81	0.65

One Way ANOVA test revealed no significant differences at the level of ($\alpha \leq 0.05$) between the means of selected organizational factors affecting performance of professional nurses attributed to the Academic degree

variable except the domain of resources availability. (Table 10)

Table (10): Results of One Way ANOVA to test the differences between the means of organizational factors to academic degree

Domain	F	Sig.*
Work load	1.018	0.386
Resources availability (disposable)	2.768	0.043
Manager support	0.521	0.668

8. Discussion: The majority of professional nurses were bachelor degree (71.9%), while (32.4%) of the participants (25-29) years old. There was a bias in the distribution. On the other hand, the majority were female (61.1%) as opposed to (38.9%) males. It was found that 32.4% of the participants were 25-29 years old, 21.1% aged 35-39 years old, 18.9% aged 30-34 years old, 16.8% aged 40 and above years old, 10.8% aged less than 25 years old. However, there were no significant differences at the level $\alpha \leq 0.05$ between means of organizational factors affected professional nurses performance which might be attributed to the age variable. This means that the age of the participant had no effect on the organizational factors affected professional nurses' performance at the selected hospitals. The majority of respondents age range between 25-29 years old (32.4%). This result could be interpreted by the following: the nurses with long experiences in the hospitals prefer to move to public clinics so as to get rid of evening and night shift duties, this movement give chance for new professional nurses to be hired by hospitals, and also the application of the law in the civil service and the Palestinian MOH, which gives the chance for early retirement of (50s) for females or after 20 years of experience, so many nurses now scheduled on the program of retirement according to this law, and the MOH starts to replace the nurses with new graduated.

8.1 Gender

It was found that the majority of participants were female (61.1%) as opposed to (38.9%) males. There was no significant differences at the level $\alpha \leq 0.05$ between the mean of organizational factors affected professional nurses performance at north west bank governmental hospitals due to gender. it was found that gender of the participants had no effect on their on the organizational factors affecting professional nurses performance at the selected hospitals Through the study results it was congruent with the result of Awads study (2004) where males formed most of respondent, they were congruent with the study of Elkahout & Algaed (2003) however, most of the nursing staff are females, they 88% of the population of nurses and the rest 12% are males . It should note that nurses is a female profession and needs female more than males. The Palestinian Central Bureau of Statistics (2003) found that the percentage of female nurse was nearly 63.0%as opposed to 37% males.

8.2 Workplace

The majority of the participants worked at Rafedia hospital (27.6%), worked at Dr. Suleiman hospital (20%), at Alwatani hospital (15.7%), worked at Dr. Thabit hospital(15.7%), Dr. Arafat hospital (11.4%), and worked at Dr. Nazal hospital (9.7%) . However the researcher found there are no significant differences at $\alpha \leq 0.05$ between the means of organizational factors affecting professional nurses performance at north west bank governmental hospitals which might be attributed to workplace variable. In the light of the findings, indicated in previous chapter according to mean workload it was found that Dr. Nazal hospital the highest to affect nurses' performance in north WB hospitals, according to the researcher opinion this result related to shortage of professional nurses (30) compared with the number of beds 56 and nursing staff provide their own coverage for weekend, annual leave, sick leaves, maternity leave and nurses may end up working many extra shifts. In addition, the other causes of short staffing include poor work conditions, nursing is mostly female in nature, training of new staff and increased overtime and use of temporary agency staff to fill gaps, and the increasing complexity of health care and care technology. Followed sequentially by Rafedia hospital, Al-Watani hospital, Because the two hospitals in the central area of the north West Bank, where it was found the most of medical ,surgical, cardiology, neurology, hematology, oncology and other specialties of this hospitals. Followed Dr. Suleiman hospital, Thabet hospital and the last one was Arafat hospital. In the light of these finding, the researcher found that the workplace was significant variable in the selected organizational factors in north WB toward the workplace variable due to available resources (disposable), Dr, Nazal hospital was the most affected on nurses performance followed Dr. Suleiman hospital, then Dr. Thabet hospital, Rafedia hospital, Arafat hospital and the last one Al-Watani hospital. According to the researcher opinion this result related to an inadequate supply of stock and equipment and lack of resources is creating an ongoing crisis in the healthcare sector and also effect on professional nurses performance. In addition providing the disposable resources varies from one hospital to another according to the priorities and it is known that from time to time government hospitals are faced with the challenges of an insufficient supply of stock and inadequate and malfunctioning

equipment. Manger support affect nurses performance in north WB found to be Rafedia hospital the highest affect followed Dr. Suleiman hospital. Arafat hospital, Al-Watani hospital, Thabet hospital and the last one was Dr. Nazal hospital. The hypothesis that correlated workplace of participants with their workload, resources availability, and manager support, which might be attributed to the workplace variable, were significant at the level of $\alpha = 0.05$. that is, the workplace of participates had an effect on their selected organizational factors.

8.3 Number of years of experience in professional nurses

The majority of participants (33.5%) have an experience 1-5 years, (25.9%) had an experience 6-10 years, (21.1%) had an experience 11-15 years, (13%) had an experience 16 and above, (6.5%) had an experience less than one year show. This result could be explained that the nurses with long experiences in the hospitals prefer to move to public clinics so as to get rid of evening and night shift duties, this movement give chance for new professional nurses to be hired by hospitals and may be related to the fact that nurses through their experience they gain knowledge that enable them to enhance their performance. Mclaughlin and Kaluzny (2006) emphasized that nurses learn from experience and they become capable to view their performance and develop strategies to enhance it. However, the researcher found that there were no significant differences at the level of $\alpha = 0.05$ between the means of organizational factors affecting professional nurses performance at north west bank governmental hospitals which might be attributed to years of experience of participants. The result show that there were no significant differences at the level of $\alpha = 0.05$ between the means of workload, resources availability, and manager support and the total score, which might be attributed to the experience variable. The result agree with Blegen et al (2002) found that there are negative relationship between nurses' experience and the medication errors and patient's fall rates.

8.4 Academic degree

The majority of participants (71.9%) had a bachelor degree, (13%) had a diploma three years degree, (8.1%) have post graduated diploma degree, (7%) had a master degree. This result is inconsistent with the literatures that focused on the importance of the educational level for nurses because it determines their responsibilities for performing the various roles (Jacob, 2002). According to Kane, et al (2007) found that there is a relationship between registered nurses and the quality of nursing outcome, decreasing mortality rate, decreasing complications, and infection among nurses.

The hypothesis that correlated the academic degree of participants with selected organizational factors was not significant at the level of 0.05 except the domain of resource availability

9. Conclusion

There are selected organizational factor affecting performance of professional nurses. The selected organizational factors affecting performance found that Dr. Nazal Hospital the highest to affect nurses' performance and the last one was Dr. Thabet Hospital

10. Recommendation: adequate professional nurses in term of number and qualifications, importance of the application of the job description, providing appropriate equipment and adequate material resources, and program that will help to develop nurses as effective nurses manager should be implemented.

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