A Propose Model for Nurses Empowerment Through Characteristics of Workplace and Management Strategies; A Study in Iranian Hospitals

Amir Ashkan Nasiripour, Seyed Abbas Siadati

Department of Health Services Management, Science and Research Branch, Islamic Azad University, Tehran, Iran.

Abstract: Globally, empowerment has been viewed as having potential to play a key role in the professional development of nursing, increasing nurses' job satisfaction and giving a better quality for patients. The aim of this study is to propose an integrated model of nurses’ empowerment that could be used as a guide for creating high quality nursing practice work environment that ensure positive outcomes for nurses. In this descriptive study, 292 registered nurses in six Iran Social Security Organization hospitals were randomly selected. Instruments consisted of the conditions for work effectiveness questionnaire-II, Spreitzer empowerment questionnaire, which is partly designed by the researcher which was adjusted in accordance with the special status of nurse’s empowerment which were collected and distributed among samples after determining the validity and reliability. In order to determine the effect of management strategies and Workplace Characteristics on nurse’s empowerment, first the exploratory factor analysis was conducted and the obtained results of these steps were analyzed using confirmatory factor by Lisrel software and the final model was extracted. In this study, the structural equation modeling was used for studying various relational models among variables. The appropriate Workload with a coefficient standard of 84%, respecting the nurses with a coefficient standard of 73%, participation in decision-making with a coefficient standard of 88% and supporting nurses with a coefficient standard of 83% had the highest impact on the sense of empowerment among Iranian registered nurses. Based on the obtained values, (χ²/df) = 2.2, (CFI) = 0.95, (NNFI) = 0.95, (GFI) = 0.77, (RMSEA) = 0.06 it can be said that nurses’ empowerment model appropriately corresponds to the data. The Results showed that nurses’ characteristics of workplace had effects on their sense of meaning, self-determination, competence and impact. Management strategies had effect on sense of impact among Iranian registered nurses.

Key words: empowerment, nurse, characteristics of workplace, management strategies.

INTRODUCTION

Iran’s health-care system has witnessed profound changes in the last decades. Despite its progress, the system has currently faced many challenges in one of the important subsystems, nursing (Farsi et al., 2010). Based on the various studies, Iranian nurses report unhappiness with a variety of issues, including staffing, low levels of respect, recognition, and wages, heavy workloads, low level of participation in decision-making, limited clinical autonomy and authority, managerial issues, lack of powerful supportive work conditions, and being overburdened to overcome staffing shortages in the health-care system (Adib Haghbagher, Salsali, and Ahmadi, 2004; Nikbakht Nasrabad, Emami, and. Parsa Yekta, 2003; Nikbakht Nasrabad, and Emami, 2006). This situation threatens the health of nurses themselves, their patients and their employing organizations (Farsi et al., 2010).

The future of professional nursing depends on finding ways to create high-quality work environments that retain both experienced nurses and new graduates (Laschinger et al., 2009). The hospital practice environment has a significant effect on nursing and patient outcomes (Aiken, Smith and Lake, 1994). In nursing, the hospital practice environment has been commonly conceptualized from the perspective of either structural empowerment (Laschinger, 1996) or magnet hospital properties (Aiken, Sochalski and Lake, 1997).
Structural empowerment is a construct developed by Kanter (1993) in a qualitative study of industrial managers that describes four environmental social structures necessary for effective employee functioning. According to Kanter (1993) when the organization provides opportunity and power through access to information, resources, and support, employees are more effective on the job, and furthermore, feel good about what they do. There is adequate evidence in the literature to support the inclusion of nursing job satisfaction and empowerment in the Nursing Worklife model. Kanter’s (1993) study of empowerment and the extensive research programme on empowerment in nursing derived from Kanter have as a central theme the role of managers in structuring the work environments for staff effectiveness and satisfaction (Manojlovich and Laschinger, 2007). Najafi, et al. (2010) believe that Success in every organization depends upon the personnel motivation conducted by their directors (Najafi, et al., 2010). Management theorists argue that empowerment is a powerful mechanism for increasing employee involvement in organizational activities that result in greater job satisfaction and increased organizational productivity (Bowen and Lawler, 1992; Kirkman and Rosen, 1999).

Nurses who perceive greater empowerment are more satisfied with their jobs (Manojlovich and Laschinger, 2002), report greater work effectiveness (Laschinger and Havens, 1997). These studies suggest that once nurses are empowered, they use organizational and nursing unit domains more effectively, and as a result, have greater job satisfaction (Manojlovich and Laschinger, 2007). Therefore, employee empowerment as strategy for increasing job satisfaction and performance have received considerable attention in the general management literature and, to a lesser extent, in nursing (Spreitzer 1995; Laschinger, Wong, and Greco, 2006; Schaufeli and Bakker 2006; Mathieu, Gilson and Ruddy, 2006). On the other hand, Empowerment has been viewed as having potential to play a key role in the professional development, increasing nurses’ job satisfaction, giving a better quality for patients and included sense of meaning, self-determination, competence and impact (Corbally, et al., 2007).

High-quality patient care depends on a nursing workforce that is empowered to provide care according to professional nursing standards (Aiken, Smith and Lake, 1994). Empowered Nurses will certainly have the ability to resolve the patients’ needs and their families’ expectations and can effectively achieve their career and organizations goals (Alsop, Bertleson and Holland, 2006). But nurses who are not empowered often are not satisfied with their jobs, and do not have the motivation to do their job leave and leave their employers in the search of another job. In addition, the nursing care of patients which are carried out by such nurses will definitely be less than expected and lead to dissatisfaction of the patients with the given services (Mancholuich, 2007).

According to the above-mentioned problems, and despite colossal investment in the health service in recent years, healthcare environments are not better at fostering nurses’ empowerment with work. Therefore, it is required that managers with appropriate interventions in the field of healthcare environments prepare the grounds to facilitate appropriate condition for nurses to be empowered (Fereni and Tiranan, 2009).

The purpose of this study is to determine the effect of the workplace conditions and management strategies on the empowerment of the nurses and propose an integrated model that could explain workplace conditions and management strategies on the nurses’ empowerment.

MATERIALS AND METHODS

In this descriptive study, 292 nurses working in medical, surgery, orthopedics, intensive care unit, emergency, nursing Office wards of six Social Security Hospitals of Iran were randomly selected. Instruments included the conditions for work effectiveness questionnaire-II, Spreitzer empowerment questionnaire (Spreitzer, 1995), which is partly designed by the researcher which was adjusted in accordance with the special status of nurse’s empowerment and included three parts: demographic data, nurse’s empowerment situation (sense of competent, meaning, self-determination and impact) and the effect of management strategies and Workplace Characteristics on nurse’s empowerment. The measurement scale instrument was Likert 7-choice scale which was given 10 grades (ranging from never = 0 to always = 10). The validity of the questionnaire was measured through content validity. The internal consistency was measured through Cronbach's alpha which was equal to 85%. In order to review the effective management strategies and Workplace Characteristics for the nurses’ empowerment, first the exploratory factor analysis was conducted and the obtained results of these steps were analyzed using confirmatory factor by Liserl software and to evaluate the adequacy of sample size in confirmatory factor analysis, the Bartlett test was used.
Results:

In this study, 72.7% of the participants were female and 27.3% were male and their average age was 35.7 years. 90.4% had bachelor degree and 9.6% had master degree. 82.9% were officially employed and 17.1% was on contract, their average work experience was 11.87 years and their average work hours in a week were 51.61 hours. 21.8% was working in medical ward, 27% in the surgical ward, 10.2% in the orthopedic ward, 29% in the intensive care unit, 8.2% in the emergency department and 3.8% in hospital nursing office.

Nurses, on their current empowerment situation, reported that their competence level in caring for the patients is high and they feel that their jobs are very significant for them. But they also reported that their having a choice and being effective in nursing job is low (Table1). In general, nurses in Iran social security organization hospitals considered their empowerment status at moderate level (5.57 of 10).

Based on the exploratory factor analysis, the appropriate workload, respecting the nurses, accessing the information, lack of physician dominance, work consistent with duties, latent variable markers of workplace conditions and nurses’ participation in hospital affairs, supporting nurses, good managers’ communication with nurses, rewards based on performance and continuous learning are the latent variable markers of management strategies to empower nurses.

According to the findings, appropriate workload with a coefficient standard of 0.84 and respecting the nurses with a coefficient standard of 0.73 are reliable indicators to measure nursing workplace conditions variable. Nurse participation in hospital-related decisions with the standard ratio of 0.88 and supporting nurses with the standard ratio of 0.83 are reliable indicators for measuring management strategies variables (figure1).

Sampling Adequacy index was equal to 0.730 and the significant level of Bartlett test was less than 0.001. Based on these two criteria implementation of factor analysis was possible and nurses’ empowerment model with the following data had an appropriate compatibility ($\chi^2$/df) =2.2, (CFI) =0.95, (NNFI) =0.95, (GFI) =0.77, (RMSEA) =0.06. Based on the standard rate, workplace conditions had effects on being significant and feeling competent (p <0.05, t=2.46) and show 0.47 variance of feeling competent and meaning (R²=0.47). Workplace condition effects on nurses’ having a choice (p <0.05, t=2.33) so that it shows 0.62 variance of feeling self-determination (R²=0.62) and is effective on the nurses’ being efficient in their jobs (p <0.05, t=2/35) which shows 0.45 variance of feeling impact (R²=0.45). Nurses’ managers Strategies had also effects on nurses’ feeling of being effective in nursing jobs (p <0.05, t=2.20) which shows a variance of 0.45 variance for nurses’ feeling of being effective (R²=0.45). The multiple correlation squared value indicates the power of the model and thus is able to properly predict nurses’ empowerment.

Fig. 1: The model of nurse's empowerment through Characteristics of Workplace and Management Strategies.
Table 1: The Mean and standard deviation for the present status of nurses’ empowerment.

<table>
<thead>
<tr>
<th>Nurse empowerment status</th>
<th>Mean</th>
<th>Standard deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sense of competence</td>
<td>6.15</td>
<td>1.47</td>
</tr>
<tr>
<td>Sense of meaning</td>
<td>6.25</td>
<td>1.49</td>
</tr>
<tr>
<td>Sense of self-determination</td>
<td>5.17</td>
<td>2.26</td>
</tr>
<tr>
<td>Sense of impact</td>
<td>4.71</td>
<td>2.52</td>
</tr>
<tr>
<td>Overall ability of nurses</td>
<td>5.57</td>
<td>1.46</td>
</tr>
</tbody>
</table>

Discussion:

Comparison the factors affecting the workplace conditions on empowering nurses, the findings show the fact that the importance of appropriate workload, respect, access to information, lack of physician dominance and work consistent with duties are the most effective on nurses’ feeling of having self-determination. This finding confirmed the results of the research conducted by Corbally, et.al. (2007) that workplace conditions aspect determines the capacity of the people to be empowered which make sense of having self-determination from this prospective.

This research demonstrates that high workload, physician dominance and inconsistency of the duties with the job description are major grounds for nurses’ disability. In the same field, Fereni and Tiranan (2009) believe that the causes of heavy workload in nursing is due to nurse shortages, lack of cover for holidays, sickness or to insufficient recruitment, writing hospital records and paper work in a hospital ward are the variables which take nurses’ energy and time while they could make the time for caring the patients. This issue imposes a lot of on nurses, cause energy depletion and prevents nurses from feeling empowered in their work. The result of the study by Adib Hagbaghery, Salsali, and Ahmadi (2004) showed that lack of clear job descriptions of nurses, unbalanced nurse-patient ratios, and nurses’ involvement in other activities than nursing and physician dominance were among the hindering factors which prevents Iranian nurses’ professionals ability.

Respecting nurses and accessing information in the working condition is another important finding for the nurses which are most effective on nurses’ feeling of being competent and significant and having the right to choose and being efficient. Faulkner and Laschinger (2008) found that nurses who feel respected are more feel empowerment, more likely to feel satisfied in their work, rely more on their organizations and be more committed to their organizations. Therefore, it is important that managers prepare the ground for anything which causes respect in the nursing work environment. The results indicated that management strategies including the participation of nurses in hospital-related decisions, support, good communication, encouragement based on training and performance were the most effective factors for nurses on their effectiveness of nursing jobs. These findings complies with the results by Fereni and Tiranan (2009) which emphasizes the role of nursing leaders on empowerment and maintains that participation of nurses in decision-making process and having the chance to use their intellectual skills, communication with managers and social support, recognizing and rewarding their work and efforts based on the performance are the important factors which facilitate nurses’ empowerment.

Although all management strategies affect the ability of nurses, but nurses’ participation in hospital-related decisions and supporting them had the most effects on the effectiveness of nurses in their jobs. Adib Hagbaghery, Salsali, and Ahmadi (2004) suggested that managers supporting the nurses promote feeling stronger and thus will result in a better care quality. Supporting includes provision of care facilities, provision of financial welfare and provision of emotional support. Moreover, Kuokkanen and Leino-Kilpi (2001) explained that authoritarian leadership style prevents nurses’ empowerment and in this situation there is no chance for participation and this static atmosphere is an effective barrier for nurses being initiative and as a result their feeling of being efficient will be very low. Based on the research findings, other critical variable in the empowerment of nurses are nurse-managers’ good communication and continuous training. Accordingly, Almost and Laschinger (2002) found that a strong relationship with physicians and nurses with nurse managers, especially facilitate the nurses’ feeling of being empowered. Leiter and Maslach (1999) added that when there is no positive relationship with others in the workplace, the risk of disability increases among staff. Kuokkanen and Leino-Kilpi (2001) identified that continuous learning and personal development are the important requirements for nurses’ empowerment. Corbally, et.al. (2007) concluded that continuous training effect on good practice, nurses understanding of the power of choice and professional respect. Almost and Laschinger (2002) believed that training may provide new opportunities for nurses to be able to keep working in today’s healthcare environment and make progress. Nurses who feel they have appropriate environmental conditions feel more effective in performing their tasks, and provide better levels of patient care in their own ward (Laschenger, et.al., 2001). The role of nurse managers in this regard is to create conditions that nurses are empowered to make the best possible care for their patients to facilitate (Laschenger, 2010).
Conclusion:

The Model provided for the empowerment of nurses serves as an option among workplace conditions, management strategies and nurses’ feeling of empowerment. From this perspective, appropriate workload, respecting the nurses, accessing information, lack of physician dominance and nursing duties consistent with job descriptions are the most effective on nurses’ feeling of having a choice and participation of nurses in hospital-related decisions, support of nurses, nurse-managers’ appropriate communication, encouragement based on performance and continuous training were the most effective on the effectiveness of nurses in nursing jobs. These findings indicate that improving workplace conditions and management strategies will be very effective on nurses’ sense of empowerment. The results from this study extend our knowledge about how work environment characteristics and management strategies affect hospital nurses.

ACKNOWLEDGMENT

The authors would like to acknowledge the assistance of all the nurses, nursing directors, supervisors and head nurses who participated in this research.

REFERENCES


