Influence of Organization Structure Features on Occupational Stress among Staff Nurses

Thesis

Submitted for partial fulfillment of the requirements of master degree in Nursing Administration

BY Walid Ibrahim Hassan (B.Sc.Nursing)

FACULTY OF NURSING
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Dedication to:

My

Parents

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Wife

Who always support

And encourage me to accomplish

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Abbreviations

AHCP Allied health care personal

ENSS Expanded nursing stress scale

ER Emergency Room

ICU Intensive care unit

ABSTRACT

Organizational structure that designated well maintains low level of occupational stress. This study was carried out in ICUs at Ain Shams university specialized Hospital and Ain Shams University Hospital which affiliated to Ain Shams University Hospitals that aimed at identifying the influence of organizational structure feature on nurses' occupational stress. The study subjects included (100 staff nurses from Ain Shams university specialized Hospital and 60 staff nurses from Ain Shams University Hospital). Data collection tools included the organizational structure feature questionnaire and Expanded nursing stress scale. The results showed that the majority of staff nurses in Ain shams university specialized hospital had high perception regarding total organizational structure feature has good feature than staff nurses in Ain shams university hospital. On the other hand, staff nurses in Ain shams university hospital complain of high level of stress than staff nurses in Ain shams university specialized hospital. Conclusion: The study show that there is a negative significant correlation between the organizational structure features and occupational stress level among staff nurses. Recommendations: physical environment should be checked regularly. Stress management courses should offer to all staff nurses to managing stress in early stage. Nurse manger should have good communication with staff nurses.

Keywords: Organizational structure feature, Occupational stress and Staff nurses.

Introduction

The goal of every hospital or healthcare organization is to develop and reinforce organizational strategies, structures, and processes that improve the organization effectiveness, particularly in achieving quality of patient care and employee job satisfaction. Well designated Organizational structure maintain people's formal communications, organizational job status, the degree of accessing to information, compliance and enforcing the rules , job descriptions, rules and regulations, resource allocation and coordinating between activities (Johnson, 2013).

The organizational Structure is hierarchical levels and spans of control, responsibility, roles and positions, mechanisms for integration and problem solving. It is the internal differentiation and patterning of relationships. It's the way that responsibilities and authorities are allocated, work and procedures are carried out by the members of organizations. While organizational structure has three main dimensions which include centralization, formalization and complexity (**Klein and Sorra, 2014**).

Organizational structure feature consisted of physical environment, professional nursing practice, professional working relationships, leadership, nurses' job influences and maintaining job satisfaction. The physical environment of an organization such as the building, layout, machinery, equipment, and uniforms may have a significant impact on the way nurses work. It facilitates the access to information and resources, increase employee comfort, expand patient privacy by reducing noise, distractions, provide flexibility and personalization in the delivery of care. It will affect job performance, job satisfaction, employee injuries, workers

behavior, communication patterns, employee fatigue, employee error rates and occupational stress (**Stichler**, **2009**)

Professional nursing practice is the values that reflect the culture of an organization. The dominant attributes shared among Magnet organizations include nursing autonomy, empowerment, cost effectiveness and quality care. The primary goal of a practice is to support the relationship between the nurse and the patient. Nurses' participation in making decisions improves the quality of care, enhances patient and family satisfaction and contributes to overall nursing satisfaction. These attributes are also associated with increased nurse engagement, retention and recruitment. Nurse autonomy and empowerment are complex and crucial factors in promoting quality patient care (Liao, 2011).

Professional relation in the hospital setting include boundaries between different medical specialties and sub-specialties, between specialist nurses and ward nurses and between staff at different levels of seniority. These processes of observing, defending and expanding professional boundaries have substantial implications for the delivery of patient care. Inter professional relationships with coworkers is defined as complex concept that composed of social elements and intrinsic characteristics of the person. The social elements embedded within intra and inter professional relations, workplace characteristics, teamwork, professional competence, experience of nurses, social recognition by the general public and professional autonomy (Leino-Kilpi et al., 2016: Greenfield et al., 2015).

The nurse patient relationship is a unique relationship between the nurse and client and based on the interpersonal processes that occur between the nurse and the client. The nurse-patient relationship pertains to its operational definitions in clinical practice and diverse contexts. The purpose of the nurse-patient relationship is based on caring for others. (Parpottas, 2012).

Leadership defined as the process in which an individual influences a group of individuals to achieve a common goal. It is the conception of achieving goal, a method, the mobilization of the means necessary for attainment, adjustment of values and environmental factors in the light of desired ended. It is a dynamic interactive process that involves three dimensions: the leader, follower and situation. Each dimension influences the others. Effective nursing leadership accelerates excellent coordination mechanism (open, accurate and timely) and maintained collaborative communication and interaction for problem solving and conflict management. Through building nursing team interdependence in their tasks, nurses can see themselves and seen others as an intact social entity embedded in one or more larger social system and manage their across organizational bounders (Swansburg and Roussel, 2014).

Leaders have a direct impact on the most common work stressors among nurses. Senior leaders are considered as drivers in shaping organizational culture and therefore to shape the quality of the social environment as part of quality improvement initiatives. The loss of experienced nurses from the ward environment can lead to short staffing which requiring increased utilization of overtime and agency staff, increased recruitment and orientation costs, and increased adverse patient outcomes; all will contribute to higher levels of nursing dissatisfaction (Khasawneh,2014& Martinelli, 2013).

Nurses suffer from work-related issues such as job stress and lack of a supportive work environment. So unsupportive work environment seems to be one of the factors that create high rates of turnover among nurse. Occupational stress is condition of strain that has a direct bearing on emotions and physical conditions of a person. It's increasingly important occupational health problem. However it may also cause hidden manifestation of morbidity that can affect personal well-being and productivity (**Pragadeeswaran and Kumar, 2014 & Mudallal, et al., 2014**).

There are variety of factors that may cause stress in hospital workplace, such as increasing workload, uncertainty concerning treatment, emotional response to suffering and dying patients, organizational problem, conflicts, insufficient skills and social support at work (Ctishler, 2016).

Job stressors grouped into the following six categories: physical environment, role stressors, organizational structure and job characteristics, relationships with others, career development and work-family conflict. Unpleasant or dangerous physical conditions such as crowding, noise, air pollution as well as unrealistic deadlines, low levels of support from supervisors known to cause occupational stress (Cartwright, et al., 2015 & Kao, et al., 2013).

The stress experienced by different occupation types. Role demands could be stressful when they are excessive (role overload). Work overload comes when nurse's experience and responsibilities increased. The daily interactions with patient and co-workers may lead to stress (Cartwright et al., 2015)

Role conflict and role ambiguity are associated with low satisfaction, absenteeism, low involvement, low expectancies and task characteristics with a low motivating potential and tension in which all affect the productivity and efficiency at the organization. Role conflict is conflict arising when competing demands made on an individual in the fulfillment of his or her multiple social roles. Role ambiguity refers to the uncertainty of employees about key requirements of their jobs and about how they are expected to behave in those jobs (**Lu and Chang, 2017**).

The appropriate organizational structure features is the key to decrease occupational stress. According to **Mahmoud**, (2009) who found negative correlations between physical environment, culture, team building, professional relation and occupational stress. Who also found that level of nurses' occupational stress was high due to lack of organizational support and leadership and conflict with physician. In addition to **Mohsen**, (2011) who found that 86.5% of nurses suffer from high level of stress due to conflict with physician and 82% due to lack of support from leadership. Also **Shahata**, (2008) found that 83% of nurses suffer from occupational stress due to lack of support from leadership. Strong organizational culture maintains low level of occupational stress.