

Leadership Competencies of Frontline Nurse Leaders and its Effect on the Job Satisfaction and Performance of Staff Nurses

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Abstract

A descriptive correlational study was conducted in a selected hospital of Delhi to determine the relationship of the leadership competencies of the frontline nurse leaders with the job satisfaction and performance of staff nurses. The sample consisted of 19 nurse leaders and 131 staff nurses with over one year of experience, selected through total enumeration technique. Data collection was done for a period of two weeks. The study showed that there was a significant positive correlation between the leadership competency of frontline nurse leaders and the job satisfaction of the staff nurses working under them. The study suggested that effective leadership training be instituted for prospective nurse managers before appointments are made into management and administrative positions. It also emphasises that the nurse managers at all levels must find innovative ways to retain staff by enhancing work environment and ensuring high job satisfaction.

Nurse Leaders are the ones who lead professionals not just manage workers. They need to develop them and create a healthy work environment. A competent leadership is essential for patient safety. In most of the clinical settings, nurse leaders are selected based on their clinical expertise or the years of experience. Most of the time they lack confidence in managing human resources, use of technology, conflict management, communication skills, and effective use of emotional intelligence. Studies proved that effective leadership is highly related to retention and satisfaction of staff. The turnover can incur a good cost including hiring, training, reduced productivity of new staff, poor standards of care, increased length of stay of patients etc. Young graduates entering the profession are faced with numerous challenges such as taking a new role, developing clinical skills, building positive attitude, learning new policies, etc. Most of the time these challenges are not addressed and they are forced to leave the settings. Bormann & Abrahamson (2014) conducted a study on 117 staff nurses over a period of 3 months and stated in their study that transformational and transactional leadership of nurse leaders have a positive effect on the job satisfaction of the staff nurses. As most of the hospitals are looking forward for NABH accreditation, leadership behaviour

plays an important role in setting standards in the hospital. Frontline nurse leaders are the immediate contact and the role model for the staff nurses. Research in western countries has revealed impact of leadership on the job satisfaction of the Staff Nurses. However, very little research related to this subject has been conducted in the Indian settings.

Literature Review

N Blake in the article "How to be an effective Charge Nurse" states that frontline nurse leaders must ensure staff members have appropriate training and qualifications for the patient assignment and match the staff's competencies with the needs of the patient. As a leader on their shift, they also need to assure that adequate resources are available, policies and procedures are followed, and regulatory requirements are met.

The front line nurse leaders wears many "hats" simultaneously. They have been equated to air traffic controllers and are often described as the "go-to" person, the one to get things done or the resource that has all of the answers. Their responsibilities may extend beyond staffing the unit. They function as a resource to the staff on the unit, other departments and disciplines, and even physicians. They possess more than clinical expertise. They are problem-solvers and usually can recognise a potential problem before it arises. Exemplary leadership and communication skills also are essential in this role. Berbarie lists the characteristics necessary to be

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effective charge nurse: educator, change agent, innovator, mentor, leader, mediator, financial steward, evaluator and celebrator.

Researchers describe five effective decision-making behaviours for staffing resourcefulness, tactful communication, flexibility, decisiveness and awareness of the big picture.

Objectives

The study was set with the following objectives:

1. To identify the leadership competencies of Frontline Nurse Leaders;
2. To assess job performance and the job satisfaction of staff nurses working under them;
3. To determine the relationship of the Leadership competencies of the Frontline Nurse Leaders with the job performance and satisfaction of staff nurses.

Methodology

A descriptive correlational study design was used in this study conducted in a selected hospital New Delhi. The sample size was 150. The population comprised of frontline nurse leaders and staff nurses working under them. Total enumeration technique was used for selecting the sample. The researcher explained the purpose of the study and a written consent was obtained.

Tools

The Tool for the Research consisted of structured questionnaires and rating scales which were categorised into 5 sections: Section 1 and Section 2 covered the demographic data of the subjects (the frontline nurse leaders and staff nurses); Sections 3, 4 and 5 worked on a rating scale assessing the leadership competency of the front nurse leaders, job satisfaction and job performance of the staff nurses working under those front nurse leaders.

Structured questionnaire on demographic data consisted of total 7 items including age, gender, religion, marital status, educational qualification and work experience.

Each of the items to assess the Leadership competency of the Frontline Nurse Leaders were put under 3-point Likert scale wherein the respondent could indicate their choice by marking with a (✓) on one of the options: 'Always', 'Sometimes', or 'Never'.

Content validity of the tool: To ensure the validity of the tool, it was given to five experts in the field of Nursing and Management. The experts were chosen based on their background in management and

administration, experience, qualification and interest in the problem area. Experts were requested to judge the items on the basis of relevance, clarity, feasibility and organisation of the items included in the study. The tool was found to be valid with few corrections, which were incorporated and the final draft of the tool was prepared. Try out was conducted to check the clarity, ambiguity of the language of the tools.

Reliability of the tool: Reliability of the tools to assess the leadership competency of nurse leaders, job satisfaction of the staff nurses, job competency and job performance were tested using Cronbach's Alpha formula. The reliability coefficient was found to be 0.8. Thus the tools were found reliable for the study.

Ethical consideration: Permission was taken from the institutional review board of St Stephen's Hospital New Delhi to conduct the research study. Written consent was taken from each study subject. Anonymity and confidentiality of the subjects was maintained while carrying out the study. Participants were free to withdraw any time.

Results

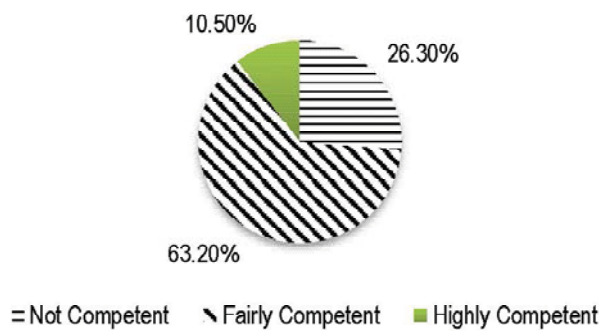
Demographic data revealed that among the front Line Nurse Leaders, 5 percent were in the age group 21-30 years and 37 percent of them were in the age group of 31-40 years, 26 percent in the age group 41-50 years and 32 percent were 51 years and above. In case of Staff Nurses, 75 percent were among the age group of 21-30 years, 20 percent were 31-40 years and 5 percent were 41-50 years old.

Regarding the educational status of the frontline nurse leaders, 84 percent were DGNM qualified, 11 percent were BSc Nursing and 5 percent were Post BSc Nursing. Among the staff nurses, 78 percent were DGNM, 18 percent were BSc Nursing, 1 percent Post BSc and 3 percent were with their Post Diploma Courses.

All the frontline nurse leaders (100%) were married; among staff nurses, 39 percent were married and 61 percent were unmarried.

As for religion, among frontline nurse leaders, 16 percent were Hindu, 5 percent Muslim and 79 percent were Christian. In case of staff nurses 26 percent were Hindu, 2 percent Muslim, 67 percent were Christian and 5 percent belonged to other religions. Among the frontline nurse leaders, 5 percent had less than 5 years of experience, 16 percent of them had 11-15 years of experience and 79 percent had more than 16 years of experience. In case of Staff nurses, 56 percent had less than 5 years

Fig 1: Leadership competency of frontline nurse leaders



of experience, 28 percent had 5-10 years of experience, 14 percent had 11-15 years of experience and only 2 percent had experience more than 16 years.

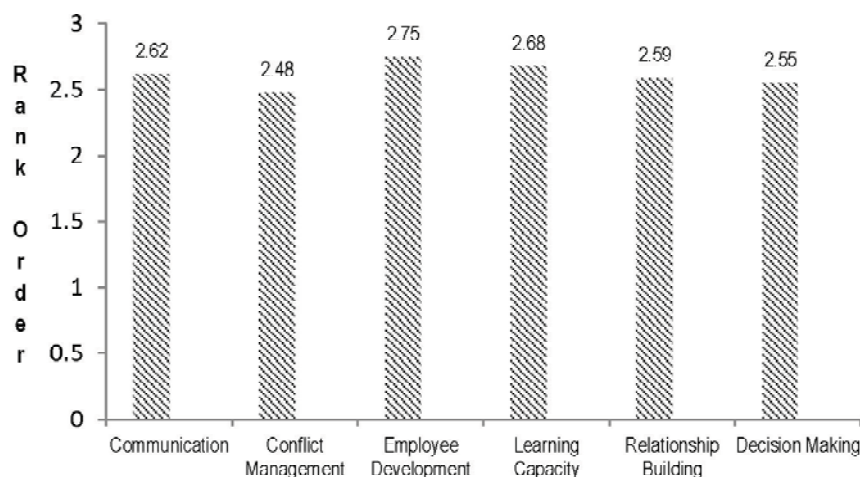
Regarding the length of working in the present ward, out of 19 front line nurse leaders, 26 percent worked in the same ward for 1-5 years of time, 21 percent of them for 6-10 years, 21 percent with 11-15 years of duration and 32 percent worked more than 16 years. In case of staff nurses, 86 percent worked in the same ward for 1-5 years, 9 percent for 6-10 years, 4 percent for 11-15 years and only 1 percent for more than 16 years.

26.3 percent of frontline nurse leaders were not competent, mostly 63.2 percent were competent and 10.5 percent were highly competent. The mean score was 146.74 ± 9.182 (Fig 1).

Discussion

It was seen that Employment development scored the highest rating and Conflict management scored lowest. The descending order of the leadership competency areas as per the order is Communication, then moving down to employee development, learning capacity, relationship building, decision making and conflict management.

Fig 2: Rank order of competency areas of front line nurse leaders



It was observed that 83.2 percent of staff nurses showed a good Job performance, whereas 9.20 percent showed a fair result. However 7.60 percent were under the excellent category (Fig 3).

The findings suggest that among staff nurses, 10 percent were highly satisfied, 73 percent were satisfied and 17 percent were with neutral status in relation to their job. The findings also revealed that the Pearson r value to seek relationship between leadership competency of the frontline nurse leaders and the job satisfaction of the staff nurses was 0.218 and p value (<0.05) was found to be significant at 0.05 level.

It was observed that the leadership competency increased with experience and age but there has been stagnation in the competency after the age of 40 years as well as after 15 years of experience. The present study also indicated that there was a significant relationship between the leadership competency and the job satisfaction of the staff nurses working under them.

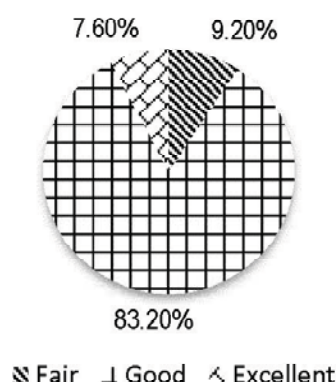
Recommendations

- Further studies can be done to assess other areas of leadership competency as the present study reflected only few domains of leadership competency.
- Similar study can be replicated on larger samples and effectiveness of leadership training programmes.
- A comparative study can be conducted on leadership competencies of nurse managers in government and private sectors.

Conclusion

Frontline nurse leaders possess more than clinical expertise. They are problem-solvers and usually can recognise a potential problem before it arises. Exemplary leadership and communication skills also are essential in this role. Frontline nurse leaders make decisions in very short intervals, so they must be decisive and understand patient flow. These professionals set the trend for the unit during their tour of work and can influence the morale for the oncoming shift. They can build up or break down the working efficiency of the unit, showing a higher level of confidence. Nurses' roles and responsibilities contribute to the quality improvement of health care services Goslin

Fig 3: Job performance of staff nurses



opines that the workers who are satisfied also tend to behave in a selfless manner and go beyond the formal requirements of a job, have higher retention rates and are more productive. This suggests that improving job satisfaction enhances the overall success of the organization. Training needs to be mandatory before taking up managerial positions. It is suggested that, ongoing in service education should focus more on Decision making and conflict management. Creation of motivational environment through career ladder salary structure and policy amendments.

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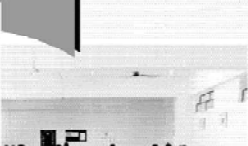
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