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SEARCH STRATEGY

Set No.	Searched for	Databases	Results
S1	journal of nursing management	Ebook Central, Public Health Database, Publicly Available Content Database	182015*

* Duplicates are removed from your search, but included in your result count.

Exploring user empowerment and service improvement within an Irish epilepsy service using Checkland's 'Soft Systems' approach

Bennett, Louise ¹

; Bergin, Michael ²

; Wells, John S G ³

¹ Department of Nursing and Health Care, School of Health Sciences, Waterford Institute of Technology, Waterford, Ireland ² Department of Applied Arts, School of Humanities, Waterford Institute of Technology, Waterford, Ireland ³ School of Health Science, Waterford Institute of Technology, Waterford, Ireland

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

To illustrate the value of Checkland's 'Soft Systems' approach to explore and analyse the interaction of human and organisational factors that affect service delivery and patient experience in one specialist epilepsy service.

Background

Checkland's approach is underutilized in relation to health service improvement. One epilepsy service in Ireland is used as an example to illustrate the value of his approach to improve service delivery, particularly when what needs to change is not clear.

Method

Checkland's 'Soft Systems' seven-stage approach was used collaboratively to explore patients' and clinicians' experience of service delivery and how to improve it.

Results

The research identified the practice of empowerment affected the quality of the service experience. Checkland's concept of a human activity system was particularly pertinent in identifying this issue and providing a 'map' for change.

Conclusion

Wider inferences for the use of Checkland's approach by nurse managers are discussed, as is the value of using Checkland's approach to improve services.

Implications for Nursing Management

Checkland's 'Soft Systems' is an underutilized approach in health care that could be used by managers to initiate and embed change within a health care service.

DETAILS

Subject: Value; Epilepsy; Empowerment; Nurse managers; Change agents; Health services; Quality of care; Health care delivery; Patient satisfaction; Nursing administration

Location: Ireland

Identifier / keyword:	Checkland's seven-stage soft systems methodology; empowerment; epilepsy services; human activity system; service improvement
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Homecare nurses' length of conversation and intention to remain at the workplace: A multilevel analysis

Maiko Noguchi-Watanabe ¹

; Noriko Yamamoto-Mitani ¹

; Nagami, Yukari ²; Eltaybani, Sameh ³

; Inagaki, Asa ¹

; Taniguchi, Yukiko ⁴ ¹ Department of Gerontological Home Care and Long-Term Care Nursing, Graduate School of Medicine, The University of Tokyo, Bunkyo-ku, Japan ² Department of Community Health Nursing, Graduate School of Medicine, The University of Tokyo, Bunkyo-ku, Japan ³ Department of Gerontological Home Care and Long-Term Care Nursing, Graduate School of Medicine, The University of Tokyo, Bunkyo-ku, Japan; Department of Critical Care and Emergency Nursing, Faculty of Nursing, Alexandria University, Alexandria, Egypt ⁴ School of Nursing, College of Nursing and Nutrition, Shukutoku University, Chiba, Japan

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aims

To examine the relationship between homecare nurses' length of conversation with nurse managers and colleagues and intention to remain at the workplace.

Background

Nurse turnover is an important issue. Previous studies focused on the perceived function of communication. However, we do not know the contribution of homecare nurses' actual conversations to nurse turnover prevention.

Methods

We conducted a cross-sectional study in 330 homecare nurse organisations in Japan. We recruited 2,315 homecare nurses and analysed the data of 608 nurses. We used a questionnaire to investigate participants' intention to remain.

Results

Nearly 68% had the intention to remain. The mean length of conversation was 34 min/day with the manager and 68 min/day with colleagues. Multilevel logistic regression analysis showed that long conversations with the nurse manager (20 min and more) and colleagues (40 min and more) were significantly related to the intention to remain.

Conclusions

Ensuring the time of conversation with a manager and colleagues may contribute to preventing potentially avoidable nurse turnover.

Implications for Nursing Management

Nurse managers should encourage homecare nurses to have daily conversations of 20 min or more with the nurse manager and 40 min or more with colleagues to continue working at their current workplace.

DETAILS

Subject:	Workplaces; Nurses; Regression analysis; Nurse managers; Multilevel analysis; Verbal communication; Colleagues; Job satisfaction; Community nursing; Professional relationships; Nursing administration
Business indexing term:	Subject: Job satisfaction Professional relationships
Location:	Japan
Identifier / keyword:	communication; home care agencies; multilevel analysis; nursing personnel turnover
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Document 3 of 55

Workplace bullying, knowledge hiding and time theft: Evidence from the health care institutions in Pakistan

Duria Fatima ¹ ; Muhammad Bin Abdul Ghaffar ¹ ; Ramsha Zakariya ² ; Lakhi Muhammad ² ; Sarwar, Aisha ²

¹ Department of Business Administration, NFC IET, Multan, Pakistan ² Department of Management and Social Sciences, Capital University of Science and Technology, Islamabad, Pakistan

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim(s)

This paper examined the impact of workplace bullying (WPB) on mild aggressive deviant behaviour, such as knowledge hiding and employee time theft, in Pakistani health care institutions. Additionally, this study investigated the mediating role of negative emotions on the relationship between WPB and its outcomes.

Background

Although mild deviant behaviour has been proven to affect the health care sector, its antecedents are still untapped.

Method

Data were collected from 233 nurses working in hospitals located across Pakistan via self-administered questionnaires in three time lags to test both the direct and indirect effects of WPB. The hypothesized correlations were tested using structural equation modelling (SEM).

Results

The results revealed that WPB increased knowledge hiding and employee time theft amongst nurses. The indirect effect of negative emotions was established on the aforementioned relationships.

Conclusion

This study contributes to the existing literature by concentrating on predictors that trigger deviant behaviour amongst nurses. It also assessed the mediating impact of emotions, wherein such endeavour is essential for researchers and practitioners.

Implications for Nursing Management

The study outcomes are significant for the hospital sector to improve their strategies, such as implementing resilience during stressful events to address WPB and deviant behaviour amongst nurses.

DETAILS

Subject:	Hospitals; Clinical outcomes; Stressful events; Modelling; Negative emotions; Workplaces; Indirect effects; Emotions; Nurses; Bullying; Resilience; Health services; Theft; Behavior; Work environment; Nursing administration; Deviance
Business indexing term:	Subject: Work environment
Location:	Pakistan
Identifier / keyword:	employee time theft; knowledge hiding; negative emotions; nurse; structural equation modelling; workplace bullying
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The reflective risk assessment model of professional quality of life in Chinese nurses

Wendy Wen Li ¹

; West, Caryn ¹ ; Xie, Guojun ² ¹ College of Healthcare Sciences, James Cook University, Townsville, Qld, Australia ² Department of Psychiatry, The Third People's Hospital of Foshan City, Foshan, China

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

To apply the reflective risk assessment model in a Chinese health care setting to investigate the relationships between professional quality of life and mental health risk profiles.

Background

Few studies have connected the quality of work life with contributing and coexisting factors such as depression, anxiety and stress, but none to date in a Chinese health care setting.

Method

A cross-sectional survey of 950 registered Chinese nurses was employed.

Results

299 of 861 participants (34.7%) were categorized into four of five professional quality of life risk profiles, consistent

with the reflective risk assessment model. Significant differences were seen with large-sized effects in the mean scores of stress, anxiety and depression among the participants, with participants of the very distressed profile having significantly higher mean scores in stress, anxiety and depression, followed by the at-risk profile group.

Conclusion

The reflective risk assessment model and professional quality of life five risk profiles are supported by this study.

Implications for Nursing Management

The reflective risk assessment model can be used to detect risk factors for mental health in nurses and for the design of interventions that promote nurses' mental health.

DETAILS

Subject:	Quality of life; Health care; Mental depression; Anxiety; Stress; Risk factors; Psychiatric nurses; Risk assessment; Mental health; Mental health services; Nurses; Nursing administration; Occupational stress; Health services; Health risks; Evaluation
Business indexing term:	Subject: Risk assessment Occupational stress
Identifier / keyword:	anxiety; compassion fatigue; compassion satisfaction; depression; stress
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Document 5 of 55

The role of structural empowerment in predicting computer use among Jordanian nurses: A cross-sectional study

Ta'an, Wafa'a F ¹

; Mohammed Munther Al-Hammouri ¹ ; Aldalaykeh, Mohammed K ¹ ; Suliman, Mohammad M ² ; Almutti, Raghad ³

¹ Community and Mental Health Nursing Department, Faculty of Nursing, Jordan University of Science and Technology, Irbid, Jordan ² Department of Community and Mental Health Nursing, Faculty of Nursing, Al al-Bayt University, Mafraq, Jordan ³ Medical Surgical Ward, Arab Medical Center, Amman, Jordan

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

The study aimed to examine the relationship between structural empowerment and attitudes towards computer use among nurses.

Background

Empowering organizational structure is a significant factor affecting employees' attitudes and behaviours towards using organizational resources. Health information technologies were proven to improve health care quality. No

previous studies examined the relationship between structural empowerment and attitudes towards computer use.

Methods

A cross-sectional correlational design was used. Self-reported questionnaires were completed by 200 Jordanian nurses. Descriptive statistics, Pearson r correlation and linear regression analyses were used to address the research aim.

Results

Structural empowerment was significantly and positively associated with attitudes towards computer use. Dimensions in structural empowerment that predict positive attitude towards computer use were access to opportunity ($\beta = 0.382, p = .000$), formal power ($\beta = -0.252, p = .006$) and informal power ($\beta = 0.176, p = .046$).

Conclusions

Strengthening access to empowerment structures is essential to increase nurses' work efficiency. Improving empowering structures can be achieved by enhancing opportunities to increase professional knowledge and skills towards computerization.

Implications for Nursing Management

Nurse managers should promote work conditions that motivate nurses towards positive recognition of innovation through efficient collaborations with the information technology teams.

DETAILS

Subject:	Positive thought; Empowerment; Professional knowledge; Nurse managers; Attitudes; Work environment; Computer use; Innovations; Organizational structure; Power; Nurses; Information technology; Teams; Quality of care; Computerization; Health information; Access; Nursing administration; Behavior
Identifier / keyword:	computer use; information technology; Jordan; nursing; structural empowerment
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Role and application of self-awareness in managerial practice: A qualitative study of nurse managers

Younas, Ahtisham ¹

; Subia Parveen Rasheed ² ; Mehmood, Faisal ³

; Inayat, Shahzad ⁴

¹ Swat College of Nursing, Mingora, Pakistan ² Shifa College of Nursing, Islamabad, Pakistan ³ Nursing Education Services, Shifa International Hospital, Islamabad, Pakistan ⁴ College of Nursing, Al Nafees Medical College and Hospital, Isra University, Islamabad, Pakistan

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aims

To explore the nurse managers' perspectives about the role and application of self-awareness in managerial practice.

Background

Effectively accomplishing complex roles and maintaining a healthy work environment requires nurse managers to be resilient and sustain positive relationships with nurses and interdisciplinary teams. Self-awareness is an essential attribute for building relationships and creating a healthier work environment.

Methods

A descriptive qualitative design was used. We conducted semi-structured interviews with a purposive sample of ten managers working in two tertiary hospitals. Reflexive thematic analysis was used for data analysis.

Results

Four themes were generated: "maximizing potential for overseeing complex management issues; becoming a conscientious and thoughtful manager; using experiential learning for nurturing managerial capabilities; and utilizing self and others' appraisal for discerning practical managerial approaches".

Conclusions

Implementing self-awareness in complex situations is beneficial for nurse managers. It allows them to overcome negative emotions and factors and incorporate ethical and moral reasoning, thereby preventing them from ineffectual management.

Implications for Nursing Management

Nurse managers should focus on assessing their temperaments and managerial abilities in each complex situation. They should use experiential learning from past experiences for discerning effective actions for managing complex situations.

DETAILS

Subject:	Hospitals; Work environment; Experiential learning; Nurse managers; Negative emotions; Emotions; Nurses; Complex; Interdisciplinary aspects; Capabilities; Past experiences; Moral judgment; Nursing administration; Self awareness; Qualitative research
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Reaching a tipping point: Perioperative nurse managers' narratives about reasons for leaving their employment—A qualitative study

Arakelian, Erebouni ¹
; Rudolfsson, Gudrun ²

¹ Department of Surgical Sciences, Uppsala University Hospital, Uppsala University, Uppsala, Sweden
² Faculty of Nursing and Health Sciences, Nord University, Bodø, Norway; Division of Nursing, Department of Health Sciences, University West, Trollhättan, Sweden

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

To describe reasons why nurse managers in perioperative settings decide to leave their employment.

Background

Current literature has shown that perioperative nurse managers' reasons to leave their positions are formed through an interaction of factors.

Methods

Individual in-depth interviews were performed with seven nurse managers, all women, in perioperative settings in Sweden. Data were analysed using systematic text condensation.

Results

Five key themes were identified: (a) to end where I started, as a frontline nurse; (b) I wanted to develop further to the next level in my career; (c) I ran out of ideas; (d) I lost trust in my head manager and did not believe in the new organisation and (e) I had had enough of being offended by my superior manager and my employees.

Conclusion

Nurse managers experienced feeling forced into a decision to leave because of being offended by their superiors or their employees. Furthermore, the findings indicate that nurse managers should be offered support from superior managers and the organisation together with time for discussions.

Implications in Nursing Management

The most essential element should be the influence of caritative leadership and the obvious expectation of being treated with dignity, respect and appreciation.

DETAILS

Subject:	Appreciation; Nurse managers; Managers; Employment; Leadership; Women; Nursing administration; Work environment; Job satisfaction; Perioperative care; Qualitative research
Business indexing term:	Subject: Work environment Job satisfaction
Identifier / keyword:	dignity; leaving work; nurse manager; qualitative analysis
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Including administrators in curricular redesign: How the academic–practice relationship can bridge the practice–theory gap

Kalogirou, Maya R ¹

; Chauvet, Christine ²; Yonge, Olive ¹ ¹ University of Alberta, Edmonton, AB, Canada ² University of Alberta, Edmonton, AB, Canada; Royal Alexandra Hospital, Edmonton, AB, Canada

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

Health care administrators provided information through semi-structured interviews as to how one faculty of nursing (FoN) was preparing students for practice.

Background

There is a long-standing disconnect between the nursing education and the clinical arena known as the theory–practice gap. The FoN wanted to redevelop their curriculum to better prepare students for practice and bridge the gap.

Method

Using developmental evaluation, 36 administrators were interviewed and asked about their expectations of newly graduated nurses, the FoN curriculum, and changes to be made.

Results

Four themes were identified: entry to programme; curricular content, delivery and structure; clinical recommendations; and stronger relationships.

Conclusion

Strong academic–practice partnerships are still needed. The current lack of communication and partnership has compromised students' quality of education and their transition into the workforce.

Implications for Nursing Management

Leaders in both the education and practice settings can better prepare newly graduated nurses and bridge the theory–practice gap by co-creating a joint committee and creating more touchpoints with one another. A joint committee can develop appropriate entry-to-programme guidelines, discuss relevant trends in practice and shape the curriculum. Clinical experiences for students may also act as extra touchpoints whereby the two groups can discuss clinical mentorship needs and build stronger academic–practice relationships.

DETAILS

Subject: Students; Health care; Curricula; Workforce; Administrators; Nursing; Partnerships; Clinical nursing; Clinical experience; Medical education; Nursing administration; Professional practice; Clinical practice guidelines

Identifier / keyword: administrators; leadership; new graduate nurse; nursing; transition

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Impact of clinical leadership in advanced practice roles on outcomes in health care: A scoping review

Duignan, Martin ¹

; Drennan, Jonathan ²

; McCarthy, Vera J C ²

¹ School of Nursing and Midwifery, University College Cork, Cork, Ireland; Emergency Department, Our Lady's Hospital, Navan, Ireland ² School of Nursing and Midwifery, University College Cork, Cork, Ireland

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

To undertake a scoping review of the literature exploring the impact of clinical leadership in advanced practice roles in relation to patient, staff and organisational outcomes.

Background

An increasing number of publications as well as job specifications have identified clinical leadership as a cornerstone of advanced practice roles. However, it is unclear whether embedding clinical leadership in such roles has led to improvements in patient, staff or organisational outcomes. Therefore, identifying the extent to which clinical leadership in advanced practice roles relates to patient, staff and organisational outcomes is needed.

Method

A scoping review examining the relationship between clinical leadership in advanced practice roles and health care outcomes. Searching in SCOPUS, PubMed, Psycinfo and CINAHL Plus and Web of Science identified 765 potential articles. Independent selection, data extraction tabulation of findings and analysis were completed.

Results

Seven studies were identified that met the inclusion criteria. Only studies reporting on nurses in advanced practice roles were included; no studies were identified that reported on the advanced practice roles of allied health professionals. The results indicate that there is no objective evidence of the impact of advanced practitioners' clinical leadership on patient, staff or organisational outcomes.

Conclusion

There is a paucity of objective evidence to identify the extent to which clinical leadership is enacted in advanced practice roles. The review indicates a need for closer alignment of AP clinical leadership policy aspirations and formal operational leadership opportunities for APs.

Implications for Nursing Management

Nurse managers have a key role in supporting and equipping APs with leadership competencies and opportunities to enable both capability and capacity building of such roles. Nurse managers should involve APs in health care leadership at an organisational level to maximize their contribution to health, quality practice environments and health care reform. Additionally, a distinct involvement in staff development, change, operational strategic decisions and policy development should be part of the AP role, which is facilitated by management.

DETAILS

Subject:	Clinical outcomes; Nurse managers; Health care policy; Allied health professionals; Staff development; Health status; Policy making; Medical personnel; Quality of care; Capacity building approach; Capabilities; Advanced practice nurses; Clinical leadership; Literature reviews; Roles; Scope of practice; Nursing administration; Clinical medicine
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Publication history :	
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Workaholism, engagement and family interaction: Comparative study in Portuguese and Spanish nurses

Elisabete Maria das Neves Borges ¹
; Carlos Alberto da Cruz Sequeira ¹
; Leite Queirós, Cristina Maria ²
; Maria Pilar Mosteiro-Díaz ³

¹ Escola Superior de Enfermagem do Porto, CINTESIS, Porto, Portugal ² Faculdade de Psicologia e de Ciências da Educação, Universidade do Porto, Porto, Portugal ³ Facultad de Medicina y Ciencias de la Salud, Universidad de Oviedo, Oviedo, Espanha

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

To identify and compare workaholism, engagement and family interaction levels among Portuguese and Spanish nurses.

Background

The contribution of nursing management and leadership to workers' health and well-being is cardinal to ensure a healthy work environment. However, factors such as workaholism, engagement and family interaction can strongly influence nurses' performance, well-being and safety.

Method

A multicentre, comparative and cross-sectional study using 333 Portuguese (54.1%) and Spanish (45.9%) nurses working in hospitals.

Results

Portuguese nurses showed higher levels for workaholism, negative work–family interaction and negative family–work interaction, while Spanish nurses presented higher levels of engagement, positive work–family interaction and positive family–work interaction. Gender, age, job experience time, academic training, working schedule and type of employment contract influenced workaholism, engagement and work–family interaction among nurses from both countries.

Conclusion

During their professional practice, nurses perceived their stress differently according to each country, with Portuguese nurses presenting worst psychological conditions than Spanish nurses, namely higher workaholism,

negative work–family interactions and lower engagement.

Implications for Nursing Management

Workaholism, engagement and work–family interaction are important areas in which nursing managers must invest to better respond to the new challenges of work contexts.

DETAILS

Subject:	Comparative studies; Workaholism; Hospitals; Nursing; Employment; Family relations; Work environment; Nurses; Leadership; Occupational stress; Multicentre; Work life balance; Occupational psychology; Nursing administration
Business indexing term:	Subject: Work life balance Occupational psychology
Identifier / keyword:	comparative study; family interaction; nursing management; work; work engagement; workaholism
Publication title:	Journal of Nursing Management; Oxford
Volume:	29
Issue:	4
Pages:	731-740
Publication year:	2021
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Country of publication:	United Kingdom, Oxford
Publication subject:	Medical Sciences--Nurses And Nursing, Business And Economics--Management
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Influence of nurse managers' toxic leadership behaviours on nurse-reported adverse events and quality of care

Labrague, Leodoro J ¹

¹ Phi Gamma Chapter, College of Nursing, Sultan Qaboos University, Muscat, Oman

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

To assess the impact of toxic leadership behaviours among nurse managers on nurse-reported adverse events and quality of care.

Background

Toxic leadership, a form of ineffective leadership, is increasingly becoming rampant in the field of nursing and has been strongly linked to poor nurse job outcomes including job dissatisfaction, higher stress levels, and increased turnover intention. To date, no studies have been conducted to examine how this type of leadership behaviours affects patient outcomes and care quality.

Methods

A multicentre, cross-sectional study. This study involved a sample of 1,053 registered nurses working in 20 hospitals in the Philippines. Three standardized scales were deployed, including the Toxic Leadership Behaviors of Nurse Managers Scale, the Adverse Patient Events Scale and the single-item quality-of-care-measure.

Results

Overall, nurses (96.2%) appraised the quality of care of their respective units as 'good to excellent' and cited complaints from patients and their families as the most commonly reported adverse events. Toxic leadership

behaviours in nurse managers were strongly associated with increased nurse-reported adverse events including reports of complaints ($\beta = .619$; $p < .001$) and verbal mistreatment from patients and their families ($\beta = .407$; $p < .001$), patient falls ($\beta = .834$; $p < .001$), health care-associated infections ($\beta = .629$; $p < .001$) and errors in administering medication ($\beta = .708$; $p < .001$) and with decreased quality of care ($\beta = -.216$; $p < .001$).

Conclusion

Nurses who experience working under a nurse manager exhibiting toxic behaviours reported an increased frequency of nurse-reported adverse events and poorer quality of care in the unit.

Implications for Nursing Management

Organizational measure to reduce the occurrence of adverse events and enhance the quality of care provided in medical units may include intervention to develop positive leadership practices among nurse managers.

DETAILS

Subject:	Hospitals; Clinical outcomes; Health care; Drugs; Nurse managers; Managers; Patients; Patient satisfaction; Occupational stress; Complaints; Multicentre; Adverse; Critical incidents; Nursing; Quality of care; Nurses; Leadership; Work environment; Nursing administration; Medical errors; Professional relationships; Job performance
Business indexing term:	Subject: Work environment Professional relationships
Identifier / keyword:	adverse events; clinical practice; nurse managers; nursing; quality of care; toxic leadership
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Pages:	855-863
Publication year:	2021
Publication date:	May 2021
Section:	ORIGINAL ARTICLES
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Validity and reliability of the Turkish version of the General Work Stress Scale

Teleş, Mesut ¹

¹ Department of Health Management, Niğde Zübeyde Hanım School of Health, Niğde Ömer Halisdemir University, Niğde, Turkey

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

To test the validity and reliability of the Turkish version of the General Work Stress Scale.

Background

Nursing is one of the most stressful professions. The primary measure that should be taken to ensure that nurses can cope with stress is determining their stress levels.

Method

The General Work Stress Scale was translated into Turkish via back-translation. Its reliability and validity were analysed via item analyses, content and construct validities, exploratory and confirmatory factor analyses,

Cronbach's alpha and Spearman–Brown reliability coefficients. Average and standard deviations of the scale items and the overall scale were calculated.

Results

The study was conducted with 276 nurses. The Cronbach's alpha of the whole scale was 0.91, and the Spearman–Brown reliability coefficient was 0.89. According to the resulting one-dimensional structure, the factor loadings of the scale items were between 0.67 and 0.82, and this structure alone explained 58.72% of the total variance. The confirmatory factor analysis revealed perfect and good-fit indices ($\chi^2/df = 1.96$; RMSA = 0.06; CFI = 0.99; IFI = 0.99; GFI = 0.97; RMR = 0.04; NFI = 0.99). The mean total score was 2.55 ± 0.87 , while the items' means ranged from 2.10 ± 1.15 to 3.33 ± 1.13 .

Conclusion

The Turkish version of the General Work Stress Scale is a valid and reliable tool for assessing nurses' general work stress. Nurses largely feel that their work makes them so stressed that they wish they had a different job. The items with high means suggest opportunities for improvement.

Implications for practice

The nurses or nursing services and units with low or high stress levels can be determined with the General Work Stress Scale. If necessary, measures aimed at eliminating or reducing the negative effects of those nurses or nursing services and units with high stress levels can be taken in a timely manner.

DETAILS

Subject:	Occupational stress; Validity; Stress; Work; Coefficient alpha; Stress management; Confirmatory factor analysis; Nursing; Reliability; Nurses; Translation; Nursing administration; Professional practice
Business indexing term:	Subject: Occupational stress
Identifier / keyword:	General Work Stress Scale; nurses; reliability; Turkish version; validity
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Issue:	4
Pages:	710-720
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Publication date:	May 2021
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ProQuest document ID:	2527391087
Document URL:	https://www.proquest.com/scholarly-journals/validity-reliability-turkish-version-general-work/docview/2527391087/se-2?accountid=211160
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Second victim experiences of nurses in obstetrics and gynaecology: A Second Victim Experience and Support Tool Survey

Finney, Robyn E ¹ ; Torbenson, Vanessa E ² ; Riggan, Kirsten A ³ ; Weaver, Amy L ⁴ ; Long, Margaret E ² ; Allyse, Megan A ⁵

; Enid Y Rivera-Chiauszi ^{2 1} Department of Anesthesiology and Perioperative Medicine, Mayo Clinic Rochester, Rochester, MN, USA ² Department of Obstetrics and Gynecology, Mayo Clinic Rochester, Rochester, MN, USA ³ Biomedical Ethics Research Program, Mayo Clinic Rochester, Rochester, MN, USA ⁴ Division of Biomedical Statistics and Informatics, Mayo Clinic Rochester, Rochester, MN, USA ⁵ Department of Obstetrics and Gynecology, Mayo Clinic Rochester, Rochester, MN, USA; Biomedical Ethics Research Program, Mayo Clinic Rochester, Rochester, MN, USA

ABSTRACT (ENGLISH)

Aim (s)

To investigate second victim experiences and supportive resources for nurses in obstetrics and gynaecology.

Background

Nurses are at risk of developing second victim experiences after exposure to work related events.

Methods

Nurses at a single institution were invited to participate in an anonymous survey that included the validated Second Victim Experience and Support Tool to assess symptoms related to second victim experiences and current and desired supportive resources.

Results

Of 310 nurses, 115 (37.1%) completed the survey; 74.8% had not heard of the term 'second victim'. Overall, 47.8% reported feeling like a second victim during their career and 19.1% over the previous 12 months. As a result of a second victim experience, 18.4% experienced psychological distress, 14.3% turnover intentions, 13.0% decreased professional self-efficacy, and 12.2% felt that institutional support was poor. Both clinical and non-clinical events were reported as possible triggers for second victim experiences. Peer support was the most desired form of support as reported by 95.5%.

Conclusion(s)

Nurses in obstetrics and gynaecology face clinical and non-clinical situations that lead to potential second victim experiences.

Implications for Nursing Management

The second victim experiences of nurses should be acknowledged, and resources should be implemented to navigate it. Educational opportunities and peer supportive interventions specific to second victim experiences should be encouraged.

DETAILS

Subject:	Gynecology; Nurses; Efficacy; Institutional aspects; Obstetrics; Polls & surveys; Clinical nursing; Psychological distress; Nursing administration
Identifier / keyword:	adverse patient events; employee turnover; OBGYN; second victim phenomenon; trained peer support
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Volume:	29
Issue:	4
Pages:	642-652
Publication year:	2021
Publication date:	May 2021
Section:	ORIGINAL ARTICLES

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Longitudinal evaluation of a programme for safety culture change in a mental health service

Dickens, Geoffrey L ¹
; Salamonson, Yenna ²
; Johnson, Alisha ¹ ; Ramjan, Lucie ²
; Steel, Kelly ¹ ; Taylor, Michelle ³ ; Everett, Bronwyn ²

¹ Centre for Applied Nursing Research, Ingham Institute for Applied Medical Research, South Western Sydney Local Health District and Western Sydney University School of Nursing and Midwifery, Liverpool, NSW, Australia ² School of Nursing and Midwifery, Western Sydney University, Penrith, NSW, Australia ³ Taylor Made Coaching Solutions, Sydney, NSW, Australia

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

To evaluate whether a two-part culture improvement programme aimed at nurses in clinical and managerial positions in an inpatient mental health service was associated with culture change, and safety-related behaviour and knowledge improvements.

Background

Due to serious failings in the delivery of physiological care to mentally disordered inpatients, it was deemed important that interventions be applied to improve service culture.

Methods

A pre-test and post-test study was conducted to evaluate change associated with a mandated intervention aimed at culture change. Nurses in clinical and managerial positions at all levels attended relevant sessions. All were invited to participate in evaluation measures.

Results

$N = 241$ nurses participated in the evaluation ($n = 137$ and $n = 104$, pre-test and post-test, respectively). There was a small but significant change in organisational culture indicating greater *adhocracy* and less *clan* culture in the second survey period and a small decline in reported safety behaviour. Measures of safety culture, knowledge and emergency-related educational satisfaction were unchanged.

Conclusion

Only a small change in measured culture was associated with the programme.

Implications for Nursing Management

Attempts to evaluate culture change need to align anticipated outcomes with appropriate outcome measures. A mandated programme of culture change had little tangible effect on the outcomes measured.

DETAILS

Subject:	Culture; Intervention; Nurses; Mental health; Clinical nursing; Health services; Inpatient care; Safety behaviour; Nursing administration; Mental health care; Behavior change
Identifier / keyword:	culture; mental health; nursing; organisational behaviour; patient safety; physiological deterioration
Publication title:	Journal of Nursing Management; Oxford
Volume:	29
Issue:	4
Pages:	690-698

Publication year:	2021
Publication date:	May 2021
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Nurses' perception regarding patient safety climate and quality of health care in general hospitals in Japan

Nakano, Youko ¹ ; Tanioka, Tetsuya ² ; Yokotani, Tomoya ³ ; Ito, Hirokazu ² ; Miyagawa, Misao ⁴ ; Yasuhara, Yuko ² ; Betriana, Feni ⁵ ; Locsin, Rozzano ² ¹ Kagawa University Hospital, Kagawa, Japan; Graduate School of Health Sciences, Tokushima University, Tokushima, Japan ² Department of Nursing, Institute of Biomedical Sciences, Graduate School, Tokushima University, Tokushima, Japan ³ Tokushima University Hospital, Tokushima, Japan; Graduate School of Health Sciences, Tokushima University, Tokushima, Japan ⁴ Department of Nursing, Faculty of Health and Welfare, Tokushima Bunri University, Tokushima, Japan ⁵ Graduate School of Health Sciences, Tokushima University, Tokushima, Japan

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

To clarify perceptions of nurses towards patient safety climate and quality of health care in Japan.

Background

Nurses' perceptions of patient safety climate and quality of health care services are not well-known.

Method

The survey was conducted at general hospitals with 200 beds or more using the Patient Safety Climate Scale and the Modified multiple-item scale for consumer perceptions of health care service quality.

Results

Significant positive correlations were found among nurses' perception towards patient safety and health care service quality. The experience of nurses as members of the committee on patient safety and their employment position did not show any significant difference in the perception towards patient safety and health care services quality. Perceptions of health care service quality were lower among those with 6– to 10-year experience than with over 21 years.

Conclusion

In the perception of nurses and nurse managers' continuous improvement, perceptions towards patient safety were related to reliability, assurance, responsiveness and empathy in health care service quality.

Implications for Nursing Management

Generalist nurses with 21 years or more experiences in multiple departments showed high perception towards health care service quality. Experienced nurses' perceptions of activities to improve patient safety and quality of health care services are important.

DETAILS

Subject: Patient safety; Organizational climate; Hospitals; Safety; Perceptions; Responsiveness; Nurse managers; Quality of service; Patients; Health care; Health status; Nurses; Reliability; Quality of care; Empathy; Employment; Nursing administration

Business indexing term:	Subject: Quality of service
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Pages:	749-758
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Testing the structural equation model of the influence of nurses' spiritual well-being and caring behaviour on their provision of spiritual care to patients

Biag, Al D ¹

; Angeles, Leonardo S, Jr ¹ ¹ School of Nursing and Allied Medical Sciences, Holy Angel University, Angeles City, Philippines

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

To test a proposed model that determined the effects of nurses' spiritual well-being and caring behaviour on their provision of spiritual care to patients.

Background

The spiritual dimension of caring gained attention in the recent past as it is recognized to bring positive patient outcomes.

Methods

A cross-sectional, descriptive, correlational design was used in the study. Data were collected from 300 registered nurses working in the hospitals in Pampanga, Philippines. Partial least square structural equation modelling was used to test the model.

Results

Nurses had a high level of ideal and lived perspectives of spiritual well-being. They perceived their caring behaviour to be *always* manifested and *occasionally* engaged in spiritual activities that supported patient spirituality.

Conclusions

The structural equation model provided a feasible model that was either caring behaviour-laden spiritual well-being or spiritual well-being-infused caring behaviour.

Implications for Nursing Management

Nursing administrators may develop guidelines for practice within their institutions that are considerate of the proposed model. They may focus on caring behaviour-laden spiritual well-being model of nursing practice or spiritual well-being-infused caring behaviour model of nursing practice.

DETAILS

Subject:	Hospitals; Clinical outcomes; Spirituality; Nursing; Caregiving; Behavior; Modelling; Nurses; Nursing care; Holistic nursing; Nurse patient relationships; Nursing administration; Structural equation modeling; Professional practice
Identifier / keyword:	caring behaviour; partial least squares structural equation modelling; spiritual care; spiritual well-being
Publication title:	Journal of Nursing Management; Oxford
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Pages:	822-833
Publication year:	2021
Publication date:	May 2021
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Turnover intention linking compulsory citizenship behaviours to social loafing in nurses: A mediation analysis

Yildiz, Bora ¹

; Elibol, Esengül ²

¹ Department of Management, Faculty of Economics, Istanbul University, Istanbul, Turkey ²

Department of Medical Services and Techniques, Vocational School of Health Services, Istanbul Bilgi University, Istanbul, Turkey

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aims

To propose a theoretical model of social loafing behaviours and to examine the effects of compulsory citizenship behaviours and turnover intention on nurses' social loafing behaviour.

Method

This cross-sectional study included 264 nurses working in public hospitals in Istanbul, Turkey. The data were gathered by using a snowball sampling method and analysed using descriptive statistical analyses, *F* test, *t* test, Pearson's correlation analysis and multiple and hierarchical linear regression analyses.

Results

Results indicated that compulsory citizenship behaviours were positively associated with turnover intention and social loafing. Turnover intention fully mediated the relationship between compulsory citizenship behaviours and social loafing.

Conclusion

Nurses who exhibit compulsory citizenship behaviours have developed turnover intentions to conserve their well-being, which led to social loafing as a resource recovery tactic.

Implications for Nursing Management

Training should be provided for managers and nurses to raise awareness about the possible negative effects of compulsory citizenship behaviours. To manage social loafing and turnover intention, effective and proactive solution-

oriented strategies should be implemented.

DETAILS

Subject:	Snowball sampling; Hospitals; Nurse managers; Professional training; Citizenship; Management development programmes; Resource recovery; Nurses; Compulsory; Social loafing; Behavior; Nursing administration; Employee turnover
Business indexing term:	Subject: Employee turnover
Identifier / keyword:	compulsory citizenship behaviours; nurses; nursing; social loafing; turnover intention
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Issue:	4
Pages:	653-663
Publication year:	2021
Publication date:	May 2021
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Leveraging momentum of 2020—Reflections from an International Conference

Catherine Clune Mulvaney ¹ ; Carney, Marie ¹

; Kearns, Thomas ¹ ¹ Faculty of Nursing and Midwifery, RCSI University of Medicine and Health Sciences, Dublin, Ireland

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Purpose

This Commentary illustrates how innovative clinical and research initiatives highlight the ingenuity and creativity of nursing and midwifery professions thus leveraging the momentum of 2020 that commenced with the Year of the Nurse and Midwife and the Nursing Now Challenge.

Background

Speakers demonstrated through vision, creativity and policy generation how the world is now in a different place due to COVID-19 and how the global crisis will change and shape the future of health care delivery.

Evaluation

Speakers were invited because of their reputation as international leaders in global health and population. Participants evaluated content and its relevance to research, education and practice in group discussions.

Key Issues

The current global crisis determines that the capabilities and capacity of nurses and midwives will become more crucial than ever to the delivery of universal health coverage (UHC) and population health by 2030.

Conclusions

Global leaders and policymakers must seek the knowledge and skills they need to support their work during a global crisis.

Implications for Nursing Management

Achieving population health and equitable access to health care is dependent on an adequate health workforce.

DETAILS

Subject:	Health care; Workforce; Midwifery; COVID-19; Midwives; Clinical research; Policy making; Capabilities; Nursing; Creativity; Clinical nursing; Crises; Innovations; Health care delivery; Pandemics; Nursing administration; Health care access; Global health
Identifier / keyword:	Global Health policy; midwifery; nursing; practice
Publication title:	Journal of Nursing Management; Oxford
Volume:	29
Issue:	4
Pages:	609-612
Publication year:	2021
Publication date:	May 2021
Section:	COMMENTARY
Publisher:	Hindawi Limited
Place of publication:	Oxford
Country of publication:	United Kingdom, Oxford
Publication subject:	Medical Sciences--Nurses And Nursing, Business And Economics--Management
ISSN:	09660429
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Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article
Publication history :	
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ProQuest document ID: 2527390872

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Database: Publicly Available Content Database

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Critical care nurses' communication challenges during handovers: A systematic review and qualitative meta-synthesis

Jung-Won Ahn ¹

; Hye-Young Jang ²

; Youn-Jung Son ¹

¹ Red Cross College of Nursing, Chung-Ang University, Seoul, Korea ² College of Nursing, Hanyang University, Seoul, Korea

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aims

To review and synthesize qualitative studies to gain a deeper understanding of critical care nurses' inter-departmental and shift-to-shift handover challenges.

Background

Good-quality nurse-to-nurse handover promotes patient safety, while poor handover has been associated with medical errors. However, systematic reviews of qualitative approaches for better understanding the handover experiences of critical care nurses are lacking.

Evaluation

Systematic review methods incorporating meta-synthesis were used. A comprehensive search of seven databases was conducted. Two independent reviewers performed data extraction and evaluated ten studies using the Critical Appraisal Screening Program. Findings were analysed and synthesized using thematic analysis. The transactional model of communication was used to guide the analysis.

Key issues

A total of 10 qualitative studies were included. Seven major handover themes were identified: (a) expectations of perfection, (b) need for partnership, (c) unilateral communication, (d) obstacles to information acquisition, (e) lack of pertinent patient information, (f) need for a structured handover and (g) interruptions/distractions.

Conclusions

Handovers should be considered an essential part of patient-centred care for ensuring continuity of care.

Implications for Nursing Management

Poor communication during a handover could increase the nurse's burden or stress and adversely affect patient care. Therefore, training should be provided on explicit handover communication.

DETAILS

Subject:	Patient safety; Patient information; Databases; Systematic review; Perfectionism; Communication; Patients; Nurses; Critical incidents; Handover; Critical care; Interruptions; Nursing administration; Medical screening; Patient-centered care; Continuity of care
Identifier / keyword:	communication; intensive care units; nurses; patient handoff; systematic review
Publication title:	Journal of Nursing Management; Oxford
Volume:	29
Issue:	4
Pages:	623-634
Publication year:	2021
Publication date:	May 2021
Section:	REVIEW ARTICLES
Publisher:	Hindawi Limited
Place of publication:	Oxford
Country of publication:	United Kingdom, Oxford
Publication subject:	Medical Sciences--Nurses And Nursing, Business And Economics--Management
ISSN:	09660429
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Publication history :	
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Milestone dates:	2020-10-30 (Revised); 2020-09-02 (Received); 2020-10-31 (Accepted)
Publication history :	

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Document URL:	https://www.proquest.com/scholarly-journals/critical-care-nurses-communication-challenges/docview/2527390818/se-2?accountid=211160
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Changes in nurse job outcomes after 4 years of a Best Practice Spotlight Organization[®] programme implementation in the Spanish National Health Context

Maria Ruzafa-Martinez¹

; Solanger Hernández-Méndez²

; Jessica Garcia-Gonzalez³

; Cesar Leal-Costa¹

; Miguel Ángel Martínez-González²; Antonio Jesús Ramos-Morcillo¹

¹ Nursing Department, Faculty of Nursing, University of Murcia, Murcia, Spain ² Hospital Rafael Méndez, III Healthcare Area, Murcian Health Service, Murcia, Spain ³ Nursing Department, Faculty of Health and Social Sciences, University of Murcia, Murcia, Spain

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

To evaluate the changes produced after the application of the Best Practice Spotlight Organization[®] (BPSO[®]) Program on the attitude towards the evidence-based practice, the nurses' perception of the organisational climate and nurse outcomes in a health area of the Spanish National Health System.

Background

There is limited research that associates strategies of evidence-based practice implementation with changes on the work environment and nurse outcomes.

Methods

Cross-sectional study that compared data on the nurses' perception of the work environment. Five guidelines were implemented between 2012 and 2015 in a health area. Data were collected in 2012 and 2016/2017, using a

questionnaire consisting of five previously validated tools. χ^2 , *t* test, ANOVA and multivariate analysis were carried out.

Results

A total of 451 nurses participated. Compared with the baseline evaluation in 2012, several outcomes changed significantly ($p < .001$), nurses were younger and were more satisfied with "salary", "annual leaves" and "sick leave". The rest of the nurse outcomes were not modified.

Conclusions

Nurses' perception of the work environment is favourable, although the application of the BPSO[®] Program has not produced any major changes.

Implications for Nursing Management

Measures are suggested that are oriented towards the planning of staffing and the increase in the participation of the nursing staff in programmes of implementation of guidelines.

DETAILS

Subject:	Health status; Sick leave; Nursing; Work environment; Best practice; Multivariate analysis; Staffing; Nurses; Health services; Implementation; Quality of care; Professional development; Evidence-based nursing; Nursing administration; Clinical practice guidelines
Business indexing term:	Subject: Work environment Professional development
Location:	Spain
Identifier / keyword:	BPSO; clinical practice guideline; job satisfaction; organisational climate; patient safety; quality of care; Evidence-based Practice
Publication title:	Journal of Nursing Management; Oxford
Volume:	29
Issue:	4
Pages:	699-709
Publication year:	2021
Publication date:	May 2021
Section:	ORIGINAL ARTICLES
Publisher:	Hindawi Limited
Place of publication:	Oxford
Country of publication:	United Kingdom, Oxford
Publication subject:	Medical Sciences--Nurses And Nursing, Business And Economics--Management
ISSN:	09660429

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Document type:	Journal Article
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ProQuest document ID:	2527390687
Document URL:	https://www.proquest.com/scholarly-journals/changes-nurse-job-outcomes-after-4-xa0-years-best/docview/2527390687/se-2?accountid=211160
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Document 21 of 55

Relationship between eHealth literacy and psychological status during COVID-19 pandemic: A survey of Chinese residents

Bing Xiang Yang ¹

; Lin, Xia ²; Huang, Run ²; Chen, Pan ²; Luo, Dan ²; Liu, Qian ²; Li Jun Kang ³; Zhi-jiang Zhang ⁴; Liu, Zhongchun ³; Yu, Sihong ²; Li, Xiaofen ³; Xiao Qin Wang ^{2 1} Faculty of School of Health Sciences, Wuhan University, Wuhan, China; Department of Psychiatry, Renmin Hospital of Wuhan University, Wuhan, China; Population and Health Research Center, Wuhan University, Wuhan, China ² Faculty of School of Health Sciences, Wuhan University, Wuhan, China ³ Department of Psychiatry, Renmin Hospital of Wuhan University, Wuhan, China ⁴ Department of Preventive Medicine, School of Health Sciences, Wuhan University, Wuhan, China

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aims

To investigate the eHealth literacy and the psychological status of Chinese residents during the COVID-19 pandemic and explore their interrelationship.

Background

The COVID-19 outbreak has placed intense psychological pressure on community residents. Their psychological status may be affected by eHealth literacy due to home isolation during this rampant pandemic.

Methods

This is a Web-based cross-sectional survey conducted on the JD Health platform, which resulted in 15,000 respondents having participated in this survey. The eHealth Literacy Questionnaire (EHLQ), Patient Health Questionnaire-9 (PHQ-9), Insomnia Severity Index (ISI) and Impact of Event Scale-Revised (IES-R) were used. The Pearson correlation was used to analyse the relationship between eHealth literacy and depression, insomnia and post-traumatic stress disorder.

Results

The score of eHealth literacy was 48.88 ± 8.46 , and 11.4%, 6.8% and 20.1% of respondents experienced moderate to severe depression, insomnia and post-traumatic stress disorder. eHealth literacy negatively correlated with depression ($r = -0.331$), insomnia ($r = -0.366$) and post-traumatic stress disorder ($r = -0.320$).

Conclusion

eHealth literacy is closely related to psychological status. Improving eHealth literacy may contribute to maintaining good psychological well-being.

Implications for Nursing Management

It is necessary to strengthen the education of primary health care providers to enhance their ability to help community residents effectively use eHealth information.

DETAILS

Subject:	Insomnia; Literacy; Health care; Mental depression; COVID-19; Pandemics; Questionnaires; Traumatic stress; Medical personnel; Polls & surveys; Primary care; Psychological status; Post traumatic stress disorder; Nursing administration
Identifier / keyword:	Chinese; COVID-19; eHealth literacy; psychological status
Publication title:	Journal of Nursing Management; Oxford
Volume:	29
Issue:	4
Pages:	805-812
Publication year:	2021
Publication date:	May 2021
Section:	ORIGINAL ARTICLES
Publisher:	Hindawi Limited

Place of publication:	Oxford
Country of publication:	United Kingdom, Oxford
Publication subject:	Medical Sciences--Nurses And Nursing, Business And Economics--Management
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Language of publication:	English
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Publication history :	
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DOI:	https://doi.org/10.1111/jonm.13221
ProQuest document ID:	2527390507
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Don't forget the leadership in advanced practice

Lee, Geraldine A ¹

¹ Florence Nightingale Faculty of Nursing, Midwifery & Palliative Care, King's College London, London, UK

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Although the advanced practice role primarily focuses on delivering the clinical aspects of patient care, the other pillars of advanced practice (research, education and leadership/management) should not be overlooked as they are key to the success of the advanced practice role. Interestingly, the International Council of Nursing definition of nurse practitioners includes the importance of certain characteristics, 'expert knowledge base, complex decision-making skills and clinical competencies', but does not include the other pillars of advanced practice (International Council of Nurses, 2020).

DETAILS

Subject:	Leadership; Nursing administration; Clinical competence; Nursing education; Professional development; Advanced practice nurses; Medical research
Business indexing term:	Subject: Professional development
Publication title:	Journal of Nursing Management; Oxford
Volume:	29
Issue:	4
Pages:	607-608
Publication year:	2021
Publication date:	May 2021
Section:	EDITORIAL
Publisher:	Hindawi Limited
Place of publication:	Oxford
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Publication subject:	Medical Sciences--Nurses And Nursing, Business And Economics--Management
ISSN:	09660429
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Qualitative perspectives of nurse managers on mixed-gender accommodation in a regional hospital in Australia

Elsasser, Janine ¹ ; Cope, Vicki ¹
; Murray, Melanie ¹

¹ Discipline of Nursing, College of Science, Health, Engineering & Education (SHEE), Murdoch University, Murdoch, WA, Australia

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aims

To explore and analyse the current bed management processes and understand the perspectives of nurse managers on mixed-gender accommodation in a regional hospital in Australia.

Background

Mixed-gender accommodation was introduced to help manage the increasing demand for hospital beds. Yet, some health services identify same-gender accommodation better aligns with patient-centredness.

Method

This qualitative research was conducted at a public hospital in regional Australia and focused on the experience in the general wards. Eight nurse managers were selected using purposeful sampling. Data were collected through face-to-face semi-structured interviews and thematically analysed.

Results

Three main themes were identified: current admission processes—managing admissions, bed allocation considerations, patient involvement and managing mixed-gender rooms; impacts on patients—participant views, patient experience and bathrooms; and barriers and facilitators—capacity, infrastructure, safety and risk, bed swapping and organisational factors.

Conclusions

The study demonstrates a lack of structure and patient-centredness with mixed-gender allocation processes. Local organisational guidelines are suggested to support improvement in patient-centred inpatient hospital accommodation.

Implications for Nursing Management

The findings of this study will help nursing leaders drive positive change concerning bed allocations and support advocacy for patient rights. Future studies should explore the patient perspective of mixed-gender accommodation.

DETAILS

Subject:	Qualitative research; Beds; Nurse managers; Patient satisfaction; Facilitators; Gender; Advocacy; Positive action; Patient participation; Nursing; Patient admissions; Hospitalization; Health services; Inpatient care; Infrastructure; Hospitals; Nursing administration; Privacy; Patients rights; Patient-centered care
Location:	Australia
Identifier / keyword:	bed allocation; mixed-gender accommodation; patient-centred care; qualitative research; regional hospital management
Publication title:	Journal of Nursing Management; Oxford
Volume:	29
Issue:	4
Pages:	741-748
Publication year:	2021
Publication date:	May 2021
Section:	ORIGINAL ARTICLES
Publisher:	Hindawi Limited
Place of publication:	Oxford
Country of publication:	United Kingdom, Oxford
Publication subject:	Medical Sciences--Nurses And Nursing, Business And Economics--Management
ISSN:	09660429
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ProQuest document ID:	2527390468
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Meeting the Canadian strength training recommendations: Implications for the cardiometabolic, psychological and musculoskeletal health of nurses

Terada, Tasuku ¹

; Scott, Kyle ² ; Way, Kimberley L ³ ; Tulloch, Heather E ⁴ ; Pipe, Andrew L ⁴ ; Chirico, Daniele ⁵ ; Reid, Robert D ⁴ ; Gibbs, Jenna C ⁶ ; Reed, Jennifer L ⁷ ¹ Division of Cardiac Prevention and Rehabilitation, Exercise Physiology and Cardiovascular Health Lab, University of Ottawa Heart Institute, Ottawa, ON, Canada ² Division of Cardiac Prevention and Rehabilitation, Exercise Physiology and Cardiovascular Health Lab, University of Ottawa Heart Institute, Ottawa, ON, Canada; Faculty of Health Sciences, School of Human Kinetics, University of Ottawa, Ottawa, ON, Canada ³ Division of Cardiac Prevention and Rehabilitation, Exercise Physiology and Cardiovascular Health Lab, University of Ottawa Heart Institute, Ottawa, ON, Canada; Institute for Physical Activity and Nutrition (IPAN), School of Exercise and Nutrition Sciences, Deakin University, Geelong, Australia ⁴ Division of Cardiac Prevention and Rehabilitation, University of Ottawa Heart Institute, Ottawa, ON, Canada ⁵ Division of Cardiac Prevention and

Rehabilitation, Exercise Physiology and Cardiovascular Health Lab, University of Ottawa Heart Institute, Ottawa, ON, Canada; TotalCardiology™ Research Network, Calgary, AB, Canada ⁶ Department of Kinesiology and Physical Education, McGill University, Montreal, QC, Canada ⁷ Division of Cardiac Prevention and Rehabilitation, Exercise Physiology and Cardiovascular Health Lab, University of Ottawa Heart Institute, Ottawa, ON, Canada; Faculty of Health Sciences, School of Human Kinetics, University of Ottawa, Ottawa, ON, Canada; Division of Cardiac Prevention and Rehabilitation, University of Ottawa Heart Institute, Ottawa, ON, Canada

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

To examine the proportion of nurses meeting the strength training recommendation and its associated cardiometabolic, psychological and musculoskeletal benefits.

Background

Strength training targets poor physical and mental health often reported by nurses; however, it is unknown whether nurses are meeting the strength training guidelines.

Methods

Nurses from 14 hospitals completed a 7-day physical activity log. Nurses were considered meeting the recommendation if they reported ≥ 2 strength training sessions per week. Cardiometabolic, psychological and musculoskeletal health, and levels of motivation were compared between nurses meeting and not meeting the guidelines.

Results

Of the 307 nurses (94% female; age: 43 ± 12 years), 29 (9.4%) met the strength training recommendation. These nurses had lower body mass index (24.1 ± 2.6 vs. 27.3 ± 5.5 kg/m², $p = .007$) and waist circumference (73.8 ± 8.3 vs. 81.1 ± 11.7 cm, $p = .017$); and higher vigour–activity (18.0 ± 5.8 vs. 15.6 ± 6.5 points, $p = .046$) and self-determined motivation (relative autonomic index: 54.9 ± 20.3 vs. 45.0 ± 23.8 points, $p = .042$) scores than nurses not meeting the recommendation.

Conclusion

While the proportion of nurses meeting the strength training recommendation was small (<10%), they had lower body mass and waist circumference, and higher vigour–activity.

Implications for nursing management

Strategies to increase the strength training engagement may improve the cardiometabolic health and increase vigour among nurses.

DETAILS

Subject: Professional training; Day hospitals; Motivation; Psychiatric nurses; Sports training; Strength training; Physical activity; Health status; Body mass index; Waist; Lower limbs; Nurses; Mental health; Nursing administration; Exercise

Identifier / keyword: cardiovascular health; exercise; exercise motivation; mood; resistance exercise; resistance training

Publication title: Journal of Nursing Management; Oxford

Volume: 29

Issue:	4
Pages:	681-689
Publication year:	2021
Publication date:	May 2021
Section:	ORIGINAL ARTICLES
Publisher:	Hindawi Limited
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Evidence-based practice nurses' competency: Spanish national survey and establishment of a scale of the EBP-COQ-Prof©

Antonio Jesús Ramos-Morcillo ¹
; Serafín Fernández-Salazar ²
; César Leal-Costa ¹
; Maria Ruzafa-Martinez ¹

¹ Nursing Department, Faculty of Nursing, University of Murcia, Murcia, Spain ² Andalusian Health Service, AGS Northeast Jaén, Úbeda, Spain

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aims

To discover the level of evidence-based practice competency of Spanish nurses, to develop a scale of the EBP-COQ-Prof© and to analyse the influence of different variables on the level of competency.

Background

The evidence-based practice competency has previously been assessed using a wide variety of instruments, although these have methodological limitations and lack associated scales that allow for the interpretation of the score obtained.

Method

Observational, cross-sectional, national study. Using an online questionnaire, data were obtained between January and March 2020 from nurses working in the National Health System. An ANOVA was performed along with multiple regression analyses. The *T*-score and percentiles were calculated to obtain the scale of the EBP-COQ-Prof©.

Results

2,942 nurses participated. The score for the evidence-based practice competency was 130.29 (standard deviation 17.55). The multiple regression analysis showed a model comprised of 8 variables that explained 33% of the variance.

Conclusions

The Spanish nurses have a moderate level of evidence-based practice competency. The scale classifies the subjects into 3 levels: low, moderate and high competency.

Implications for Nursing Management

The scale proposed for the EBP-COQ-Prof© could be utilized to facilitate the diagnosis of evidence-based practice competency, and to monitor and plan individual and collective strategies to improve this competency.

DETAILS

Subject: Regression analysis; Polls & surveys; Competence; Medical diagnosis; Nurses; Health services; Practice nurses; Clinical competence; Evidence-based nursing; Nursing skills; Quantitative psychology; Questionnaires; Nursing administration

Location: Spain

Identifier / keyword:	competence; evidence-based practice; implementation; nurse; questionnaire; scale; setting norms; survey
Publication title:	Journal of Nursing Management; Oxford
Volume:	29
Issue:	4
Pages:	794-804
Publication year:	2021
Publication date:	May 2021
Section:	ORIGINAL ARTICLES
Publisher:	Hindawi Limited
Place of publication:	Oxford
Country of publication:	United Kingdom, Oxford
Publication subject:	Medical Sciences--Nurses And Nursing, Business And Economics--Management
ISSN:	09660429
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Source type:	Scholarly Journal
Language of publication:	English
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Relationships between the components of nurse managers' transformational leadership and organisational learning subprocesses in a hospital ward: A cross-sectional study

Ishii, Keiko ¹

; Takemura, Yukie ¹

; Ichikawa, Naoko ¹

¹ Department of Nursing Administration, Division of Health Sciences and Nursing, Graduate School of Medicine, The University of Tokyo, Tokyo, Japan

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aims

To investigate the association between the five components of nurse managers' transformational leadership and each process of organisational learning in a hospital ward.

Background

Elucidating the components of nurse managers' transformational leadership that promote organisational learning is needed.

Methods

In 2018, 591 self-report questionnaires from two hospitals in Japan were analysed, using the measurement scale for Organizational Learning Subprocesses and Multifactor Leadership Questionnaire. Hierarchical linear modelling was conducted using the wards' mean scores of five components of transformational leadership and five subprocesses of organisational learning.

Results

None of the transformational leadership components were significantly associated with information acquisition, but all five were significantly positively associated with information distribution and information integration. Only some of the five components showed a significant association with information interpretation and organisational memory.

Conclusion

Transformational leadership may be effective to promote the four organisational learning processes other than information acquisition.

Implications for Nursing Management

A nurse manager should exercise leadership other than transformational leadership, or use other strategies to

promote information acquisition. However, particular behaviours of transformational leadership, such as intellectually stimulating behaviours and personal considerations, could be effective in promoting the understanding of information among the members and establishing new routines.

DETAILS

Subject:	Questionnaires; Measurement; Hospitals; Acquisition; Organizational learning; Nurse managers; Managers; Transformational leadership; Modelling; Components; Work environment; Professional development; Nursing administration
Business indexing term:	Subject: Organizational learning Work environment Professional development
Identifier / keyword:	leadership style; nurse managers; organisational learning; team development; transformational leadership
Publication title:	Journal of Nursing Management; Oxford
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Pages:	672-680
Publication year:	2021
Publication date:	May 2021
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Defining a set of potentially preventable complications relevant to nursing: A Delphi Study among head nurses

Grosemans, Joep ¹
; Bergs, Jochen ¹ ; Vlayen, Annemie ² ; Ward Schrooten ² ; Hellings, Johan ² ¹ Faculty of Medicine and Life Sciences, Hasselt University, Hasselt, Belgium; Healthcare Department, PXL University of Applied Sciences and Arts, Hasselt, Belgium ² Faculty of Medicine and Life Sciences, Hasselt University, Hasselt, Belgium

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

To establish a list of potentially preventable complications as a tool for nursing management.

Background

Different outcome parameters have been used in patient safety research. However, they have mainly been used for medical and administrative goals. The role of nurses in achieving patient safety outcomes has been given little attention.

Method

A three-round Web-based modified Delphi study was conducted in four hospitals, using the list of potentially preventable complications (PPCs) as a starting point. Consensus on a shortlist of nursing relevant complications was the endpoint.

Results

This study revealed a shortlist 12 PPCs relevant to the nursing profession, based on the expert opinion of more than

sixty head nurses from different wards and hospitals. An overall consensus of 77.58% was reached. In surgical, medical and geriatric wards, a consensus of 95.7% was achieved.

Conclusion

This is the first study that points out which PPCs are related to nursing. The shortlist contains some of the most studied complications and can serve a wide variety of hospital wards.

Implications for Nursing Management

Prevention of complications reduces harm to patients and avoids the nursing work and costs to treat them. This list provides nursing managers with a powerful tool to raise awareness for risk assessment and preventive measures among nurses. It offers an instrument to facilitate the documentation and handover of patient safety outcomes in nursing. This shortlist can also serve as an assessment tool for patient safety interventions.

DETAILS

Subject:	Patient safety; Hospitals; Prevention programs; Risk assessment; Parameters; Handover; Nursing; Medical records; Geriatric wards; Nurses; Complications; Clinical assessment; Nursing administration
Identifier / keyword:	Delphi Technique; health care; nursing care; outcome assessment; patient safety
Publication title:	Journal of Nursing Management; Oxford
Volume:	29
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Pages:	834-843
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The influence of learning circumstances and on-the-job opportunities for professional growth on perceived person–environment fit among hospital nurses: A longitudinal study

Inoue, Maho ¹

; Kunie, Keiko ¹

; Takemura, Yukie ¹

; Kida, Ryohei ¹

; Ichikawa, Naoko ¹

¹ Department of Nursing Administration, Division of Health Sciences and Nursing, Graduate School of Medicine, The University of Tokyo, Tokyo, Japan

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aims

The study aimed to determine the influence of learning circumstances (learning inside and outside hospitals, and communication about the nursing practice with colleagues) and on-the-job opportunities for professional growth on each dimension of person–environment fit (needs–supplies, demands–abilities, person–organisation and person–group fit) among nurses.

Background

It is desirable for each dimension of person–environment fit to be high, as it links to many work-related outcomes.

Methods

A longitudinal survey using a questionnaire was conducted in February 2019 (Time 1) and October 2019 (Time 2). A simple linear regression analysis and a multiple linear regression analysis were conducted, using data from 324 nurses.

Results

The results of the simple regression analysis showed that three variables related to learning circumstances at Time 1 were positively related to each dimension of person–environment fit at Time 2. The multiple regression analysis showed on-the-job opportunities for professional growth at Time 1 related to person–environment fit at Time 2.

Conclusions

To achieve high person–environment fit, nurses should be aware of on-the-job opportunities for professional growth.

Implications for Nursing Management

To achieve high person–environment fit, nurse managers should evaluate nurses' abilities and assign them jobs that would help improve their nursing skills.

DETAILS

Subject:	Hospitals; Regression analysis; Nursing; Learning; Nurse managers; Work environment; Nurses; Job opportunities; Nursing administration; Professional practice
Identifier / keyword:	job; learning circumstances; longitudinal study; multidimensional person-environment fit
Publication title:	Journal of Nursing Management; Oxford
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Issue:	4
Pages:	776-784
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Factors that influence nurse manager job satisfaction: An integrated literature review

Keith, Angela C ¹

; Warshawsky, Nora ¹

; Neff, Donna ¹

; Loerzel, Victoria ¹

; Parchment, Joy ²

¹ College of Nursing, University of Central Florida, Orlando, FL, USA ² Orlando Health®, Orlando, FL, USA

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aims and objectives

To understand factors that influence nurse manager job satisfaction.

Background

Nurse managers influence patient care, staff retention and health care initiatives, yet poor retention and recruiting outcomes threaten the supply of managers. Research regarding staff nurse job satisfaction and retention is substantial, but far less is known about these same areas for nurse managers.

Evaluations

Electronic databases were systematically searched to find studies regarding nurse manager job satisfaction. Articles were selected using professional guidelines and set criteria. Fourteen peer-reviewed publications were included in this review. Major themes were extracted and synthesized.

Key Issues

Findings from this review indicate that nurse manager job satisfaction is influenced by workloads, organisational support, nurse manager–supervisor relationships and the quality of their training and competency.

Conclusions

This review found overwhelming workloads, inadequate resources, poor supervisor relationships and insufficient training to be commonplace for nurse managers. To improve satisfaction and retention, institutions must cultivate practice environments that promote healthy workloads, strong interorganisational relationships, professional growth and success of their nurse managers.

Implications for Nursing Management

Findings from this study reveal areas for improvement that health care institutions and senior nursing leadership can use to transform practice environments, increase nurse managers' job satisfaction and entice them to stay.

DETAILS

Subject:	Health care; Clinical outcomes; Job satisfaction; Nurse managers; Managers; Recruitment; Patients; Workloads; Supervisor-Subordinate interactions; Nursing; Literature reviews; Health initiatives; Leadership; Nursing administration; Professional practice; Retention
Business indexing term:	Subject: Job satisfaction Workloads Retention
Identifier / keyword:	job satisfaction; nursing managers; practice environment
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Sanctification of work and hospital nurse employment outcomes: An observational study

Ada, Hazel M ¹ ; Salem Dehom ² ; Ellen D'Errico ² ; Boyd, Kendall ³ ; Elizabeth Johnston Taylor ²

¹ Adventist Health White Memorial, Los Angeles, CA, USA ² School of Nursing, Loma Linda University, Loma Linda, CA, USA ³ Department of Psychology, Loma Linda University, Loma Linda, CA, USA

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

To explore nurse ascriptions of sacredness to work and measure its association with the employment outcomes of job satisfaction, burnout, organisational commitment, employee engagement and turnover intention.

Background

High portions of hospital nurses experience burnout. Many factors contributing to burnout also contribute to job dissatisfaction and other negative employment outcomes. Personal factors, such as religiosity, help nurses to cope with work.

Methods

Questionnaires measuring study variables were distributed to all nursing personnel at a faith-based hospital in Los Angeles; 463 responded. Regression analyses allowed measurement of how sacredness ascribed to work (measured by Sanctification of Work Scale) and religiosity (measured by Duke Religiosity Index) were associated with the various employment outcomes.

Results

Sanctification of work consistently was found to be associated with less burnout and intention to leave, and more job satisfaction, employee engagement and organisational commitment.

Conclusion

The sacredness with which a nurse views work explains, in part, positive employment outcomes.

Implications for Nursing Management

Nurturing a sense of sacredness for work in nurses may provide them with an internal buffer against negative employment outcomes. Suggestions for creating rituals and educating nurses are offered.

DETAILS

Subject:	Sacredness; Measurement; Job satisfaction; Religiosity; Work; Employment; Employee involvement; Burnout; Rituals; Nursing; Organizational commitment; Nurses; Ascription; Medical-surgical nursing; Occupational psychology; Nursing administration; Observational studies
Business indexing term:	Subject: Job satisfaction Employment Employee involvement Burnout Occupational psychology
Identifier/ keyword:	burnout; job satisfaction; nursing; religion; spirituality
Publication title:	Journal of Nursing Management; Oxford
Volume:	29
Issue:	3
Pages:	442-450
Publication year:	2021
Publication date:	Apr 2021
Section:	ORIGINAL ARTICLES
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Publication subject:	Medical Sciences--Nurses And Nursing, Business And Economics--Management
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Intention to migrate among the next generation of Turkish nurses and drivers of migration

Öncü, Emine ¹

; Vayısoğlu, Sümbüle Köksoy ¹

; Karadağ, Gülendamar ²

; Alaçam, Burcu ³

; Göv, Pınar ⁴

; Alime Selçuk Tosun⁵

; Nuray Şahin Orak⁶

; Çatiker, Aslıhan⁷

¹ Nursing Faculty, Mersin University, Mersin, Turkey ² Nursing Faculty, Dokuz Eylül University, İzmir, Turkey ³ Nursing Faculty, Atatürk University, Erzurum, Turkey ⁴ Faculty of Health Sciences, Department of Nursing, Gaziantep University, Gaziantep, Turkey ⁵ Nursing Faculty, Selçuk University, Konya, Turkey ⁶ Faculty of Health Sciences, Department of Nursing, Marmara University, İstanbul, Turkey ⁷ Faculty of Health Sciences, Department of Nursing, Ordu University, Ordu, Turkey

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ABSTRACT (ENGLISH)

Aims

To determine the main driving factors affecting the senior nursing students in their decision to migrate and to evaluate the effect of attitude towards migration in career planning.

Background

In order to promote the nursing workforce, it is important to understand the factors affecting the decisions to migrate.

Method

A cross-sectional study was conducted with 1,410 Turkish nursing students. The data, which were collected using the Descriptive Form and Attitude Scale for Brain Drain (BD-s), were analysed with the multiple regression and decision tree analysis.

Results

The mean score of attitudes towards migration was 56.30 ± 12.09 (min 16- max 80). The main push-pull drivers to migrate were the socio-political factors and working conditions. The BD-s score was higher in the participants, who had overseas experience, had career plans and studied in a metropolitan city. The strongest variable predicting career planning was the attitude towards migration.

Conclusion

The opinions of the students on career planning and their intentions to migrate indicated that the shortage of nurses would continue in Turkey in the future.

Implications for Nursing Management

The prospects of the nursing candidates regarding the nursing profession should be addressed considering their expectations for initial salaries, career development and salary increases.

DETAILS

Subject: Working conditions; Nursing education; Brain drain; Workforce; Career planning; Nursing; Candidates; Career development; Prospects; Wages & salaries; Migration; Career development planning; Motivation; Students; Overseas employment; Sociopolitical factors; Nursing administration; Attitude measures

Business indexing term: Subject: Career development planning Overseas employment

Location: Turkey

Identifier / keyword: driving factors; migration; nursing students; nursing workforce; push and pull factors

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Lessons from Italian front-line nurses' experiences during the COVID-19 pandemic: A qualitative descriptive study

Catania, Gianluca ¹

; Zanini, Milko ¹ ; Hayter, Mark ² ; Timmins, Fiona ³

; Dasso, Nicoletta ¹ ; Ottonello, Giulia ¹ ; Aleo, Giuseppe ¹

; Sasso, Loredana ¹

; Bagnasco, Annamaria ¹

¹ Department of Health Sciences, University of Genoa, Genoa, Italy ² Faculty of Health Sciences, University of Hull, Hull, UK ³ School of Nursing and Midwifery, Trinity College Dublin, Dublin, Ireland

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

To explore nursing management issues within COVID-19 narratives of Italian front-line nurses.

Background

The COVID-19 pandemic has dramatically affected health systems and professionals worldwide. Italian nurses have key messages for nursing leaders following their acute experiences in the pandemic.

Method

A descriptive qualitative study with thematic analysis.

Results

Twenty-three testimonies from clinical nurses were analysed. Six macrothemes were identified as follows: organisational and logistic change; leadership models adopted to manage the emergency; changes in nursing approaches; personal protective equipment issues; physical and psychological impact on nurses; and team value/spirit.

Conclusions

Our testimonies highlighted the huge impact of COVID-19 on the Italian nursing workforce, especially in terms of the high risks associated with caring for COVID-19 patients, exacerbated by the shortage of appropriate personal protective equipment. Nurses had to care for their colleagues and live separately from their families to avoid infecting them, revealing nurses' resilience and the important role of effective and sensitive management.

Implications for Nursing Management

Nurse managers must be prepared for the impact of pandemics on staff and need to ensure availability and replacement of quality personal protective equipment, rehearse strategies for communicating with patients while wearing personal protective equipment and establish protocols for communicating with relatives.

DETAILS

Subject: Health care; Personal protective equipment; Personal development; Nurse managers; Workforce; COVID-19; Pandemics; Equipment; Testimony; Communication; Teams; Nursing; Resilience; Clinical nursing; Nurses; Leadership; Qualitative research; Nursing administration

Identifier / keyword:	COVID-19; experience; management; nursing; qualitative
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Pages:	404-411
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Common components of nurse manager development programmes: A literature review

Ullrich, Dalys ¹ ; Cope, Vicki ¹
; Murray, Melanie ¹

¹ Discipline of Nursing, College of Science, Health, Engineering & Education (SHEE), Murdoch University, Murdoch, WA, Australia

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aims

To critically appraise contemporary literature and synthesize common components of nurse manager development programmes.

Background

Although the need for nurse manager development programmes has been well documented, minimal recent research exists which identifies and evaluates the common components in these programmes. Furthermore, nurse managers continue to be poorly prepared and supported in role transition, contributing to poor organisational and role performance and decreased retention.

Method

A structured literature review saw 14 original research publications appraised for quality, analysed and included in the review.

Results

The common components identified in nurse manager development programmes include curriculum, method of delivery, support, and funding components. Various subthemes were also identified.

Conclusion

The components identified within existing nurse manager development programmes are varied. Although there are common components within nurse manager development programmes, these individual components have not been evaluated for effectiveness. There is a clear need for further development of nurse manager development programmes and evaluation of the specific components within.

Implications for Nursing Management

An understanding of the common components in NM development programmes is useful for designing and implementing robust evidence-based programmes. Inclusion of these components may facilitate a smoother role transition, enhance performance and improve recruitment and retention of nurse managers.

DETAILS

Subject:	Nurse managers; Recruitment; Curricula; Literature reviews; Appraisal; Management training; Nursing education; Professional development; Workforce; Nursing administration; Leadership; Managerial skills; Development programs
Business indexing term:	Subject: Management training Professional development Workforce Leadership Managerial skills
Identifier / keyword:	development programm e; education; nurse manager; role development; transition
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Factors that influence Australian early career nurse employment outcomes and settings: A prospective cohort study

Amanda Cottle-Quinn ¹

; Tower, Marion ¹

; Eley, Rob ²

¹ School of Nursing, Midwifery and Social Work, The University of Queensland, Brisbane, Qld, Australia ² Faculty of Medicine, The University of Queensland, Brisbane, Qld, Australia

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

To identify the factors influencing employment outcomes and settings for early career nurses.

Background

A shortage of nurses attracted to work in out-of-hospital settings exists. Despite this, not all nursing graduates can secure work as a nurse. Information on the factors that impact wider graduate employment is available. However, a nursing perspective is missing, especially for hard to recruit to areas.

Methods

A prospective cohort study was conducted. Participants were 293 final-year undergraduate nursing students, recruited from two universities. Data were collected over 12 months, commencing November 2016.

Results

English as a first language was the greatest predictor of employment for graduates. Previous health care experience and workplace preferences predicted employment in the out-of-hospital setting.

Conclusions

Misalignment between English language requirements and industry expectations about language may lead to bias in recruitment of graduate nurses with English as their second language. Recruitment to out-of-hospital settings may be promoted by having health care experience and targeting those with a preference.

Implications for Nursing Management

Reviewing current employment policies to ensure they reflect the need for cultural diversity in the nursing workforce is critical. Additionally, research that aims to understand how preferences for out-of-hospital settings are developed

will help target graduate employment strategies.

DETAILS

Subject:	Health care; Clinical outcomes; Employment policies; Recruitment; Workforce; Second languages; Multiculturalism & pluralism; Employment; Bias; Workplaces; Cohort analysis; Nursing; English language; Nurses; Work environment; Job satisfaction; Careers; Employee turnover; Nursing administration
Business indexing term:	Subject: Employment Work environment Job satisfaction Careers Employee turnover
Identifier / keyword:	education; employment; health workforce; nursing; nursing graduate; work engagement
Publication title:	Journal of Nursing Management; Oxford
Volume:	29
Issue:	3
Pages:	459-467
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Publication date:	Apr 2021
Section:	ORIGINAL ARTICLES
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Validating the Hebrew version of the Person-Centered Care of Older People with Cognitive Impairment in Acute Care scale

Werner, Perla ¹
; AboJabel, Hanan ¹
; Hagar Cohen Saban ¹; Schiffman, Ilie Kermel ¹; Idilbi, Nasra ²; Engel, Anat ³; Helena Malka-Zeevi ⁴
; Dwolatzky, Tzvi ⁵
; Dudkiewicz, Mickey ⁶ ¹ Department of Community Mental Health, University of Haifa, Haifa, Israel ²
The Max Stern Yezreel Valley College, Jezreel Valley, Israel ³ Edith Wolfson Medical Center, Holon,
Israel ⁴ Galilee Medical Center, Nahariya, Israel ⁵ Technion - Israel Institute of Technology, Haifa, Israel;
Rambam Health Care Campus, Haifa, Israel ⁶ Hillel Yaffe Medical Center, Hadera, Israel

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

To validate the Hebrew version of the Person-Centered Care of Older People with Cognitive Impairment in the Acute Care scale.

Background

The Person-Centered Care of Older People with Cognitive Impairment in Acute Care scale is a reliable and valid measure to assess the extent to which person-centred care among people with dementia is adopted in the acute care setting.

Methods

A cross-sectional study using a self-reporting structured questionnaire was conducted with 678 professionals (69% nurses, 26% physicians, 5% other health care professionals) in five hospitals across Israel.

Results



Similar to other languages, best results were obtained using 14 of the 15 items included in the original scale. Confirmatory factor analysis indicated the appropriateness of a three-factor structure for the Hebrew version of the scale. Cronbach's alpha scores for these factors were moderate to good.

Conclusions

The Hebrew version of the scale is a reliable and valid tool for assessing hospital professionals' perceptions of person-centred care.

Implications for Nursing Management

A new language validated version of the scale will allow nurse managers to learn from multiple countries' experience while conducting international comparisons. Such developments will improve and expand the implementation of the person-centred care among people with dementia in hospital settings.

DETAILS

Subject:	Comparative studies; Health care; Hospitals; Cognitive impairment; Nurse managers; Patient-centered care; Dementia; Confirmatory factor analysis; Older people; Nurses; Medical personnel; Cognitive ability; Acute services; Nursing administration
Identifier / keyword:	dementia; hospital; Person-Centered Care of Older People with Cognitive Impairment in Acute Care Scale; person-centred care; validation
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An illumination of the ICN's core competencies in disaster nursing version 2.0: Advanced nursing response to COVID-19 outbreak in China

Mao, Xiaorong ¹ ; Yang, Qin ¹ ; Li, Xin ¹ ; Chen, Xuemei ¹ ; Guo, Chunlan ² ; Wen, Xianxiu ¹ ; Alice Yuen Loke ²

¹ Sichuan Academy of Medical Sciences & Sichuan Provincial People's Hospital, Chengdu, China ² School of Nursing, The Hong Kong Polytechnic University, Hong Kong SAR, China

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

This study aims to report on the actions and incident management of the advanced practice nurses of a disaster operation team who were deployed in response to the COVID-19 outbreak, and to explore how it illustrated the Core Competencies in Disaster Nursing Version 2.0 delineated by the International Council of Nurses in 2019.

Methods

This is a descriptive study. The participants (responders) communicated and reported their actions in the operation with headquarter on a popular social media platform in China (WeChat), established specifically for the three-rescue teams.

Results

The response approach of advanced nurses to COVID-19 encompassed six of the eight domains of the competencies outlined in ICN CCDN V2.0, namely on preparation and planning, communication, incident management systems, safety and security, assessment and intervention.

Conclusions

The response teams of advanced practice nurses in this study clearly demonstrated their competencies in disaster rescue, which fulfilled most of the core competencies set forth by the ICN.

Implications for Nursing Management

The findings of this study contributed to understand the roles played by advanced practice nurses and nurse managers in disaster management and how these relate to the competencies set forth by the ICN.

DETAILS

Subject:	Nurse managers; COVID-19; Social media; Mass media; Communication; Disaster management; Nursing; Core competencies; Competence; Teams; Advanced practice nurses; Clinical competence; Pandemics; Nursing administration; Nursing skills
Business indexing term:	Subject: Core competencies
Location:	China
Identifier / keyword:	core competencies in disaster nursing; COVID-19; disaster response; Wuhan
Publication title:	Journal of Nursing Management; Oxford
Volume:	29
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Pages:	412-420
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Publisher:	Hindawi Limited
Place of publication:	Oxford
Country of publication:	United Kingdom, Oxford
Publication subject:	Medical Sciences --Nurses And Nursing, Business And Economics--Management
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Factors affecting work ability index among Polish nurses working in hospitals – A prospective observational survey

Rypicz, Łukasz ¹
 ; Witczak, Izabela ¹
 ; Rosińczuk, Joanna ²
 ; Karniej, Piotr ³
 ; Kołcz, Anna ⁴

¹ Department of Health Care Economics and Quality, Wrocław Medical University, Wrocław, Poland ² Department of Nervous System Diseases, Wrocław Medical University, Wrocław, Poland ³ Department of Organisation and Management, Wrocław Medical University, Wrocław, Poland ⁴ Laboratory of Ergonomics and Biomedical Monitoring, Wrocław Medical University, Wrocław, Poland

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aims

To assess the ability to work of Polish nurses by age groups.

Background

The ability to work is widely discussed in the literature in the context of nurses' productivity; thus, it is necessary to identify the ability to work when facing an increasing demand for services.

Methods

The observational study involved 349 professionally active nurses aged 46.9 ± 9.7 years, with a length of service of 23.5 ± 9.6 years. The Work Ability Index (WAI) was used to assess the nurses' ability to work.

Results

The ability to work decreases with age ($r_s = -0.324, p < .000$) and with seniority ($r_s = -0.257; p < .000$). Nurses with higher education presented higher Work Ability Index scores. Also, the age ($B = -0.25, p < .001$), work seniority ($B = -0.19, p < .001$) and education (masters' degree: $B = 1.41, p = .012$; ref. secondary) affect work ability.

Conclusions

The ageing process and seniority of nurses negatively affect their ability to work. A lack of programmes to maintain physical condition for nurses can result in a shortage of staff.

Implications for nursing management

Programmes can be developed to create or improve healthy working environments to increase productivity.

DETAILS

Subject:	Productivity; Aging; Hospitals; Nurses; Seniority; Ability; Higher education; Work; Length of service; Occupational health; Ergonomics; Nurse practitioners; Inpatient care; Age groups; Educational attainment; Nursing administration; Quality of care; Public health
Business indexing term:	Subject: Seniority Occupational health
Location:	Poland
Identifier / keyword:	nurse practitioners; occupational health; public health; quality of care; workplace ergonomics
Publication title:	Journal of Nursing Management; Oxford
Volume:	29
Issue:	3
Pages:	468-476
Publication year:	2021
Publication date:	Apr 2021
Section:	ORIGINAL ARTICLES
Publisher:	Hindawi Limited

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Country of publication:	United Kingdom, Oxford
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Mindfulness, emotional intelligence and occupational burnout in intensive care nurses: A mediating effect model

Xie, Caixia ¹
; Li, Xinyu ¹ ; Zeng, Yanli ² ; Hu, Xiuying ³

¹ Department of Nursing, Sichuan Academy of Medical Sciences and Sichuan Provincial People's Hospital, School of Medicine, University of Electronic Science and Technology of China, Chengdu, China
² School of Nursing, Chengdu University of Traditional Chinese Medicine, Chengdu, China
³ Innovation Center of Nursing Research, School of Medicine/West China Hospital, Sichuan University, Chengdu, China

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim(s)

To construct structural equation models to test the mediating role of emotional intelligence in the relationship between mindfulness and occupational burnout.

Background

Reports assessing the relationships among mindfulness, emotional intelligence and burnout, specifically in ICU nurses, are scarce.

Methods

This was a descriptive, correlational, cross-sectional research design with 883 ICU nurses enrolled by convenience sampling from 29 ICUs in seven tertiary hospitals in urban areas of Chengdu, China. Mediation analysis was performed by structural equation modelling. Indirect effects were evaluated through bootstrapping.

Results

The associations among mindfulness, emotional intelligence, emotional exhaustion, depersonalization and personal accomplishment were all significant ($p < .001$). In the mediation models, emotional intelligence partially mediates the relationships between mindfulness and emotional exhaustion (indirect effect 0.118, $p = .006$; direct effect -0.374 , $p = .010$; total effect -0.492 , $p = .011$) and between mindfulness and depersonalization (indirect effect -0.182 , $p = .006$; direct effect -0.452 , $p = .015$; total effect -0.633 , $p = .018$). Emotional intelligence plays a total mediating role between mindfulness and personal accomplishment (indirect effect 0.293, $p = .004$; direct effect 0.119, $p = .053$).

Conclusions

The results suggest that nursing manager could implement mindfulness training to improve occupational burnout in ICU nurses.

Implications for Nursing Management

Nursing managers could help create a more favourable working environment by providing mindfulness training. Such mindfulness training could help improve nursing quality, reduce errors and ensure patient safety, possibly improving patient prognosis and probably satisfaction.

DETAILS

Subject: Medical prognosis; Hospitals; Fatigue; Professional training; Patient satisfaction; Modelling; Consciousness; Urban areas; Burnout; Mindfulness; Indirect effects; Nursing; Depersonalization; Enrolled nurses; Structural equation models; Bootstrap methods; Nurses; Emotional intelligence; Intelligence; Nursing administration; Intensive care

Business indexing term: Subject: Burnout

Identifier / keyword: emotional intelligence; intensive care unit; mediation analysis; mindfulness; nurse; occupational burnout

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Volume:	29
Issue:	3
Pages:	535-542
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The association between workplace social capital and authentic leadership, structural empowerment and forms of communication as antecedent factors in hospital nurses: A cross-sectional multilevel approach

Kida, Ryohei ¹

; Togari, Taisuke ²; Yumoto, Yoshie ³; Ogata, Yasuko ³

¹ Department of Gerontological Nursing and Healthcare Systems Management, Graduate School of Health Care Sciences, Tokyo Medical and Dental University (TMDU), Bunkyo-ku, Japan; Department of Nursing Administration, Division of Health Science and Nursing, Graduate School of Medicine, The University of Tokyo, Bunkyo-ku, Japan ² Human Life and Health Sciences, Graduate School of Arts and Sciences, The Open University of Japan, Chiba-shi, Japan ³ Department of Gerontological Nursing and Healthcare Systems Management, Graduate School of Health Care Sciences, Tokyo Medical and Dental University (TMDU), Bunkyo-ku, Japan

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

To identify the effects of authentic leadership, structural empowerment and forms of communication as antecedent factors of workplace social capital in nursing.

Background

Enhancing workplace social capital for nurses by management requires identifying antecedent factors of workplace social capital focusing on work environment and relationships between members.

Methods

In 2019, self-administered questionnaires were sent to all nurses working on the general wards of two university hospitals in Japan. A multilevel analysis was conducted to evaluate relationships between perceived workplace social capital—the dependent variable—and authentic leadership, structural empowerment and forms of communication—the individual- and ward-level independent variables.

Results

Data from 463 nurses and 28 nurse managers were analysed (valid response rates = 38.0% and 58.3%, respectively). Their average age was 28.64 years (standard deviation: 7.00), and 93.5% were female. Ward-level authentic leadership and semi-formal communication were found to be significantly related to workplace social capital.

Conclusion

More authentic leadership and communication to promote mutual understanding between members can foster workplace social capital among hospital nurses. These findings can help inform effective workplace training in hospitals.

Implications for Nursing Management

Workplace social capital can be produced by improved management, environment and communication opportunities.

DETAILS

Subject:	Antecedents; Social capital; Hospitals; Empowerment; Professional training; Nurse managers; Communication; Work environment; Workplaces; Nursing; Authenticity; Multilevel analysis; Nurses; Leadership; Nursing administration
Identifier / keyword:	communication research; empowerment; leadership; nursing; social capital
Publication title:	Journal of Nursing Management; Oxford
Volume:	29
Issue:	3
Pages:	508-517
Publication year:	2021
Publication date:	Apr 2021
Section:	ORIGINAL ARTICLES
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A quasi-experimental study into the effects of naps and therapy glasses on fatigue and well-being

Marianne van Woerkom ¹

¹ Department of Human Resource Studies, Tilburg University, Tilburg, The Netherlands; Department of Psychology, Education and Child Studies, Erasmus University Rotterdam, Rotterdam, The Netherlands

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

To investigate the effects of a napping facility and therapy glasses on fatigue and well-being at the end of the night shift.

Background

Night shift work has adverse effects on fatigue and well-being.

Methods

A quasi-experimental study was conducted, and data were collected on 243 night shifts of 95 nurses who had either access to a napping facility, therapy glasses, both facilities or no facilities. Multilevel analyses were conducted to predict fatigue and well-being.

Results

Night shifts of nurses having access to both facilities were associated with less fatigue and more well-being. The use of therapy glasses related negatively to fatigue and positively to well-being. The use of the napping facility was not associated with fatigue and well-being. However, having slept while napping and sleeping time during napping were negatively associated with fatigue and positively associated with well-being.

Conclusion

Therapy glasses and sleeping in a napping facility can be effective interventions in reducing the adverse effects of night shift work.

Implications for Nursing Management

Therapy glasses seem an effective investment to facilitate the well-being of nurses. To enhance sleeping during

napping, it is worthwhile to let nurses get accustomed to the napping facility and customize settings to personal preferences.

DETAILS

Subject:	Side effects; Shift work; Shiftwork; Nurses; Fatigue; Night shifts; Sleep deprivation; Sleep; Occupational health; Light therapy; Nursing administration; Quasi-experimental methods
Business indexing term:	Subject: Shift work Occupational health
Identifier / keyword:	fatigue; light therapy; napping; night shift work; nursing; psychological well-being; quasi-experiment
Publication title:	Journal of Nursing Management; Oxford
Volume:	29
Issue:	3
Pages:	562-571
Publication year:	2021
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Section:	ORIGINAL ARTICLES
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Publication subject:	Medical Sciences--Nurses And Nursing, Business And Economics--Management
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A bibliometric analysis of workplace incivility in nursing

Taşkaya, Serap ¹

; Aksoy, Alptuğ ²

¹ Department of Health Care Management, Osmaniye Korkut Ata University, Osmaniye, Turkey ² Business Administration, Osmaniye Korkut Ata University, Osmaniye, Turkey

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ABSTRACT (ENGLISH)

Aim

This research aims to present a general summary of researches on workplace incivility in nursing using bibliometric indicators.

Background

Nurses regularly experience incivility from their working environment. However, evidence shows that it has significant potential for harmful consequences, both in terms of their health and in terms of productivity. Therefore, nursing and hospital managers have a crucial role in creation and maintenance of civil behaviour.

Method(s)

This research reports on a bibliometric analysis using a systematic review of academic literature on workplace incivility in nursing. A search of Web of Science databases was performed, and a total of 269 abstracts were investigated. Calculation of bibliometric indicator was done in Excel, and tag clouds had been created in VOSviewer.

Results

Nursing incivility literature is growing, and the United States contributed the largest number of papers. Studies have been carried out on nurses working in hospitals and nursing students in general. Topics are mainly focused on the organisational consequences of uncivil behaviour.

Conclusion(s)

This study reveals that there are not enough studies on workplace incivility in nursing.

Implications for nursing management

As a result obtained from this research, it especially recommends health care and nursing managers to research some risky groups and subject less studied yet.

DETAILS

Subject:	Workplaces; Productivity; Health care; Hospitals; Nursing; Systematic review; Bibliometrics; Literature reviews; Bullying; Professional relationships; Nursing administration
Business indexing term:	Subject: Professional relationships
Identifier / keyword:	bibliometric analysis; nursing; VOSviewer; workplace incivility
Publication title:	Journal of Nursing Management; Oxford
Volume:	29
Issue:	3
Pages:	518-525
Publication year:	2021
Publication date:	Apr 2021
Section:	ORIGINAL ARTICLES
Publisher:	Hindawi Limited
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Country of publication:	United Kingdom, Oxford
Publication subject:	Medical Sciences--Nurses And Nursing, Business And Economics--Management
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The quality of nursing care as perceived by nursing personnel: Critical incident technique

Peršolja, Melita ¹

¹ Faculty of Health Sciences, University of Primorska, Nova Gorica, Slovenia

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aims

To identify the determinants of the quality of nursing care from the perceptions of nursing personnel.

Background

The quality of nursing care is often measured with standards, expectations, satisfaction and outcomes, but in developing countries, it relies mostly on negative indicators.

Methods

A descriptive qualitative study was used. Semi-structured interviews based on the critical incident technique were conducted with a convenience sample of 136 nursing personnel who told 225 stories.

Results

Seven quality determinants of nursing care were identified as follows: standard of care, triage and assessment, emergency care, communication with the patient or family, communication with colleagues, multidisciplinary teamwork and helping colleagues. The most important one was the standard of care.

Conclusion

Quality nursing care is based on the degree of excellence nursing personnel show with regard to their competences in technical care, communication and teamwork. A key attribute of quality nursing care is defined by the related standards, and the focus is mostly on the nursing care process.

Implications for nursing management

These findings can increase awareness of the determinants of nursing quality and the qualities of the nursing personnel involved and can help managers to evaluate nursing practice, select new employees and organise teams.

DETAILS

Subject:	Critical incident technique; Quality standards; Communication; Patients; Developing countries--LDCs; Nursing care; Triage; Critical incidents; Emergency services; Nursing; Employees; Quality of care; Colleagues; Attitudes; Nurses; Teamwork; Multidisciplinary teams; Quality control; Nursing administration; Qualitative research; Professional practice; Patient communication
Business indexing term:	Subject: Quality standards Quality control
Identifier / keyword:	health care; nursing; qualitative research; quality indicators; task performance and analysis
Publication title:	Journal of Nursing Management; Oxford
Volume:	29
Issue:	3
Pages:	432-441
Publication year:	2021
Publication date:	Apr 2021
Section:	ORIGINAL ARTICLES
Publisher:	Hindawi Limited
Place of publication:	Oxford
Country of publication:	United Kingdom, Oxford
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Strategies to prevent missed nursing care: An international qualitative study based upon a positive deviance approach

Longhini, Jessica ¹ ; Papastavrou, Evridiki ² ; Efstathiou, Georgios ³ ; Andreou, Panayiota ⁴ ; Stemmer, Renate ⁵ ; Ströhm, Christina ⁵ ; Schubert, Maria ⁶ ; Susanne de Wolf-Linder ⁶ ; Palese, Alvisa ¹

¹ Department of Medical Sciences, School of Nursing, University of Udine, Udine, Italy ² Department of Nursing, School of Health Sciences, Cyprus University of Technology, Limassol, Cyprus ³ Department of Nursing, School of Health Sciences, Cyprus University of Technology, Limassol, Cyprus; Nursing Services, Ministry of Health, Nicosia, Cyprus ⁴ University of Nicosia Medical School, Nicosia, Cyprus ⁵ Catholic University of Applied Sciences, Mainz, Germany ⁶ School of Health Professions, Zurich University of Applied Science, Winterthur, Switzerland

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

To identify the strategies to prevent missed nursing care (MNC) that can be implemented by nurse managers/directors on a daily basis.

Background

Only few recommendations have been established to date aiming at supporting nurse managers/ directors in preventing MNC. However, several strategies are implemented on a daily basis, suggesting that a body of tacit, practical and wise knowledge is already in place.

Method(s)

An international qualitative descriptive study based on the positive deviance approach conducted in 2019–2020 and

reported according to the Consolidated Criteria for Reporting Qualitative Research. A purposeful sample of 35 nurse managers/directors working in hospitals in Cyprus, Italy, Germany and Switzerland was involved. Codes were extracted from each country, and a thematic analysis was performed at the transnational level to identify strategies and interventions preformed to prevent MNC.

Results

Eight strategies and 22 interventions, mainly with preventive intent and designed at the hospital level, affecting both the processes and the structural dimensions, have been reported as effective in preventing MNC.

Conclusion

Nurse leaders are involved daily in implementing strategies to minimise MNC at the nursing and at the hospital system levels, integrated with each other.

Implications for Nursing Management

Preventing MNC should be a core value of the entire hospital, and not merely a nursing issue. Therefore, complex interventions at the system level are required.

DETAILS

Subject:	Qualitative research; Intervention; Hospitals; Nursing; Nurse managers; Deviance; Medical errors; Nursing care; Patient safety; Quality of care; Nursing administration
Identifier / keyword:	head nurses; missed nursing care; nursing care management; patient safety; safety management
Publication title:	Journal of Nursing Management; Oxford
Volume:	29
Issue:	3
Pages:	572-583
Publication year:	2021
Publication date:	Apr 2021
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Strengthening the power of nurses in combating COVID-19

Zhang, Yuxia ¹

¹ Department of Nursing, Zhongshan Hospital, Fudan University, Shanghai, China

[ProQuest document link](#)

ABSTRACT (ENGLISH)

As the sentinel hospital, Zhongshan Hospital affiliated to Fudan University is a 2000-bed tertiary general hospital located in Shanghai, with more than 2000 practising nurses. Our nursing team has made great efforts during the outbreak and achieved remarkable effects. Since January 2020, a total of 4,675 patients visited fever clinic in our hospital, and 53 suspected cases of COVID-19 were monitored, of which three were confirmed and transferred to Shanghai Public Health Medical Centre for further standard treatments of COVID-19. With effective countermeasures against the outbreak, usual health care services have been gradually restored. Patient safety was assured in our hospital with no nosocomial infection. It is a challenge for hospitals to balance the routine work and outbreak control. As the director of nursing department, I would like to share our experience in combating COVID-19.

DETAILS

Subject:	Nurses; COVID-19; Nursing administration; Leadership; Severe acute respiratory syndrome coronavirus 2; Pandemics; Nursing care; Disease control; Empowerment
Business indexing term:	Subject: Leadership
Publication title:	Journal of Nursing Management; Oxford
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Issue:	3
Pages:	357-359
Publication year:	2021
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Publication subject:	Medical Sciences--Nurses And Nursing, Business And Economics--Management
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Effects of mHealth-based interventions on health literacy and related factors: A systematic review

Yueh-Hsiu Lin ¹

; Meei-Fang Lou ¹

¹ School of Nursing, College of Medicine, National Taiwan University, Taipei, Taiwan, ROC

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aims

To evaluate the effects of mobile health (mHealth)-based interventions on health literacy and related factors.

Background

Few reviews exist on the effects of mHealth-based interventions on the improvement and changes in health literacy and related factors.

Evaluation

A systematic review was conducted using the Mixed Methods Appraisal Tool to evaluate the quality of articles.

Results

Outcome variables included eHealth literacy, mHealth literacy and health literacy. Two studies showed that health literacy was significantly enhanced after mHealth application use, particularly among those with low education and health literacy levels. Two articles reported that health information seeking and health information appraisal improved after mHealth-based interventions, thereby increasing health literacy levels. In one article, no significant relationship was found between health literacy levels and mHealth literacy.

Conclusion

mHealth can enhance health literacy; furthermore, mobile applications effectively improve patient health literacy. However, measurement tools used for evaluating health literacy indicators are inconsistent, with the concept and components of these tools being not specifically designed for evaluating health literacy indicators.

Implications for nursing management

To successfully and effectively overcome health problems in diverse clinical settings, the theory-based mHealth services should be adopted while considering their intensity, frequency, duration and credibility.

DETAILS

Subject:	Measurement; Intervention; Health literacy; Credibility; Systematic review; Health education; Health problems; Health status; Health information; Appraisal; Clinical nursing; Nursing administration; Information seeking behavior
Identifier / keyword:	eHealth literacy; mHealth; mobile phone; nursing; systematic review
Publication title:	Journal of Nursing Management; Oxford
Volume:	29
Issue:	3
Pages:	385-394
Publication year:	2021
Publication date:	Apr 2021
Section:	REVIEW ARTICLES
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Discharge teaching, readiness for hospital discharge and post-discharge outcomes in cataract patients: A structural equation model analysis

Zhang, Aihua ¹

; Feng, Xianqiong ¹

; Qiu, Chujin ¹

¹ West China School of Nursing, West China Hospital, Sichuan University, Chengdu, China

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

To explore the interaction mechanism of cataract patients' quality of discharge teaching, discharge readiness and post-discharge outcomes using structural equation model analysis.

Background

The quality of discharge teaching and discharge readiness are two indicators used to evaluate the quality of hospital discharge services. Little research has been done on the quality of discharge teaching, discharge readiness and post-discharge outcomes in cataract patients, especially in China.

Methods

Four questionnaires were administered to 192 patients, and the results were analysed using Spearman's correlation and structural equation model.

Results

The statistical analysis showed low-to-moderate correlations among the quality of discharge teaching, discharge readiness and post-discharge outcome variables; discharge readiness played an intermediary role in the interaction mechanism of the three variables.

Conclusion

The cataract patients demonstrated satisfactory quality of discharge teaching, discharge readiness and post-discharge outcomes. Quality of discharge teaching affected post-discharge outcomes through the intermediary role of discharge readiness.

Implications for Nursing Management

Nursing managers should recognize the importance of discharge services, pay more attention to improve the quality of discharge teaching and strengthen discharge readiness to prevent the risks of post-discharge complications and readmission.

DETAILS

Subject:	Statistical analysis; Nursing; Readmission; Teaching; Discharge planning; Cataracts; Eye surgery; Patient education; Clinical outcomes; Nursing administration; Structural equation modeling
Identifier / keyword:	cataract; discharge teaching; post-discharge outcomes; readiness for discharge; structural equation model
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Effects of horizontal violence among nurses on patient safety: Mediation of organisational communication satisfaction and moderated mediation of organisational silence

Eun Young Doo ¹

; Choi, Sujin ²

¹ Nursing Administrator of Nursing Department, Myongji Hospital, Gyeonggi-do, South Korea ² College of Nursing, Woosuk University, Jeollabuk-do, South Korea

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aims

This study aimed to investigate the effect of nurses' horizontal violence on patient safety as mediated by organisational communication satisfaction and to examine the moderated mediation effect of organisational silence.

Background

Patient safety is a worldwide concern in health care, but patients still experience adverse events. Among factors affecting patient safety, organisational silence must be examined in relation to organisational communication satisfaction and horizontal violence.

Method

A total of 301 nurses working at four general hospitals with over 500 beds in Gyeonggi-do were recruited from October to November 2018. Data were collected through questionnaires and analysed using SPSS 25.0 and SPSS PROCESS macro.

Results

Horizontal violence directly affected patient safety and indirectly affected patient safety via mediation by organisational communication satisfaction. Organisational communication satisfaction had a partial mediation effect, and organisational silence had a significant moderated mediation effect in the path from horizontal violence to organisational communication.

Conclusion

To enhance patient safety, educational programmes and strategies that improve organisational silence and organisational communication satisfaction should be developed at an organisational level.

Implications for nursing management

Hospital administrators should be aware of the pivotal impact of organisational silence among nurses on patient safety.

DETAILS

Subject:	Educational programs; Patient safety; Hospitals; Safety; Beds; Communication; Violence; Mediation; Health education; Critical incidents; Nurses; Nursing administration
Business indexing term:	Subject: Mediation
Identifier / keyword:	horizontal violence; nurses; organisational communication satisfaction; organisational silence; patient safety
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Surviving an infectious disease outbreak: How does nurse calling influence performance during the COVID-19 fight?

Zhou, Yan, RN ¹ ; Asante, Eric Adom ²
 ; Yiyu Zhuang RN ¹ ; Wang, Jie ³
 ; Zhu, Yue ⁴

; Shen, Lihua, RN ^{1 1} Sir Run Run Shaw Hospital, School of Medicine, Zhejiang University, Hangzhou, China ² Department of Management, Lingnan University, Tuen Mun, Hong Kong ³ Nottingham University Business School China, University of Nottingham Ningbo China, Ningbo, China ⁴ School of Business Administration, Zhejiang Gongshang University, Hangzhou, China

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

To assess the performance of front-line nurses, who believed they were living out their calling, during the coronavirus disease 2019 (COVID-19) pandemic.

Background

Although as a profession nursing generally requires high levels of performance, the disruption arising from an infectious disease outbreak increases the work stress and decreases the performance of front-line nurses. How this situation can be improved has yet to be thoroughly examined.

Method

We used a snowball sampling technique to recruit 339 nurses who were originally from outside Hubei but volunteered to join medical teams going to Hubei to tackle COVID-19.

Results

Drawing on the theory of work as a calling, we found that living a calling had a positive effect on front-line nurses' performance through the clinical and relational care they provided. Perceived supervisor support strengthened these mediated relationships.

Conclusion

Our findings indicate that despite the constraints associated with pandemics, front-line nurses who are living a calling are able to provide better clinical and relational care to infected patients, which in turn improves their performance.

Implications for Nursing Management

The findings of this study suggest that hospitals can introduce career educational interventions to enhance nurses' ability to discern and live out their calling to improve their performance.

DETAILS

Subject:	Infectious diseases; Hospitals; Snowball sampling; COVID-19; Pandemics; Epidemics; Disruption; Occupational stress; Teams; Clinical nursing; Nurses; Nursing administration
Identifier / keyword:	caring; COVID-19; living a calling; nursing performance; perceived supervisor support
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Pages:	421-431
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The Medical Gloves Assessment Tool (MGAT): Developing and validating a quantitative tool for assessing the safety and ergonomic features related to medical gloves

Zare, Asma ¹

; Choobineh, Alireza ²

; Mokarami, Hamidreza ³

; Jahangiri, Mehdi ⁴

¹ Department of Occupational Health Engineering, School of Health, Shiraz University of Medical Sciences, Shiraz, Iran ² Research Center for Health Sciences, Institute of Health, Shiraz University of Medical Sciences, Shiraz, Iran ³ Department of Ergonomics, School of Health, Shiraz University of Medical Sciences, Shiraz, Iran ⁴ Department of Occupational Health Engineering, Research Center for Health Sciences, School of Health, Shiraz University of Medical Sciences, Shiraz, Iran

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Background

Medical gloves play a very important role in protecting health care workers and patients. It is very important to pay attention to the safety and ergonomic properties of medical gloves in their protective function.

Aim

To develop a quantitative tool for evaluating the safety and ergonomic properties of the medical gloves.

Methods

Five hospitals with a total of 185 health care workers participated in the research. The domains and items of the tool were developed based on an expert's panel, interviews with health care workers and a literature review. Face, content and construct validity was used for validation. Reliability was also evaluated using internal consistency.

Results

The final tool included 26 items in six domains, including tactile sensation, dexterity, grip strength, fitting, reliability and hand hygiene. The Cronbach's alpha was 0.82 for the total scale.

Conclusion

The final tool had good validity and reliability. The findings of this study led to the development of a comprehensive standard tool that can be used to assess the ergonomic and safety status of medical gloves.

Implications for Nursing Management

With this tool, problems related to medical gloves can be identified among nurses, and the necessary interventions can be predicted.

DETAILS

Subject:	Health care; Hospitals; Safety; Fitting; Coefficient alpha; Gloves; Workers; Validity; Dexterity; Nurses; Hygiene; Medical personnel; Reliability; Grip strength; Personal protective equipment; Ergonomics; Nursing administration
Identifier / keyword:	assessment tool; ergonomics; medical glove; psychometric properties; safety
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The influence of supervisory support, work effectiveness, work empowerment and stress secondary to residents' responsive behaviours on job satisfaction of nursing staff: A multisite cross-sectional study

Míriam Rodríguez-Monforte ¹

; Bethell, Jennifer ²

; Stewart, Steven ³

; Chu, Charlene H ⁴

; Astrid Escrig-Pinol ⁵



; Montserrat Gea-Sánchez ⁶

; McGilton, Katherine S ⁴

¹ Blanquerna School of Health Sciences – Ramon Llull University, Barcelona, Spain; Global Research on Wellbeing (GRoW) Research Group, Blanquerna School of Health Sciences – Ramon Llull University, Barcelona, Spain ² KITE-Toronto Rehabilitation Institute, University Health Network, Toronto, ON, Canada; Institute of Health Policy, Management and Evaluation, University of Toronto, Toronto, ON, Canada ³ KITE-Toronto Rehabilitation Institute, University Health Network, Toronto, ON, Canada ⁴ KITE-Toronto Rehabilitation Institute, University Health Network, Toronto, ON, Canada; Lawrence S. Bloomberg Faculty of Nursing, University of Toronto, Toronto, ON, Canada ⁵ KITE-Toronto Rehabilitation Institute, University Health Network, Toronto, ON, Canada; Dalla Lana School of Public Health, University of Toronto, Toronto, ON, Canada; Mar Nursing School (ESIMar), Pompeu Fabra University, Barcelona, Spain ⁶ Department of Nursing and Physiotherapy, GESEC Group, University of Lleida, Lleida, Spain; Group of Health Care Research (GRECS), IRB Lleida, Lleida, Spain

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

To examine the association between stress secondary to residents' responsive behaviours and job satisfaction of nurses and nursing assistants working in nursing homes. To test whether supervisory support, work effectiveness and work empowerment confound this relationship.

Background

Understanding how the stress secondary to residents' responsive behaviours influences job satisfaction for staff and determining the factors influencing this relationship are important for retention of staff in nursing homes. The term 'responsive behaviours' refers to the subset of behavioural and psychological symptoms of dementia.

Methods

Survey responses from 191 nursing assistants and 81 nurses in five nursing homes in Ontario were analysed.

Results

Staff's stress attributed to residents' responsive behaviours was negatively associated with job satisfaction. This direct effect was weakened by more than a third through the confounding net effects of supervisory support, work effectiveness and work empowerment.

Conclusion

The work environment created by leaders in nursing homes can lessen the influence of stress secondary to residents' responsive behaviours on staffs' job satisfaction.

Implications for Nursing Management

Supervisors need training and education to support and mentor their staff effectively, and to guide their use of evidence-based practices that integrate the patient-centred care approach in order to effectively respond and minimize responsive behaviours.

DETAILS

Subject: Job satisfaction; Empowerment; Nursing homes; Patients; Patient-centered care; Psychological problems; Work environment; Assistants; Occupational stress; Behavior; Dementia; Supervisors; Nursing administration

Business indexing term: Subject: Job satisfaction

Identifier / keyword:	job satisfaction; nursing assistants; regulated nurses; residents' responsive behaviours; work characteristics
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Pages:	497-507
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Undergraduate nurses' perception of the nursing practice environment in university hospitals: A cross-sectional survey

M^a Carmen Rodríguez-García ¹ ; Verónica V Márquez-Hernández ²

; Genoveva Granados-Gámez ² ; Gabriel Aguilera-Manrique ² ; Lorena Gutiérrez-Puertas ^{1 1}

Department of Nursing, Physiotherapy and Medicine, Universidad de Almería, Almería, Spain ²

Department of Nursing, Physiotherapy and Medicine, Universidad de Almería, Almería, Spain; Research Group for Health Sciences CTS-451, Almería, Spain

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Objective

To describe the psychometric properties of the Practice Environment Scale of the Nursing Work Index (PES-NW) among undergraduate nurses and to compare their perceptions of the nursing practice environment by academic year and unit type.

Background

Despite the fact that nursing students develop most of their undergraduate learning and training in the nursing practice environment, their perception about it has not been considered to date.

Methods

The psychometric properties were analysed on a sample of 180 undergraduate nurses. Data collection was carried out in 2018. Data were analysed using percentages, frequencies, mean, standard deviation and Mann–Whitney *U* test. Factor structure was evaluated with exploratory factor analysis, and reliability was evaluated with Cronbach's alpha.

Results

Psychometric analysis showed an adequate construct validity and reliability for the PES-NWI. Cronbach's Alpha was 0.884. Undergraduate nurses perceived most hospitals as favourable, scoring the 'Nurse-physician relationships' factor highest and 'Staffing and resource adequacy' factor lowest.

Conclusion

The PES-NWI is a valid and reliable instrument that could be applied in future research to explore nursing students' perceptions of the nursing practice environment.

Implications for nursing management

Nurse managers are responsible for supervising and ensuring that the nursing practice environment at university hospitals meets the necessary criteria to support the workplace learning of undergraduate nurses.

DETAILS

Subject:	Hospitals; Nursing education; Perceptions; Nurse managers; Adequacy; Coefficient alpha; Quantitative psychology; Workplace learning; Nursing; Reliability; Exploratory factor analysis; Staffing; Nurses; Nursing administration; Professional practice; Physician nurse relationships
Identifier / keyword:	clinical placement; nurse management; practice environment scale of the nursing work index; students; nursing; work environment
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Volume:	29
Issue:	3
Pages:	477-486
Publication year:	2021
Publication date:	Apr 2021
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Fear of COVID-19, psychological distress, work satisfaction and turnover intention among frontline nurses

Labrague, Leodoro J ¹

; Janet Alexis A de los Santos ^{2 1} College of Nursing, Sultan Qaboos University, Muscat, Oman ² College of Nursing, Visayas State University, Baybay, Philippines

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

To examine the relative influence of fear of COVID-19 on nurses' psychological distress, work satisfaction and intent to leave their organisation and the profession.

Background

The emergence of COVID-19 has significantly impacted the psychological and mental well-being of frontline health care workers, including nurses. To date, no studies have been conducted examining how this fear of COVID-19 contributes to health, well-being and work outcomes in frontline nurses.

Methods

This is a cross-sectional research design involving 261 frontline nurses in the Philippines. Five standardized scales were used for data collection.

Results

Overall, the composite score of the fear of COVID-19 scale was 19.92. Job role and attendance of COVID-19-related training predicted fear of COVID-19. An increased level of fear of COVID-19 was associated with decreased job satisfaction, increased psychological distress and increased organisational and professional turnover intentions.

Conclusions

Frontline nurses who reported not having attended COVID-19-related training and those who held part-time job roles reported increased fears of COVID-19. Addressing the fear of COVID-19 may result in improved job outcomes in frontline nurses, such as increased job satisfaction, decreased stress levels and lower intent to leave the organisation and the profession.

Implications for Nursing Management

Organisational measures are vital to support the mental health of nurses and address their fear of COVID-19 through peer and social support, psychological and mental support services (e.g. counselling or psychotherapy), provision of training related to COVID-19 and accurate and regular information updates.

DETAILS

Subject:	Social support; Health care; Clinical outcomes; Fear & phobias; Job satisfaction; Professional training; Psychotherapy; Psychiatric nurses; COVID-19; Occupational stress; Medical personnel; Support services; Nurses; Counselling services; Mental health; Psychological distress; Pandemics; Employee turnover; Disease control; Nursing administration; Occupational roles
Business indexing term:	Subject: Job satisfaction Occupational stress Employee turnover
Identifier / keyword:	COVID-19; fear; job satisfaction; nursing; psychological distress; turnover intention
Publication title:	Journal of Nursing Management; Oxford
Volume:	29
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Pages:	395-403
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Clinical nurses' perspectives on discharge practice changes from participating in a translational research study

Bobay, Kathleen L ¹

; Regina Conway-Phillips ¹ ; Hughes, Ronda G ² ; Costa, Linda ³ ; Bahr, Sarah J ⁴ ; Siclovan, Danielle ⁵ ; Nuccio, Susan ⁴ ; Weiss, Marianne ⁴ ¹ Marcella Niehoff School of Nursing, Loyola University Chicago, Chicago, IL, USA ² Center for Nursing Leadership, University of South Carolina College of Nursing, Columbia, SC, USA ³ University of Maryland School of Nursing, Baltimore, MD, USA ⁴ Marquette University College of Nursing, Milwaukee, WI, USA ⁵ Risk Management Services, Froedtert & Medical College of Wisconsin, Milwaukee, WI, USA

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

To describe clinical nurses' experiences with practice change associated with participation in a multi-site nursing translational research study implementing new protocols for hospital discharge readiness assessment.

Background

Nurses' participation in translational research studies provides an opportunity to evaluate how implementation of new nursing interventions affects care processes within a local context. These insights can provide information that leads to successful adoption and sustainability of the intervention.

Methods

Semi-structured focus groups from 30 of 33 participating study hospitals lead by team nurse researchers.

Results

Nurses reported improved and earlier awareness of patients' discharge needs, changes in discharge practices, greater patient/family involvement in discharge, synergy and enhanced discharge processes, and implementation challenges. Participating nurses related the benefits of participation in nursing research.

Conclusion

Participation in a unit-level translational research project was a successful strategy for engaging nurses in practice change to improve hospital discharge.

Implications for Nursing Management

Leading unit-based implementation of a structured discharge readiness assessment including nurse assessment and patient self-assessment encourages earlier awareness of patients' discharge needs, improved patient assessment and greater patient/family involvement in discharge preparation. Integrating discharge readiness assessments into existing discharge care promotes communication between health team members that facilitates a timely, coordinated discharge.

DETAILS

Subject:	Research; Intervention; Participation; Implementation; Health education; Teams; Nursing; Health information; Clinical nursing; Nurses; Discharge; Nursing administration; Parent participation; Professional practice; Clinical medicine; Needs analysis
Identifier / keyword:	discharge assessment; hospital discharge; practice change; translational research
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Transition shock and job satisfaction changes among newly graduated nurses in their first year of work: A prospective longitudinal study

Eun-Young Kim ¹

; Yeo, Jung Hee ¹

¹ Department of Nursing, Dong-A University, Busan, South Korea

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aims

To identify the changes in transition shock and job satisfaction among newly graduated nurses during their first year and examine the factors affecting these changes.

Background

Newly graduated nurses' high turnover is related to transition shock and job satisfaction. However, insufficient

information exists on changes in these variables among such nurses.

Methods

A prospective longitudinal design was used. Participants were nurses newly graduated from nursing schools and working in hospitals in South Korea. There were 312, 195 and 120 participants at 4, 8 and 12 months, respectively.

Results

Transition shock and job satisfaction decreased as working period increased; transition shock was lower, and job satisfaction was higher in positive work environments. Linear mixed models revealed work environment was the only factor significantly related to transition shock and job satisfaction changes.

Conclusion

The nurses' transition shock and job satisfaction varied as per working period and work environment, which were the most important factors of these changes.

Implications for Nursing Management

Nurse managers can be aware of transition shock and job satisfaction changes, assess their severity and implement solutions in their hospitals. Thus, retention strategies should differ according to the changing needs of nurses at different stages of their career.

DETAILS

Subject:	Hospitals; Nursing; Job satisfaction; Work environment; First year; Nurse managers; Change agents; Nurses; Transitions; New employees; Nursing administration; Occupational stress
Business indexing term:	Subject: Job satisfaction Work environment New employees Occupational stress
Identifier / keyword:	job satisfaction; longitudinal studies; nurses; professional practice; workplace stress
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A commentary on spiritual leadership and workplace spirituality in nursing management

Ribeiro, Mónica ¹
; Caldeira, Sílvia ¹
; Nunes, Elisabete ¹
; Vieira, Margarida ²

¹ Institute of Health Sciences, Centre for Interdisciplinary Research in Health, Universidade Católica Portuguesa, Lisbon, Portugal ² Institute of Health Sciences, Centre for Interdisciplinary Research in Health, Universidade Católica Portuguesa, Lisbon, Portugal; Institute of Health Sciences, Universidade Católica Portuguesa, Oporto, Portugal

[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

Bring to discussion spiritual leadership and workplace spirituality on a health care system that faces constant challenges and seeks constant adaptations, as a way to guarantee nurses' well-being and quality of care.

Background

The work environment has shown to have impact on staff well-being. Workplace spirituality relates to sense of belonging, motivation and commitment. A spiritual leadership is fundamental to develop workplace spirituality.

Evaluation

Starting from literature, a reflection on the theme was carried out based on the results of the development of spiritual leadership and workplace spirituality in health care institutions, in professionals and in patients.

Key issues

Nurses have spiritual needs which need to be also addressed in order to promote the sense of identification with the institutions' vision and goals. A relation between spiritual leadership, workplace spirituality and subjective well-being is often found in literature, and this is critical evidence towards new management and leadership dynamics and models in health care institutions that should integrate workplace spirituality.

Conclusion

Nursing leaders are responsible for workplace spirituality facilitation. Nursing leadership and workplace spirituality seem both an answer and way to the change of health institutions management paradigm, but more studies are needed to inform this change in practice.

Implications for Nursing Management

- Workplace spirituality must be promoted in all health care institutions, aiming the humanization of care and teams.
- Nursing leaders must have spiritual competences and must include the promotion of workplace spirituality in daily agenda as a foundational area in management.
- The health care institutions' managers should consider the best leaders who should facilitate workplace spirituality.

DETAILS

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Bennett, L., Bergin, M., & Wells, J. S. G. (2021). Exploring user empowerment and service improvement within an Irish epilepsy service using Checkland's 'Soft systems' approach. *Journal of Nursing Management*, 29(4), 844-854. doi:<https://doi.org/10.1111/jonm.13227>

AimTo illustrate the value of Checkland's 'Soft Systems' approach to explore and analyse the interaction of human and organisational factors that affect service delivery and patient experience in one specialist epilepsy service. **Background** Checkland's approach is underutilized in relation to health service improvement. One epilepsy service in Ireland is used as an example to illustrate the value of his approach to improve service delivery, particularly when what needs to change is not clear. **Method** Checkland's 'Soft Systems' seven-stage approach was used collaboratively to explore patients' and clinicians' experience of service delivery and how to improve it. **Results** The research identified the practice of empowerment affected the quality of the service experience. Checkland's concept of a human activity system was particularly pertinent in identifying this issue and providing a 'map' for change. **Conclusion** Wider inferences for the use of Checkland's approach by nurse managers are discussed, as is the value of using Checkland's approach to improve services. **Implications for Nursing Management** Checkland's 'Soft Systems' is an underutilized approach in health care that could be used by managers to initiate and embed change within a health care service.

Maiko Noguchi-Watanabe, Noriko Yamamoto-Mitani, Nagami, Y., Eltaybani, S., Inagaki, A., & Taniguchi, Y. (2021). Homecare nurses' length of conversation and intention to remain at the workplace: A multilevel analysis. *Journal of Nursing Management*, 29(4), 721-730. doi:<https://doi.org/10.1111/jonm.13212>

AimsTo examine the relationship between homecare nurses' length of conversation with nurse managers and colleagues and intention to remain at the workplace. **Background** Nurse turnover is an important issue. Previous studies focused on the perceived function of communication. However, we do not know the contribution of homecare nurses' actual conversations to nurse turnover prevention. **Methods** We conducted a cross-sectional study in 330 homecare nurse organisations in Japan. We recruited 2,315 homecare nurses and analysed the data of 608 nurses. We used a questionnaire to investigate participants' intention to remain. **Results** Nearly 68% had the intention to remain. The mean length of conversation was 34 min/day with the manager and 68 min/day with colleagues. Multilevel logistic regression analysis showed that long conversations with the nurse manager (20 min and more) and colleagues (40 min and more) were significantly related to the intention to remain. **Conclusions** Ensuring the time of conversation with a manager and colleagues may contribute to preventing potentially avoidable nurse turnover. **Implications for Nursing Management** Nurse managers should encourage homecare nurses to have daily conversations of 20 min or more with the nurse manager and 40 min or more with colleagues to continue working at their current workplace.

Fatima, D., Muhammad Bin, A. G., Zakariya, R., Muhammad, L., & Sarwar, A. (2021). Workplace bullying, knowledge hiding and time theft: Evidence from the health care institutions in Pakistan. *Journal of Nursing Management*, 29(4), 813-821. doi:<https://doi.org/10.1111/jonm.13222>

Aim(s) This paper examined the impact of workplace bullying (WPB) on mild aggressive deviant behaviour, such as knowledge hiding and employee time theft, in Pakistani health care institutions. Additionally, this study investigated the mediating role of negative emotions on the relationship between WPB and its outcomes. **Background** Although mild deviant behaviour has been proven to affect the health care sector, its antecedents are still untapped. **Method** Data were collected from 233 nurses working in hospitals located across Pakistan via self-administered questionnaires in three time lags to test both the direct and indirect effects of WPB. The hypothesized correlations were tested using structural equation modelling (SEM). **Results** The results revealed that WPB increased knowledge hiding and employee time theft amongst nurses. The indirect effect of negative emotions was established on the aforementioned relationships. **Conclusion** This study contributes to the existing literature by concentrating on predictors that trigger deviant behaviour amongst nurses. It also assessed the mediating impact of emotions, wherein such endeavour is essential for researchers and practitioners. **Implications for Nursing Management** The

study outcomes are significant for the hospital sector to improve their strategies, such as implementing resilience during stressful events to address WPB and deviant behaviour amongst nurses.

Wendy, W. L., West, C., & Xie, G. (2021). The reflective risk assessment model of professional quality of life in Chinese nurses. *Journal of Nursing Management*, 29(4), 767-775. doi:<https://doi.org/10.1111/jonm.13217>

AimTo apply the reflective risk assessment model in a Chinese health care setting to investigate the relationships between professional quality of life and mental health risk profiles.
BackgroundFew studies have connected the quality of work life with contributing and coexisting factors such as depression, anxiety and stress, but none to date in a Chinese health care setting.
MethodA cross-sectional survey of 950 registered Chinese nurses was employed.
Results299 of 861 participants (34.7%) were categorized into four of five professional quality of life risk profiles, consistent with the reflective risk assessment model. Significant differences were seen with large-sized effects in the mean scores of stress, anxiety and depression among the participants, with participants of the very distressed profile having significantly higher mean scores in stress, anxiety and depression, followed by the at-risk profile group.
ConclusionThe reflective risk assessment model and professional quality of life five risk profiles are supported by this study.
Implications for Nursing ManagementThe reflective risk assessment model can be used to detect risk factors for mental health in nurses and for the design of interventions that promote nurses' mental health.

Ta'an, W.,F., Mohammed Munther Al-Hammouri, Aldalaykeh, M. K., Suliman, M. M., & Almutti, R. (2021). The role of structural empowerment in predicting computer use among Jordanian nurses: A cross-sectional study. *Journal of Nursing Management*, 29(4), 759-766. doi:<https://doi.org/10.1111/jonm.13216>

AimThe study aimed to examine the relationship between structural empowerment and attitudes towards computer use among nurses.
BackgroundEmpowering organizational structure is a significant factor affecting employees' attitudes and behaviours towards using organizational resources. Health information technologies were proven to improve health care quality. No previous studies examined the relationship between structural empowerment and attitudes towards computer use.
MethodsA cross-sectional correlational design was used. Self-reported questionnaires were completed by 200 Jordanian nurses. Descriptive statistics, Pearson r correlation and linear regression analyses were used to address the research aim.
ResultsStructural empowerment was significantly and positively associated with attitudes towards computer use. Dimensions in structural empowerment that predict positive attitude towards computer use were access to opportunity ($\beta = 0.382$, $p = .000$), formal power ($\beta = -0.252$, $p = .006$) and informal power ($\beta = 0.176$, $p = .046$).
ConclusionsStrengthening access to empowerment structures is essential to increase nurses' work efficiency. Improving empowering structures can be achieved by enhancing opportunities to increase professional knowledge and skills towards computerization.
Implications for Nursing ManagementNurse managers should promote work conditions that motivate nurses towards positive recognition of innovation through efficient collaborations with the information technology teams.

Younas, A., Subia, P. R., Mehmood, F., & Inayat, S. (2021). Role and application of self-awareness in managerial practice: A qualitative study of nurse managers. *Journal of Nursing Management*, 29(4), 785-793. doi:<https://doi.org/10.1111/jonm.13219>

AimsTo explore the nurse managers' perspectives about the role and application of self-awareness in managerial practice.
BackgroundEffectively accomplishing complex roles and maintaining a healthy work environment requires nurse managers to be resilient and sustain positive relationships with nurses and interdisciplinary teams. Self-awareness is an essential attribute for building relationships and creating a healthier work environment.
MethodsA descriptive qualitative design was used. We conducted semi-structured interviews with a purposive sample of ten managers working in two tertiary hospitals. Reflexive thematic analysis was used for data analysis.
ResultsFour themes were generated: "maximizing potential for overseeing complex management issues; becoming a conscientious and thoughtful manager; using experiential learning for nurturing managerial capabilities; and utilizing self and others' appraisal for discerning practical managerial approaches".
ConclusionsImplementing self-awareness in complex situations is beneficial for nurse managers. It allows them to overcome negative emotions and factors and incorporate ethical and moral reasoning, thereby preventing them from ineffectual management.
Implications for

Nursing Management Nurse managers should focus on assessing their temperaments and managerial abilities in each complex situation. They should use experiential learning from past experiences for discerning effective actions for managing complex situations.

Arakelian, E., & Rudolfsson, G. (2021). Reaching a tipping point: Perioperative nurse managers' narratives about reasons for leaving their employment—A qualitative study. *Journal of Nursing Management*, 29(4), 664-671. doi:<https://doi.org/10.1111/jonm.13202>

AimTo describe reasons why nurse managers in perioperative settings decide to leave their employment.
BackgroundCurrent literature has shown that perioperative nurse managers' reasons to leave their positions are formed through an interaction of factors.
MethodsIndividual in-depth interviews were performed with seven nurse managers, all women, in perioperative settings in Sweden. Data were analysed using systematic text condensation.
ResultsFive key themes were identified: (a) to end where I started, as a frontline nurse; (b) I wanted to develop further to the next level in my career; (c) I ran out of ideas; (d) I lost trust in my head manager and did not believe in the new organisation and (e) I had had enough of being offended by my superior manager and my employees.
ConclusionNurse managers experienced feeling forced into a decision to leave because of being offended by their superiors or their employees. Furthermore, the findings indicate that nurse managers should be offered support from superior managers and the organisation together with time for discussions.
Implications in Nursing ManagementThe most essential element should be the influence of caritative leadership and the obvious expectation of being treated with dignity, respect and appreciation.

Kalogirou, M. R., Chauvet, C., & Yonge, O. (2021). Including administrators in curricular redesign: How the academic–practice relationship can bridge the practice–theory gap. *Journal of Nursing Management*, 29(4), 635-641. doi:<https://doi.org/10.1111/jonm.13209>

AimHealth care administrators provided information through semi-structured interviews as to how one faculty of nursing (FoN) was preparing students for practice.
BackgroundThere is a long-standing disconnect between the nursing education and the clinical arena known as the theory–practice gap. The FoN wanted to redevelop their curriculum to better prepare students for practice and bridge the gap.
MethodUsing developmental evaluation, 36 administrators were interviewed and asked about their expectations of newly graduated nurses, the FoN curriculum, and changes to be made.
ResultsFour themes were identified: entry to programme; curricular content, delivery and structure; clinical recommendations; and stronger relationships.
ConclusionStrong academic–practice partnerships are still needed. The current lack of communication and partnership has compromised students' quality of education and their transition into the workforce.
Implications for Nursing ManagementLeaders in both the education and practice settings can better prepare newly graduated nurses and bridge the theory–practice gap by co-creating a joint committee and creating more touchpoints with one another. A joint committee can develop appropriate entry-to-programme guidelines, discuss relevant trends in practice and shape the curriculum. Clinical experiences for students may also act as extra touchpoints whereby the two groups can discuss clinical mentorship needs and build stronger academic–practice relationships.

Duignan, M., Drennan, J., & McCarthy, V. J. C. (2021). Impact of clinical leadership in advanced practice roles on outcomes in health care: A scoping review. *Journal of Nursing Management*, 29(4), 613-622. doi:<https://doi.org/10.1111/jonm.13189>

AimTo undertake a scoping review of the literature exploring the impact of clinical leadership in advanced practice roles in relation to patient, staff and organisational outcomes.
BackgroundAn increasing number of publications as well as job specifications have identified clinical leadership as a cornerstone of advanced practice roles. However, it is unclear whether embedding clinical leadership in such roles has led to improvements in patient, staff or organisational outcomes. Therefore, identifying the extent to which clinical leadership in advanced practice roles relates to patient, staff and organisational outcomes is needed.
MethodA scoping review examining the relationship between clinical leadership in advanced practice roles and health care outcomes. Searching in SCOPUS, PubMed, Psycinfo and CINAHL Plus and Web of Science identified 765 potential articles. Independent selection, data

extraction tabulation of findings and analysis were completed. Results Seven studies were identified that met the inclusion criteria. Only studies reporting on nurses in advanced practice roles were included; no studies were identified that reported on the advanced practice roles of allied health professionals. The results indicate that there is no objective evidence of the impact of advanced practitioners' clinical leadership on patient, staff or organisational outcomes. Conclusion There is a paucity of objective evidence to identify the extent to which clinical leadership is enacted in advanced practice roles. The review indicates a need for closer alignment of AP clinical leadership policy aspirations and formal operational leadership opportunities for APs. Implications for Nursing Management Nurse managers have a key role in supporting and equipping APs with leadership competencies and opportunities to enable both capability and capacity building of such roles. Nurse managers should involve APs in health care leadership at an organisational level to maximize their contribution to health, quality practice environments and health care reform. Additionally, a distinct involvement in staff development, change, operational strategic decisions and policy development should be part of the AP role, which is facilitated by management.

Elisabete Maria das, N. B., Carlos Alberto da, C. S., Leite Queirós, C. M., & Maria Pilar Mosteiro-Díaz. (2021). Workaholism, engagement and family interaction: Comparative study in portuguese and spanish nurses. *Journal of Nursing Management*, 29(4), 731-740. doi:<https://doi.org/10.1111/jonm.13213>

Aim To identify and compare workaholism, engagement and family interaction levels among Portuguese and Spanish nurses. Background The contribution of nursing management and leadership to workers' health and well-being is cardinal to ensure a healthy work environment. However, factors such as workaholism, engagement and family interaction can strongly influence nurses' performance, well-being and safety. Method A multicentre, comparative and cross-sectional study using 333 Portuguese (54.1%) and Spanish (45.9%) nurses working in hospitals. Results Portuguese nurses showed higher levels for workaholism, negative work-family interaction and negative family-work interaction, while Spanish nurses presented higher levels of engagement, positive work-family interaction and positive family-work interaction. Gender, age, job experience time, academic training, working schedule and type of employment contract influenced workaholism, engagement and work-family interaction among nurses from both countries. Conclusion During their professional practice, nurses perceived their stress differently according to each country, with Portuguese nurses presenting worst psychological conditions than Spanish nurses, namely higher workaholism, negative work-family interactions and lower engagement. Implications for Nursing Management Workaholism, engagement and work-family interaction are important areas in which nursing managers must invest to better respond to the new challenges of work contexts.

Labrague, L. J. (2021). Influence of nurse managers' toxic leadership behaviours on nurse-reported adverse events and quality of care. *Journal of Nursing Management*, 29(4), 855-863. doi:<https://doi.org/10.1111/jonm.13228>

Aim To assess the impact of toxic leadership behaviours among nurse managers on nurse-reported adverse events and quality of care. Background Toxic leadership, a form of ineffective leadership, is increasingly becoming rampant in the field of nursing and has been strongly linked to poor nurse job outcomes including job dissatisfaction, higher stress levels, and increased turnover intention. To date, no studies have been conducted to examine how this type of leadership behaviours affects patient outcomes and care quality. Methods A multicentre, cross-sectional study. This study involved a sample of 1,053 registered nurses working in 20 hospitals in the Philippines. Three standardized scales were deployed, including the Toxic Leadership Behaviors of Nurse Managers Scale, the Adverse Patient Events Scale and the single-item quality-of-care-measure. Results Overall, nurses (96.2%) appraised the quality of care of their respective units as 'good to excellent' and cited complaints from patients and their families as the most commonly reported adverse events. Toxic leadership behaviours in nurse managers were strongly associated with increased nurse-reported adverse events including reports of complaints ($\beta = .619$; $p < .001$) and verbal mistreatment from patients and their families ($\beta = .407$; $p < .001$), patient falls ($\beta = .834$; $p < .001$), health care-associated infections ($\beta = .629$; $p < .001$) and errors in administering medication ($\beta = .708$; $p < .001$) and with decreased quality of care ($\beta = -.216$; $p < .001$). Conclusion Nurses who experience working under a nurse manager exhibiting toxic behaviours reported an increased frequency of nurse-reported adverse events and poorer quality of care in the unit. Implications for Nursing Management Organizational measure to reduce the occurrence of adverse events and enhance the quality of care provided in medical units may include intervention to develop positive

leadership practices among nurse managers.

Teleş, M. (2021). Validity and reliability of the turkish version of the general work stress scale. *Journal of Nursing Management*, 29(4), 710-720. doi:<https://doi.org/10.1111/jonm.13211>

AimTo test the validity and reliability of the Turkish version of the General Work Stress Scale.
BackgroundNursing is one of the most stressful professions. The primary measure that should be taken to ensure that nurses can cope with stress is determining their stress levels.
MethodThe General Work Stress Scale was translated into Turkish via back-translation. Its reliability and validity were analysed via item analyses, content and construct validities, exploratory and confirmatory factor analyses, Cronbach's alpha and Spearman–Brown reliability coefficients. Average and standard deviations of the scale items and the overall scale were calculated.
ResultsThe study was conducted with 276 nurses. The Cronbach's alpha of the whole scale was 0.91, and the Spearman–Brown reliability coefficient was 0.89. According to the resulting one-dimensional structure, the factor loadings of the scale items were between 0.67 and 0.82, and this structure alone explained 58.72% of the total variance. The confirmatory factor analysis revealed perfect and good-fit indices ($\chi^2/df = 1.96$; RMSA = 0.06; CFI = 0.99; IFI = 0.99; GFI = 0.97; RMR = 0.04; NFI = 0.99). The mean total score was 2.55 ± 0.87 , while the items' means ranged from 2.10 ± 1.15 to 3.33 ± 1.13 .
ConclusionThe Turkish version of the General Work Stress Scale is a valid and reliable tool for assessing nurses' general work stress. Nurses largely feel that their work makes them so stressed that they wish they had a different job. The items with high means suggest opportunities for improvement.
Implications for practiceThe nurses or nursing services and units with low or high stress levels can be determined with the General Work Stress Scale. If necessary, measures aimed at eliminating or reducing the negative effects of those nurses or nursing services and units with high stress levels can be taken in a timely manner.

Finney, R. E., Torbenson, V. E., Riggan, K. A., Weaver, A. L., Long, M. E., Allyse, M. A., & Enid Y Rivera-Chiauzzi. (2021). Second victim experiences of nurses in obstetrics and gynaecology: A second victim experience and support tool survey. *Journal of Nursing Management*, 29(4), 642-652. doi:<https://doi.org/10.1111/jonm.13198>

Aim (s)To investigate second victim experiences and supportive resources for nurses in obstetrics and gynaecology.
BackgroundNurses are at risk of developing second victim experiences after exposure to work related events.
MethodsNurses at a single institution were invited to participate in an anonymous survey that included the validated Second Victim Experience and Support Tool to assess symptoms related to second victim experiences and current and desired supportive resources.
ResultsOf 310 nurses, 115 (37.1%) completed the survey; 74.8% had not heard of the term 'second victim'. Overall, 47.8% reported feeling like a second victim during their career and 19.1% over the previous 12 months. As a result of a second victim experience, 18.4% experienced psychological distress, 14.3% turnover intentions, 13.0% decreased professional self-efficacy, and 12.2% felt that institutional support was poor. Both clinical and non-clinical events were reported as possible triggers for second victim experiences. Peer support was the most desired form of support as reported by 95.5%.
Conclusion(s)Nurses in obstetrics and gynaecology face clinical and non-clinical situations that lead to potential second victim experiences.
Implications for Nursing ManagementThe second victim experiences of nurses should be acknowledged, and resources should be implemented to navigate it. Educational opportunities and peer supportive interventions specific to second victim experiences should be encouraged.

Dickens, G. L., Salamonson, Y., Johnson, A., Ramjan, L., Steel, K., Taylor, M., & Everett, B. (2021). Longitudinal evaluation of a programme for safety culture change in a mental health service. *Journal of Nursing Management*, 29(4), 690-698. doi:<https://doi.org/10.1111/jonm.13205>

AimTo evaluate whether a two-part culture improvement programme aimed at nurses in clinical and managerial positions in an inpatient mental health service was associated with culture change, and safety-related behaviour and knowledge improvements.
BackgroundDue to serious failings in the delivery of physiological care to mentally disordered inpatients, it was deemed important that interventions be applied to improve service culture.
MethodsA pre-test and post-test study was conducted to evaluate change associated with a mandated intervention aimed at culture change. Nurses in clinical and managerial positions at all levels attended relevant sessions. All were invited

to participate in evaluation measures. Results N = 241 nurses participated in the evaluation (n = 137 and n = 104, pre-test and post-test, respectively). There was a small but significant change in organisational culture indicating greater adhocracy and less clan culture in the second survey period and a small decline in reported safety behaviour. Measures of safety culture, knowledge and emergency-related educational satisfaction were unchanged. Conclusion Only a small change in measured culture was associated with the programme. Implications for Nursing Management Attempts to evaluate culture change need to align anticipated outcomes with appropriate outcome measures. A mandated programme of culture change had little tangible effect on the outcomes measured.

Nakano, Y., Tanioka, T., Yokotani, T., Ito, H., Miyagawa, M., Yasuhara, Y., . . . Locsin, R. (2021). Nurses' perception regarding patient safety climate and quality of health care in general hospitals in Japan. *Journal of Nursing Management*, 29(4), 749-758. doi:<https://doi.org/10.1111/jonm.13215>

AimTo clarify perceptions of nurses towards patient safety climate and quality of health care in Japan. **Background**Nurses' perceptions of patient safety climate and quality of health care services are not well-known. **Method**The survey was conducted at general hospitals with 200 beds or more using the Patient Safety Climate Scale and the Modified multiple-item scale for consumer perceptions of health care service quality. **Results**Significant positive correlations were found among nurses' perception towards patient safety and health care service quality. The experience of nurses as members of the committee on patient safety and their employment position did not show any significant difference in the perception towards patient safety and health care services quality. Perceptions of health care service quality were lower among those with 6- to 10-year experience than with over 21 years. **Conclusion**In the perception of nurses and nurse managers' continuous improvement, perceptions towards patient safety were related to reliability, assurance, responsiveness and empathy in health care service quality. **Implications for Nursing Management**Generalist nurses with 21 years or more experiences in multiple departments showed high perception towards health care service quality. Experienced nurses' perceptions of activities to improve patient safety and quality of health care services are important.

Biag, A. D., & Angeles, Leonardo S., Jr. (2021). Testing the structural equation model of the influence of nurses' spiritual well-being and caring behaviour on their provision of spiritual care to patients. *Journal of Nursing Management*, 29(4), 822-833. doi:<https://doi.org/10.1111/jonm.13224>

AimTo test a proposed model that determined the effects of nurses' spiritual well-being and caring behaviour on their provision of spiritual care to patients. **Background**The spiritual dimension of caring gained attention in the recent past as it is recognized to bring positive patient outcomes. **Methods**A cross-sectional, descriptive, correlational design was used in the study. Data were collected from 300 registered nurses working in the hospitals in Pampanga, Philippines. Partial least square structural equation modelling was used to test the model. **Results**Nurses had a high level of ideal and lived perspectives of spiritual well-being. They perceived their caring behaviour to be always manifested and occasionally engaged in spiritual activities that supported patient spirituality. **Conclusions**The structural equation model provided a feasible model that was either caring behaviour-laden spiritual well-being or spiritual well-being-infused caring behaviour. **Implications for Nursing Management**Nursing administrators may develop guidelines for practice within their institutions that are considerate of the proposed model. They may focus on caring behaviour-laden spiritual well-being model of nursing practice or spiritual well-being-infused caring behaviour model of nursing practice.

Yildiz, B., & Elibol, E. (2021). Turnover intention linking compulsory citizenship behaviours to social loafing in nurses: A mediation analysis. *Journal of Nursing Management*, 29(4), 653-663. doi:<https://doi.org/10.1111/jonm.13200>

AimsTo propose a theoretical model of social loafing behaviours and to examine the effects of compulsory citizenship behaviours and turnover intention on nurses' social loafing behaviour. **Method**This cross-sectional study included 264 nurses working in public hospitals in Istanbul, Turkey. The data were gathered by using a snowball sampling method and analysed using descriptive statistical analyses, F test, t test, Pearson's correlation analysis and multiple and hierarchical linear regression analyses. **Results**Results indicated that compulsory citizenship behaviours were positively associated with turnover intention and social loafing. Turnover intention fully mediated

the relationship between compulsory citizenship behaviours and social loafing. Conclusion Nurses who exhibit compulsory citizenship behaviours have developed turnover intentions to conserve their well-being, which led to social loafing as a resource recovery tactic. Implications for Nursing Management Training should be provided for managers and nurses to raise awareness about the possible negative effects of compulsory citizenship behaviours. To manage social loafing and turnover intention, effective and proactive solution-oriented strategies should be implemented.

Catherine, C. M., Carney, M., & Kearns, T. (2021). Leveraging momentum of 2020—Reflections from an international conference. *Journal of Nursing Management*, 29(4), 609-612. doi:<https://doi.org/10.1111/jonm.13269>

Purpose This Commentary illustrates how innovative clinical and research initiatives highlight the ingenuity and creativity of nursing and midwifery professions thus leveraging the momentum of 2020 that commenced with the Year of the Nurse and Midwife and the Nursing Now Challenge. **Background** Speakers demonstrated through vision, creativity and policy generation how the world is now in a different place due to COVID-19 and how the global crisis will change and shape the future of health care delivery. **Evaluation** Speakers were invited because of their reputation as international leaders in global health and population. Participants evaluated content and its relevance to research, education and practice in group discussions. **Key Issues** The current global crisis determines that the capabilities and capacity of nurses and midwives will become more crucial than ever to the delivery of universal health coverage (UHC) and population health by 2030. **Conclusions** Global leaders and policymakers must seek the knowledge and skills they need to support their work during a global crisis. **Implications for Nursing Management** Achieving population health and equitable access to health care is dependent on an adequate health workforce.

Jung-Won Ahn, Hye-Young Jang, & Youn-Jung Son. (2021). Critical care nurses' communication challenges during handovers: A systematic review and qualitative meta-synthesis. *Journal of Nursing Management*, 29(4), 623-634. doi:<https://doi.org/10.1111/jonm.13207>

Aims To review and synthesize qualitative studies to gain a deeper understanding of critical care nurses' inter-departmental and shift-to-shift handover challenges. **Background** Good-quality nurse-to-nurse handover promotes patient safety, while poor handover has been associated with medical errors. However, systematic reviews of qualitative approaches for better understanding the handover experiences of critical care nurses are lacking. **Evaluation** Systematic review methods incorporating meta-synthesis were used. A comprehensive search of seven databases was conducted. Two independent reviewers performed data extraction and evaluated ten studies using the Critical Appraisal Screening Program. Findings were analysed and synthesized using thematic analysis. The transactional model of communication was used to guide the analysis. **Key issues** A total of 10 qualitative studies were included. Seven major handover themes were identified: (a) expectations of perfection, (b) need for partnership, (c) unilateral communication, (d) obstacles to information acquisition, (e) lack of pertinent patient information, (f) need for a structured handover and (g) interruptions/distractions. **Conclusions** Handovers should be considered an essential part of patient-centred care for ensuring continuity of care. **Implications for Nursing Management** Poor communication during a handover could increase the nurse's burden or stress and adversely affect patient care. Therefore, training should be provided on explicit handover communication.

Maria Ruzafa-Martinez, Solanger Hernández-Méndez, Jessica Garcia-Gonzalez, Cesar Leal-Costa, Miguel Ángel Martínez-González, & Antonio Jesús Ramos-Morcillo. (2021). Changes in nurse job outcomes after 4 years of a best practice spotlight organization® programme implementation in the spanish national health context. *Journal of Nursing Management*, 29(4), 699-709. doi:<https://doi.org/10.1111/jonm.13206>

Aim To evaluate the changes produced after the application of the Best Practice Spotlight Organization® (BPSO®) Program on the attitude towards the evidence-based practice, the nurses' perception of the organisational climate and nurse outcomes in a health area of the Spanish National Health System. **Background** There is limited research that associates strategies of evidence-based practice implementation with changes on the work environment and nurse outcomes. **Methods** Cross-sectional study that compared data on the nurses' perception of the work environment. Five guidelines were implemented between 2012 and 2015 in a health area. Data were collected in

2012 and 2016/2017, using a questionnaire consisting of five previously validated tools. X², t test, ANOVA and multivariate analysis were carried out. Results A total of 451 nurses participated. Compared with the baseline evaluation in 2012, several outcomes changed significantly ($p < .001$), nurses were younger and were more satisfied with “salary”, “annual leaves” and “sick leave”. The rest of the nurse outcomes were not modified. Conclusions Nurses' perception of the work environment is favourable, although the application of the BPSO® Program has not produced any major changes. Implications for Nursing Management Measures are suggested that are oriented towards the planning of staffing and the increase in the participation of the nursing staff in programmes of implementation of guidelines.

Bing, X. Y., Lin, X., Huang, R., Chen, P., Luo, D., Liu, Q., . . . Xiao, Q. W. (2021). Relationship between eHealth literacy and psychological status during COVID-19 pandemic: A survey of Chinese residents. *Journal of Nursing Management*, 29(4), 805-812. doi:<https://doi.org/10.1111/jonm.13221>

Aims To investigate the eHealth literacy and the psychological status of Chinese residents during the COVID-19 pandemic and explore their interrelationship. **Background** The COVID-19 outbreak has placed intense psychological pressure on community residents. Their psychological status may be affected by eHealth literacy due to home isolation during this rampant pandemic. **Methods** This is a Web-based cross-sectional survey conducted on the JD Health platform, which resulted in 15,000 respondents having participated in this survey. The eHealth Literacy Questionnaire (EHLQ), Patient Health Questionnaire-9 (PHQ-9), Insomnia Severity Index (ISI) and Impact of Event Scale-Revised (IES-R) were used. The Pearson correlation was used to analyse the relationship between eHealth literacy and depression, insomnia and post-traumatic stress disorder. **Results** The score of eHealth literacy was 48.88 ± 8.46 , and 11.4%, 6.8% and 20.1% of respondents experienced moderate to severe depression, insomnia and post-traumatic stress disorder. eHealth literacy negatively correlated with depression ($r = -0.331$), insomnia ($r = -0.366$) and post-traumatic stress disorder ($r = -0.320$). **Conclusion** eHealth literacy is closely related to psychological status. Improving eHealth literacy may contribute to maintaining good psychological well-being. **Implications for Nursing Management** It is necessary to strengthen the education of primary health care providers to enhance their ability to help community residents effectively use eHealth information.

Lee, G. A. (2021). Don't forget the leadership in advanced practice. *Journal of Nursing Management*, 29(4), 607-608. doi:<https://doi.org/10.1111/jonm.13032>

Although the advanced practice role primarily focuses on delivering the clinical aspects of patient care, the other pillars of advanced practice (research, education and leadership/management) should not be overlooked as they are key to the success of the advanced practice role. Interestingly, the International Council of Nursing definition of nurse practitioners includes the importance of certain characteristics, ‘expert knowledge base, complex decision-making skills and clinical competencies’, but does not include the other pillars of advanced practice (International Council of Nurses, 2020).

Elsasser, J., Cope, V., & Murray, M. (2021). Qualitative perspectives of nurse managers on mixed-gender accommodation in a regional hospital in Australia. *Journal of Nursing Management*, 29(4), 741-748. doi:<https://doi.org/10.1111/jonm.13214>

Aims To explore and analyse the current bed management processes and understand the perspectives of nurse managers on mixed-gender accommodation in a regional hospital in Australia. **Background** Mixed-gender accommodation was introduced to help manage the increasing demand for hospital beds. Yet, some health services identify same-gender accommodation better aligns with patient-centredness. **Method** This qualitative research was conducted at a public hospital in regional Australia and focused on the experience in the general wards. Eight nurse managers were selected using purposeful sampling. Data were collected through face-to-face semi-structured interviews and thematically analysed. **Results** Three main themes were identified: current admission processes—managing admissions, bed allocation considerations, patient involvement and managing mixed-gender rooms; impacts on patients—participant views, patient experience and bathrooms; and barriers and facilitators—capacity, infrastructure, safety and risk, bed swapping and organisational factors. **Conclusions** The study

demonstrates a lack of structure and patient-centredness with mixed-gender allocation processes. Local organisational guidelines are suggested to support improvement in patient-centred inpatient hospital accommodation. Implications for Nursing Management The findings of this study will help nursing leaders drive positive change concerning bed allocations and support advocacy for patient rights. Future studies should explore the patient perspective of mixed-gender accommodation.

Terada, T., Scott, K., Way, K. L., Tulloch, H. E., Pipe, A. L., Chirico, D., . . . Reed, J. L. (2021). Meeting the Canadian strength training recommendations: Implications for the cardiometabolic, psychological and musculoskeletal health of nurses. *Journal of Nursing Management*, 29(4), 681-689. doi:<https://doi.org/10.1111/jonm.13204>

AimTo examine the proportion of nurses meeting the strength training recommendation and its associated cardiometabolic, psychological and musculoskeletal benefits. **Background**Strength training targets poor physical and mental health often reported by nurses; however, it is unknown whether nurses are meeting the strength training guidelines. **Methods**Nurses from 14 hospitals completed a 7-day physical activity log. Nurses were considered meeting the recommendation if they reported ≥ 2 strength training sessions per week. Cardiometabolic, psychological and musculoskeletal health, and levels of motivation were compared between nurses meeting and not meeting the guidelines. **Results**Of the 307 nurses (94% female; age: 43 ± 12 years), 29 (9.4%) met the strength training recommendation. These nurses had lower body mass index (24.1 ± 2.6 vs. 27.3 ± 5.5 kg/m², $p = .007$) and waist circumference (73.8 ± 8.3 vs. 81.1 ± 11.7 cm, $p = .017$); and higher vigour-activity (18.0 ± 5.8 vs. 15.6 ± 6.5 points, $p = .046$) and self-determined motivation (relative autonomic index: 54.9 ± 20.3 vs. 45.0 ± 23.8 points, $p = .042$) scores than nurses not meeting the recommendation. **Conclusion**While the proportion of nurses meeting the strength training recommendation was small ($<10\%$), they had lower body mass and waist circumference, and higher vigour-activity. **Implications for nursing management**Strategies to increase the strength training engagement may improve the cardiometabolic health and increase vigour among nurses.

Antonio Jesús Ramos-Morcillo, Serafín Fernández-Salazar, César Leal-Costa, & María Ruzafa-Martínez. (2021). Evidence-based practice nurses' competency: Spanish national survey and establishment of a scale of the EBP-COQ-Prof©. *Journal of Nursing Management*, 29(4), 794-804. doi:<https://doi.org/10.1111/jonm.13220>

AimsTo discover the level of evidence-based practice competency of Spanish nurses, to develop a scale of the EBP-COQ-Prof© and to analyse the influence of different variables on the level of competency. **Background**The evidence-based practice competency has previously been assessed using a wide variety of instruments, although these have methodological limitations and lack associated scales that allow for the interpretation of the score obtained. **Method**Observational, cross-sectional, national study. Using an online questionnaire, data were obtained between January and March 2020 from nurses working in the National Health System. An ANOVA was performed along with multiple regression analyses. The T-score and percentiles were calculated to obtain the scale of the EBP-COQ-Prof©. **Results**2,942 nurses participated. The score for the evidence-based practice competency was 130.29 (standard deviation 17.55). The multiple regression analysis showed a model comprised of 8 variables that explained 33% of the variance. **Conclusions**The Spanish nurses have a moderate level of evidence-based practice competency. The scale classifies the subjects into 3 levels: low, moderate and high competency. **Implications for Nursing Management**The scale proposed for the EBP-COQ-Prof© could be utilized to facilitate the diagnosis of evidence-based practice competency, and to monitor and plan individual and collective strategies to improve this competency.

Ishii, K., Takemura, Y., & Ichikawa, N. (2021). Relationships between the components of nurse managers' transformational leadership and organisational learning subprocesses in a hospital ward: A cross-sectional study. *Journal of Nursing Management*, 29(4), 672-680. doi:<https://doi.org/10.1111/jonm.13203>

AimsTo investigate the association between the five components of nurse managers' transformational leadership and each process of organisational learning in a hospital ward. **Background**Elucidating the components of nurse managers' transformational leadership that promote organisational learning is needed. **Methods**In 2018, 591 self-report questionnaires from two hospitals in Japan were analysed, using the measurement scale for Organizational

Learning Subprocesses and Multifactor Leadership Questionnaire. Hierarchical linear modelling was conducted using the wards' mean scores of five components of transformational leadership and five subprocesses of organisational learning. Results None of the transformational leadership components were significantly associated with information acquisition, but all five were significantly positively associated with information distribution and information integration. Only some of the five components showed a significant association with information interpretation and organisational memory. Conclusion Transformational leadership may be effective to promote the four organisational learning processes other than information acquisition. Implications for Nursing Management A nurse manager should exercise leadership other than transformational leadership, or use other strategies to promote information acquisition. However, particular behaviours of transformational leadership, such as intellectually stimulating behaviours and personal considerations, could be effective in promoting the understanding of information among the members and establishing new routines.

Grosemans, J., Bergs, J., Vlayen, A., Schrooten, W., & Hellings, J. (2021). Defining a set of potentially preventable complications relevant to nursing: A delphi study among head nurses. *Journal of Nursing Management*, 29(4), 834-843. doi:<https://doi.org/10.1111/jonm.13225>

Aim To establish a list of potentially preventable complications as a tool for nursing management. Background Different outcome parameters have been used in patient safety research. However, they have mainly been used for medical and administrative goals. The role of nurses in achieving patient safety outcomes has been given little attention. Method A three-round Web-based modified Delphi study was conducted in four hospitals, using the list of potentially preventable complications (PPCs) as a starting point. Consensus on a shortlist of nursing relevant complications was the endpoint. Results This study revealed a shortlist 12 PPCs relevant to the nursing profession, based on the expert opinion of more than sixty head nurses from different wards and hospitals. An overall consensus of 77.58% was reached. In surgical, medical and geriatric wards, a consensus of 95.7% was achieved. Conclusion This is the first study that points out which PPCs are related to nursing. The shortlist contains some of the most studied complications and can serve a wide variety of hospital wards. Implications for Nursing Management Prevention of complications reduces harm to patients and avoids the nursing work and costs to treat them. This list provides nursing managers with a powerful tool to raise awareness for risk assessment and preventive measures among nurses. It offers an instrument to facilitate the documentation and handover of patient safety outcomes in nursing. This shortlist can also serve as an assessment tool for patient safety interventions.

Inoue, M., Kunie, K., Takemura, Y., Kida, R., & Ichikawa, N. (2021). The influence of learning circumstances and on-the-job opportunities for professional growth on perceived person–environment fit among hospital nurses: A longitudinal study. *Journal of Nursing Management*, 29(4), 776-784. doi:<https://doi.org/10.1111/jonm.13218>

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