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29 September 2023 02:29

TABLE OF CONTENTS

Search Strategy.....	v
1. Advancing nursing practice through fundamental care delivery.....	1
2. Factors affecting nurses' retention in Iranian hospitals.....	2
3. The association between hospital nursing resource profiles and nurse and patient outcomes.....	4
4. Peer group clinical supervision for community health nurses: Perspectives from an interpretive hermeneutic study.....	6
5. Appraisal and evaluation of the instruments measuring the nursing work environment: A systematic review.....	9
6. Citation analysis on the research frontiers and evolution of enhanced recovery after surgery.....	11
7. The impact of nurse staffing on falls performance within a health care system: A descriptive study.....	13
8. Perceived importance of competencies by nurse managers at all levels: A cross-sectional study.....	15
9. Second victim experience and support desire among nurses working at regional levels in China.....	17
10. Nurses' spiritual well-being and the COVID-19 pandemic: A thematic approach.....	19
11. The status and associated factors of junior nurses' transition shock: A cross-sectional study.....	21
12. Associations between two nursing workload scales and the cost of intensive care unit nursing staff: A retrospective study of one Belgian hospital.....	23
13. Turnover intention and coronaphobia among frontline nurses during the second surge of COVID-19: The mediating role of social support and coping skills.....	25
14. Nurse leader agency: Creating an environment conducive to support for graduate nurses.....	28
15. A qualitative study on barriers and facilitators of quality improvement engagement by frontline nurses and leaders.....	30
16. Nurses' disaster core competencies and resilience during the COVID-19 pandemic: A cross-sectional study from Turkey.....	32
17. The effect of burnout and its dimensions on turnover intention among nurses: A meta-analytic review....	34
18. Safety climate in hospitals: A cross-sectional study on the perspectives of nurses and midwives.....	36
19. Factors influencing mindfulness among clinical nurses in China: An observational cross-sectional study	39
20. The impact of organisational commitment and leadership style on job satisfaction of nurse practitioners in acute care practices.....	41
21. Global prevalence of resilience in health care professionals: A systematic review, meta-analysis and meta-regression.....	43
22. Leadership challenges and strategies to dementia care in Chinese faith-based nursing homes: A qualitative study.....	45
23. Exploring the relationship between organisational silence and organisational learning in nurses: A cross-sectional study.....	47
24. A cost analysis with the discrete-event simulation application in nurse and doctor employment management.....	49

TABLE OF CONTENTS

25. The association of professionalism and systems thinking on patient safety competency: A structural equation model.....	51
26. Assessing sense of coherence as an element of primary-focused health services in schools for children and adolescents with complex health care needs.....	54
27. Nurses' attitudes towards their jobs in outpatient human immunodeficiency virus facilities in Namibia: A qualitative descriptive study.....	56
28. The Inpatient Experience with Nursing Care Scale (IPENCS): Development, validation and psychometric properties.....	58
29. Mental health, safety and support during COVID-19: A cross-sectional study of primary health care nurses.....	60
30. The impact of nurses' perceptions of systems thinking on occurrence and reporting of adverse events: A cross-sectional study.....	63
31. Stress, psychological distress and support in a health care organization during Covid-19: A cross-sectional study.....	65
32. Relationship between nursing mentorship and transformational leadership of mentor: A cross-sectional study.....	67
33. The effects of an emergency nurse-led stress-reduction project during the first 120days of the COVID-19 pandemic in Taiwan.....	69
34. A translational research framework for nurse practitioners.....	72
35. Structural empowerment and work ethics influence on the work engagement of millennial nurses.....	74
36. Staff structural empowerment—Observations of first-line managers and interviews with managers and staff.....	76
37. Effects of group psychological counselling on transition shock in newly graduated nurses: A quasi-experimental study.....	78
38. Nurse staffing, missed care, quality of care and adverse events: A cross-sectional study.....	80
39. Defining nursing workload predictors: A pilot study.....	83
40. Perceptions of nurses and physicians on pay-for-performance in hospital: A systematic review of qualitative studies.....	85
41. Setting minimum standards of practice in times of crisis.....	87
42. Nurses' experience of work stress related to COVID-19 regular prevention and control in China: A qualitative study.....	89
43. Factors influencing career success of clinical nurses in northwestern China based on Kaleidoscope Career Model: Structural equation model.....	91
44. Work schedule characteristics and occupational fatigue/recovery among rotating-shift nurses: A cross-sectional study.....	94
45. Experiences of first-line nurse managers during COVID-19: A Jordanian qualitative study.....	96
46. Family caregivers' experiences and needs of transitional care during the transfer from intensive care unit to a general ward: A qualitative study.....	98

TABLE OF CONTENTS

47. The effect of Neurolinguistic Programming practices on organizational citizenship behaviour of nurses: A randomized controlled study.....	100
48. Nurses' views on change management in health care settings: A qualitative study.....	102
49. Core competencies of the midwifery workforce in China: A scoping review.....	104
50. Nurses' perceptions regarding barriers to implementing the Internet Plus Nursing Service programme: A qualitative study.....	106
Bibliography.....	109

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.

Advancing nursing practice through fundamental care delivery

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Fundamental care is defined as follows (Feo et al., 2017; ILC, 2021):

Fundamental care involves actions on the part of the nurse that respect and focus on a person's essential needs to ensure their physical and psychosocial wellbeing. These needs are met by developing a positive and trusting relationship with the person being cared for as well as their family/carers

The fundamentals of care are conceptualized within three distinct dimensions of care: (1) the relationship, (2) the integration of care and (3) the care context (ILC, 2021). The relationship involves five core elements: developing and maintaining trust, focusing on the patient being cared for, anticipating the patients' needs, getting to know the patient and how best to provide care for them and evaluating the quality progress and outcomes of the relationship (ILC, 2021). The integration of care provides detailed outline of the physical psychosocial and relational aspects of the fundamentals of care

DETAILS

Subject:	Holistic nursing; Nursing administration; Quality of care; Nurse patient relationships; Nursing care
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	3
Pages:	601-603
Publication year:	2022
Publication date:	Apr 2022
Section:	EDITORIAL

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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Editorial
Publication history :	
Online publication date:	2022-04-07
Milestone dates:	2021-06-24 (Received); 2021-06-24 (Accepted)
Publication history :	
First posting date:	07 Apr 2022
DOI:	https://doi.org/10.1111/jonm.13402
ProQuest document ID:	2647662534
Document URL:	https://www.proquest.com/scholarly-journals/advancing-nursing-practice-through-fundamental/docview/2647662534/se-2?accountid=211160
Copyright:	© 2022 John Wiley & Sons Ltd
Last updated:	2022-05-23
Database:	Publicly Available Content Database

Document 2 of 50

Factors affecting nurses' retention in Iranian hospitals

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

This research was conducted to study the factors affecting nurses' retention in Iranian hospitals.

Background

Health care systems should pay attention to their human resources' retention to deliver health care services and maintain their organizational values. This issue becomes more significant when we consider the human and financial limitations in place.

Method

Data were analysed using conventional qualitative content analysis based on the model developed by Elo and Kyngäs. Forty-two managers and nurses were selected by purposive sampling. Data were obtained through 45 semi-structured interviews until data saturation was reached.

Results

The data analysis resulted in four main categories and 17 subcategories. The main categories included dignity and respect, ethics and spirituality, empathy, and flourishing. The main theme extracted was 'maternal management'.

Conclusion

The present study proposes 'maternal management' as a strategy to increase the retention of nurses.

DETAILS

Subject:	Spirituality; Health care; Hospitals; Retention; Nurse managers; Human resources; Content analysis; Nursing administration; Leadership; Nurses; Saturation; Empathy; Ethics
Business indexing term:	Subject: Leadership
Identifier / keyword:	human resource management; leadership; nurse management; nurse managers
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	3
Pages:	785-794
Publication year:	2022
Publication date:	Apr 2022
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article
Publication history :	
Online publication date:	2022-03-15
Milestone dates:	2022-01-11 (Revised); 2021-06-19 (Received); 2022-02-19 (Accepted)
Publication history :	
First posting date:	15 Mar 2022
DOI:	https://doi.org/10.1111/jonm.13568
ProQuest document ID:	2647662521
Document URL:	https://www.proquest.com/scholarly-journals/factors-affecting-nurses-retention-iranian/docview/2647662521/se-2?accountid=211160
Copyright:	© 2022 John Wiley & Sons Ltd
Last updated:	2022-06-28
Database:	Publicly Available Content Database

Document 3 of 50

The association between hospital nursing resource profiles and nurse and patient outcomes

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aims

To identify and describe profiles of nursing resources and compare nurse and patient outcomes among the identified nursing resource profiles.

Background

Research linking nurse education, staffing, and the work environment treats these nursing resources as separate variables. Individual hospitals exhibit distinct profiles of these resources.

Methods

This cross-sectional secondary analysis used 2006 data from 692 hospitals in four states. Latent class mixture modelling was used to identify resource profiles. Regression models estimated the associations among the profiles and outcomes.

Results

Three profiles were identified (better, mixed and poor) according to their nursing resource levels. Hospitals with poor profiles were disproportionately mid-sized, for-profit, and had lower technology capability. Nurse job outcomes, patient mortality and care experiences were significantly improved in hospitals with better resource profiles.

Conclusions

Hospitals exhibit distinct profiles of nursing resources that reflect investments into nursing. Nurse and patient outcomes and patients' experiences are improved in hospitals with better nursing resource profiles. This finding is consistent with the literature that has examined these resources independently.

Implications for Nursing Management

Nurse managers can identify their nursing resource profile and the associated outcomes. Our results show the advantages of improving one's hospital nursing resource profile, motivating managers to make an informed decision regarding investments in nursing resources.

DETAILS

Subject:	Clinical outcomes; Hospitals; Clinical training; Nurse managers; Patients; Patient satisfaction; Modelling; Work environment; Nursing administration; Nursing; Capabilities; Technology; Staffing
Identifier / keyword:	hospitals; nurse administrators; nursing staff, hospital; patient care; workforce
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	3
Pages:	836-845

Publication year:	2022
Publication date:	Apr 2022
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article
Publication history :	
Online publication date:	2022-02-17
Milestone dates:	2022-01-12 (Revised); 2021-10-30 (Received); 2022-01-27 (Accepted)
Publication history :	
First posting date:	17 Feb 2022
DOI:	https://doi.org/10.1111/jonm.13553
ProQuest document ID:	2647662474
Document URL:	https://www.proquest.com/scholarly-journals/association-between-hospital-nursing-resource/docview/2647662474/se-2?accountid=211160
Copyright:	© 2022 John Wiley & Sons Ltd
Last updated:	2022-05-23
Database:	Publicly Available Content Database

Peer group clinical supervision for community health nurses: Perspectives from an interpretive hermeneutic study

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

To explore the lived experience of utilizing peer group supervision in practice for community health nurses.

Background

Community health nursing is an autonomous and challenging role where quality clinical supervision has benefits for the registered nurse. The structured New Zealand Coaching and Mentoring model of peer group supervision provides the foundation for this research.

Method

An interpretive hermeneutic study explored the experience of peer group supervision in a regional health service in Australia. Qualitative in-depth interviews were conducted with all levels of nursing staff to gain an understanding of their experience of peer group supervision.

Results

Data interpretation through hermeneutic analysis revealed the value and professional sustenance gained by participants. Identified game changers include adherence to rules and the influence of group dynamics. These areas were found to impact the quality of supervision.

Conclusions

This research provides different perspectives of peer group supervision that shares the experience of staff immersed in the process. Peer group supervision yields benefits for community health nurses; however, the research has implications for practice.

Implications for nursing management

Nurse managers require information when making key decisions regarding workplace implementation. Effective supervision is only possible when balance between benefits and game changers are achieved.

DETAILS

Subject: Clinical supervision; Group dynamics; Nurse managers; Coaching; Group supervision; Community health; Community nursing; Nursing administration; Workplaces; Supervision; Nursing; Clinical nursing; Nurses; Health services; Professional practice

Business indexing term: Subject: Supervision

Identifier / keyword: clinical supervision; community health nurse; hermeneutic interpretation; peer group supervision

Publication title: Journal of Nursing Management; Oxford

Volume:	30
Issue:	3
Pages:	684-693
Publication year:	2022
Publication date:	Apr 2022
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:	0966042 9
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article
Publication history :	
Online publication date:	2021-12-28
Milestone dates:	2021-11-16 (Revised); 2021-07-14 (Received); 2021-12-09 (Accepted)
Publication history :	
First posting date:	28 Dec 2021
DOI:	https://doi.org/10.1111/jonm.13535
ProQuest document ID:	2647662472
Document URL:	https://www.proquest.com/scholarly-journals/peer-group-clinical-supervision-community-health/docview/2647662472/se-2?accountid=211160
Copyright:	© 2022 John Wiley & Sons Ltd
Last updated:	2023-07-28
Database:	Publicly Available Content Database

Appraisal and evaluation of the instruments measuring the nursing work environment: A systematic review

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aims

To appraise the current instruments available for measuring the nursing work environment and re-examine the definition and construct of the nursing work environment.

Background

A psychometrically sound instrument is fundamental to understanding and improving the nursing work environment. The nursing work environment is a complex construct, and its definition remains inconclusive. None of the instruments available is considered as the gold standard.

Evaluation

A comprehensive searching was undertaken in August 2021 in six databases according to PRISMA. The COSMIN and modified GRADE were applied to assess the methodological quality and measurement properties of the instruments. Instruments were categorized into three levels. The definition and construct of nursing work environment were revisited.

Key issues

Forty-one studies (19 instruments) were included. One, fourteen, and four instruments are respectively appraised as A-, B- and C-level recommendation. Definition and eight labels of nursing work environment are identified.

Conclusion

This paper provides recommendations for selecting a proper instrument for the nursing work environment.

Implications for nursing management

This study helps nurse managers to select instruments and understand the construct of the nursing work environment. The eight labels can be used as a reference for tailoring policy aimed at creating a favourable nursing work environment.

DETAILS

Subject: Nursing administration; Measurement; Databases; Nursing; Work environment; Systematic review; Nurse managers; Appraisal; Nurses

Business indexing term: Subject: Work environment

Identifier / keyword:	health facility environment; health care management; nursing work environment; psychometrics; systematic review
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	3
Pages:	670-683
Publication year:	2022
Publication date:	Apr 2022
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Evidence Based Healthcare, Journal Article
Publication history :	
Online publication date:	2022-02-28
Milestone dates:	2021-12-13 (Revised); 2021-09-27 (Received); 2022-02-04 (Accepted)
Publication history :	
First posting date:	28 Feb 2022
DOI:	https://doi.org/10.1111/jonm.13559
ProQuest document ID:	2647662467
Document URL:	https://www.proquest.com/scholarly-journals/appraisal-evaluation-instruments-measuring/docview/2647662467/se-2?accountid=211160

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Last updated: 2022-05-23

Database: Publicly Available Content Database

Document 6 of 50

Citation analysis on the research frontiers and evolution of enhanced recovery after surgery

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aims

To evaluate the research frontiers and evolution laws in the field of enhanced recovery after surgery (ERAS) and to predict the next direction of development.

Background

In recent years, the clinical applications of ERAS have been widely recognized by the medical community. Nursing work is present throughout the entire process, and nurses not only play a role in multidisciplinary coordination but also maintain independent professional characteristics.

Methods

The citation analysis method was used to analyse the research documents in the Web of Science database over the last 10 years.

Results

The number of documents in the field published from 2011 to 2020 increased annually. The application in colorectal surgery was the most important research frontier. From 2016 to 2020, the research frontiers were diversified. The application in colorectal surgery remains the most important research frontier, and perioperative nursing will play an important role in the future.

Conclusions

This study used citation analysis to analyse the research frontiers and evolution of ERAS in the last 10 years.

Implications for nursing management

This research will help nursing managers to carry out research and clinical promotion plans in the ERAS field and guide the transformation of scientific research achievements into nursing practice.

DETAILS

Subject:	Databases; Transformation; Recovery (Medical); Application; Citation analysis; Recovery; Surgery; Community nursing; Clinical research; Nursing administration; Research; Nursing; Clinical nursing; Coordination; Colorectal surgery; Professional practice
Identifier / keyword:	citation analysis; ERAS; research frontiers
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	3
Pages:	827-835
Publication year:	2022
Publication date:	Apr 2022
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article
Publication history :	
Online publication date:	2022-02-03
Milestone dates:	2021-12-14 (Revised); 2021-10-18 (Received); 2021-12-18 (Accepted)
Publication history :	
First posting date:	03 Feb 2022
DOI:	https://doi.org/10.1111/jonm.13541
ProQuest document ID:	2647662386

Document URL: <https://www.proquest.com/scholarly-journals/citation-analysis-on-research-frontiers-evolution/docview/2647662386/se-2?accountid=211160>

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Last updated: 2023-06-21

Database: Publicly Available Content Database

Document 7 of 50

The impact of nurse staffing on falls performance within a health care system: A descriptive study

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

The purpose of this study was to examine the impact of nurse staffing on inpatient falls performance across a multi-hospital system.

Background

Evidence to support which staffing variables influence fall performance so that health care organizations can better allocate resources is lacking.

Method

A descriptive study design was used to analyse the impact of nurse staffing and falls performance, with units dichotomized as either high or low performing based on national benchmarking data. The impact was evaluated using 10 nurse staffing variables.

Results

A total of nine units were included (five high and four low performing). Higher performing units showed less use of sitters and travellers, had fewer overtime hours worked by nurses, and employed more expert-level clinical nurses and combined nursing assistant/health unit coordinator positions, than lower performing units.

Conclusion

Findings provide evidence of how staffing variables affect a unit's falls performance. While significant relationships were found, further evaluation is needed to explore the relationship of staffing variables and quality outcomes.

Implications for Nursing Management

Nursing managers may consider trying to reduce use of sitters and travellers, and utilize innovative staffing models, such as using combined nursing assistant/health unit coordinator positions, to help improve their falls performance.

DETAILS

Subject:	Variables; Workforce planning; Health care; Clinical outcomes; Resource allocation; Travellers; Working hours; Assistants; Nursing administration; Nursing; Staffing; Clinical nursing; Nurses; Inpatient care
Business indexing term:	Subject: Workforce planning
Identifier / keyword:	falls; nursing; skill mix; staffing; staffing ratios
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	3
Pages:	750-757
Publication year:	2022
Publication date:	Apr 2022
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article
Publication history :	
Online publication date:	2022-02-20
Milestone dates:	2022-01-19 (Revised); 2021-10-19 (Received); 2022-02-01 (Accepted)
Publication history :	
First posting date:	20 Feb 2022

DOI: <https://doi.org/10.1111/jonm.13555>

ProQuestdocument ID: 2647662382

Document URL: <https://www.proquest.com/scholarly-journals/impact-nurse-staffing-on-falls-performance-within/docview/2647662382/se-2?accountid=211160>

Copyright: © 2022 John Wiley & Sons Ltd

Last updated: 2022-05-23

Database: Publicly Available Content Database

Document 8 of 50

Perceived importance of competencies by nurse managers at all levels: A cross-sectional study

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

To explore nurse managers' perceived importance of competencies for their current job at different levels and the associated factors.

Background

Little work to date has explored the perceived importance of competencies in nursing leadership and management or considered the related factors in the Taiwan healthcare context.

Methods

Data collected from a previous large study comprising a cross-sectional web-based survey were analysed. Kruskal–Wallis test, two-sided Fisher exact test and multiple linear regression models were used for statistics analysis.

Results

The mix of three skills in Katz's model indicated that human skills were equally important in all three managerial levels. Of the 23 competencies, effective communication and political astuteness were rated by nurse managers at all levels as the highest-scored ($M=4.88$, $SD=0.34$) and lowest-scored competency ($M=3.92$, $SD=0.78$), respectively. Managerial level was a significant predictor of the perceived importance of competency.

Conclusions

Relationship-based competencies were prominent in the perceived importance of competencies among nurse managers at different levels. Managerial hierarchy influences the relative importance of the different managerial competencies.

Implications for Nursing Management

This study's results provide the talent strategy framework required for improving the competencies of nurse managers at all levels.

DETAILS

Subject:	Nursing administration; Health care; Nursing; Core competencies; Competence; Nurse managers; Managers; Managerial skills; Leadership; Ability
Business indexing term:	Subject: Core competencies Managerial skills
Identifier / keyword:	cross-sectional studies; leadership; managerial competencies; nurse administrators
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	3
Pages:	633-642
Publication year:	2022
Publication date:	Apr 2022
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article
Publication history :	
Online publication date:	2022-01-17
Milestone dates:	2021-12-23 (Revised); 2021-06-10 (Received); 2021-12-29 (Accepted)
Publication history :	

First posting date: 17 Jan 2022

DOI: <https://doi.org/10.1111/jonm.13545>

ProQuest document ID: 2647662381

Document URL: <https://www.proquest.com/scholarly-journals/perceived-importance-competencies-nurse-managers/docview/2647662381/se-2?accountid=211160>

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Last updated: 2022-10-08

Database: Publicly Available Content Database

Document 9 of 50

Second victim experience and support desire among nurses working at regional levels in China

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

The aim of this study was to describe and analyse the degree of second victim syndrome and the desire for supports among nurses working in regional hospitals in China.

Background

The evidence on the prevalence of second victim among health care workers remains inconsistent and has rarely focused on the regional level.

Methods

A quantitative, descriptive, survey-based, online, cross-sectional study was conducted among 1,194 nurses in three regional hospitals.

Results

A total of 918 (76.88%) nurses, who reported have had experienced patient safety incidents, were selected for the final analysis. The mean score for the Chinese version of the Second Victim Experience and Support Tool (C-SVEST) was (65.58±10.05). Psychological distress (15.91±2.99) and practice distress (15.26±4.32) had the highest score. The mean score for the desired form of support was (4.29±0.614). The option 'the opportunity to get

guidance and suggestions for future work' was rated the most desired.

Conclusion

Nurses working at the regional level reported a similar degree of second victim experience and support desire, while the prevalence was much higher.

Implications for Nursing Management

The second victim phenomenon has become increasingly complex and challenging and deserves more attention. Not only Safety-I but also Safety-II approaches are suggested to be integrated to patient safety.

DETAILS

Subject:	Nursing administration; Patient safety; Health care; Hospitals; Nurse led services; Nurses; Medical personnel; Chinese languages; Desire; Psychological distress
Location:	China
Identifier / keyword:	critical medical incidents; nurses; patient safety; regional level; second victims
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	3
Pages:	767-776
Publication year:	2022
Publication date:	Apr 2022
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article

Publication history :

Online publication date: 2022-03-11

Milestone dates: 2021-12-24 (Revised); 2021-11-18 (Received); 2022-02-13 (Accepted)

Publication history :

First posting date: 11 Mar 2022

DOI: <https://doi.org/10.1111/jonm.13563>

ProQuest document ID: 2647662380

Document URL: <https://www.proquest.com/scholarly-journals/second-victim-experience-support-desire-among/docview/2647662380/se-2?accountid=211160>

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Last updated: 2023-08-01

Database: Publicly Available Content Database

Document 10 of 50

Nurses' spiritual well-being and the COVID-19 pandemic: A thematic approach

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ABSTRACT (ENGLISH)

Aims

This study explores nurses' perceived spiritual well-being in the workplace during the COVID-19 pandemic.

Background

Nurses have been working heavy shifts under challenging workplace conditions during the COVID-19 pandemic, leading to anxiety and psychological stress. These various challenges at work place their spiritual well-being at risk.

Methods

An unstructured individual online interview was conducted to collect data from 18 nurses from April to August 2021. Data were analysed using the thematic approach.

Results

This study highlighted the four themes of spiritual well-being of nurses, namely, "Trust in God," "spiritual encouragement," "spiritual attributes in the workplace," and "spiritual growth."

Conclusions

The study concludes that spirituality is critical in helping nurses overcome the myriad of adversities they face as they assume their important roles during the ongoing pandemic.

Implication for Nursing Management

The study emphasizes that nurses' spiritual aspect during crises is equally important with the other aspects of a nurse's life. Moreover, policies and interventions in hospitals must be implemented to ensure excellent levels of spiritual well-being among nurses.

DETAILS

Subject:	Nursing administration; Workplaces; Spirituality; Hospitals; Pandemics; Nurses; God; COVID-19; Occupational stress; Personal growth; Qualitative research
Identifier / keyword:	COVID-19 pandemic; nurses; nursing practice; qualitative study; spiritual well-being; thematic approach
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	3
Pages:	604-611
Publication year:	2022
Publication date:	Apr 2022
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article

Publication history :

Online publication date: 2022-01-07

Milestone dates: 2021-12-10 (Revised); 2021-10-18 (Received); 2021-12-18 (Accepted)

Publication history :

First posting date: 07 Jan 2022

DOI: <https://doi.org/10.1111/jonm.13540>

ProQuest document ID: 2647662373

Document URL: <https://www.proquest.com/scholarly-journals/nurses-spiritual-well-being-covid-19-pandemic/docview/2647662373/se-2?accountid=211160>

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Last updated: 2022-07-21

Database: Publicly Available Content Database

Document 11 of 50

The status and associated factors of junior nurses' transition shock: A cross-sectional study

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

To analyse junior nurses' transition shock status and its associated factors.

Background

When nurses experience transition shock, turnover intentions followed by turnover behaviour are likely, which is unfavourable for the stable development of nursing teams.

Methods

Using convenience sampling, 1,148 Chinese junior nurses were recruited. Those recruited completed a demographic questionnaire and the head nurses' humanistic care behaviour for nurses, feedback-seeking behaviour and transition shock of nurses scales. Data and associated factors of transition shock were analysed using SPSS and univariate and multivariate analyses, respectively.

Results

Head nurses' humanistic care behaviour and nurses' feedback-seeking behaviour were significantly and negatively correlated with junior nurses' transition shock (mean score: 2.87 ± 0.85). Income satisfaction, head nurses' humanistic care behaviour, night shift frequency and educational background entered the regression equation.

Conclusions

Transition shock exists not only in new nurses but also in junior nurses with ≤ 5 -year service. Those dissatisfied with their income have frequent night shifts, and higher education backgrounds have higher levels of transition shock.

Implications for Nursing Management

Head nurses need to reduce transition shock of nurses with ≤ 5 -year service by integrating humanistic care into nursing management and creating a friendly environment to stimulate feedback-seeking behaviour.

DETAILS

Subject:	Nursing administration; Feedback; Nursing; Behavior; Teams; Higher education; Nurses; Night shifts
Identifier / keyword:	feedback seeking; humanistic care; nurses; transition shock
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	3
Pages:	716-723
Publication year:	2022
Publication date:	Apr 2022
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article

Publication history :**Online publication date:** 2022-01-17**Milestone dates:** 2021-12-07 (Revised); 2021-07-20 (Received); 2021-12-29 (Accepted)**Publication history :****First posting date:** 17 Jan 2022**DOI:** <https://doi.org/10.1111/jonm.13543>**ProQuest document ID:** 2647662368**Document URL:** <https://www.proquest.com/scholarly-journals/status-associated-factors-junior-nurses/docview/2647662368/se-2?accountid=211160>**Copyright:** © 2022 John Wiley & Sons Ltd**Last updated:** 2022-05-23**Database:** Publicly Available Content Database

Document 12 of 50

Associations between two nursing workload scales and the cost of intensive care unit nursing staff: A retrospective study of one Belgian hospital

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aims

The aim of this study was to assess associations between a general nursing funding scale and an intensive care unit specific nursing workload scale and the cost of nursing staff.

Background

Nurse staffing represents the most important cost in the intensive care unit, so it is essential to evaluate it accurately. In addition, the assessment of nursing workload is important for the daily management of the intensive care unit and to ensure quality of care.

Methods

This was a retrospective and quantitative study carried out in the intensive care unit of a Belgian hospital. The extraction of data from the Nursing Activities Score and the Minimum Hospital Summary Nursing Dataset were carried out during 2 periods of 15 days, from 1 June 2018 to 15 June 2018 and from 1 September 2018 to 15 September 2018.

Results

A total of 234 patients were included in the study. A total of 773 Nursing Activities Score and Minimum Hospital Summary Nursing Dataset recordings were analyzed in the study per intensive care unit day. A strong correlation was observed between Nursing Activities Score and Minimum Hospital Summary Nursing Dataset for the entire intensive care unit stay with a rho (95% CI) of .88 (0.83–.93); however, the correlation was moderate per intensive care unit day with a rho of .51 (0.45–0.57). A strong association was observed between the Minimum Hospital Summary Nursing Dataset and the Nursing Activities Score with the costs of intensive care unit nurses with a rho (95% CI) of .78 (0.72–0.86) and .74 (0.65–0.84), respectively.

Conclusions

A general nursing funding scale in Belgium was strongly correlated with the nursing workload for the whole intensive care unit stay, but this correlation was moderate per intensive care unit day. In contrast, both scales showed a good correlation with intensive care unit nursing costs.

Implications for nursing management

In Belgium, a general funding scale for nurses does not allow for an assessment of the nursing workload in the intensive care unit. The Nursing Activities Score is strongly correlated with the cost of nursing staff in the intensive care unit. The authors recommend that the Belgian authorities carry out this type of study in several intensive care units in the country and eventually replace the general funding scale for nurses with the Nursing Activities Score.

DETAILS

Subject:	Datasets; Funding; Associations; Health care expenditures; Nursing administration; Nursing; Quality of care; Staffing; Workloads; Intensive care; Nurses
Business indexing term:	Subject: Workloads
Location:	Belgium
Identifier / keyword:	care organisation; cost; hospital funding; nursing activities score; workload
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	3

Pages:	724-732
Publication year:	2022
Publication date:	Apr 2022
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article
Publication history :	
Online publication date:	2022-01-18
Milestone dates:	2021-12-07 (Revised); 2021-09-08 (Received); 2021-12-29 (Accepted)
Publication history :	
First posting date:	18 Jan 2022
DOI:	https://doi.org/10.1111/jonm.13544
ProQuest document ID:	2647662356
Document URL:	https://www.proquest.com/scholarly-journals/associations-between-two-nursing-workload-scales/docview/2647662356/se-2?accountid=211160
Copyright:	© 2022 John Wiley & Sons Ltd
Last updated:	2023-09-21
Database:	Publicly Available Content Database

Turnover intention and coronaphobia among frontline nurses during the second surge of COVID-19: The mediating role of social support and coping skills

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Background

Turnover among frontline health care workers, particularly nurses, reached an alarming rate during the COVID-19 pandemic. This turnover has been attributed, in part, to excessive fear of the virus (a condition called coronaphobia). Studies have not yet been conducted examining whether social support and coping skills could act as buffers between coronaphobia and the intention to leave.

Aim

To examine the relationship between coronaphobia and frontline nurses' organisational and professional turnover intention and to assess whether social support and coping skills can buffer this relationship.

Methods

A correlational research design was used to collect responses through an online questionnaire from a convenience sample of 687 frontline nurses from the Central Philippines. Data were analyzed using descriptive (mean, standard deviation and percentages) and inferential statistics (*t* test, Pearson *r* correlation coefficient, ANOVA and multiple linear regression).

Results

More than half of the frontline nurses experienced coronaphobia, while 25.8% reported a desire to leave their job and 20.7% reported a desire to leave their profession. Coronaphobia had direct significant effects on nurses' organisational ($\beta=.424, p<.001$) and professional turnover intention ($\beta=.316, p<.001$). Social support and coping skills partially mediated the relationship between organisational ($\beta=.365, p<.001$; $\beta=.362, p<.001$) and professional turnover intention ($\beta=.279, p<.001$; $\beta=.289, p<.001$).

Conclusion

Frontline nurses who experienced coronaphobia were more likely to quit their job and the nursing profession. Increasing nurses' social support and enhancing their coping skills reduced the negative effects of coronaphobia, resulting in improved nurse retention.

Implications for Nursing Management

Institutional approaches to reduce coronaphobia and turnover intention during the pandemic can be facilitated by improving social support through innovative approaches (e.g., use of technology and social media) and equipping nurses with positive coping skills through coping skills training and other empirically based coping skill-building interventions.

DETAILS

Subject:	Social support; Health care; Professional training; Social skills; Coping; COVID-19; Social media; Pandemics; Nursing administration; Skill development; Nurse led services; Medical personnel; Nursing; Coping skills; Technology; Desire; Nurses; Skills; Employee turnover
Business indexing term:	Subject: Employee turnover
Identifier / keyword:	coping; coronaphobia; COVID-19; nursing; social support; turnover intention
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	3
Pages:	612-621
Publication year:	2022
Publication date:	Apr 2022
Section:	ORIGINAL ARTICLES
Publisher:	Hindawi Limited
Place of publication:	Oxford
Country of publication:	United Kingdom, Oxford
Publication subject:	Medical Sciences--Nurses And Nursing, Bus iness And Economics--Management
ISSN:	09660429
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article
Publication history :	
Online publication date:	2022-01-25
Milestone dates:	2021-12-07 (Revised); 2021-11-11 (Received); 2021-12-30 (Accepted)
Publication history :	
First posting date:	25 Jan 2022
DOI:	https://doi.org/10.1111/jonm.13542

ProQuest document ID: 2647662348

Document URL: <https://www.proquest.com/scholarly-journals/turnover-intention-coronaphobia-among-frontline/docview/2647662348/se-2?accountid=211160>

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Last updated: 2022-07-21

Database: Publicly Available Content Database

Document 14 of 50

Nurse leader agency: Creating an environment conducive to support for graduate nurses

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

The aim of the study was to gain insight on how nurse leaders manage a culture of safety for graduate nurses.

Background

Current theoretical approaches to safety culture tend towards a checklist approach that focuses on institutional characteristics, failing to examine the quality of interpersonal relationships. These interpersonal interactions are often seen as separate from the institutional realities of resource allocation, nurse–patient ratios, patient acuity or throughput. A theoretical approach is required to illuminate the dialectic between the structure of an organisation and the agency created by nurse leaders to promote patient safety.

Design

Qualitative exploratory descriptive study.

Methods

Semi-structured interviews were undertaken with 24 nurse leaders from hospital and aged care settings. Thematic analysis and Giddens structuration theory was used to describe the findings.

Results

Nurse leaders identified a range of reciprocal communicative and cultural norms and values, decision-making processes, personal nursing philosophies, strategies and operational procedures to foster patient safety and mentor graduate nurses. The mentoring of graduate nurses included fostering critical thinking, building and affirming formal structural practices such as handover, teamwork, medication protocols and care plans.

Conclusions

The study provides insight into how nurse leaders foster a culture of safety. Emphasis is placed on how agency in nurse leaders creates an environment conducive to learning and support for graduate nurses.

Implications for Nursing Management

Nurse leadership functions and decision-making capacity hinges on multiple factors including practicing agency and aspects of the social structure such as the rules for safe communication, and the various institutional protocols. Nurse leaders enforce these forms of engagement and practice through their legitimation as leaders. They have both allocative and authoritative resources; they can command resources, direct staff to attend to patients and/or clinical tasks, mentor, guide, assign, correct and encourage with the authority vested in them by the formal structure of the organisation. In doing so, they sustain the structure and reinforce it.

DETAILS

Subject:	Culture; Patient safety; Resource allocation; Drugs; Legitimation; Interpersonal relations; Learning environment; Nursing administration; Structuration; Leadership; Social structure; Nurse led services; Mentoring; Nursing; Handover; Care plans; Nurses; Critical thinking
Business indexing term:	Subject: Leadership
People:	Giddens, Anthony
Identifier / keyword:	agency; graduate nurses; nurse leaders; patient safety; structuration theory; structure
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	3
Pages:	643-650
Publication year:	2022
Publication date:	Apr 2022
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English

Document type: Journal Article

Publication history :

Online publication date: 2022-03-02

Milestone dates: 2021-12-22 (Received); 2022-02-14 (Accepted)

Publication history :

First posting date: 02 Mar 2022

DOI: <https://doi.org/10.1111/jonm.13561>

ProQuest document ID: 2647662326

Document URL: <https://www.proquest.com/scholarly-journals/nurse-leader-agency-creating-environment/docview/2647662326/se-2?accountid=211160>

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Last updated: 2023-08-30

Database: Publicly Available Content Database

Document 15 of 50

A qualitative study on barriers and facilitators of quality improvement engagement by frontline nurses and leaders

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

This study aimed to understand the facilitators and barriers of quality improvement (QI) from the perspective of nurses and leaders at the frontline.

Background

Nurse engagement in QI has been associated with quality care and improved patient outcomes, yet nurse reported participation is low.

Methods

A descriptive qualitative design and purposive sampling was used to examine barriers and facilitators of nurse engagement.

Results

Facilitators (1) A leader's influence on a QI culture. Subthemes: creating buy-in, support of a just culture and working in partnership with nurses. Barriers (1) Barriers in organizational culture for nurses to lead QI. Subthemes: organizational hierarchy, absence of a just culture, nurses' role not valued, lack of accountability for QI in nursing role and resistance to change. (2) Barriers in organisational structure for nurses to lead QI. Subthemes: manager disengagement, time pressures, lack of access to timely data, lack of QI knowledge, siloed departments and lack of QI experts.

Conclusion

Barriers to QI engagement prevent nurses from fully engaging in QI. Creating a just culture and building the infrastructure to support nurse engagement is critical for success.

Implications for Nursing Management

Specific facilitators and barriers were identified that nurse leaders can assess in their practice setting and use relevant strategies to support engagement in QI.

DETAILS

Subject:	Quality management; Barriers; Corporate culture; Clinical outcomes; Accountability; Patients; Facilitators; Quality improvement; Nursing administration; Organizational structure; Nursing; Disengagement; Quality of care; Nurses; Organizational culture; Infrastructure; Qualitative research
Business indexing term:	Subject: Corporate culture Quality improvement
Identifier / keyword:	barriers; facilitators; leaders; nurse engagement; quality improvement
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	3
Pages:	694-701
Publication year:	2022
Publication date:	Apr 2022
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article
Publication history :	
Online publication date:	2022-02-06
Milestone dates:	2021-12-15 (Revised); 2021-08-11 (Received); 2021-12-18 (Accepted)
Publication history :	
First posting date:	06 Feb 2022
DOI:	https://doi.org/10.1111/jonm.13537
ProQuest document ID:	2647662299
Document URL:	https://www.proquest.com/scholarly-journals/qualitative-study-on-barriers-facilitators/docview/2647662299/se-2?accountid=211160
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Last updated:	2022-07-21
Database:	Publicly Available Content Database

Document 16 of 50

Nurses' disaster core competencies and resilience during the COVID-19 pandemic: A cross-sectional study from Turkey

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

The aim of this study is to determine nurses' disaster core competency levels, compare them based on characteristics and examine the relationships with psychological resilience.

Background

Since nurses constitute a critical part in the health care services, it is important to understand the competencies and effective factors in their disaster preparedness.

Methods

The data were collected from 489 nurses between January and February 2021 with an introductory information form, the Nurses' Perceptions of Disaster Core Competencies Scale and the Connor–Davidson Resilience Scale.

Results

The nurses' level of disaster core competencies was above the average, and it was positively correlated with their psychological resilience. The nurses' disaster experiences made higher differences on their disaster core competencies when compared to their personal and professional characteristics.

Conclusions

It is important to provide disaster training and drills to all nurses on a regular basis. However, under disaster conditions, resilience should also be considered and included in the preparation plans for nurses to support their professional competencies and qualifications.

Implications for nursing management

Nurse managers should play a leadership role in planning disaster preparedness training for nurses, and these trainings should be addressed to cover both professional competencies and resilience for nurses to respond effectively to disasters.

DETAILS

Subject:	Health care; Emergency preparedness; Professional training; Nurse managers; COVID-19; Nursing administration; Disasters; Pandemics; Nurse led services; Nurses; Core competencies; Competence; Resilience; Leadership
Business indexing term:	Subject: Core competencies
Identifier / keyword:	disaster core competencies; disaster preparedness; nurses; nursing management; psychological resilience
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	3

Pages:	622-632
Publication year:	2022
Publication date:	Apr 2022
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article
Publication history :	
Online publication date:	2022-03-04
Milestone dates:	2021-11-26 (Revised); 2021-10-13 (Received); 2022-01-24 (Accepted)
Publication history :	
First posting date:	04 Mar 2022
DOI:	https://doi.org/10.1111/jonm.13552
ProQuest document ID:	2647662239
Document URL:	https://www.proquest.com/scholarly-journals/nurses-disaster-core-competencies-resilience/docview/2647662239/se-2?accountid=211160
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Last updated:	2023-07-28
Database:	Publicly Available Content Database

The effect of burnout and its dimensions on turnover intention among nurses: A meta-analytic review

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

The objective of this study is elaborating on the relationship between burnout and turnover intention.

Background

Burnout and its dimensions have a significant effect on turnover intention.

Evaluation

Meta-analysis technique is used. Forty-four studies were brought together to form four data sets. These data sets were heterogeneous, and they did not include publication bias. The effect sizes of burnout, emotional exhaustion, depersonalization and professional efficacy on turnover intention among nurses were computed.

Key Issues

Random-effects model was used. The groups including two or more studies were added into moderator analysis.

Conclusions

The effect size of the relationship between professional efficacy and turnover intention was *small*, and the effect size of the other surveyed relationships was *medium* among both nurses and other health employees. The moderator analysis results suggested that the effect size of the relationship between professional efficacy and turnover intention among nurses is significantly different from the other health employees. Being a nurse was determined as a significant moderator for the relationship between professional inefficacy and turnover intention, and it weakened this relationship.

Implications for Nursing Management

The findings of this study can be used by health managers as burnout and turnover intention are important to determine organizational policies.

DETAILS

Subject:	Nursing administration; Burnout; Nurses; Fatigue; Efficacy; Depersonalization; Joint ventures; Employee turnover
Business indexing term:	Subject: Burnout Employee turnover
Identifier / keyword:	burnout; depersonalization; emotional exhaustion; professional inefficacy; turnover intention
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	3

Pages:	660-669
Publication year:	2022
Publication date:	Apr 2022
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
e-ISSN:	13 652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article
Publication history :	
Online publication date:	2022-02-22
Milestone dates:	2021-10-26 (Revised); 2021-06-19 (Received); 2021-11-18 (Accepted)
Publication history :	
First posting date:	22 Feb 2022
DOI:	https://doi.org/10.1111/jonm.13525
ProQuest document ID:	2647662192
Document URL:	https://www.proquest.com/scholarly-journals/effect-burnout-dimensions-on-turnover-intention/docview/2647662192/se-2?accountid=211160
Copyright:	© 2022 John Wiley & Sons Ltd
Last updated:	2022-07-21
Database:	Publicly Available Content Database

Safety climate in hospitals: A cross-sectional study on the perspectives of nurses and midwives

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aims

To explore nurses' and midwives' perspectives of safety climate in Austrian hospitals as measurable elements of safety culture and to identify areas of quality improvement.

Background

Due to close contact with patients, nurses and midwives play a vital role in ensuring patient safety.

Method

An online survey among 713 nurses and midwives was conducted, using the 19-item Safety Climate Survey (SCS). To answer the survey, a 5-point Likert scale was provided with higher ratings indicating a more positive safety climate.

Results

Results demonstrate a positive safety culture (MD 4.09, SD 0.53). Significant group differences in overall safety climate score could be found regarding nurses and midwives in managerial positions, between gender and participants age with low effect size. High item missing rates focus aspects on management/leadership, institutional concerns, leadership by physicians, and handling of adverse events. In addition, these items present the lowest ratings in safety climate.

Conclusion

Results indicate potentials for optimization in the areas of leadership communication and feedback, the handling of safety concerns, and visibility or improvement of patient safety strategies.

Implications for Nursing Management

A regular, standardized safety climate measurement can be a valuable tool for nurse managers and (political) decision-makers to manage patient safety initiatives.

DETAILS

Subject: Culture; Measurement; Quality management; Patient safety; Hospitals; Organizational climate; Safety; Nurse managers; Midwives; Visibility; Nursing administration; Critical incidents; Nurses; Optimization; Polls & surveys; Midwifery; Leadership; Industrial safety

Business indexing term: Subject: Industrial safety

Identifier / keyword: hospital; midwives; nurses; patient safety; safety climate; safety culture

Publication title: Journal of Nursing Management; Oxford

Volume:	30
Issue:	3
Pages:	742-749
Publication year:	2022
Publication date:	Apr 2022
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article
Publication history :	
Online publication date:	2022-03-02
Milestone dates:	2021-12-07 (Revised); 2021-09-14 (Received); 2022-01-24 (Accepted)
Publication history :	
First posting date:	02 Mar 2022
DOI:	https://doi.org/10.1111/jonm.13551
ProQuest document ID:	2647662189
Document URL:	https://www.proquest.com/scholarly-journals/safety-climate-hospitals-cross-sectional-study-on/docview/2647662189/se-2?accountid=211160
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Last updated:	2023-08-30

Document 19 of 50

Factors influencing mindfulness among clinical nurses in China: An observational cross-sectional study

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

The aim of this study was to evaluate factors influencing mindfulness among clinical nurses in China.

Background

Mindfulness has positive effects on nurses' negative emotions and job burnout. However, few studies have explored the antecedent variables of mindfulness.

Methods

A total of 358 clinical nurses in Beijing Aerospace Center Hospital completed a cross-sectional survey between July and September 2020. The study employed self-report questionnaires covering social demographics, mindfulness, anxiety, job burnout, emotion regulation, stress perception, resilience, well-being and loneliness.

Results

The mean Mindful Attention Awareness Scale score was 66.82 ± 11.53 , which is near the cut-off score between the high and medium mindfulness categories. Anxiety, stress perception, emotional exhaustion and expressive suppression negatively affected the level of mindfulness, while mental resilience and cognitive reappraisal positively influenced the level of mindfulness (all $P < .05$).

Conclusion

Hospital nurses have higher-than-normal levels of mindfulness. The mindfulness level of clinical nurses is related to anxiety, stress perception, resilience, cognitive reappraisal, emotional exhaustion and expressive suppression.

Implications for nursing management

Nursing managers should consider the role and mechanism of positive psychology and develop targeted intervention measures to improve nurses' mindfulness, in order to further reduce their negative emotions, improve their sense of professional benefit and thus ensure the quality and safety of nursing.

DETAILS

Subject: Fatigue; Positive psychology; Consciousness; Cognitive appraisal; Burnout; Occupational stress; Negative emotions; Nursing administration; Emotional regulation; Mindfulness; Emotions; Loneliness; Social anxiety; Safety regulations; Nursing; Resilience; Clinical nursing; Nurses; Anxiety

Business indexing term:	Subject: Burnout
Location:	China
Identifier / keyword:	anxiety; cognitive reappraisal; job burnout; mindfulness; nurse; stress perception
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	3
Pages:	758-766
Publication year:	2022
Publication date:	Apr 2022
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article
Publication history :	
Online publication date:	2022-02-28
Milestone dates:	2021-12-28 (Revised); 2021-09-14 (Received); 2022-02-13 (Accepted)
Publication history :	
First posting date:	28 Feb 2022
DOI:	https://doi.org/10.1111/jonm.13560
ProQuest document ID:	2647662186

Document URL: <https://www.proquest.com/scholarly-journals/factors-influencing-mindfulness-among-clinical/docview/2647662186/se-2?accountid=211160>

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Last updated: 2022-10-05

Database: Publicly Available Content Database

Document 20 of 50

The impact of organisational commitment and leadership style on job satisfaction of nurse practitioners in acute care practices

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

This study aimed to determine the main factors that affect nurse practitioners' (NPs) job satisfaction, especially the relationship between organisational commitment and leadership styles in acute care practices.

Background

There is little known about the influence of organisational commitment and leadership on NPs' job satisfaction within acute care hospitals.

Methods

A cross-sectional design with a national online survey enrolled 1205 NPs from the Taiwan Association of Nurse Practitioners. A multiple regression model was applied to identify potential variables that associated with job satisfaction.

Results

Organisational commitment (mean=59.47), job satisfaction (mean=173.47) and leadership style (mean ranged from 13.29 to 28) were at a moderate level. Organisational commitment, leadership style, patient load and NP advancement levels explained 63% of the variance in NPs' job satisfaction.

Conclusions

Organisational commitment and leadership styles, such as idealized influence and individual consideration, are

major factors that impact NPs' job satisfaction.

Implications for Nursing Management

Health care organisations should develop policies targeting organisational commitment and managers' leadership styles to improve NPs' job satisfaction.

DETAILS

Subject:	Medical-surgical nursing; Leadership style; Health care; Hospitals; Job satisfaction; Nursing administration; Nurse practitioners; Occupational psychology; Leadership; Organizational commitment; Acute services; Managerial skills
Business indexing term:	Subject: Job satisfaction Occupational psychology Leadership Managerial skills
Identifier / keyword:	acute care; job satisfaction; leadership styles; national survey; nurse practitioners; organisational commitment
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	3
Pages:	651-659
Publication year:	2022
Publication date:	Apr 2022
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article
Publication history :	
Online publication date:	2022-02-24

Milestone dates: 2022-02-09 (Revised); 2021-07-13 (Received); 2022-02-13 (Accepted)

Publication history :

First posting date: 24 Feb 2022

DOI: <https://doi.org/10.1111/jonm.13562>

ProQuest document ID: 2647662185

Document URL: <https://www.proquest.com/scholarly-journals/impact-organisational-commitment-leadership-style/docview/2647662185/se-2?accountid=211160>

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Last updated: 2022-05-23

Database: Publicly Available Content Database

Document 21 of 50

Global prevalence of resilience in health care professionals: A systematic review, meta-analysis and meta-regression

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ABSTRACT (ENGLISH)

Aims

This review aims to examine the prevalence estimate of low resilience among health care professionals and identify the factors affecting the prevalence.

Background

Health care professionals experience high levels of stress. Understanding the health care professionals' resilience may provide an insight into how they perform in a highly stressed environment.

Evaluation

A comprehensive search of 11 databases was conducted. Studies that provided prevalence rates for low resilience among health care professionals working in a health care setting were included. Meta-analyses, sensitivity, subgroup analyses and meta-regression were conducted.

Key issues

Among 27,720 studies, 41 studies ($N=17,073$) across 16 countries were included. The prevalence of low resilience

was 26% (95% CI: 20–32). Subgroup analyses indicated that types of resilience measures affect resilience prevalence significantly. A higher prevalence of low resilience was observed among allied health professions during the COVID-19 pandemic in the Middle East.

Conclusions

This review indicated the prevalence of low resilience and type of resilience measurement instruments that affected the prevalence.

Implications for nursing management

This review provides a roadmap to design tailored, discipline-specific and sustainable resilience training for nurses. Nursing managers should monitor the working hours and workload of nursing staffing in order to provide a protective working environment. This is a systematic review, and the PROSPERO registration number is CRD42021235350.

DETAILS

Subject:	Measurement; Databases; Health care; Systematic review; Academic disciplines; Professional training; Nurse managers; COVID-19; Working hours; Nursing administration; Pandemics; Medical personnel; Nursing; Prevalence; Staffing; Resilience
Identifier / keyword:	health personnel; meta-analysis; prevalence; resilience, psychological
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	3
Pages:	795-816
Publication year:	2022
Publication date:	Apr 2022
Section:	REVIEW ARTICLE
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English

Document type: Journal Article, Evidence Based Healthcare

Publication history :

Online publication date: 2022-03-04

Milestone dates: 2021-12-21 (Revised); 2021-10-30 (Received); 2022-02-01 (Accepted)

Publication history :

First posting date: 04 Mar 2022

DOI: <https://doi.org/10.1111/jonm.13558>

ProQuest document ID: 2647662164

Document URL: <https://www.proquest.com/scholarly-journals/global-prevalence-resilience-health-care/docview/2647662164/se-2?accountid=211160>

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Last updated: 2022-05-23

Database: Publicly Available Content Database

Document 22 of 50

Leadership challenges and strategies to dementia care in Chinese faith-based nursing homes: A qualitative study

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

To address the need and fill a knowledge gap in understanding challenges and coping strategies from the perspectives of nursing home leadership.

Background

The rapid increase of older adults with dementia in China highlights the need for research on dementia care in long-

term care facilities.

Methods

Semistructured interviews were conducted among 20 facility directors employed by faith-based nursing homes across 12 provinces in China via phone or in-person in their native language. Two researchers fluent in Mandarin Chinese- and English-coded interview transcripts; thematic analysis was conducted to identify patterns.

Results

Four primary challenges were identified, including recruiting and retaining nursing staff, funding, lacking governmental support and discord with family members. The coping strategies included using external resources, incorporating religious beliefs, teamwork, rewarding performance and improving staff skills and empathy.

Conclusions

This study contributes to nursing home practice knowledge by disseminating insights of administrators regarding culturally relevant dementia management strategies in China.

Implications for nursing management

Implications for nursing management are as follows: teamwork and staff encouragement; advocate for a sustainable governmental financial support; staff training and staff-resident ratio regulations and policy; seeking external resources; integrate faith-based means for problem management and service quality improvement.

DETAILS

Subject:	Provinces; Quality management; Native language; Home practice; Relatives; Coping strategies; Financial support; Nursing homes; Nursing administration; Empathy; Dementia; Teamwork; Leadership; Recruitment; Interviews; Quality of service; Regulation; Older people; Religious beliefs; Qualitative research; Home health care; Professional practice
Location:	China
Identifier / keyword:	continuing challenges; leadership; nursing home; strategic management
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	3
Pages:	777-784
Publication year:	2022
Publication date:	Apr 2022
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article
Publication history :	
Online publication date:	2022-03-04
Milestone dates:	2022-01-19 (Revised); 2021-09-25 (Received); 2022-02-14 (Accepted)
Publication history :	
First posting date:	04 Mar 2022
DOI:	https://doi.org/10.1111/jonm.13564
ProQuest document ID:	2647662158
Document URL:	https://www.proquest.com/scholarly-journals/leadership-challenges-strategies-dementia-care/docview/2647662158/se-2?accountid=211160
Copyright:	© 2022 John Wiley & Sons Ltd
Last updated:	2023-08-15
Database:	Publicly Available Content Database

Document 23 of 50

Exploring the relationship between organisational silence and organisational learning in nurses: A cross-sectional study

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aims

To assess the organisational silence and learning levels among nurses of a university hospital and explore the relationship between the socio-demographics, organisational silence and learning.

Background

Organisational learning is an active process needed for improving organisational performance, and silence has a devastating impact on an organisation's capacity to learn.

Methods

A cross-sectional quantitative design was applied using two tools: the organisational silence and the organisational learning scales. Over 3 months, data were collected from 724 nurses. The data were then analysed using suitable statistical methods.

Results

The organisational silence level is moderate. The organisational learning level is predominantly moderate. The association between the two scales is a weak negative correlation, yet statistically significant. The multiple regression analysis was better in predicting organisational learning scores.

Conclusions

There is a highly statistically significant negative weak correlation between overall organisational silence and overall organisational learning. More researchers are invited to implement of interventions to promote speaking-up behaviours and organisational learning in nurses.

Implications for Nursing Management

Nurse managers and leaders can create a work atmosphere that encourages and promotes open communication among nurses and other health care team members, likewise, creating an environment conducive to translating experiences into organisational learning.

DETAILS

Subject:	Nursing administration; Regression analysis; Health care; Nurses; Learning; Organizational learning; Nurse managers; Teams; Professional development
Business indexing term:	Subject: Organizational learning Professional development
Identifier / keyword:	nurses; organisational learning; organisational silence; university hospital
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	3
Pages:	702-715
Publication year:	2022
Publication date:	Apr 2022
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article
Publication history :	
Online publication date:	2022-02-07
Milestone dates:	2021-12-08 (Revised); 2021-07-07 (Received); 2021-12-18 (Accepted)
Publication history :	
First posting date:	07 Feb 2022
DOI:	https://doi.org/10.1111/jonm.13539
ProQuest document ID:	2647662067
Document URL:	https://www.proquest.com/scholarly-journals/exploring-relationship-between-organisational/docview/2647662067/se-2?accountid=211160
Copyright:	© 2022 John Wiley & Sons Ltd
Last updated:	2022-05-23
Database:	Publicly Available Content Database

Document 24 of 50

A cost analysis with the discrete-event simulation application in nurse and doctor employment management

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ABSTRACT (ENGLISH)

Aim

This study aimed to analyse the treatment cost of a patient, depending on the number of patients treated, patient waiting times, and the number of nurses and doctors employed in an emergency department of a private hospital.

Background

Within health systems, changes in health care resources can be very costly, especially if these changes are long-term. The discrete-event simulation method described in this paper allows for the monitoring and analysis of complicated changes in real systems by using computer-based modelling.

Method

The discrete event simulation model was derived from nine scenarios according to the number of nurses and doctors, and a comparison was made between the results of the scenarios and the actual results.

Results

Among the scenarios, scenario 6 provided the lowest treatment cost for a patient by employing three doctors and two nurses with the best performance. The cost of treatment for a patient varies between €9.00 and €11.00 depending on the value of δ , and the daily cost of these resources to the hospital is €1300.77.

Conclusions

This study provides a clear picture of a cost analysis comparison based on changes made about the actual health system in the computer-based simulated environment.

Implications for Nursing Management

The workforce data of nurses and doctors offers enough detail for cost analysis in health care settings to calculate the cost of treatment for a patient.

DETAILS

Subject:	Simulation; Cost analysis; Waiting times; Workforce; Health care expenditures; Modelling; Physicians; Nursing administration; Emergency services; Nurses; Employment
Business indexing term:	Subject: Cost analysis
Identifier / keyword:	discrete event simulation; doctors; emergency department; nurses; treatment cost
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	3
Pages:	733-741
Publication year:	2022
Publication date:	Apr 2022
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article
Publication history :	
Online publication date:	2022-01-23
Milestone dates:	2021-12-31 (Revised); 2021-07-13 (Received); 2022-01-10 (Accepted)
Publication history :	
First posting date:	23 Jan 2022
DOI:	https://doi.org/10.1111/jonm.13547
ProQuest document ID:	2647662063
Document URL:	https://www.proquest.com/scholarly-journals/cost-analysis-with-discrete-event-simulation/docview/2647662063/se-2?accountid=211160
Copyright:	© 2022 John Wiley & Sons Ltd
Last updated:	2022-05-23
Database:	Publicly Available Content Database

Document 25 of 50

The association of professionalism and systems thinking on patient safety competency: A structural equation model

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aims

The aim of this study is to identify how professionalism and systems thinking contribute to patient safety competency among Iranian nurses.

Background

Professionalism, systems thinking and patient safety competency play important roles in the quality of care. Strategies to enhance the patient safety competency of nurses must be devised by identifying the relationships between these variables.

Methods

A cross-sectional, descriptive survey study was conducted in 10 teaching hospitals in Tabriz, Iran. A total of 358 nursing staff with at least 12 months of experience in nursing were enrolled. Data were collected using the Professionalism scale, Systems Thinking Scale and Patient Safety Competency Self-Evaluation tool. Structural equation modelling analysis was performed to test the relationship between variables.

Results

The final model illustrated a good fit ($\chi^2/df = 2.329$, goodness-of-fit index = 0.990, Tucker-Lewis index = 0.906 and root mean square error of approximation = 0.068). Professionalism directly influenced patient safety competency ($\beta = 0.59$, $p < 0.001$) and indirectly influenced systems thinking ($\beta = 0.29$, $p < 0.001$). Systems thinking directly influenced patient safety competency ($\beta = 0.46$, $p < 0.001$). Results indicated that 91% of the variance in patient safety competency was explained by professionalism while 40.1% of the variance in the systems thinking was explained by professionalism.

Conclusions

The professionalism and systems thinking of hospital nurses play a pivotal role as predictors in patient safety competency. Training opportunities, mentorship and nursing managers' leadership are needed to assist hospital nurses in their perceptions of professionalism and systems thinking.

Implications for Nursing Management

Nursing educators and managers should implement patient safety training strategies and improve the professionalism and systems thinking of hospital nurses to promote patient safety and quality care.

DETAILS

Subject: Patient safety; Safety; Professional training; Patients; Teaching; Modelling; Teaching hospitals; Nursing administration; Nursing; Professionalism; Competence; Quality of care; Nurses; Leadership; Teaching methods; Structural equation modeling; Self evaluation

Identifier / keyword: competency; nurses; patient safety; professionalism; systems thinking

Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	3
Pages:	817-826
Publication year:	2022
Publication date:	Apr 2022
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article
Publication history :	
Online publication date:	2022-02-08
Milestone dates:	2021-11-17 (Revised); 2021-08-23 (Received); 2021-12-18 (Accepted)
Publication history :	
First posting date:	08 Feb 2022
DOI:	https://doi.org/10.1111/jonm.13536
ProQuest document ID:	2647662062
Document URL:	https://www.proquest.com/scholarly-journals/association-professionalism-systems-thinking-on/docview/2647662062/se-2?accountid=211160
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Last updated:	2023-01-12

Assessing sense of coherence as an element of primary-focused health services in schools for children and adolescents with complex health care needs

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

This study aimed to clarify if sense of coherence (SOC) could be used as an element of primary-focused health services in schools.

Background

The United Arab Emirates (UAE) is striving to develop a high-quality, primary-focused health care system. School health care services are well established in the UAE but have not yet been fully used to play a key role in this development.

Methods

This is a cross-sectional survey study to explore adolescents' SOC and their behavioural, psychosocial and clinical outcomes.

Results

A total of 408 adolescents participated in this study. Compared with others, adolescents with higher SOC had better adherence to treatment, fewer visits to the school nurse, better self-efficacy, fewer hyperactivity problems, fewer emotional problems, more prosocial behaviours and fewer conduct problems.

Conclusion

Implementing interventions that improve SOC may support improved well-being among adolescents. The findings also support the use of SOC and salutogenesis as a framework to reinforce primary health care services for this population.

Implications for Nursing Management

Health service managers can utilize SOC as a framework to focus service on illness prevention and health promotion, they should collaborate with education authorities to include more health-related topics as part of school

curricula to promote students' SOC and, finally, they should assess and build awareness of SOC and associated tools among school nurses and primary health care providers.

DETAILS

Subject:	Emotional-Behavioural problems; Sense of coherence; Clinical outcomes; Emotional disturbance; Adolescents; School nurses; Health promotion; Psychosocial factors; Hyperactivity; Nursing administration; Primary care; Medical personnel; Efficacy; Child & adolescent psychiatry; Curricula; Health services; Education authorities; Teenagers; Conduct disorder; Prosocial behavior; Children with disabilities
Identifier / keyword:	practice development; practice framework; primary health care; school nursing; sense of coherence; United Arab Emirates
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	2
Pages:	582-591
Publication year:	2022
Publication date:	Mar 2022
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article
Publication history :	
Online publication date:	2021-12-05
Milestone dates:	2021-11-08 (Revised); 2021-09-09 (Received); 2021-11-14 (Accepted)

Publication history :

First posting date:	05 Dec 2021
DOI:	https://doi.org/10.1111/jonm.13517
ProQuest document ID:	2634659583
Document URL:	https://www.proquest.com/scholarly-journals/assessing-sense-coherence-as-element-primary/docview/2634659583/se-2?accountid=211160
Copyright:	© 2022 John Wiley & Sons Ltd
Last updated:	2023-07-03
Database:	Publicly Available Content Database

Document 27 of 50

Nurses' attitudes towards their jobs in outpatient human immunodeficiency virus facilities in Namibia: A qualitative descriptive study

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ABSTRACT (ENGLISH)

Aim

The aims were to (1) describe nurses' attitudes towards their jobs, (2) identify factors that contribute to nurses' job attitudes and (3) examine how nurses' job attitudes affect their ability to perform their jobs.

Background

Nurses' job attitudes affect their ability to do their jobs well.

Methods

This was a qualitative descriptive study of 18 semi-structured interviews with nurses who work in rural health facilities. Interviews were analysed using content analysis.

Results

Factors that influenced job attitudes included support from co-workers, workload, access to material resources, access to information, patient rapport and nurses' personal resilience. Nurses reported that positive attitudes helped them to do their jobs well and negative attitudes diminished their ability to do their jobs well.

Conclusions

This study's findings support investment in factors to promote positive nurse attitudes and job performance such as a healthy work environment and self-efficacy.

Implications for Nursing Management

Nurse managers can improve nurses' attitudes by advocating for tangible supports for staff such as appropriate staffing ratios, sufficient equipment, necessary training and work environments that allow safe patient interactions.

DETAILS

Subject:	Human immunodeficiency virus--HIV; Content analysis; Employment; Equipment; Nursing administration; Nurses; Efficacy; Staffing; Resilience; Outpatient care facilities; Positive thought; Ability; Rural health care; Nurse managers; Interviews; Work environment; Burnout; Negative attitudes; Access to information; Qualitative research; Attitudes; Job performance; Roles
Business indexing term:	Subject: Employment Burnout
Location:	Namibia
Identifier / keyword:	attitude of health personnel; burnout; health personnel; job satisfaction; nursing staff; psychological
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	2
Pages:	491-500
Publication year:	2022
Publication date:	Mar 2022
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English

Document type: Journal Article

Publication history :

Online publication date: 2021-12-13

Milestone dates: 2021-10-21 (Revised); 2021-05-12 (Received); 2021-11-25 (Accepted)

Publication history :

First posting date: 13 Dec 2021

DOI: <https://doi.org/10.1111/jonm.13529>

ProQuest document ID: 2634659582

Document URL: <https://www.proquest.com/scholarly-journals/nurses-attitudes-towards-their-jobs-outpatient/docview/2634659582/se-2?accountid=211160>

Copyright: © 2022 John Wiley & Sons Ltd

Last updated: 2022-09-22

Database: Publicly Available Content Database

Document 28 of 50

The Inpatient Experience with Nursing Care Scale (IPENCS): Development, validation and psychometric properties

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

This study aimed to develop a patient experience with nursing care scale and to evaluate its psychometric

properties.

Background

Patient experience is increasingly recognized as one of the pillars of quality in health care. Nevertheless, few instruments reflecting the preferences, needs and values of the health care recipients were developed to measure and improve patient experience with nursing care.

Methods

Instrument development and psychometric analysis were used, and a total of 1050 individuals participated in this study. The validity and reliability of the scale were evaluated.

Results

An exploratory factor analysis yielded a seven-dimension structure and explained 70.79% of the variance. Confirmatory factor analyses supported the factor structure of the instrument. The content validity was very good (mean item content validity index [I-CVI] .96). Criterion validity was demonstrated with the general satisfaction question. Internal consistency reliability was found to be acceptable, as indicated by a Cronbach's alpha of .95, split-half reliability of .88 and item-total correlations of $-.80$.

Conclusions

This study produced a 30-item instrument, which exhibits good psychometric properties.

Implications for Nursing Management

This scale could be used to determine to what extent patients' nursing care needs are met, examine the strength and weakness of current care delivery and analyse the gap between patients' expectations and health care providers' behaviours.

DETAILS

Subject:	Health care; Validity; Patients; Coefficient alpha; Quantitative psychology; Nursing care; Health behavior; Questionnaires; Nursing administration; Confirmatory factor analysis; Medical personnel; Nursing; Reliability; Exploratory factor analysis; Inpatient care
Identifier / keyword:	nursing care; patient experience; scale
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	2
Pages:	570-581
Publication year:	2022
Publication date:	Mar 2022
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article
Publication history :	
Online publication date:	2021-12-21
Milestone dates:	2021-10-20 (Revised); 2021-10-03 (Received); 2021-11-07 (Accepted)
Publication history :	
First posting date:	21 Dec 2021
DOI:	https://doi.org/10.1111/jonm.13509
ProQuest document ID:	2634659562
Document URL:	https://www.proquest.com/scholarly-journals/inpatient-experience-with-nursing-care-scale/docview/2634659562/se-2?accountid=211160
Copyright:	© 2022 John Wiley & Sons Ltd
Last updated:	2023-01-20
Database:	Publicly Available Content Database

Document 29 of 50

Mental health, safety and support during COVID-19: A cross-sectional study of primary health care nurses

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ABSTRACT (ENGLISH)

Aim

The aim of this study is to explore primary health care nurses' mental health, concerns and perceived safety and supports during COVID-19.

Background

Respiratory pandemics have negative impacts on nurses' wellbeing. While literature is replete with hospital nurses' experiences, there is less exploration of COVID-19 impacts on primary health care nurses. Given the importance of primary health care nurses in the health system, understanding their experiences is vital.

Methods

Three hundred and fifty nine primary health care nurses responded to an online cross-sectional survey. The Depression Anxiety Stress Scales (DASS-21) was used to measure emotional state. Data were analysed using descriptive and inferential statistics.

Results

DASS-21 scores indicated that 39.6% of participants were experiencing symptoms of depression, anxiety or stress. Of those, 41.8% were experiencing symptoms on one scale, 26.9% were experiencing symptoms on two scales and 31.2% were experiencing symptoms across all three scales. Most participants identified that their feelings were related to COVID-19.

Conclusions

COVID-19 is having a significant impact on primary health care nurses' mental health. Nurse managers need to develop strategies to effectively address nurses' concerns and effectively support them to sustain the workforce during and after the pandemic.

Implications for Nursing Management

Findings from this study can inform the design of effective nurse support programmes to reduce mental health impacts and promote staff wellbeing during the pandemic.

DETAILS

Subject:	Occupational stress; Symptoms; Safety; Well being; Mental depression; Anxiety; Nurse managers; Workforce; COVID-19; Pandemics; Nursing administration; Primary care; Practice nursing; Mental health; Mental health services; Nurses; Mental health care; Statistical inference; Stress; Measures
Business indexing term:	Subject: Occupational stress
Identifier / keyword:	community nursing; mental health; nursing workforce; pandemic; primary care; primary health care
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	2
Pages:	393-402
Publication year:	2022
Publication date:	Mar 2022
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article
Publication history :	
Online publication date:	2022-01-02
Milestone dates:	2021-11-23 (Revised); 2021-10-25 (Received); 2021-12-05 (Accepted)
Publication history :	
First posting date:	02 Jan 2022

DOI: <https://doi.org/10.1111/jonm.13534>

ProQuest document ID: 2634659504

Document URL: <https://www.proquest.com/scholarly-journals/mental-health-safety-support-during-covid-19/docview/2634659504/se-2?accountid=211160>

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Last updated: 2023-03-24

Database: Publicly Available Content Database

Document 30 of 50

The impact of nurses' perceptions of systems thinking on occurrence and reporting of adverse events: A cross-sectional study

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aims

To assess systems thinking level and its relationship with occurrence and reporting of adverse events in Iranian nurses.

Background

Systems thinking has recently emerged as an important element of patient safety and quality improvement in health care systems. It helps health care professionals to understand the different elements of health care systems, the interrelatedness and interdependencies of these elements in the health care systems.

Methods

This cross-sectional survey was carried out in 10 teaching hospitals in Tehran, Iran. A total of 511 nurses were selected using simple random sampling. Systems thinking was measured using the validated Systems Thinking

Scale. Data analysis was performed by descriptive analyses, independent *t* test and logistic regression analysis.

Results

The average score for total systems thinking was a mean of 49.45 (SD= 12.10; range 0–80). In total, 67.5% of participants reported the experience of the occurrence of adverse events leading to harm to patients, and 65.2% of them responded as having appropriate adverse events reporting behaviours. Nurses who had higher scores in systems thinking were found to be more likely to report adverse events (odds ratio= 1.07; 95% CI= 1.05–1.09), whereas they were less prone to experience adverse events (odds ratio=0.97; 95% CI=0.95–0.98).

Conclusion

Our results indicated that the nurses' systems thinking level was moderate. Systems thinking had a significant role in preventing the occurrence of adverse events as well as improving the reporting of adverse events. Therefore, it is recommended to enhance the competency of nurses' systems thinking to prevent the occurrence of adverse events and to improve the reporting of adverse events.

Implications for nursing management

Nursing managers need to focus on the systems thinking weaknesses and the occurrence and the reporting of adverse events in policymaking, practice and research. Also, systems thinking should be integrated with the health care system for preventing the occurrence of adverse events and improving reporting of adverse events. They should support, lead and allocate the essential pragmatic strategies and resources for the involvement of all health care members in policymaking.

DETAILS

Subject:	Quality management; Patient safety; Health care; Documentation; Quality of care; Teaching; Teaching hospitals; Adverse; Nursing administration; Policy making; Critical incidents; Regression analysis; Medical personnel; Nursing; Attitudes; Integrated services; Random sampling; Medical errors; Nurses; Teaching methods
Identifier / keyword:	adverse events; medical error; patient safety; quality of care; systems thinking
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	2
Pages:	482-490
Publication year:	2022
Publication date:	Mar 2022
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article
Publication history :	
Online publication date:	2022-01-25
Milestone dates:	2021-11-08 (Revised); 2021-10-04 (Received); 2021-11-18 (Accepted)
Publication history :	
First posting date:	25 Jan 2022
DOI:	https://doi.org/10.1111/jonm.13524
ProQuest document ID:	2634659492
Document URL:	https://www.proquest.com/scholarly-journals/impact-nurses-perceptions-systems-thinking-on/docview/2634659492/se-2?accountid=211160
Copyright:	© 2022 John Wiley & Sons Ltd
Last updated:	2023-08-01
Database:	Publicly Available Content Database

Document 31 of 50

Stress, psychological distress and support in a health care organization during Covid-19: A cross-sectional study

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

The main aim of this study was to understand what health and wellbeing initiatives are helpful for health care workers' stress and psychological distress during the Covid-19 pandemic.

Background

Health care workers are at increased risk of poor mental health during health emergencies; understanding support required for health care workers is of paramount importance.

Methods

Participants were health care workers at a health and social care organization ($N=159$). The study included an online questionnaire including an evaluation of health and wellbeing initiatives and measures of perceived stress and psychological distress.

Results

The highest rated resources were counselling, personal protective equipment (PPE) and Covid-19 testing. Those who accessed yoga reported significantly less stress and psychological distress than those who did not access yoga.

Conclusions

Health care workers with higher stress and psychological distress felt less supported by their organization, less listened to and less involved in organizational decisions.

Implications for nursing management

Practical implications are discussed such as forward planning for health emergencies (e.g., PPE supply), accessible Covid-19 testing as well as budgeting for counselling services and exercise classes. In addition, targeted support for those diagnosed with Covid-19 is recommended, alongside involvement of staff members in organizational decisions.

DETAILS

Subject:	Occupational stress; Health care; Well being; Personal protective equipment; Social care; Budgets; Yoga; Mental health care; Workers; COVID-19; Medical personnel; Equipment; Nursing administration; Pandemics; Mental health; Health initiatives; Stress; Counselling services; Psychological distress
Business indexing term:	Subject: Occupational stress
Identifier / keyword:	Covid-19; health; organization; distress; stress; support
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	2
Pages:	359-366
Publication year:	2022
Publication date:	Mar 2022
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article
Publication history :	
Online publication date:	2021-12-12
Milestone dates:	2021-10-26 (Revised); 2021-08-09 (Received); 2021-11-18 (Accepted)
Publication history :	
First posting date:	12 Dec 2021
DOI:	https://doi.org/10.1111/jonm.13526
ProQuest document ID:	2634659452
Document URL:	https://www.proquest.com/scholarly-journals/stress-psychological-distress-support-health-care/docview/2634659452/se-2?accountid=211160
Copyright:	© 2022 John Wiley & Sons Ltd
Last updated:	2022-05-23
Database:	Publicly Available Content Database

Document 32 of 50

Relationship between nursing mentorship and transformational leadership of mentor: A cross-sectional study

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ABSTRACT (ENGLISH)

Aim

The purpose of this research was to explore nurses' mentorship, mentors' basic psychological needs satisfaction and transformational leadership. Moreover, this study evaluated the moderating role of a protégé's mindfulness.

Background

Previous research had only focused on the benefits that protégés reaped from the mentoring relationship, neglected the mentor's benefits.

Method

We conducted an analysis of a cross-sectional sample comprising 366 frontline nurses in China. Descriptive, correlation and regression analyses were conducted using SPSS 22.0. Mediating, moderating and conditional process analyses were conducted using Process Macro 3.3.

Results

Mentorship is associated with mentors' transformational leadership through the satisfaction of their basic psychological needs ($\beta = .13$, 95% confidence interval [CI]: [0.05, 0.23]). The indirect association of mentorship and transformational leadership is stronger for protégés with low mindfulness levels ($\beta = -.05$, 95% CI: [-0.08, -0.02]).

Conclusion

The establishment of healthy associations between mentors and protégés facilitates the fulfilment of the mentors' basic psychological needs, enhancing the former's transformational leadership, especially for protégés with low mindfulness levels.

Implications for Nursing Management

Mentors should provide more meaningful knowledge about the organisation and protégés' career path, obtain information to help tailor the advice and put more energy into building trust-based relationships with protégés.

DETAILS

Subject:	Nursing administration; Mindfulness; Psychological needs; Mentoring; Nursing; Fulfilment; Mentors; Transformational leadership; Career development; Consciousness
Business indexing term:	Subject: Mentors
Identifier / keyword:	basic psychological needs; mentorship; mindfulness; transformational leadership
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	2
Pages:	413-420
Publication year:	2022
Publication date:	Mar 2022
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article
Publication history :	
Online publication date:	2021-11-28
Milestone dates:	2021-11-04 (Revised); 2021-08-09 (Received); 2021-11-14 (Accepted)
Publication history :	
First posting date:	28 Nov 2021
DOI:	https://doi.org/10.1111/jonm.13519
ProQuest document ID:	2634659414
Document URL:	https://www.proquest.com/scholarly-journals/relationship-between-nursing-mentorship/docview/2634659414/se-2?accountid=211160
Copyright:	© 2022 John Wiley & Sons Ltd
Last updated:	2022-05-23
Database:	Publicly Available Content Database

Document 33 of 50

The effects of an emergency nurse-led stress-reduction project during the first 120 days of the COVID-19 pandemic in Taiwan

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ABSTRACT (ENGLISH)

Background

The COVID-19 frontline nurses' stress-reduction programme by the cooperation of manager with the nurses is not well developed.

Aim

This study aimed to examine the effect of an emergency nurse-led stress-reduction project on reducing stress levels during the COVID-19 pandemic.

Methods

The action research was conducted using online and person-to-person group brainstorming strategies. The online survey was used to evaluate emergency nurses' stress levels, causes of stress and needs at the 50th, 80th and 110th days of the pandemic from March to May 2020.

Results

The numbers of nurses participating in three-time survey were 160, 166 and 160, respectively. There was a decrease in the nurses' work-related stress after implementing the improvement strategies. Stress from personal protective equipment (PPE), information about infection control and family's worry about being infected reduced across 2 months. Needs regarding PPE, COVID-19 information and a forum for sharing experiences of COVID-19 care decreased whereas needs of allowing more days off increased.

Conclusions

The stress-reduction project targeting at nurses' views of their needs can reduce their stress during the COVID-19 pandemic.

Implications for Nursing Management

The online and person-to-person group brainstorming building a good partnership between nurses and managers can be an effective nursing management.

DETAILS

Subject: Occupational stress; Personal protective equipment; Nurse managers; Mental health care; Stress management; Action research; COVID-19; Pandemics; Brainstorms; Equipment; Nursing administration; Emergency services; Nursing; Polls & surveys; Nurse led care; Nurses; Cooperation; Disease control

Business indexing term: Subject: Occupational stress

Location: Taiwan

Identifier / keyword:	COVID-19; emergency department; needs; nurses; stress reduction
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	2
Pages:	367-374
Publication year:	2022
Publication date:	Mar 2022
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article
Publication history :	
Online publication date:	2021-12-08
Milestone dates:	2021-10-08 (Revised); 2021-06-03 (Received); 2021-11-20 (Accepted)
Publication history :	
First posting date:	08 Dec 2021
DOI:	https://doi.org/10.1111/jonm.13527
ProQuest document ID:	2634659398
Document URL:	https://www.proquest.com/scholarly-journals/effects-emergency-nurse-led-stress-reduction/docview/2634659398/se-2?accountid=211160
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Last updated: 2023-03-27

Database: Publicly Available Content Database

Document 34 of 50

A translational research framework for nurse practitioners

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aims

This study aims to explore a proposed translational research continuum for nurse practitioners.

Background

Nurse practitioners are acknowledged as clinical leaders responsible for transforming health care delivery. It is important that nurse practitioners contribute to health care knowledge using scientific processes for the implementation of evidence-based practice and evaluation of outcomes of interventions for their patient groups.

Evaluation

This paper provides a review of translational research literature including implementation science to align nurse practitioner activities to a modified translational research framework.

Key Issues

A translational research framework has the potential to strengthen nursing research in the nurse practitioner role. Adapting an accepted translational research continuum for nurse practitioners places the clinical nursing leaders in an equitable research position with all health care professionals.

Implications for Nursing Management

The translational research continuum provides nursing management with a structure to benchmark nursing research. The continuum applies a modern research framework to support research engagement for the nurse practitioner role.

DETAILS

Subject: Nursing administration; Nurse practitioners; Clinical outcomes; Medical personnel; Health care delivery; Nursing; Literature reviews; Clinical nursing

Identifier / keyword: implementation science; nurse practitioner; nursing research; translational research

Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	2
Pages:	421-427
Publication year:	2022
Publication date:	Mar 2022
Section:	REVIEW ARTICLE
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article
Publication history :	
Online publication date:	2021-11-04
Milestone dates:	2021-10-12 (Revised); 2021-05-07 (Received); 2021-10-13 (Accepted)
Publication history :	
First posting date:	04 Nov 2021
DOI:	https://doi.org/10.1111/jonm.13496
ProQuest document ID:	2634659389
Document URL:	https://www.proquest.com/scholarly-journals/translational-research-framework-nurse/docview/2634659389/se-2?accountid=211160
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Document 35 of 50

Structural empowerment and work ethics influence on the work engagement of millennial nurses

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

This study investigated the influence of structural empowerment and work ethics on work engagement among millennial Saudi clinical nurses.

Background

No extensive research has been conducted on the structural empowerment, work ethics and work engagement of millennial nurses, especially in Arab countries such as Saudi Arabia.

Design

This study utilized descriptive correlation quantitative design.

Method

A total of 250 millennial Saudi nurses participated in the online survey containing the Multidimensional Work Ethic Profile–Short Form, Conditions for Work Effectiveness Questionnaire-II and Utrecht Work Engagement Scale.

Results

Descriptive analyses revealed the highest mean for 'delay of gratification' for work ethics (M=4.38, SD=0.66), 'access to opportunity' for structural empowerment (M=4.28, SD=0.78) and 'dedication' dimension for work engagement (M=5.02, SD=1.10). Regression analysis revealed that marital status, employment status, type of hospital, structural empowerment and work ethics influenced the work engagement of millennial Saudi clinical nurses.

Conclusions

Personal and organisational factors, work ethics and structural empowerment contribute to the work engagement of millennial Saudi clinical nurses.

Implications for nursing management

This study discusses the importance of formulating strategies such as recognition, rewards and incentives for good nursing practice to foster the work engagement of millennial nurses.

DETAILS

Subject:	Employment status; Motivation; Job satisfaction; Empowerment; Marital status; Gratification; Nursing administration; Occupational psychology; Millennials; Ethics; Work ethic; Clinical nursing; Nurses; Medical ethics; Professional practice
Business indexing term:	Subject: Job satisfaction Occupational psychology
Identifier / keyword:	millennial Saudi clinical nurses; structural empowerment; work engagement; work ethics
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	2
Pages:	501-510
Publication year:	2022
Publication date:	Mar 2022
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article
Publication history :	
Online publication date:	2022-01-03

Milestone dates: 2021-11-24 (Revised); 2021-08-24 (Received); 2021-12-03 (Accepted)

Publication history :

First posting date: 03 Jan 2022

DOI: <https://doi.org/10.1111/jonm.13532>

ProQuest document ID: 2634659351

Document URL: <https://www.proquest.com/scholarly-journals/structural-empowerment-work-ethics-influence-on/docview/2634659351/se-2?accountid=211160>

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Last updated: 2023-06-21

Database: Publicly Available Content Database

Document 36 of 50

Staff structural empowerment—Observations of first-line managers and interviews with managers and staff

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

The aim was to study how first-line managers act to make structural empowerment accessible for nursing staff and furthermore to relate these observations to the manager's and their nursing staff's descriptions regarding the staff's access to empowering structures.

Background

Staff access to empowering structures has been linked to positive workplace outcomes. Managers play an important role in providing the conditions for structural empowerment.

Method

Five first-line managers were observed for two workdays. Managers and staff ($n=13$) were thereafter interviewed.

Field notes and interviews were analysed using directed content analysis.

Results

The managers displayed intentional actions that could enable their staff access to empowering structures. Managers and staff described the importance of staff's access to empowering structures.

Conclusion

Staff who perceive to have access to structural empowerment have managers who are present and available. Unanimity among managers and staff existed in regard to the importance of staff having access to structural empowerment. The managers work continually and intentionally, doing many things at the same time, to provide the staff access to empowering structures.

Implications for Nursing Management

The study shows the importance of promoting managers' awareness of staff's access to structural empowerment and maximizing managers' presence and availability to their staff.

DETAILS

Subject:	Empowerment; Interviews; Content analysis; Line managers; Supervisor-Subordinate interactions; Nursing administration; Workplaces; Nursing; Employee management relations; Access
Business indexing term:	Subject: Line managers Employee management relations
Identifier / keyword:	hospital; nurse managers; nurses; observation; structural conditions; working conditions
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	2
Pages:	403-412
Publication year:	2022
Publication date:	Mar 2022
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
e-ISSN:	13652834

Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article
Publication history :	
Online publication date:	2021-12-21
Milestone dates:	2021-10-11 (Revised); 2021-02-17 (Received); 2021-11-03 (Accepted)
Publication history :	
First posting date:	21 Dec 2021
DOI:	https://doi.org/10.1111/jonm.13513
ProQuest document ID:	2634659336
Document URL:	https://www.proquest.com/scholarly-journals/staff-structural-empowerment-observations-first/docview/2634659336/se-2?accountid=211160
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Last updated:	2023-07-28
Database:	Publicly Available Content Database

Document 37 of 50

Effects of group psychological counselling on transition shock in newly graduated nurses: A quasi-experimental study

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ABSTRACT (ENGLISH)

Aim

This study examined the effects of group psychological counselling on transition shock in newly graduated nurses.

Background

Newly graduated nurses are often faced with transition shock as they enter the workforce. Helping them adapt to the new work environment and role as quickly as possible is an important goal for nursing managers.

Method

This prospective, parallel-group, quasi-experimental trial enrolled 71 newly graduated nurses who were randomly assigned to the intervention ($n=38$) or control ($n=41$) group. In addition to routine hospital training, the intervention group received psychological counselling. Participants were evaluated with the Transition Shock Scale of Newly Graduated Nurses before (pre) and after (post) the training with or without intervention.

Results

The total score and score on each dimension of the scale were decreased after the intervention ($P<.05$); control subjects showed no difference between pre- and post-scores. The total score and score on each dimension were higher in the control group than in the intervention group ($P<.05$).

Conclusion

Psychological counselling alleviates transition shock in newly graduated nurses entering the workforce.

Implications for Nursing Management

Nursing managers can introduce group psychological counselling into their training programmes to increase the job readiness of newly graduated nurses.

DETAILS

Subject:	Occupational stress; Transitions; Intervention; Group therapy; Professional training; Workforce; Work environment; New employees; Research subjects; Nursing administration; Nursing; Enrolled nurses; Counseling; Nurses; Quasi-experimental methods
Business indexing term:	Subject: Occupational stress New employees
Identifier / keyword:	group psychological counselling; newly graduated nurses; transition shock
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	2
Pages:	455-46 2
Publication year:	2022
Publication date:	Mar 2022
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article
Publication history :	
Online publication date:	2021-11-18
Milestone dates:	2021-10-19 (Revised); 2021-08-23 (Received); 2021-11-03 (Accepted)
Publication history :	
First posting date:	18 Nov 2021
DOI:	https://doi.org/10.1111/jonm.13506
ProQuest document ID:	2634659309
Document URL:	https://www.proquest.com/scholarly-journals/effects-group-psychological-counselling-on/docview/2634659309/se-2?accountid=211160
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Last updated:	2022-10-12
Database:	Publicly Available Content Database

Document 38 of 50

Nurse staffing, missed care, quality of care and adverse events: A cross-sectional study

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

This study aimed to illustrate the relationship between nurse staffing and missed care, and how missed care affects quality of care and adverse events in Thai hospitals.

Background

Quality and safety are major priorities for health care system. Nurse staffing and missed care are associated with low quality of care and adverse events. However, examination of this relationship is limited in Thailand.

Methods

This cross-sectional study collected data from 1188 nurses in five university hospitals across Thailand. The participants completed questionnaires that assessed the patient-to-nurse ratio, adequacy of staffing, missed care, quality of care and adverse events. Logistic regression models were used to estimate associations.

Results

Higher patient-to-nurse ratio, poor staffing and lack of resource adequacy were significantly associated with higher odds of reporting missed care. Higher nurse-reported missed care was significantly associated with higher odds of adverse events and poor quality of care.

Conclusions

Poor nurse staffing was associated with missed care, and missed care was associated with adverse events and lower quality of care in Thai university hospitals.

Implications for Nursing Management

Improving nurse staffing and assuring adequate resources are recommended to reduce missed care and adverse events and increase quality of care.

DETAILS

Subject: Workforce planning; Patient safety; Health care; Hospitals; Adequacy; Nursing care; Adverse; Nursing administration; Critical incidents; Nurses; Quality of care; Staffing; Workloads; Medical errors; Ratios; Labor shortages; Nurse patient relationships

Business indexing term: Subject: Workforce planning Workloads Ratios Labor shortages

Location: Thailand

Identifier / keyword:	adverse events; missed care; nurse staffing; quality of nursing; Thailand
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	2
Pages:	447-454
Publication year:	20 22
Publication date:	Mar 2022
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article
Publication history :	
Online publication date:	2021-11-26
Milestone dates:	2021-10-14 (Revised); 2021-06-03 (Received); 2021-10-27 (Accepted)
Publication history :	
First posting date:	26 Nov 2021
DOI:	https://doi.org/10.1111/jonm.13501
ProQuest document ID:	2634659292
Document URL:	https://www.proquest.com/scholarly-journals/nurse-staffing-missed-care-quality-adverse-events/docview/2634659292/se-2?accountid=211160
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Defining nursing workload predictors: A pilot study

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

To explore predictors of perceived nursing workload in relation to patients, nurses and workflow.

Background

Nursing workload is important to health care organisations. It determines nurses' well-being and quality of care. Nevertheless, its predictors are barely studied.

Methods

A cross-sectional prospective design based on the complex adaptive systems theory was used. An online survey asked nurses to describe perceived workload at the end of every shift. Data were gathered from five medical-surgical wards over three consecutive weeks. We received 205 completed surveys and tested multivariate regression models.

Results

Patient acuity, staffing resources, patient transfers, documentation, patient isolation, unscheduled activities and patient specialties were significant in predicting perceived workload. Nurse-to-patient ratio proved not to be a predictor of workload.

Conclusions

This study significantly contributed to literature by identifying some workload predictors. Complexity of patient care, staffing adequacy and some workflow aspects were prominent in determining the shift workload among nurses.

Implications for nursing management

Our findings provide valuable information for top and middle hospital management, as well as for policymakers. Identification of predictors and measurement of workload are essential for optimizing staff resources, workflow processes and work environment. Future research should focus on the appraisal of more determinants.

DETAILS

Subject:	Workforce planning; Measurement; Health care; Work environment; Labor shortages; Patients; Systems theory; Nursing administration; Surgical wards; Policy making; Professional identity; Nursing; Polls & surveys; Quality of care; Medical records; Staffing; Workloads; Nurses; System theory
Business indexing term:	Subject: Workforce planning Work environment Workloads
Identifier / keyword:	hospital; nursing; staffing; workflow; workload
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	2
Pages:	473-481
Publication year:	2022
Publication date:	Mar 2022
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article
Publication history :	
Online publication date:	2021-12-12
Milestone dates:	2021-09-27 (Received); 2021-11-18 (Accepted)
Publication history :	
First posting date:	12 Dec 2021
DOI:	https://doi.org/10.1111/jonm.13523

ProQuest document ID: 2634659265

Document URL: <https://www.proquest.com/scholarly-journals/defining-nursing-workload-predictors-pilot-study/docview/2634659265/se-2?accountid=211160>

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Last updated: 2022-05-23

Database: Publicly Available Content Database

Document 40 of 50

Perceptions of nurses and physicians on pay-for-performance in hospital: A systematic review of qualitative studies

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aims

This study aimed to systematically examine perceptions of nurses and physicians on pay-for-performance in hospital.

Background

Pay-for-performance projects have proliferated over the past two decades, most systematic reviews of which solely focused on its effectiveness in primary health care and the physicians' or nurses' attitudes. However, systematic reviews of qualitative approaches for better examining perceptions of both nurses and physicians in hospital were lacking.

Evaluation

Electronic databases were systematically searched with date from the inception to 31 December 2020. Meta-aggregation synthesis methodology and the conceptual framework of the theory of planned behaviour were used to summarize findings.

Key issues

A total of nine studies were included. Three major synthesized themes were identified: (1) perceptions of the motivation effects and positive outcomes, (2) perceptions about the design defects and negative effects and (3) perceptions of the obstacles in the implementation process.

Conclusion

To maximize the intended positive effects, nurses' and physicians' perceptions should be considered and

incorporated into the project design and implementation stage.

Implications for Nursing Management

The paper gives enlightenment to nurse managers on improving and advancing the cause of nurses when planning for or evaluating their institutions' policies on pay-for-performance in the future research.

DETAILS

Subject:	Databases; Health care; Clinical outcomes; Systematic review; Nurse managers; Motivation; Physicians; Perceptions; Hospitals; Nursing administration; Pay for performance; Nurses; Primary care; Defects; Enlightenment; Theory of planned behavior
Business indexing term:	Subject: Pay for performance
Identifier / keyword:	health policy; hospital; pay-for-performance; perceptions
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	2
Pages:	521-534
Publication year:	2022
Publication date:	Mar 2022
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Evidence Based Healthcare, Journal Article
Publication history :	
Online publication date:	2022-01-03

Milestone dates: 2021-10-30 (Revised); 2021-07-13 (Received); 2021-11-04 (Accepted)

Publication history :

First posting date: 03 Jan 2022

DOI: <https://doi.org/10.1111/jonm.13505>

ProQuest document ID: 2634659175

Document URL: <https://www.proquest.com/scholarly-journals/perceptions-nurses-physicians-on-pay-performance/docview/2634659175/se-2?accountid=211160>

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Last updated: 2023-09-07

Database: Publicly Available Content Database

Document 41 of 50

Setting minimum standards of practice in times of crisis

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

The COVID-19 global pandemic is certainly taking a toll on all countries of the world. Health care systems are seriously challenged, and shortages both in staff and in equipment are evident even in high-income countries. Nonetheless, one cannot avoid wondering: Were these problems new or did they just exacerbate because of the terrible pandemic? Were there ways to have avoided the trauma faced by nurses (International Council of Nurses, ICN, 2021) after the overexposure to the health care crisis? Such a grim realization has specific implications for nursing. Naturally, one cannot change the world. Similarly, nurses cannot affect all aspects of health care systems that need serious reform. But nurses can affect nursing-sensitive outcomes. Most importantly, nursing-sensitive outcomes can be used to establish criteria for safe nursing practice. Health care institutions must enable health care professionals to function within the scope of their professional ethical codes. After all, systems operate thanks to the professionals comprising them. Similarly, professionals need to be facilitated by systems to function with integrity.

DETAILS

Subject:	Health care; Clinical outcomes; Quality of care; COVID-19; Pandemics; Shortages; Morality; Equipment; Nursing administration; Codes of conduct; Medical personnel; Nursing; Nurses; Professional practice
Identifier / keyword:	crisis; nursing practice; quality standards
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	2
Pages:	357-358
Publication year:	2022
Publication date:	Mar 2022
Section:	EDITORIAL
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Editorial
Publication history :	
Online publication date:	2022-03-01
Milestone dates:	2021-05-09 (Received); 2021-05-11 (Accepted)
Publication history :	
First posting date:	01 Mar 2022
DOI:	https://doi.org/10.1111/jonm.13374
ProQuest document ID:	2634659079

Document URL: <https://www.proquest.com/scholarly-journals/setting-minimum-standards-practice-times-crisis/docview/2634659079/se-2?accountid=211160>

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Last updated: 2023-06-21

Database: Publicly Available Content Database

Document 42 of 50

Nurses' experience of work stress related to COVID-19 regular prevention and control in China: A qualitative study

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

To explore the experiences of nurses' work stress related to COVID-19 regular epidemic prevention and control in China.

Background

The global COVID-19 epidemic is still severe, and China's ongoing regular epidemic prevention and control still cannot be relaxed, which places demands on nurses.

Methods

Thirty nurses and eight nurse managers were interviewed using semistructured in-depth interviews, and the data were analysed by the Colaizzi seven-step analysis method.

Results

Four themes were extracted as follows: environmental factors, organizational factors, personal factors and positive factors in coping with stress.

Conclusions

Nursing managers should pay attention to construction of the first-line departments of regular epidemic prevention and control. The shortage of nurses' human resources and the increase of nurse–patient conflicts are problems that need to be solved urgently. In addition, this research also emphasizes the importance of promoting nurses' stress-related growth and thinking about the possibility of reform.

Implications for Nursing Management

The construction of the hospital environment and increasing the resilience of nursing teams require attention. We should attach importance to the training of nurses' communication skills and provide sufficient organizational support and economic guarantees for nurses. Finally, perhaps we should also consider whether it is necessary to reform the relevant hospital systems and how to reform them.

DETAILS

Subject:	Occupational stress; Coping; Nursing administration; Nursing; Environmental aspects; Teams; Organizational support; Resilience; Nurses; COVID-19; Prevention; Organizational factors; Professional training; Nurse managers; Human resources; Pandemics; Communication skills training; Epidemics; Qualitative research; Reforms; Attention
Business indexing term:	Subject: Occupational stress
Location:	China
Identifier / keyword:	COVID-19; nurse; qualitative research; regular epidemic prevention and control; work stress
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	2
Pages:	375-383
Publication year:	2022
Publication date:	Mar 2022
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

e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article
Publication history :	
Online publication date:	2021-12-21
Milestone dates:	2021-11-22 (Revised); 2021-10-31 (Received); 2021-11-22 (Accepted)
Publication history :	
First posting date:	21 Dec 2021
DOI:	https://doi.org/10.1111/jonm.13528
ProQuest document ID:	2634659033
Document URL:	https://www.proquest.com/scholarly-journals/nurses-experience-work-stress-related-covid-19/docview/2634659033/se-2?accountid=211160
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Last updated:	2023-08-30
Database:	Publicly Available Content Database

Document 43 of 50

Factors influencing career success of clinical nurses in northwestern China based on Kaleidoscope Career Model: Structural equation model

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ABSTRACT (ENGLISH)

Aim

To explore the relationships among self-efficacy, information literacy, social support and career success of clinical nurses and identify factors influencing clinical nurses' career success in northwestern China.

Background

Understanding the influencing factors of career success is important for the professional development of nurses and the improvement of clinical nursing quality. Many influencing factors of career success have been identified, but there is no large-scale research on the relationships among self-efficacy, information literacy, social support and career success of clinical nurses based on Kaleidoscope Career Model. Studies examining the association of the four factors remain limited.

Methods

A total of 3011 clinical nurses from 30 hospitals in northwestern China were selected in the cross-sectional survey, and the response rate was 94.71%. The clinical nurses completed the online self-report questionnaires including self-efficacy, information literacy, social support rating scale and career success scale. The data were analysed by SPSS23.0 statistical software using *t* test, analysis of variance, Pearson's correlation and multiple linear regression. Structural equation model (SEM) was used to analyse the influencing factors of career success using Mplus 8.3.

Results

The career success of clinical nurses in northwestern China was at a medium level. The linear multivariate regression analysis showed that self-efficacy ($\beta = .513$), social support ($\beta = .230$), information support ($\beta = .106$), information consciousness ($\beta = -.097$), information knowledge ($\beta = .067$), information ethics ($\beta = -.053$), hospital grade ($\beta = .118$), marital status ($\beta = -.071$) and age ($\beta = -.037$) entered regression equation of clinical nurses' career success (all $P < .05$). SEM results showed that the career success was negatively correlated with demographic characteristics and positively correlated with social support and self-efficacy.

Conclusion

Demographic characteristics, self-efficacy, social support and information literacy are the influencing factors of nurses' career success, which should be considered in the process of promoting nurses' career success.

Implications for nursing management

Nursing managers need to acknowledge the significance of nurses' career success both for the realization of their own value and for the improvement of clinical nursing quality. They should encourage nurses to enhance self-efficacy and render more social support through incentive policies and foster nurses' information literacy through information technology training so as to improve their career success.

DETAILS

Subject:	Social support; Literacy; Hospitals; Careers; Success; Information literacy; Professional training; Marital status; Consciousness; Nursing administration; Efficacy; Information technology; Clinical nursing; Nurses; Professional development; Ethics; Demography; Structural equation modeling; Response rates
Business indexing term:	Subject: Careers
Location:	China
Identifier / keyword:	career success; clinical nurse; information literacy; self-efficacy; social support; structural equation model

Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	2
Pages:	428-438
Publication year:	2022
Publication date:	Mar 2022
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article
Publication history :	
Online publication date:	2021-11-16
Milestone dates:	2021-10-13 (Revised); 2021-06-25 (Received); 2021-10-22 (Accepted)
Publication history :	
First posting date:	16 Nov 2021
DOI:	https://doi.org/10.1111/jonm.13499
ProQuest document ID:	2634659030
Document URL:	https://www.proquest.com/scholarly-journals/factors-influencing-career-success-clinical/docview/2634659030/se-2?accountid=211160
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Last updated: 2023-08-04

Database: Publicly Available Content Database

Document 44 of 50

Work schedule characteristics and occupational fatigue/recovery among rotating-shift nurses: A cross-sectional study

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aims

To determine the effects of work schedule characteristics on occupational fatigue and recovery among rotating-shift nurses in South Korea.

Background

Understanding the effects of work schedule characteristics on occupational fatigue is important to prevent adverse nurse outcomes and to ensure patient safety.

Methods

This study used secondary data analysis with a cross-sectional design. Data were collected on 436 rotating-shift nurses in 2018. Nurses' occupational fatigue and recovery were measured using the Occupational Fatigue Exhaustion/Recovery Scale. We used quantile regression models.

Results

The scores for acute and chronic fatigue and intershift recovery were 70.40, 73.39, and 29.82, respectively. Overtime hours, number of night shifts, number of consecutive days off, and breaks were significant influential factors in some quantiles of acute fatigue, chronic fatigue, and intershift recovery, while total working hours was only associated with chronic fatigue in the 25th quantile.

Conclusions

The quantile and linear regression models revealed different results for work schedule factors that affect occupational fatigue and intershift recovery among rotating-shift nurses.

Implication for Nursing Management

These findings have important implications for developing targeted strategies and policies to reduce occupational fatigue and improve intershift recovery for rotating-shift nurses with different levels of occupational fatigue and recovery.

DETAILS

Subject:	Schedules; Chronic fatigue syndrome; Shift work; Fatigue; Recovery; Occupational health; Working hours; Nursing administration; Nurses; Characteristics; Night shifts; Recovery (Medical)
Business indexing term:	Subject: Shift work Occupational health
Identifier / keyword:	fatigue; nurses; recovery; shift-work schedules
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	2
Pages:	463-472
Publication year:	2022
Publication date:	Mar 2022
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article
Publication history :	
Online publication date:	2021-11-28
Milestone dates:	2021-10-23 (Revised); 2021-07-30 (Received); 2021-11-03 (Accepted)
Publication history :	
First posting date:	28 Nov 2021
DOI:	https://doi.org/10.1111/jonm.13511

ProQuest document ID: 2634659012

Document URL: <https://www.proquest.com/scholarly-journals/work-schedule-characteristics-occupational/docview/2634659012/se-2?accountid=211160>

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Last updated: 2023-08-01

Database: Publicly Available Content Database

Document 45 of 50

Experiences of first-line nurse managers during COVID-19: A Jordanian qualitative study

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

The aim of this study is to explore the experiences of Jordanian first-line nurse managers during COVID-19.

Background

Nurses are exposed to life-threatening occupational risks during COVID-19. Exploring the first-line nurse managers' experiences will help in designing health policies to better deal with such emerging crises.

Methods

A descriptive phenomenological study was conducted. A purposive sample was used to recruit 16 first-line nurse managers from Jordanian hospitals. Semistructured interviews were conducted. Phenomenological data analysis method was used to analyse the data.

Results

Four major themes emerged: (a) unprecedented pressure (first-line nurse managers revealed their suffering with the unprecedented demanding situations during COVID-19 pandemic); (b) strengthening system and resilience (nurse managers employed several strategies to strengthen the health system and enhance resilience); (c) building a supportive team (the presence of a robust supportive system is vital to deal with the pandemic); and (d) maturity during the crisis (exposure to a new experience developed nurse managers management skills and self-awareness).

Conclusions

The unprecedented pressure associated with COVID-19 drained first-line nurse managers physically and psychosocially. Providing adequately trained staff and medical equipment is important to better deal with crises.

Implications for Nursing Management

Strengthening emergency training and improving emergency response plans of hospitals are essential.

DETAILS

Subject:	Hospitals; Work environment; Personal protective equipment; Nurse managers; COVID-19; Pandemics; Equipment; Nursing administration; Maturity; Nurses; Teams; Resilience; Disease control; Crises; Qualitative research
Business indexing term:	Subject: Work environment
Location:	Jordan (country)
Identifier / keyword:	COVID-19; experience; first-line nurse managers; Jordan; pandemic
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	2
Pages:	384-392
Publication year:	2022
Publication date:	Mar 2022
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article
Publication history :	
Online publication date:	2022-01-02
Milestone dates:	2021-11-29 (Revised); 2021-09-14 (Received); 2021-12-03 (Accepted)
Publication history :	
First posting date:	02 Jan 2022

DOI: <https://doi.org/10.1111/jonm.13530>

ProQuest document ID: 2634658991

Document URL: <https://www.proquest.com/scholarly-journals/experiences-first-line-nurse-managers-during/docview/2634658991/se-2?accountid=211160>

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Last updated: 2022-07-21

Database: Publicly Available Content Database

Document 46 of 50

Family caregivers' experiences and needs of transitional care during the transfer from intensive care unit to a general ward: A qualitative study

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

To explore the family caregivers' experiences and needs of transitional care during the transfer from an intensive care unit to a general ward in China.

Background

The transfer of patients from the intensive care unit to the ward is a vulnerable time for patients and caregivers, exposing the risk of readmission and death. However, there are few qualitative studies on the family caregivers' views of transitional care for their loved ones in China.

Methods

With a qualitative research design, 15 interviews were conducted with 15 family caregivers of hospitalized patients transferred from the neurosurgery ICU to the general ward. Colaizzi's (1978) method of data analysis was performed using the NVivo 11.0 software.

Results

Based on data analysis, four themes were obtained: perception of transfer decision, the experience of transitional care, the obstacles to maintaining care efficiency and demand for transitional care.

Conclusion

In order to enhance the continuity of care and improve patient safety during the transfer from an ICU to a general ward in China, priorities should be given to the implementation of effective strategies and methods, including providing psychological and emotional support, encouraging active participation of caregivers, and various communication and collaboration procedures.

Implications for Nursing Management

The findings from this study can be used as a guide to better preparation and awareness among health care professionals to achieve the much-needed demands of family caregivers, as well as the increased quality of transitional care.

DETAILS

Subject:	Qualitative research; Transitions; Health care; Hospitalized; Patients; Readmission; Neurosurgery; Nursing administration; Families & family life; Emotional support; Data analysis; Caregivers; Medical personnel; Intensive care; Continuity of care
Location:	China
Identifier / keyword:	family caregiver; interview; patient transfer; qualitative research; transitional care
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	2
Pages:	592-599
Publication year:	2022
Publication date:	Mar 2022
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article

Publication history :

Online publication date: 2021-12-01

Milestone dates: 2021-11-11 (Revised); 2021-08-19 (Received); 2021-11-14 (Accepted)

Publication history :

First posting date: 01 Dec 2021

DOI: <https://doi.org/10.1111/jonm.13518>

ProQuest document ID: 2634658978

Document URL: <https://www.proquest.com/scholarly-journals/family-caregivers-experiences-needs-transitional/docview/2634658978/se-2?accountid=211160>

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Last updated: 2023-08-01

Database: Publicly Available Content Database

Document 47 of 50

The effect of Neurolinguistic Programming practices on organizational citizenship behaviour of nurses: A randomized controlled study

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

The aim of this study is to evaluate the effect of Neurolinguistic Programming practices on organizational citizenship behavior in nursing.

Background

Neurolinguistic Programming practices are used for different purposes in many areas, and they can also be used to contribute to the acquisition of organizational citizenship behaviour.

Methods

The research is a randomized controlled trial. The sample of the study consisted of 180 nurses. The data of the study were collected through structured face-to-face interviews conducted with the nurses in the sample group, Neurolinguistic Programming training group, standard training and control groups between January and April 2020

after Neurolinguistic Programming training was received by the researcher. The Chi-squared test and the analysis of variance (ANOVA) were used to analyze the collected data.

Results

A statistically significant difference was found in the total score of the organizational citizenship behaviour in the Neurolinguistic Programming training group compared with the standard training group and the control group ($p < .05$).

Conclusions

The use of Neurolinguistic Programming practices can be an effective method for nurses to gain organizational citizenship behaviour. Neurolinguistic Programming practices can be used to achieve the desired goals, especially for the acquisition of informing and participation, tolerance and conscientiousness behaviours.

Implications for nursing management

Organizational citizenship behaviour exhibited by employees is very important for organisations. With this behaviour, nurses can improve all processes, from the quality of care services they provide to patients, to satisfaction. Findings of this study may be used to increase work satisfaction of nurses and to improve the quality of services received by patients.

DETAILS

Subject:	Professional training; Citizenship; Behavior modification; Nursing administration; Occupational psychology; Conscientiousness; Nursing; Job satisfaction; Quality of care; Tolerance; Nurses; Organizational citizenship behaviour; Variance analysis; Clinical trials; Behavior
Business indexing term:	Subject: Occupational psychology
Identifier / keyword:	Neurolinguistic Programming; nurses; organizational citizenship behaviour
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	2
Pages:	559-569
Publication year:	2022
Publication date:	Mar 2022
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

e-ISSN: 13652834

Source type: Scholarly Journal

Language of publication: English

Document type: Evidence Based Healthcare, Journal Article

Publication history :

Online publication date: 2021-12-13

Milestone dates: 2021-10-01 (Revised); 2021-04-23 (Received); 2021-10-27 (Accepted)

Publication history :

First posting date: 13 Dec 2021

DOI: <https://doi.org/10.1111/jonm.13502>

ProQuest document ID: 2634658977

Document URL: <https://www.proquest.com/scholarly-journals/effect-neurolinguistic-programming-practices-on/docview/2634658977/se-2?accountid=211160>

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Last updated: 2022-10-08

Database: Publicly Available Content Database

Document 48 of 50

Nurses' views on change management in health care settings: A qualitative study

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

To discover nurses' views on change management processes in health care settings.

Background

Because 'change' is an inevitable fact of today's health care environments, developing change management competencies at all levels is a must to survive and compete for the organisations and professionals in the health care systems.

Methods

A descriptive qualitative approach was used. The sample consisted of 18 nurses reached by using snowball sampling. The data were collected through semi-structured interviews and analysed using the Colaizzi method in the NVivo12 program.

Results

The results of the study were collected under three main themes: 'general approaches and initial responses to change', 'factors affecting attitudes toward change' and 'strategic mistakes made by managers during the change process'.

Conclusion

The study showed that nurses show different reactions to change. Their attitudes towards change could be affected positively and negatively by the relevant factors. Nurses thought that managers were making strategic mistakes during the change process.

Implications for nursing management

Recognizing the approaches of nurses and managers towards change and increasing awareness of the mistakes during the change process may contribute to the achievement of the change processes in health care settings.

DETAILS

Subject:	Nursing administration; Health care; Nurses; Snowball sampling; Nurse managers; Attitudes; Qualitative research; Change agents; Management of change; Errors
Business indexing term:	Subject: Management of change
Identifier / keyword:	change; change management; nurses; nursing; resistance to change
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	2
Pages:	439-446
Publication year:	2022
Publication date:	Mar 2022
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article
Publication history :	
Online publication date:	2021-11-18
Milestone dates:	2021-09-29 (Revised); 2021-07-24 (Received); 2021-10-27 (Accepted)
Publication history :	
First posting date:	18 Nov 2021
DOI:	https://doi.org/10.1111/jonm.13500
ProQuest document ID:	2634658968
Document URL:	https://www.proquest.com/scholarly-journals/nurses-views-on-change-management-health-care/docview/2634658968/se-2?accountid=211160
Copyright:	© 2022 John Wiley & Sons Ltd
Last updated:	2023-05-25
Database:	Publicly Available Content Database

Document 49 of 50

Core competencies of the midwifery workforce in China: A scoping review

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; Zhao, Yang ¹; Ren, Lihua ¹; Cao, Linlin ²; Pang, Dong ³; Wang, Aihua ⁴ ¹ School of Nursing, Peking University, Beijing, China ² Department of Obstetrics and Gynecology, Peking University Third Hospital, Beijing, China; National Clinical Research Center for Obstetrics and Gynecology, Peking University Third Hospital, Beijing, China ³ School of Nursing, Peking University, Beijing, China; Health Science Center for Evidence-Based Nursing, Peking University, Beijing, China ⁴ Health Science Library,

ABSTRACT (ENGLISH)

Aim

This review aims to demonstrate the current core competencies of the Chinese midwifery workforce and to summarize the influencing factors of core competencies.

Background

Midwifery core competencies are crucial to providing high-quality maternal and newborn health care, but little is known about the overall status of the core competencies of the Chinese midwifery workforce.

Evaluation

A scoping review was conducted following the latest Joanna Briggs Institute (JBI) scoping review methodology and Preferred Reporting Items for Systematic reviews and Meta-Analyses extension for Scoping Reviews (PRISMA-ScR) checklist.

Key issues

Forty-one studies were included in this review. Regarding core competency assessment tools, the Midwife Core Competency Scale was used most frequently among 16 identified tools. Generally, the core competencies of the Chinese midwifery workforce were at a moderate or high level, but the competencies in pre-pregnancy, public health care and integrative competence were relatively inadequate. The main factors influencing the core competencies of the midwifery workforce were their working years, educational level and training experience.

Conclusion

This review provides a comprehensive overview of the core competencies of the Chinese midwifery workforce at the national level. Future studies are encouraged to use objective instruments to reflect core competencies and explore the intervenable influencing factors of core competencies.

Implications for Nursing Management

Core competency assessment tools can be used to select the qualified midwifery workforce. Targeted core competency enhancement programmes should be formulated based on the current core competencies level and the factors influencing core competencies.

DETAILS

Subject:	Clinical competence; Systematic review; Academic achievement; Public health; Midwifery; Workforce; Maternal characteristics; Midwives; Nursing administration; Health status; Core competencies; Competency tests; Competence; Health services
Business indexing term:	Subject: Workforce Core competencies
Location:	China
Identifier / keyword:	China; midwifery; nurse-midwives; professional competence
Publication title:	Journal of Nursing Management; Oxford
Volume:	30
Issue:	2

Pages:	535-558
Publication year:	2022
Publication date:	Mar 2022
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Literature Review, Journal Article
Publication history :	
Online publication date:	2022-02-06
Milestone dates:	2021-11-25 (Revised); 2021-09-27 (Received); 2021-12-01 (Accepted)
Publication history :	
First posting date:	06 Feb 2022
DOI:	https://doi.org/10.1111/jonm.13531
ProQuest document ID:	2634658965
Document URL:	https://www.proquest.com/scholarly-journals/core-competencies-midwifery-workforce-china/docview/2634658965/se-2?accountid=211160
Copyright:	© 2022 John Wiley & Sons Ltd
Last updated:	2022-05-23
Database:	Publicly Available Content Database

Nurses' perceptions regarding barriers to implementing the Internet Plus Nursing Service programme: A qualitative study

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

The aim of this work is to investigate nurses' perceptions of barriers constraining the implementation of the Internet Plus Nursing Service program.

Background

The Internet Plus Nursing Service programme helps meet the demands of an ageing population, people with chronic diseases, the disabled, and home convalescents, and affirms the value of nurses. However, this programme has failed to elicit nurses' active participation, and there is limited knowledge regarding nurses' perceptions of the barriers to the programme's implementation.

Methods

A qualitative study was conducted. Thematic analysis of the data was performed.

Results

The analysis yielded three main themes: a sense of insecurity, role conflict, and a lack of support.

Conclusion

This study explores nurses' perspectives on the factors impeding the implementation of the programme, which are identified as being insufficient protection and support on nurses at personal, sociocultural, infrastructural, and organizational levels.

Implications for Nursing Management

The study results will guide the department of nursing management to foster supportive work and social environment for nurses, which will decrease their feeling of insecurity and role conflicts and provides them enough infrastructural and organizational supports through proposing emergency code system and improving training system and team collaboration.

DETAILS

Subject: Barriers; Aging; Scope of practice; Internet; Chronic illnesses; Social environment; Perceptions; Implementation; Sociocultural factors; Nursing administration; Role conflict; Nurse led services; Nursing; Older people; Job insecurity; Teams; Health care industry; Qualitative research; Nurses; Roles; People with disabilities

Identifier / keyword: culture; Internet Plus Nursing Service program; nurses' perceptions; qualitative study; social environment

Publication title: Journal of Nursing Management; Oxford

Volume:	30
Issue:	2
Pages:	511-520
Publication year:	2022
Publication date:	Mar 2022
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
e-ISSN:	13652834
Source type:	Scholarly Journal
Language of publication:	English
Document type:	Journal Article
Publication history :	
Online publication date:	2021-12-23
Milestone dates:	2021-11-11 (Revised); 2021-07-22 (Received); 2021-12-07 (Accepted)
Publication history :	
First posting date:	23 Dec 2021
DOI:	https://doi.org/10.1111/jonm.13533
ProQuest document ID:	2634658948
Document URL:	https://www.proquest.com/scholarly-journals/nurses-perceptions-regarding-barriers/docview/2634658948/se-2?accountid=211160
Copyright:	© 2022 John Wiley & Sons Ltd
Last updated:	2023-07-12
Database:	Publicly Available Content Database

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Citation style: APA 6th - Annotated with Abstracts - American Psychological Association, 6th Edition

Ryder, M., Kitson, A. L., O'Brien, T. S., & Timmins, F. (2022). Advancing nursing practice through fundamental care delivery. *Journal of Nursing Management*, 30(3), 601-603. doi:<https://doi.org/10.1111/jonm.13402>

Fundamental care is defined as follows (Feo et al., 2017; ILC, 2021): Fundamental care involves actions on the part of the nurse that respect and focus on a person's essential needs to ensure their physical and psychosocial wellbeing. These needs are met by developing a positive and trusting relationship with the person being cared for as well as their family/carers. The fundamentals of care are conceptualized within three distinct dimensions of care: (1) the relationship, (2) the integration of care and (3) the care context (ILC, 2021). The relationship involves five core elements: developing and maintaining trust, focusing on the patient being cared for, anticipating the patients' needs, getting to know the patient and how best to provide care for them and evaluating the quality progress and outcomes of the relationship (ILC, 2021). The integration of care provides detailed outline of the physical psychosocial and relational aspects of the fundamentals of care

Najafi, Z., Akram-Sadat Sadat-Hoseini, Imanipour, M., & Ali, M. M. (2022). Factors affecting nurses' retention in Iranian hospitals. *Journal of Nursing Management*, 30(3), 785-794. doi:<https://doi.org/10.1111/jonm.13568>

Aim This research was conducted to study the factors affecting nurses' retention in Iranian hospitals. **Background** Health care systems should pay attention to their human resources' retention to deliver health care services and maintain their organizational values. This issue becomes more significant when we consider the human and financial limitations in place. **Method** Data were analysed using conventional qualitative content analysis based on the model developed by Elo and Kyngäs. Forty-two managers and nurses were selected by purposive sampling. Data were obtained through 45 semi-structured interviews until data saturation was reached. **Results** The data analysis resulted in four main categories and 17 subcategories. The main categories included dignity and respect, ethics and spirituality, empathy, and flourishing. The main theme extracted was 'maternal management'. **Conclusion** The present study proposes 'maternal management' as a strategy to increase the retention of nurses.

Lake, E. T., Riman, K. A., & Lee, C. S. (2022). The association between hospital nursing resource profiles and nurse and patient outcomes. *Journal of Nursing Management*, 30(3), 836-845. doi:<https://doi.org/10.1111/jonm.13553>

Aims To identify and describe profiles of nursing resources and compare nurse and patient outcomes among the identified nursing resource profiles. **Background** Research linking nurse education, staffing, and the work environment treats these nursing resources as separate variables. Individual hospitals exhibit distinct profiles of these resources. **Methods** This cross-sectional secondary analysis used 2006 data from 692 hospitals in four states. Latent class mixture modelling was used to identify resource profiles. Regression models estimated the associations among the profiles and outcomes. **Results** Three profiles were identified (better, mixed and poor) according to their nursing resource levels. Hospitals with poor profiles were disproportionately mid-sized, for-profit, and had lower technology capability. Nurse job outcomes, patient mortality and care experiences were significantly improved in hospitals with better resource profiles. **Conclusions** Hospitals exhibit distinct profiles of nursing resources that reflect investments into nursing. Nurse and patient outcomes and patients' experiences are improved in hospitals with better nursing resource profiles. This finding is consistent with the literature that has examined these resources independently. **Implications for Nursing Management** Nurse managers can identify their nursing resource profile and the associated outcomes. Our results show the advantages of improving one's hospital nursing resource profile, motivating managers to make an informed decision regarding investments in nursing resources.

Tulleners, T., Taylor, M., & Campbell, C. (2022). Peer group clinical supervision for community health nurses: Perspectives from an interpretive hermeneutic study. *Journal of Nursing Management*, 30(3), 684-693. doi:<https://doi.org/10.1111/jonm.13535>

AimTo explore the lived experience of utilizing peer group supervision in practice for community health nurses.**Background**Community health nursing is an autonomous and challenging role where quality clinical supervision has benefits for the registered nurse. The structured New Zealand Coaching and Mentoring model of peer group supervision provides the foundation for this research.**Method**An interpretative hermeneutic study explored the experience of peer group supervision in a regional health service in Australia. Qualitative in-depth interviews were conducted with all levels of nursing staff to gain an understanding of their experience of peer group supervision.**Results**Data interpretation through hermeneutic analysis revealed the value and professional sustenance gained by participants. Identified game changers include adherence to rules and the influence of group dynamics. These areas were found to impact the quality of supervision.**Conclusions**This research provides different perspectives of peer group supervision that shares the experience of staff immersed in the process. Peer group supervision yields benefits for community health nurses; however, the research has implications for practice.**Implications for nursing management**Nurse managers require information when making key decisions regarding workplace implementation. Effective supervision is only possible when balance between benefits and game changers are achieved.

Yu-Chun Chang, Hsin-Yi Chang, & Jui-Ying Feng. (2022). Appraisal and evaluation of the instruments measuring the nursing work environment: A systematic review. *Journal of Nursing Management*, 30(3), 670-683.
doi:<https://doi.org/10.1111/jonm.13559>

AimsTo appraise the current instruments available for measuring the nursing work environment and re-examine the definition and construct of the nursing work environment.**Background**A psychometrically sound instrument is fundamental to understanding and improving the nursing work environment. The nursing work environment is a complex construct, and its definition remains inconclusive. None of the instruments available is considered as the gold standard.**Evaluation**A comprehensive searching was undertaken in August 2021 in six databases according to PRISMA. The COSMIN and modified GRADE were applied to assess the methodological quality and measurement properties of the instruments. Instruments were categorized into three levels. The definition and construct of nursing work environment were revisited.**Key issues**Forty-one studies (19 instruments) were included. One, fourteen, and four instruments are respectively appraised as A-, B- and C-level recommendation. Definition and eight labels of nursing work environment are identified.**Conclusion**This paper provides recommendations for selecting a proper instrument for the nursing work environment.**Implications for nursing management**This study helps nurse managers to select instruments and understand the construct of the nursing work environment. The eight labels can be used as a reference for tailoring policy aimed at creating a favourable nursing work environment.

Wu, Y., Li, Y., Che, L., Du, X., & Xing, J. (2022). Citation analysis on the research frontiers and evolution of enhanced recovery after surgery. *Journal of Nursing Management*, 30(3), 827-835.
doi:<https://doi.org/10.1111/jonm.13541>

AimsTo evaluate the research frontiers and evolution laws in the field of enhanced recovery after surgery (ERAS) and to predict the next direction of development.**Background**In recent years, the clinical applications of ERAS have been widely recognized by the medical community. Nursing work is present throughout the entire process, and nurses not only play a role in multidisciplinary coordination but also maintain independent professional characteristics.**Methods**The citation analysis method was used to analyse the research documents in the Web of Science database over the last 10 years.**Results**The number of documents in the field published from 2011 to 2020 increased annually. The application in colorectal surgery was the most important research frontier. From 2016 to 2020, the research frontiers were diversified. The application in colorectal surgery remains the most important research frontier, and perioperative nursing will play an important role in the future.**Conclusions**This study used citation analysis to analyse the research frontiers and evolution of ERAS in the last 10 years.**Implications for nursing management**This research will help nursing managers to carry out research and clinical promotion plans in the ERAS field and guide the transformation of scientific research achievements into nursing practice.

Cooke, M., de la Fuente, M., Stringfield, C., Sullivan, K., Brassil, R., Thompson, J., . . . Reynolds, S. S. (2022). The impact of nurse staffing on falls performance within a health care system: A descriptive study. *Journal of Nursing*

AimThe purpose of this study was to examine the impact of nurse staffing on inpatient falls performance across a multi-hospital system.
BackgroundEvidence to support which staffing variables influence fall performance so that health care organizations can better allocate resources is lacking.
MethodA descriptive study design was used to analyse the impact of nurse staffing and falls performance, with units dichotomized as either high or low performing based on national benchmarking data. The impact was evaluated using 10 nurse staffing variables.
ResultsA total of nine units were included (five high and four low performing). Higher performing units showed less use of sitters and travellers, had fewer overtime hours worked by nurses, and employed more expert-level clinical nurses and combined nursing assistant/health unit coordinator positions, than lower performing units.
ConclusionFindings provide evidence of how staffing variables affect a unit's falls performance. While significant relationships were found, further evaluation is needed to explore the relationship of staffing variables and quality outcomes.
Implications for Nursing ManagementNursing managers may consider trying to reduce use of sitters and travellers, and utilize innovative staffing models, such as using combined nursing assistant/health unit coordinator positions, to help improve their falls performance.

Yung-Fang Liou, Pay-Fan Lin, Yue-Cune Chang, & Jen-Jiuan Liaw. (2022). Perceived importance of competencies by nurse managers at all levels: A cross-sectional study. *Journal of Nursing Management*, 30(3), 633-642. doi:<https://doi.org/10.1111/jonm.13545>

AimTo explore nurse managers' perceived importance of competencies for their current job at different levels and the associated factors.
BackgroundLittle work to date has explored the perceived importance of competencies in nursing leadership and management or considered the related factors in the Taiwan healthcare context.
MethodsData collected from a previous large study comprising a cross-sectional web-based survey were analysed. Kruskal–Wallis test, two-sided Fisher exact test and multiple linear regression models were used for statistics analysis.
ResultsThe mix of three skills in Katz's model indicated that human skills were equally important in all three managerial levels. Of the 23 competencies, effective communication and political astuteness were rated by nurse managers at all levels as the highest-scored ($M=4.88$, $SD=0.34$) and lowest-scored competency ($M=3.92$, $SD=0.78$), respectively. Managerial level was a significant predictor of the perceived importance of competency.
ConclusionsRelationship-based competencies were prominent in the perceived importance of competencies among nurse managers at different levels. Managerial hierarchy influences the relative importance of the different managerial competencies.
Implications for Nursing ManagementThis study's results provide the talent strategy framework required for improving the competencies of nurse managers at all levels.

Shuangjiang, Z., Huanhuan, H., Xu, L., Zhao, Q., & Mingzhao, X. (2022). Second victim experience and support desire among nurses working at regional levels in china. *Journal of Nursing Management*, 30(3), 767-776. doi:<https://doi.org/10.1111/jonm.13563>

AimThe aim of this study was to describe and analyse the degree of second victim syndrome and the desire for supports among nurses working in regional hospitals in China.
BackgroundThe evidence on the prevalence of second victim among health care workers remains inconsistent and has rarely focused on the regional level.
MethodsA quantitative, descriptive, survey-based, online, cross-sectional study was conducted among 1,194 nurses in three regional hospitals.
ResultsA total of 918 (76.88%) nurses, who reported have had experienced patient safety incidents, were selected for the final analysis. The mean score for the Chinese version of the Second Victim Experience and Support Tool (C-SVEST) was (65.58 ± 10.05). Psychological distress (15.91 ± 2.99) and practice distress (15.26 ± 4.32) had the highest score. The mean score for the desired form of support was (4.29 ± 0.614). The option 'the opportunity to get guidance and suggestions for future work' was rated the most desired.
ConclusionNurses working at the regional level reported a similar degree of second victim experience and support desire, while the prevalence was much higher.
Implications for Nursing ManagementThe second victim phenomenon has become increasingly complex and challenging and deserves more attention. Not only Safety-I but also Safety-II approaches are suggested to integrated to patient safety.

Alquwez, N., Cruz, J. P., & Ejercito Mangawa Balay-odao. (2022). Nurses' spiritual well-being and the COVID-19 pandemic: A thematic approach. *Journal of Nursing Management*, 30(3), 604-611. doi:<https://doi.org/10.1111/jonm.13540>

AimsThis study explores nurses' perceived spiritual well-being in the workplace during the COVID-19 pandemic.**Background**Nurses have been working heavy shifts under challenging workplace conditions during the COVID-19 pandemic, leading to anxiety and psychological stress. These various challenges at work place their spiritual well-being at risk.**Methods**An unstructured individual online interview was conducted to collect data from 18 nurses from April to August 2021. Data were analysed using the thematic approach.**Results**This study highlighted the four themes of spiritual well-being of nurses, namely, "Trust in God," "spiritual encouragement," "spiritual attributes in the workplace," and "spiritual growth."**Conclusions**The study concludes that spirituality is critical in helping nurses overcome the myriad of adversities they face as they assume their important roles during the ongoing pandemic.**Implication for Nursing Management**The study emphasizes that nurses' spiritual aspect during crises is equally important with the other aspects of a nurse's life. Moreover, policies and interventions in hospitals must be implemented to ensure excellent levels of spiritual well-being among nurses.

Zhang, W., Chen, F., Han, M., Li, C., Liu, A., & Xingfeng, L. (2022). The status and associated factors of junior nurses' transition shock: A cross-sectional study. *Journal of Nursing Management*, 30(3), 716-723. doi:<https://doi.org/10.1111/jonm.13543>

AimTo analyse junior nurses' transition shock status and its associated factors.**Background**When nurses experience transition shock, turnover intentions followed by turnover behaviour are likely, which is unfavourable for the stable development of nursing teams.**Methods**Using convenience sampling, 1,148 Chinese junior nurses were recruited. Those recruited completed a demographic questionnaire and the head nurses' humanistic care behaviour for nurses, feedback-seeking behaviour and transition shock of nurses scales. Data and associated factors of transition shock were analysed using SPSS and univariate and multivariate analyses, respectively.**Results**Head nurses' humanistic care behaviour and nurses' feedback-seeking behaviour were significantly and negatively correlated with junior nurses' transition shock (mean score: 2.87 ± 0.85). Income satisfaction, head nurses' humanistic care behaviour, night shift frequency and educational background entered the regression equation.**Conclusions**Transition shock exists not only in new nurses but also in junior nurses with ≤ 5 -year service. Those dissatisfied with their income have frequent night shifts, and higher education backgrounds have higher levels of transition shock.**Implications for Nursing Management**Head nurses need to reduce transition shock of nurses with ≤ 5 -year service by integrating humanistic care into nursing management and creating a friendly environment to stimulate feedback-seeking behaviour.

Bruyneel, A., Maes, J., Pierdomenico, L. D., Tack, J., Bogaert, M., Leclercq, P., & Pirson, M. (2022). Associations between two nursing workload scales and the cost of intensive care unit nursing staff: A retrospective study of one Belgian hospital. *Journal of Nursing Management*, 30(3), 724-732. doi:<https://doi.org/10.1111/jonm.13544>

AimsThe aim of this study was to assess associations between a general nursing funding scale and an intensive care unit specific nursing workload scale and the cost of nursing staff.**Background**Nurse staffing represents the most important cost in the intensive care unit, so it is essential to evaluate it accurately. In addition, the assessment of nursing workload is important for the daily management of the intensive care unit and to ensure quality of care.**Methods**This was a retrospective and quantitative study carried out in the intensive care unit of a Belgian hospital. The extraction of data from the Nursing Activities Score and the Minimum Hospital Summary Nursing Dataset were carried out during 2 periods of 15 days, from 1 June 2018 to 15 June 2018 and from 1 September 2018 to 15 September 2018.**Results**A total of 234 patients were included in the study. A total of 773 Nursing Activities Score and Minimum Hospital Summary Nursing Dataset recordings were analyzed in the study per intensive care unit day. A strong correlation was observed between Nursing Activities Score and Minimum Hospital Summary Nursing Dataset for the entire intensive care unit stay with a rho (95% CI) of .88 (0.83–.93); however, the correlation was moderate per intensive care unit day with a rho of .51 (0.45–0.57). A strong association was observed between the Minimum Hospital Summary Nursing Dataset and the Nursing Activities Score with the costs

of intensive care unit nurses with a rho (95% CI) of .78 (0.72–0.86) and .74 (0.65–0.84), respectively. Conclusions A general nursing funding scale in Belgium was strongly correlated with the nursing workload for the whole intensive care unit stay, but this correlation was moderate per intensive care unit day. In contrast, both scales showed a good correlation with intensive care unit nursing costs. Implications for nursing management In Belgium, a general funding scale for nurses does not allow for an assessment of the nursing workload in the intensive care unit. The Nursing Activities Score is strongly correlated with the cost of nursing staff in the intensive care unit. The authors recommend that the Belgian authorities carry out this type of study in several intensive care units in the country and eventually replace the general funding scale for nurses with the Nursing Activities Score.

Fronza, D. C., & Labrague, L. J. (2022). Turnover intention and coronaphobia among frontline nurses during the second surge of COVID-19: The mediating role of social support and coping skills. *Journal of Nursing Management*, 30(3), 612-621. doi:<https://doi.org/10.1111/jonm.13542>

Background Turnover among frontline health care workers, particularly nurses, reached an alarming rate during the COVID-19 pandemic. This turnover has been attributed, in part, to excessive fear of the virus (a condition called coronaphobia). Studies have not yet been conducted examining whether social support and coping skills could act as buffers between coronaphobia and the intention to leave. Aim To examine the relationship between coronaphobia and frontline nurses' organisational and professional turnover intention and to assess whether social support and coping skills can buffer this relationship. Methods A correlational research design was used to collect responses through an online questionnaire from a convenience sample of 687 frontline nurses from the Central Philippines. Data were analyzed using descriptive (mean, standard deviation and percentages) and inferential statistics (t test, Pearson r correlation coefficient, ANOVA and multiple linear regression). Results More than half of the frontline nurses experienced coronaphobia, while 25.8% reported a desire to leave their job and 20.7% reported a desire to leave their profession. Coronaphobia had direct significant effects on nurses' organisational ($\beta = .424, p < .001$) and professional turnover intention ($\beta = .316, p < .001$). Social support and coping skills partially mediated the relationship between organisational ($\beta = .365, p < .001$; $\beta = .362, p < .001$) and professional turnover intention ($\beta = .279, p < .001$; $\beta = .289, p < .001$). Conclusion Frontline nurses who experienced coronaphobia were more likely to quit their job and the nursing profession. Increasing nurses' social support and enhancing their coping skills reduced the negative effects of coronaphobia, resulting in improved nurse retention. Implications for Nursing Management Institutional approaches to reduce coronaphobia and turnover intention during the pandemic can be facilitated by improving social support through innovative approaches (e.g., use of technology and social media) and equipping nurses with positive coping skills through coping skills training and other empirically based coping skill-building interventions.

Sahay, A., Willis, E., Kerr, D., & Rasmussen, B. (2022). Nurse leader agency: Creating an environment conducive to support for graduate nurses. *Journal of Nursing Management*, 30(3), 643-650. doi:<https://doi.org/10.1111/jonm.13561>

Aim The aim of the study was to gain insight on how nurse leaders manage a culture of safety for graduate nurses. Background Current theoretical approaches to safety culture tend towards a checklist approach that focuses on institutional characteristics, failing to examine the quality of interpersonal relationships. These interpersonal interactions are often seen as separate from the institutional realities of resource allocation, nurse–patient ratios, patient acuity or throughput. A theoretical approach is required to illuminate the dialectic between the structure of an organisation and the agency created by nurse leaders to promote patient safety. Design Qualitative exploratory descriptive study. Methods Semi-structured interviews were undertaken with 24 nurse leaders from hospital and aged care settings. Thematic analysis and Giddens structuration theory was used to describe the findings. Results Nurse leaders identified a range of reciprocal communicative and cultural norms and values, decision-making processes, personal nursing philosophies, strategies and operational procedures to foster patient safety and mentor graduate nurses. The mentoring of graduate nurses included fostering critical thinking, building and affirming formal structural practices such as handover, teamwork, medication protocols and care plans. Conclusions The study provides insight into how nurse leaders foster a culture of safety. Emphasis is placed on how agency in nurse leaders creates an environment conducive to learning and support for graduate nurses. Implications for Nursing Management Nurse leadership functions and decision-making capacity hinges on multiple factors including practicing agency and

aspects of the social structure such as the rules for safe communication, and the various institutional protocols. Nurse leaders enforce these forms of engagement and practice through their legitimation as leaders. They have both allocative and authoritative resources; they can command resources, direct staff to attend to patients and/or clinical tasks, mentor, guide, assign, correct and encourage with the authority vested in them by the formal structure of the organisation. In doing so, they sustain the structure and reinforce it.

Alexander, C., Tschannen, D., Argetsinger, D., Hakim, H., & Milner, K. A. (2022). A qualitative study on barriers and facilitators of quality improvement engagement by frontline nurses and leaders. *Journal of Nursing Management*, 30(3), 694-701. doi:<https://doi.org/10.1111/jonm.13537>

AimThis study aimed to understand the facilitators and barriers of quality improvement (QI) from the perspective of nurses and leaders at the frontline.**Background**Nurse engagement in QI has been associated with quality care and improved patient outcomes, yet nurse reported participation is low.**Methods**A descriptive qualitative design and purposive sampling was used to examine barriers and facilitators of nurse engagement.**Results**Facilitators (1) A leader's influence on a QI culture. Subthemes: creating buy-in, support of a just culture and working in partnership with nurses. Barriers (1) Barriers in organizational culture for nurses to lead QI. Subthemes: organizational hierarchy, absence of a just culture, nurses' role not valued, lack of accountability for QI in nursing role and resistance to change. (2) Barriers in organisational structure for nurses to lead QI. Subthemes: manager disengagement, time pressures, lack of access to timely data, lack of QI knowledge, siloed departments and lack of QI experts.**Conclusion**Barriers to QI engagement prevent nurses from fully engaging in QI. Creating a just culture and building the infrastructure to support nurse engagement is critical for success.**Implications for Nursing Management**Specific facilitators and barriers were identified that nurse leaders can assess in their practice setting and use relevant strategies to support engagement in QI.

Handan, A., Gulcan, T. E., Hanife, T. S., & Feride, E. B. (2022). Nurses' disaster core competencies and resilience during the COVID-19 pandemic: A cross-sectional study from turkey. *Journal of Nursing Management*, 30(3), 622-632. doi:<https://doi.org/10.1111/jonm.13552>

AimThe aim of this study is to determine nurses' disaster core competency levels, compare them based on characteristics and examine the relationships with psychological resilience.**Background**Since nurses constitute a critical part in the health care services, it is important to understand the competencies and effective factors in their disaster preparedness.**Methods**The data were collected from 489 nurses between January and February 2021 with an introductory information form, the Nurses' Perceptions of Disaster Core Competencies Scale and the Connor–Davidson Resilience Scale.**Results**The nurses' level of disaster core competencies was above the average, and it was positively correlated with their psychological resilience. The nurses' disaster experiences made higher differences on their disaster core competencies when compared to their personal and professional characteristics.**Conclusions**It is important to provide disaster training and drills to all nurses on a regular basis. However, under disaster conditions, resilience should also be considered and included in the preparation plans for nurses to support their professional competencies and qualifications.**Implications for nursing management**Nurse managers should play a leadership role in planning disaster preparedness training for nurses, and these trainings should be addressed to cover both professional competencies and resilience for nurses to respond effectively to disasters.

Özkan, A. H. (2022). The effect of burnout and its dimensions on turnover intention among nurses: A meta-analytic review. *Journal of Nursing Management*, 30(3), 660-669. doi:<https://doi.org/10.1111/jonm.13525>

AimThe objective of this study is elaborating on the relationship between burnout and turnover intention.**Background**Burnout and its dimensions have a significant effect on turnover intention.**Evaluation**Meta-analysis technique is used. Forty-four studies were brought together to form four data sets. These data sets were heterogeneous, and they did not include publication bias. The effect sizes of burnout, emotional exhaustion, depersonalization and professional efficacy on turnover intention among nurses were computed.**Key Issues**Random-effects model was used. The groups including two or more studies were added into moderator

analysis. **Conclusions** The effect size of the relationship between professional efficacy and turnover intention was small, and the effect size of the other surveyed relationships was medium among both nurses and other health employees. The moderator analysis results suggested that the effect size of the relationship between professional efficacy and turnover intention among nurses is significantly different from the other health employees. Being a nurse was determined as a significant moderator for the relationship between professional inefficacy and turnover intention, and it weakened this relationship. **Implications for Nursing Management** The findings of this study can be used by health managers as burnout and turnover intention are important to determine organizational policies.

Glarcher, M., Kaiser, K., Kutschar, P., & Nestler, N. (2022). Safety climate in hospitals: A cross-sectional study on the perspectives of nurses and midwives. *Journal of Nursing Management*, 30(3), 742-749. doi:<https://doi.org/10.1111/jonm.13551>

Aims To explore nurses' and midwives' perspectives of safety climate in Austrian hospitals as measurable elements of safety culture and to identify areas of quality improvement. **Background** Due to close contact with patients, nurses and midwives play a vital role in ensuring patient safety. **Method** An online survey among 713 nurses and midwives was conducted, using the 19-item Safety Climate Survey (SCS). To answer the survey, a 5-point Likert scale was provided with higher ratings indicating a more positive safety climate. **Results** Results demonstrate a positive safety culture (MD 4.09, SD 0.53). Significant group differences in overall safety climate score could be found regarding nurses and midwives in managerial positions, between gender and participants age with low effect size. High item missing rates focus aspects on management/leadership, institutional concerns, leadership by physicians, and handling of adverse events. In addition, these items present the lowest ratings in safety climate. **Conclusion** Results indicate potentials for optimization in the areas of leadership communication and feedback, the handling of safety concerns, and visibility or improvement of patient safety strategies. **Implications for Nursing Management** A regular, standardized safety climate measurement can be a valuable tool for nurse managers and (political) decision-makers to manage patient safety initiatives.

Yu, J., Song, Y., Hua, D., Shi, Y., & Zhao, J. (2022). Factors influencing mindfulness among clinical nurses in china: An observational cross-sectional study. *Journal of Nursing Management*, 30(3), 758-766. doi:<https://doi.org/10.1111/jonm.13560>

Aim The aim of this study was to evaluate factors influencing mindfulness among clinical nurses in China. **Background** Mindfulness has positive effects on nurses' negative emotions and job burnout. However, few studies have explored the antecedent variables of mindfulness. **Methods** A total of 358 clinical nurses in Beijing Aerospace Center Hospital completed a cross-sectional survey between July and September 2020. The study employed self-report questionnaires covering social demographics, mindfulness, anxiety, job burnout, emotion regulation, stress perception, resilience, well-being and loneliness. **Results** The mean Mindful Attention Awareness Scale score was 66.82 ± 11.53 , which is near the cut-off score between the high and medium mindfulness categories. Anxiety, stress perception, emotional exhaustion and expressive suppression negatively affected the level of mindfulness, while mental resilience and cognitive reappraisal positively influenced the level of mindfulness (all $P < .05$). **Conclusion** Hospital nurses have higher-than-normal levels of mindfulness. The mindfulness level of clinical nurses is related to anxiety, stress perception, resilience, cognitive reappraisal, emotional exhaustion and expressive suppression. **Implications for nursing management** Nursing managers should consider the role and mechanism of positive psychology and develop targeted intervention measures to improve nurses' mindfulness, in order to further reduce their negative emotions, improve their sense of professional benefit and thus ensure the quality and safety of nursing.

Lee-Pi Lei, Kuan-Pin Lin, Sheng-Shiung Huang, Heng-Hsin Tung, Jung-Mei Tsai, & Shioh-Luan Tsay. (2022). The impact of organisational commitment and leadership style on job satisfaction of nurse practitioners in acute care practices. *Journal of Nursing Management*, 30(3), 651-659. doi:<https://doi.org/10.1111/jonm.13562>

Aim This study aimed to determine the main factors that affect nurse practitioners' (NPs) job satisfaction, especially the relationship between organisational commitment and leadership styles in acute care practices. **Background** There

is little known about the influence of organisational commitment and leadership on NPs' job satisfaction within acute care hospitals. **Methods** A cross-sectional design with a national online survey enrolled 1205 NPs from the Taiwan Association of Nurse Practitioners. A multiple regression model was applied to identify potential variables that associated with job satisfaction. **Results** Organisational commitment (mean=59.47), job satisfaction (mean=173.47) and leadership style (mean ranged from 13.29 to 28) were at a moderate level. Organisational commitment, leadership style, patient load and NP advancement levels explained 63% of the variance in NPs' job satisfaction. **Conclusions** Organisational commitment and leadership styles, such as idealized influence and individual consideration, are major factors that impact NPs' job satisfaction. **Implications for Nursing Management** Health care organisations should develop policies targeting organisational commitment and managers' leadership styles to improve NPs' job satisfaction.

Tian Cheng, C. K., Jie, H. C., Ling, J. C., Wei How, D. A., & Lau, Y. (2022). Global prevalence of resilience in health care professionals: A systematic review, meta-analysis and meta-regression. *Journal of Nursing Management*, 30(3), 795-816. doi:<https://doi.org/10.1111/jonm.13558>

Aims This review aims to examine the prevalence estimate of low resilience among health care professionals and identify the factors affecting the prevalence. **Background** Health care professionals experience high levels of stress. Understanding the health care professionals' resilience may provide an insight into how they perform in a highly stressed environment. **Evaluation** A comprehensive search of 11 databases was conducted. Studies that provided prevalence rates for low resilience among health care professionals working in a health care setting were included. Meta-analyses, sensitivity, subgroup analyses and meta-regression were conducted. **Key issues** Among 27,720 studies, 41 studies (N=17,073) across 16 countries were included. The prevalence of low resilience was 26% (95% CI: 20–32). Subgroup analyses indicated that types of resilience measures affect resilience prevalence significantly. A higher prevalence of low resilience was observed among allied health professions during the COVID-19 pandemic in the Middle East. **Conclusions** This review indicated the prevalence of low resilience and type of resilience measurement instruments that affected the prevalence. **Implications for nursing management** This review provides a roadmap to design tailored, discipline-specific and sustainable resilience training for nurses. Nursing managers should monitor the working hours and workload of nursing staffing in order to provide a protective working environment. This is a systematic review, and the PROSPERO registration number is CRD42021235350.

Jiang, L., Sun, F., Bonifas, R. P., & Hodge, D. R. (2022). Leadership challenges and strategies to dementia care in chinese faith-based nursing homes: A qualitative study. *Journal of Nursing Management*, 30(3), 777-784. doi:<https://doi.org/10.1111/jonm.13564>

Aim To address the need and fill a knowledge gap in understanding challenges and coping strategies from the perspectives of nursing home leadership. **Background** The rapid increase of older adults with dementia in China highlights the need for research on dementia care in long-term care facilities. **Methods** Semistructured interviews were conducted among 20 facility directors employed by faith-based nursing homes across 12 provinces in China via phone or in-person in their native language. Two researchers fluent in Mandarin Chinese- and English-coded interview transcripts; thematic analysis was conducted to identify patterns. **Results** Four primary challenges were identified, including recruiting and retaining nursing staff, funding, lacking governmental support and discord with family members. The coping strategies included using external resources, incorporating religious beliefs, teamwork, rewarding performance and improving staff skills and empathy. **Conclusions** This study contributes to nursing home practice knowledge by disseminating insights of administrators regarding culturally relevant dementia management strategies in China. **Implications for nursing management** Implications for nursing management are as follows: teamwork and staff encouragement; advocate for a sustainable governmental financial support; staff training and staff-resident ratio regulations and policy; seeking external resources; integrate faith-based means for problem management and service quality improvement.

Amal Diab, G. A., Elamir, H., & Mennat Alla, G. A. Z. (2022). Exploring the relationship between organisational silence and organisational learning in nurses: A cross-sectional study. *Journal of Nursing Management*, 30(3), 702-715. doi:<https://doi.org/10.1111/jonm.13539>

AimsTo assess the organisational silence and learning levels among nurses of a university hospital and explore the relationship between the socio-demographics, organisational silence and learning.
BackgroundOrganisational learning is an active process needed for improving organisational performance, and silence has a devastating impact on an organisation's capacity to learn.
MethodsA cross-sectional quantitative design was applied using two tools: the organisational silence and the organisational learning scales. Over 3 months, data were collected from 724 nurses. The data were then analysed using suitable statistical methods.
ResultsThe organisational silence level is moderate. The organisational learning level is predominantly moderate. The association between the two scales is a weak negative correlation, yet statistically significant. The multiple regression analysis was better in predicting organisational learning scores.
ConclusionsThere is a highly statistically significant negative weak correlation between overall organisational silence and overall organisational learning. More researchers are invited to implement of interventions to promote speaking-up behaviours and organisational learning in nurses.
Implications for Nursing ManagementNurse managers and leaders can create a work atmosphere that encourages and promotes open communication among nurses and other health care team members, likewise, creating an environment conducive to translating experiences into organisational learning.

Atalan, A. (2022). A cost analysis with the discrete-event simulation application in nurse and doctor employment management. *Journal of Nursing Management*, 30(3), 733-741. doi:<https://doi.org/10.1111/jonm.13547>

AimThis study aimed to analyse the treatment cost of a patient, depending on the number of patients treated, patient waiting times, and the number of nurses and doctors employed in an emergency department of a private hospital.
BackgroundWithin health systems, changes in health care resources can be very costly, especially if these changes are long-term. The discrete-event simulation method described in this paper allows for the monitoring and analysis of complicated changes in real systems by using computer-based modelling.
MethodThe discrete event simulation model was derived from nine scenarios according to the number of nurses and doctors, and a comparison was made between the results of the scenarios and the actual results.
ResultsAmong the scenarios, scenario 6 provided the lowest treatment cost for a patient by employing three doctors and two nurses with the best performance. The cost of treatment for a patient varies between €9.00 and €11.00 depending on the value of δ , and the daily cost of these resources to the hospital is €1300.77.
ConclusionsThis study provides a clear picture of a cost analysis comparison based on changes made about the actual health system in the computer-based simulated environment.
Implications for Nursing ManagementThe workforce data of nurses and doctors offers enough detail for cost analysis in health care settings to calculate the cost of treatment for a patient.

Kakemam, E., Ghafari, M., Rouzbahani, M., Zahedi, H., & Roh, Y. S. (2022). The association of professionalism and systems thinking on patient safety competency: A structural equation model. *Journal of Nursing Management*, 30(3), 817-826. doi:<https://doi.org/10.1111/jonm.13536>

AimsThe aim of this study is to identify how professionalism and systems thinking contribute to patient safety competency among Iranian nurses.
BackgroundProfessionalism, systems thinking and patient safety competency play important roles in the quality of care. Strategies to enhance the patient safety competency of nurses must be devised by identifying the relationships between these variables.
MethodsA cross-sectional, descriptive survey study was conducted in 10 teaching hospitals in Tabriz, Iran. A total of 358 nursing staff with at least 12 months of experience in nursing were enrolled. Data were collected using the Professionalism scale, Systems Thinking Scale and Patient Safety Competency Self-Evaluation tool. Structural equation modelling analysis was performed to test the relationship between variables.
ResultsThe final model illustrated a good fit ($\chi^2/df = 2.329$, goodness-of-fit index = 0.990, Tucker-Lewis index = 0.906 and root mean square error of approximation = 0.068). Professionalism directly influenced patient safety competency ($\beta = 0.59$, $p < 0.001$) and indirectly influenced systems thinking ($\beta = 0.29$, $p < 0.001$). Systems thinking directly influenced patient safety competency ($\beta = 0.46$, $p < 0.001$). Results indicated that 91% of the variance in patient safety competency was explained by professionalism while 40.1% of the variance in the systems thinking was explained by professionalism.
ConclusionsThe professionalism and systems thinking of hospital nurses play a pivotal role as predictors in patient safety competency. Training opportunities, mentorship and nursing managers' leadership are needed to assist hospital nurses in their perceptions of professionalism and systems thinking.
Implications for Nursing ManagementNursing educators and managers should implement patient

safety training strategies and improve the professionalism and systems thinking of hospital nurses to promote patient safety and quality care.

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