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TABLE OF CONTENTS

Search Strategy.....	iv
1. Nurse managers' learning facilitation practices: A philosophical hermeneutic study.....	1
2. Sleep, fatigue and alertness during working hours among rotating-shift nurses in Korea: An observational study.....	1
3. Leadership, professional quality of life and moral distress during COVID-19: A mixed-methods approach	2
4. Personality, staff attitudes and their association with absenteeism and presenteeism in Australian public sector hospital-based nurses: A cross-sectional study.....	3
5. The organisational and managerial challenges experienced by nurses recovered from COVID-19: A phenomenological study.....	4
6. Missed nursing care during the COVID-19 pandemic: A comparative observational study.....	5
7. Professional success of men in the nursing workforce: An integrative review.....	6
8. Nurse staffing in Portuguese public hospitals.....	6
9. The WeanCare nutritional intervention in institutionalized dysphagic older people and its impact on nursing workload and costs: A quasi-experimental study.....	7
10. Healthcare worker resilience during the COVID-19 pandemic: An integrative review.....	8
11. The effect of discharge planning on length of stay and readmission rates of older adults in acute hospitals: A systematic review and meta-analysis of systematic reviews.....	9
12. Effects of resilience, social support, and work environment on turnover intention in newly graduated nurses: The mediating role of transition shock.....	10
13. Gender equality and managers' work in elderly and social care: A structural equation modelling approach.....	11
14. Associations between personal protective equipment and nursing staff stress during the COVID-19 pandemic.....	12
15. Psychosocial working conditions of shiftworking nurses: A long-term latent transition analysis.....	13
16. A phenomenological study of nurses' experiences with maternal guilt in Turkey.....	13
17. Managerial and organisational prerequisites for the integration of palliative care in the intensive care setting: A qualitative study.....	14
18. Nurses and midwives' experiences with peer-group clinical supervision intervention: A pilot study.....	15
19. Job satisfaction and generational nursing characteristics among registered nurses in the United States, Italy and Finland: Results of a survey study.....	16
20. Progress and challenges for advanced practice nursing in Mexico and the United Kingdom.....	17
21. Prevalence and reasons for non-nursing tasks as perceived by nurses: Findings from a large cross-sectional study.....	18
22. Changes over 10years in the nursing workforce in Guangdong province, China: Three-wave multisite surveys.....	19
23. Fostering an ethos of cultural humility development in nurturing inclusiveness and effective intercultural team working.....	20
24. Psychosocial factors associated with conflicts among health professionals in the operating room in a Greek sample.....	21

TABLE OF CONTENTS

25. High-involvement HRM and innovative behaviour: The mediating roles of nursing staff's autonomy and affective commitment.....	22
26. Development of management structures for future nursing services in the Republic of Kazakhstan requires change of organizational culture.....	22
27. Harmonious work passion and work-related internet information seeking among nurses: The mediating role of intrinsic motivation.....	23
28. Curbing nurses' burnout during COVID-19: The roles of servant leadership and psychological safety.....	24
29. Safety attitudes build safety culture: Nurse/midwife leaders improving health care using quantitative data	25
30. Predicting nurses' occupational commitment and turnover intention: The role of autonomous motivation and supervisor and coworker behaviours.....	26
31. Authentic leadership and nurses' motivation to engage in leadership roles: The mediating effects of nurse work environment and leadership self-efficacy.....	27
32. Introducing health care professionals to systems thinking through an integrated curriculum for leading in health systems.....	28
33. Manager's influence on the registered nurse and nursing assistant relational quality and patient safety culture.....	28
34. Establishing quality evaluation system of nursing management in fever clinics: A Delphi method.....	29
35. Compliance and barriers to the use of infection prevention and control measures among health care workers during COVID-19 pandemic in Qatar: A national survey.....	30
36. Understanding the expanded nursing role in indigenous communities: A qualitative study.....	31
37. Nursing staff ratio and skill mix in Swedish emergency departments: A national cross-sectional benchmark study.....	32
38. Fall prevention education to reduce fall risk among community-dwelling older persons: A systematic review.....	33
39. Nurses' perceptions of emotional intelligence in the clinical setting: A qualitative systematic review.....	34
40. 'The office of disaster management' nurse managers' experiences during COVID-19: A qualitative interview study using thematic analysis.....	35
Bibliography.....	36

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.

Nurse managers' learning facilitation practices: A philosophical hermeneutic study

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ABSTRACT (ENGLISH)

Aim(s)

To understand how nurse managers facilitate learning in clinical workplaces.

Background

Meeting staff learning needs in the complex workplaces of contemporary health care is paramount to the delivery of safe patient care. Hospitals employ a range of strategies to address these needs. However, nurse managers' contribution to staff learning at the unit level is underexplored in contemporary literature.

Method(s)

A Gadamerian philosophical hermeneutic framework guided data collection and analysis. Thirteen nurse managers from two Australian hospitals each participated in two interviews and a period of observation.

Findings

Nurse managers' learning facilitation practices were enacted with staff individually, within teams, and through artefacts, and were shaped by their identities, perspectives on staff learning, knowledge of staff performance, and motivations. Power was revealed as a uniquely enacted driver of their learning facilitation practices.

Conclusion(s)

This paper illuminates an aspect of nurse managers' practice that has been poorly acknowledged in contemporary nursing literature. Nurse managers' learning facilitation practices were found to be complex, fluid, and embedded in their everyday work routines.

Implications for Nursing Management

Given current concerns about safety and quality in health care, this research opens up possibilities for definition and enrichment of nurse managers' practice as facilitators of learning.

Sleep, fatigue and alertness during working hours among rotating-shift nurses in Korea: An observational study

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ABSTRACT (ENGLISH)

Aims

To determine the effects of sleep parameters and fatigue on the decline in alertness of nurses across shifts.

Background

Shift work can lead to nurse fatigue owing to insufficient sleep and inadequate recovery time between shifts. Nurse fatigue has adverse effects on alertness and can affect provision of quality care.

Methods

An observational study using wrist actigraphs was conducted from 2019 to 2020. Participants were 82 rotating-shift nurses who provided direct nursing care in acute hospitals in South Korea. They wore actigraphs for 14 days to measure sleep parameters and predict hourly alertness and reported subjective fatigue before and after every shift.

Results

Nurses demonstrated shorter sleep hours, lower sleep efficiency and longer sleep latency before night shifts compared with other shifts. Fatigue was the highest before day shifts. Sleep parameters and fatigue significantly affected the steep decline in alertness in participants with alertness scores below 70.

Conclusions

Sleep parameters and fatigue level contributed to the differences in decline in alertness across shifts.

Implication for Nursing Management

Findings inform nurse managers, administrators to develop interventions to reduce fatigue, improve sleep quantity and quality and increase alertness among rotating-shift nurses. Management, institutional and individual factors should be considered when developing interventions.

Document 3 of 40

Leadership, professional quality of life and moral distress during COVID-19: A mixed-methods approach

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ABSTRACT (ENGLISH)

Aim

To understand the impact of professional stressors on nurses' and other health care providers' professional quality of life and moral distress as they cared for patients during the COVID-19 pandemic.

Background

Health care providers caring for patients during the COVID-19 pandemic are at increased risk of decreased professional quality of life and increased moral distress.

Methods

A convergent mixed-methods design and snowball sampling was used to collect survey data ($n=171$) and semi-structured interviews ($n=23$) among health care providers working in the inpatient setting.

Results

Perceived lack of support from executive leadership, access to personal protective equipment and constantly changing guidelines led to decreased professional quality of life and increased moral distress among health care providers.

Conclusion

Findings from this study indicate that shared governance, disaster management training and enhanced communication may assist executive leadership to reduce the likelihood of decreased professional quality of life and increased moral distress in front line health care providers.

Implications for Nursing Management

Following the principles of shared governance may assist executive leadership to promote and acknowledge the significance of the role of health care providers at the bedside. Additionally, disaster management training and open communication are crucial to ensure that health care providers are adequately informed and supported at the bedside.

Document 4 of 40

Personality, staff attitudes and their association with absenteeism and presenteeism in Australian public sector hospital-based nurses: A cross-sectional study

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ABSTRACT (ENGLISH)

Aim

To examine how personality and attitudes to sick leave influence nurses self-reported rates of absenteeism and presenteeism.

Background

Despite the significant economic cost and negative impact of absenteeism and presenteeism in health care, there has been limited research looking at personality (using the five-factor model) and absenteeism and presenteeism in nurses.

Methods

A cross-sectional online survey of 320 nurses.

Results

Low emotional stability was significantly associated with higher presenteeism. Shift work predicted more absenteeism, whereas those who believed that a culture of entitlement to sick leave existed in the health service were less likely to be absent from work. Increased work-related stress was also a significant predictor of presenteeism.

Conclusion

The results of this study highlight the role of personality, stress and attitudes in nurses' decision to be absent or present at work when they are sick.

Implications for nursing management

Nurses are the largest workforce in health care settings. Reducing absenteeism and presenteeism in nursing through a greater understanding of the influencing factors will limit the economic impacts of this behaviour and improve patient safety.

Document 5 of 40

The organisational and managerial challenges experienced by nurses recovered from COVID-19: A phenomenological study

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ABSTRACT (ENGLISH)

Aim

This study was conducted to discover the organisational and managerial challenges of nurses recovered from COVID-19.

Background

Nurses, who are at the front line of fighting against COVID-19, face numerous organisational and managerial challenges that impose a burden on their already heavy burden of infection. Working in challenging situations can affect the quality of nursing care.

Methods

This qualitative study was conducted through an interpretive phenomenological approach. To collect the data, 18 semistructured interviews were held with 15 recovered nurses, which were then analysed using van Manen's method.

Results

The data analysis led to the extraction of four themes: nurses as victims of organisational prejudice, a profession surrounded by problems, insufficient sources for dealing with COVID-19 and post-COVID-19 development.

Conclusion

This study showed the organisational and managerial challenges of recovered nurses from COVID-19. Although these nurses had positive experiences, they needed eliminating organisational prejudice, minimizing concerns and sufficient resources to deal with the crisis.

Implications for nursing management

It is believed that these results can be used as a guide to nurse managers to improve the experience of recovered nurses from COVID-19 by treating all employees with equal kindness, considering to their problems and minimizing burden by actively providing resources.

Document 6 of 40

Missed nursing care during the COVID-19 pandemic: A comparative observational study

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ABSTRACT (ENGLISH)

Aim

To evaluate frequencies, types of and reasons for missed nursing care during the COVID-19 pandemic at inpatient wards in a highly specialized university hospital.

Background

Registered nurse/patient ratio and nursing competence are known to affect patient outcomes. The first wave of the COVID-19 pandemic entailed novel ways for staffing to meet the expected increased acute care demand, which potentially could impact on quality of care.

Methods

A comparative cross-sectional study was conducted, using *the MISSCARE Survey*. A sample of nursing staff during the first wave of the COVID-19 pandemic ($n = 130$) was compared with a reference sample ($n = 157$).

Results

Few differences between samples concerning elements of missed care and no significant differences concerning reasons for missed care were found. Most participants perceived the quality of care and the patient safety to be good.

Conclusion

The results may be explained by three factors: maintained registered nurse/patient ratio, patients' dependency levels and that nursing managers could maintain the staffing needs with a sufficient skill mix.

Implications for nursing management

Nursing managers impact on the occurrence of MNC; to provide a sufficient registered nurse/patient ratio and skill mix when staffing. They play an important role in anticipatory planning and during infectious disease outbreaks.

Professional success of men in the nursing workforce: An integrative review

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ABSTRACT (ENGLISH)

Aim

To identify and summarize evidence of objective achievements and subjective indicators associated with professional success of men in nursing.

Background

Despite being a minority group, men in nursing are purported to enjoy hidden advantages.

Evaluation

In this integrative review, studies from seven databases were retrieved and independently evaluated using the quality appraisal tools in accordance with PRISMA guidelines. Inductive content analysis and narrative synthesis were conducted, guided by the aim of this review.

Key issues

In total, 12 studies published between 1987 and 2021 were included. Two themes with related subthemes supporting or refuting professional success of men were identified. These were (a) evidence of professional success and (b) challenges to professional success.

Conclusion

As a minority group, men are highly visible in nursing, which is a double-edged sword. Although men were overrepresented in senior nursing positions of higher salaries than women, they also experienced gender stereotyping, prejudice, and discrimination, which reduced the duration of men staying in a specific nursing position.

Implications for Nursing Management

Findings of this study highlighted the need for nurse leaders to proactively address specific gender issues that are unique to men in the nursing workforce.

Nurse staffing in Portuguese public hospitals

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ABSTRACT (ENGLISH)

Aim

This study aims to contribute to the knowledge of nurse staffing in hospital settings in central and northern Portugal.

Background

Nurse staffing is a critical factor for the quality and safety of health care and is still an understudied topic in Portugal.

Method

A cross-sectional study was conducted with a sample of 850 nurses from 12 public hospitals in the central and northern regions of Portugal.

Results

Nurse staffing in these hospital units is insufficient, especially in internal medicine units and central hospitals. Nurses' perceptions are in line with the objective data.

Conclusions

The shortage of nurses is a horizontal issue that is especially serious in internal medicine units and central hospitals and a potential threat to the quality of care.

Implications for Nursing Management

The results stress the need for an urgent leadership intervention in nurse staffing levels in the hospitals analysed in this study. Contextual knowledge about nurse staffing is essential for decision-making and supporting health and human resource management policies.

Document 9 of 40

The WeanCare nutritional intervention in institutionalized dysphagic older people and its impact on nursing workload and costs: A quasi-experimental study

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ABSTRACT (ENGLISH)

Aim

The aim of this study is to explore how a nutritional intervention that improves the biochemical and functional profile of dysphagic older people impacts on nursing workload and costs for nursing homes.

Background

Dysphagic institutionalized older people particularly at risk of malnutrition require more intensive support from nursing staff and higher costs for nursing homes.

Method

This is an open pre–post longitudinal multicentre quasi-experimental study without a control group.

Results

There is a significant reduction in the number of enemas (from 3.51 to 1.11 enemas), with an average nursing workload reduction from 52 to 16min per patient every month. Each nurse also spent 20h less per patient every month spoon-feeding. This resulted in nursing staff cost savings.

Conclusions

The nutritional intervention led to a significantly better quality of life for the patients manifested through increased independence and social engagement. This reduced workload for nursing staff and costs for nursing home administrators.

Implications for Nursing Management

Sensitive, targeted nutritional interventions have the potential to improve nursing home residents' quality of life and enable a more efficient use of resources. This study revealed reduced workload and cost savings due to less time spent administering enemas and spoon-feeding, in addition to reduced malnutritional consequences.

Document 10 of 40

Healthcare worker resilience during the COVID-19 pandemic: An integrative review

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

The purpose of this review was to examine resilience among healthcare workers during the coronavirus-disease-2019 (COVID-19) pandemic.

Background

The COVID-19 pandemic has caused an unprecedented strain on healthcare workers internationally. Rising

infection rates, inadequate personal protective equipment, and the lack of availability of hospital beds has resulted in further deterioration of the already-fragile mental health of healthcare workers. Resilient workers have lower rates of burnout and improved patient outcomes.

Evaluation

PubMed and the Cumulative Index to Nursing and Allied Health Literature databases were searched using the terms resilience, nurse and COVID-19 to identify studies on resilience during the COVID-19 pandemic. Results were organized by outcome measures for comparison.

Key Issues

Resilience scores among frontline healthcare workers worldwide during the COVID-19 pandemic in the studies reviewed were overall found to be in the moderate range. Data from the United States showed a decrease in nurse resilience, whereas participants from China had increased resilience compared with pre-pandemic levels.

Conclusions

Building resilience in nurses and other healthcare workers can serve as a protective factor against negative outcomes related to the job, including burnout, anxiety and depression, and can improve patient outcomes.

Implications for Nursing Management

Strategies for building resilience in healthcare workers are discussed.

Document 11 of 40

The effect of discharge planning on length of stay and readmission rates of older adults in acute hospitals: A systematic review and meta-analysis of systematic reviews

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ABSTRACT (ENGLISH)

Aim

To examine the effectiveness of discharge planning on length of stay and readmission rates among older adults in acute hospitals.

Background

Discharge planning takes place in all acute hospital settings in many forms. However, it is unclear how it contributes to reducing patient length of stay in hospital and readmission rates.

Methods

Seven systematic reviews were identified and examined. All of the systematic reviews explored the impact of discharge planning on length of stay and readmission rates.

Results

A limited meta-analysis of the results in relation to length of stay indicates positive finding for discharge planning as an intervention (MD = -0.71 (95% CI -1.05, -0.37; $p = .0001$)). However, further analysis of the broader findings in relation to length of stay indicates inconclusive or mixed results. In relation to readmission rates both meta-analysis and narrative analysis point to a reduced risk for older people where discharge planning has taken place (RR = 0.78 (95% CI: 0.72, 0.84; $p = .00001$)). The ability to synthesize results however is severely hampered by the diversity of approaches to research in this area.

Implications for Nursing Management

It is unclear what impact discharge planning has on length of stay of older people. Indeed, while nurse managers will be interested in gauging this impact on throughput and patient flow, it is questionable if length of stay is the correct outcome to measure when studying discharge planning as good discharge planning may increase length of stay. Readmission rates may be a more appropriate outcome measure but standardization of approach needs to be considered in this regard. This would assist nurse managers in assessing the impact of discharge planning processes.

Document 12 of 40

Effects of resilience, social support, and work environment on turnover intention in newly graduated nurses: The mediating role of transition shock

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ABSTRACT (ENGLISH)

Aim

The aim of this work was to examine the mediating role of transition shock on the relationships between resilience, social support, work environment, and turnover intention in newly graduated nurses.

Background

Reports assessing the associations between nurses' resilience, social support, work environment, and turnover intention, both directly and through the mediating effect of transition shock, are scarce.

Methods

This was a cross-sectional study, which recruited 361 Chinese newly graduated nurses with <1 year of work experience.

Results

Resilience, social support, and work environment directly and significantly predicted transition shock (direct effect -0.158 to -0.350 , $p < .01$). Resilience, work environment, and transition shock directly and significantly affected turnover intention (direct effect -0.118 to -0.257 , $p < .05$). Transition shock mediated the relationships between resilience, social support, work environment, and turnover intention indirectly and significantly (indirect effect -0.019 to -0.041 , $p < .05$).

Conclusions

The results suggest that nurse managers could enhance resilience and social support and establish a positive work environment to reduce transition shock and turnover intention.

Implications for Nursing Management

Nurse managers could continuously provide resilience training and develop a supportive workplace climate for newly graduated nurses to facilitate smooth transition into clinical practice, could alleviate their transition shock and turnover intention.

Document 13 of 40

Gender equality and managers' work in elderly and social care: A structural equation modelling approach

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

The study explores whether, and how, gender equality is associated with key aspects related to operative managers' improvement work. We explore the possible associations between gender equality and; prioritization of social regulations in operative decision-making, engagement in operative improvement work, group dynamics challenges and collaboration between managers and subordinates.

Background

Regarding organizational relations and preconditions for providing good care and developing operative work in the social and elderly care sector, the value of having organizational gender equality is unknown.

Method

Associations were analysed using structural equation modelling of questionnaire data. The questionnaire was distributed to first-line managers in a large city in Sweden ($n = 598$, response rate 56%).

Results

Positive perceptions of organizations' gender equality were significantly associated with more engagement in operative improvement work, fewer group dynamics challenges and higher priority of social regulations in unit decision-making, also when controlling for confounders. Gender equality had no association with managers' collaboration with subordinates in this study.

Conclusion(s)

This study demonstrates that equal opportunities for male and female workers could benefit operative managers' improvement work.

Implications for Nursing Management

Organizations that strive to improve conditions for operative work, which strengthen preconditions for service development, should include values of gender equality.

Document 14 of 40

Associations between personal protective equipment and nursing staff stress during the COVID-19 pandemic

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

This study gives insights into the association between the use of personal protective equipment (PPE), wearing time of masks and stress among frontline nursing staff during the COVID-19 pandemic.

Background

PPE can have physical consequences like headache and pain, which could result in increased nurse stress levels.

Methods

A total of 2600 nurses participated in this online survey. The questionnaire is based on literature and includes the perceived level of stress scale.

Results

We found no significant association between the use of PPE and stress. Nurses who wore masks for more than 8 h had significant higher stress levels than those who used the masks for a shorter period.

Conclusions

The duration of wearing masks is associated with nurse's stress level. Our findings can help nurses to argue a higher frequency of breaks and a maximum duration of mask usage in their organisations.

Implications for Nursing Management

We recommend that nursing managers implement practical strategies such as a mask break task force. This task force could promote awareness for mask breaks and recommend and allocate rooms or locations such as balconies for mask breaks.

Psychosocial working conditions of shiftworking nurses: A long-term latent transition analysis

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ABSTRACT (ENGLISH)

Aim

This study aimed to identify profiles of working conditions to which nurses were exposed to over time and investigate how changes in working conditions relate to shiftworking and health.

Background

Previous studies rarely addressed the issue of working conditions development over long periods and the effects of such development on nurses' health.

Methods

Data from a national cohort of nurses in Sweden ($N=2936$) were analysed using a person-centred analytical approach—latent profile and latent transition analysis.

Results

Nurses report better psychosocial working conditions as they progress into mid-career. Shiftworking nurses experience poorer working conditions than their dayworking counterparts and tend to move from shiftwork to daywork as they progress into mid-career. In mid-career, nurses in work environments characterized by low autonomy and support tend to report poorer health outcomes.

Conclusion

Current analyses suggest that shiftworking nurses are particularly in need of interventions that address poor work environments. Not only do they experience more negative psychosocial working conditions than their dayworking counterparts, but they do so while having to contend with demanding schedules.

Implications for Nursing Management

The findings highlight that organisational interventions should target different aspects of the work environment for nurses in diverse stages of their careers.

A phenomenological study of nurses' experiences with maternal guilt in Turkey

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

This study aims to describe nurses' views on what it is like to be a working mother in Turkey.

Background

Most mothers are in the workforce but continue to fulfil their traditional roles at home. This emerges as an important factor causing mothers to try to find a balance between work and home.

Method

For this purpose, a semi-structured form was used in face-to-face interviews conducted with 17 participants. A phenomenological design was preferred in this qualitative study.

Results

The findings obtained from the study revealed the six themes of 'the sense of inadequacy/helplessness, the sense of responsibility, the strong desire to have a positive effect, gender role stereotypes, the choice between achieving a successful career and being a good mother, but with a sense of depletion'.

Conclusion

The results obtained from the study of nurses in Turkey have shed light on how policies should be developed to eliminate work-life barriers in realizing the roles of motherhood.

Implications for Nursing Management

The study results will guide nurse managers in taking the steps needed to incorporate arrangements that will result in balanced conduct of work and home for nurses.

Document 17 of 40

Managerial and organisational prerequisites for the integration of palliative care in the intensive care setting: A qualitative study

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ABSTRACT (ENGLISH)

Aim

To explore the association of organizational structures when integrating palliative care in intensive care units.

Background

Palliative care within intensive care settings has been widely recognized as an area requiring improvement when caring for patients and their families. Despite this, intensive care units continue to struggle to integrate palliative care.

Methods

A qualitative descriptive methodology was used. Data were collected through research interviews with 15 managers and 36 health care professionals working in intensive care. The data were analysed adopting constant comparative analysis.

Results

This study provides insight into a diverse range of perspectives on organizational structure in the context of facilitation and the challenges posed. Three themes were identified: Do not resuscitate policy as a gateway to palliative care, facilitating family members to enable participation and support and barriers for palliative care in intensive care unit as a result of intensive care organization.

Conclusions

In fostering a sustainable organizational culture and practice development in intensive care, the findings indicate the need for specific palliative care policies and implementation strategies tailored according to context.

Implications for nursing management

Management has a responsibility to facilitate dialogue within any multidisciplinary team regarding palliative care and, in particular, to focus on 'do not resuscitate' policies as a gateway into this conversation.

Document 18 of 40

Nurses and midwives' experiences with peer-group clinical supervision intervention: A pilot study

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ABSTRACT (ENGLISH)

Aim

This study aimed to evaluate differences in supervisees' understanding of clinical supervision and their perceptions of organisational functioning before and after engaging in peer-group clinical supervision.

Background

Protected reflective time allows discussion of complex issues affecting health care. Peer-group clinical supervision is one model of clinical supervision that could facilitate this, but it is poorly understood.

Methods

A pre–post intervention pilot study was performed. The intervention was delivered over a 12-month period. Data were collected using surveys on demographic and work-related factors and experience of clinical supervision pre- and post intervention.

Results

Adaptability increased significantly between the pre- and post surveys. The post survey data showed finding time for clinical supervision scoring lowest with open-ended comments reinforcing this. The supervisees found the sessions to offer a safe place despite initial concerns.

Conclusion

The peer-group model of clinical supervision allowed supervisees to build a rapport and trust with their colleagues and share experiences.

Implications for Nursing Management

The benefits to participating in peer-group clinical supervision traversed the individual and organisation. These data support the implementation of such sessions while addressing workload and time pressures to aid participation.

Document 19 of 40

Job satisfaction and generational nursing characteristics among registered nurses in the United States, Italy and Finland: Results of a survey study

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ABSTRACT (ENGLISH)

Aims

The aim of this study is to describe job satisfaction and multigenerational nursing characteristics between nurses in the United States, Italy and Finland.

Background

Job satisfaction and work characteristics may be viewed differently among nurses of different generations and countries.

Methods

Data were collected on the Kuopio University Hospital Job Satisfaction Scale and Multidimensional Nursing Generations Questionnaire. A total of 1,433 usable surveys were returned and analysed using multivariate analysis of variance.

Results

Nurses in the United States were most satisfied in all subareas of job satisfaction. Across all generations and countries, *Leadership* scores were most consistent. Results did not show any generational similarities on job satisfaction or generational work characteristics that held constant across all countries. Scores on dimensions indicating intergenerational conflict were highest in the United States and lowest in Finland. Measures indicating good intergenerational relationships and teamwork were highest in Finland and lowest in the United States.

Conclusions

Country impacted job satisfaction and multigenerational characteristics more than generational cohort.

Implications for Nursing Management

Nurse managers and leaders leading multigenerational teams occupy a pivotal role in multigenerational teamwork and attitudes toward change.

Document 20 of 40

Progress and challenges for advanced practice nursing in Mexico and the United Kingdom

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ABSTRACT (ENGLISH)

Aim

The aim of this study is to compare the advanced practice nursing development in Mexico with the United Kingdom.

Background

In spite of the involvement of global and local bodies to establish and develop advanced practice nursing worldwide, progress remains variable due to the lack of homogeneity in health care systems and policies.

Evaluation

Using thematic analysis from interviews of 29 health care professionals in Mexico, we identified four major issues that impact on the development of advanced practice nursing: (a) workforce, (b) organizational and institutional, (c) regulatory and legal and (d) academic and educational.

Key Issues

Learning from the UK experience in relation to overcoming some of these issues has been insightful in terms of how advanced practice nursing skills in Mexican nurses can be developed.

Conclusions

Mexico is still in early stages of the development of APN. Based on the UK experience, the government may have to move forward to support higher level training, create labour market positions, establish new nursing functions, promote task-shifting and particularly implement solid regulation.

Implications for Nursing Management

The development of advanced practice nursing represents important challenges for training and practice of nursing in Mexico and the United Kingdom; therefore, interested actors will have to reach key agreements that could work as the foundations of an assertive planning process.

Document 21 of 40

Prevalence and reasons for non-nursing tasks as perceived by nurses: Findings from a large cross-sectional study

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ABSTRACT (ENGLISH)

Aim

The aim of this study is to describe the prevalence and reasons for non-nursing tasks as perceived by nurses.

Background

Four types of non-nursing tasks have been identified to date: (a) auxiliary; (b) administrative, (c) expected by allied health care professionals; and (d) medical. However, no studies on a large scale have been performed with the aim of identifying the prevalence of all of these non-nursing tasks, and factors promoting or hindering their occurrence, given that they represent a clear waste of nurses' time.

Methods

A cross-sectional study in 2017, following The Strengthening the Reporting of Observational studies. All active nurses registered in an Italian provincial Nursing Board (=1331) willing to participate were involved. A questionnaire survey exploring the nature of the nursing tasks performed in daily practice and the underlying reasons was administered via paper/pencil and e-mail.

Results

A total of 733 nurses participated of which 94.5% performed at least one type of non-nursing task, mainly administrative and auxiliary. Auxiliary tasks are less likely among nurses working in a community (odds ratio [OR] 0.43, 95% CI 0.29–0.63, $p < .01$) or in a residential (OR 0.41, 95% CI 0.23–0.72, $p < .01$) setting, in critical (OR 0.29,

95% CI 0.16–0.54, $p < .01$) or surgical (OR 0.37, 95% CI 0.19–0.75, $p < .01$) hospital settings, and when they deal with unexpected clinical events (OR 0.58, 95% CI 0.44–0.77, $p < .01$). Greater adequacy of nursing resources decreases the occurrence of auxiliary tasks (OR 0.98, 95% CI 0.97–0.99, $p < .01$), whereas the need to compensate for a lack of resources (OR 1.44, 95% CI 1.07–1.93, $p < .01$) increases it.

Conclusions

Around one-third of shift time is devoted to non-nursing tasks; working in a hospital, in medical units, with lack of resources and with patients with predictable clinical conditions might increase the occurrence of auxiliary tasks.

Implications for nursing management

Strategies to increase the time available for nursing care should consider the type of tasks performed by nurses, their antecedents and the value added to care in terms of patient' benefits.

Document 22 of 40

Changes over 10years in the nursing workforce in Guangdong province, China: Three-wave multisite surveys

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ABSTRACT (ENGLISH)

Aims

The study aimed to describe the changes in the nursing workforce in 2008–2018 in Guangdong province, China.

Background

A strong nursing workforce is important in the development of the health care system in China. However, whether the nursing workforce in China has improved is underexplored.

Methods

Three waves of surveys were conducted in hospitals in Guangdong province, China, in 2008, 2014 and 2018.

Findings

The proportion of less experienced nurses and nurses holding a bachelor's degree has increased. The hospital nurse-to-patient ratio did not change significantly. The work environment deteriorated from 2008 to 2014 and improved from 2014 to 2018. Nurse-perceived staffing adequacy and nurses participating in hospital administration were scored lowest. The nurse–physician relations declined from 2008 to 2018. Nurse satisfaction, retention and quality of care improved, while reduced personal accomplishment deteriorated.

Conclusion

The nursing workforce in Guangdong province, China, is young and highly educated. Nurse outcomes and quality of care have made progress from 2008 to 2018. Nurse staffing and burnout remain matters of concern.

Implications for nursing management

Strategies addressing nursing workforce issues in China include dealing with the nursing shortage, establishing pathways for nurses' participation in decision-making, increasing nurses' income and welfare, promoting recognition of nurses and improving the quality of care.

Document 23 of 40

Fostering an ethos of cultural humility development in nurturing inclusiveness and effective intercultural team working

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ABSTRACT (ENGLISH)

Aim

To discuss the importance of fostering an ethos of cultural humility development in cultivating inclusiveness and effective intercultural team working.

Background

Widening cultural and ethnic diversity of the health care workforce enriches the working environment and encourages a broader perspective on health care services and delivery. However, the intricacies of learning to work effectively within intercultural health care teams and adapting to new ways of working are often underestimated and thus overlooked.

Evaluation

In adopting a framework for cultural humility development (Hughees et al., 2020, 10.1016/j.profnurs.2019.06.005), this paper proposes some practical suggestions for nurturing intrapersonal, interpersonal and system level cultural humility simultaneously.

Key Issues

Fostering an ethos of cultural humility development within the workplace can support inclusiveness and better intercultural team working relationships. Nurses need support in developing awareness of their own cultural beliefs, whilst examining perceptions of cultural difference.

Conclusion

Examining cultural factors that influence intercultural working relationships will help in identifying structures, supports and approaches required for integration and inclusiveness.

Implications for Nursing Management

Nurturing ways of supporting interpersonal, intrapersonal and systems levels cultural humility development inspires the self-awareness, openness and respect for cultural difference required. Developing culturally responsive leadership styles and prioritizing their own cultural humility development is critical.

Document 24 of 40

Psychosocial factors associated with conflicts among health professionals in the operating room in a Greek sample

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

The purpose of this study is to investigate conflicts and identify the factors that cause the creation of conflicts in the operating room as well as coping strategies for conflict resolution.

Background

The operating room is a special and changeable working environment, which is constantly evolving, and requires interdisciplinary team collaboration. Therefore, it is an environment that may cause conflict among employees.

Method

The study was conducted at three Public Hospitals of Athens, during the period from 1 April 2018, to 15 June 2018. The research tool used to conduct the research was the questionnaire of Kontogianni et al. (2011). The questionnaire consisted of four sections dealing with conflict issues and their management. The sample consisted of 185 nurses and medical staff. The level of statistical significance was set equal to .05. The questions were analysed through the statistical package SPSS 20.

Results

The majority of participants had conflicts with colleagues (79%), with doctors (69.5%) and with nurses (43.7%). The majority of the sample was unaware of conflict management strategies (60%). One of the important factors that intensify the conflicts is the burdensome workload in combination with the unsatisfactory salary. Avoidance is the preferred conflict management strategy (64.7%), followed by mutual benefit trading (55.4%). Acceptance is the least appropriate strategy (10.9%).

Conclusions

In order to deal with conflicts in the operating room effectively, it is necessary for nurses and physicians to be trained in conflict management.

Implications for nursing management

Nursing managers should support the training of nurses in conflict management in order to create a climate of cooperation and reduce conflicts.

High-involvement HRM and innovative behaviour: The mediating roles of nursing staff's autonomy and affective commitment

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ABSTRACT (ENGLISH)

Aims

The purpose of this paper was to investigate the relationship between high-involvement human resource management, autonomy, affective organisational commitment and innovative behaviours of nursing staff who care for elderly clients.

Background

Nursing teams are increasingly required to demonstrate innovative behaviours that enhance care quality. Nursing leaders need to create environments where nursing staff have sufficient autonomy and feel a sense of commitment to support these behaviours. The appropriate implementation of these processes and practices may lead to greater involvement.

Methods

A cross-sectional survey-based research design was employed to explore the experiences of involvement practices, autonomy, affective organisational commitment and innovative behaviours of 567 nursing staff workers from four elderly care organisations in the Netherlands.

Results

The results demonstrate that a bundle of high-involvement practices positively influences innovative behaviour and that affective commitment and autonomy fully mediate this relationship.

Conclusions

The study highlights the role of autonomy and commitment as routes towards translating involvement practices into nurses' innovativeness.

Implications for Nursing Management

To create an innovative environment, leaders need to create a positive climate by providing nurses with opportunities to enhance their competence, relatedness and autonomy through active involvement. Leaders should, therefore, encourage involvement as a mechanism to promote innovation.

Development of management structures for future nursing services in the Republic of Kazakhstan requires change of organizational culture

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ABSTRACT (ENGLISH)

Aim

This study's aim was to describe the development of new management structures for nursing services in pilot public healthcare organizations in the Republic of Kazakhstan by focusing on cultural change from the former Soviet system to the modern nursing management system.

Background

Because organizational culture plays an essential role in developing nursing management processes, the challenge in Kazakhstan is to change the deep-rooted Soviet administration practices, such as top-down management and the absence of a career structure in nursing, to meet the new public management system's requirements.

Method

Participatory method was used to generate organizational culture change in 31 pilot organizations.

Results

The organizational structures were reorganized with new nursing positions. Changes concerning nurses' job descriptions and educational requirements were introduced to the legislation. Workforce planning and work division between the healthcare professionals were suggested, allowing new operational functions for nurses. The implemented changes facilitate the culture change in the healthcare and nursing service system.

Conclusion

The shift of healthcare organizations towards a modern nursing management system has started in Kazakhstan.

Implications for Nursing Management

Good understanding and competence of cultural issues related to the change processes are critical in countries that are undergoing fundamental reforms in their healthcare systems.

Document 27 of 40

Harmonious work passion and work-related internet information seeking among nurses: The mediating role of intrinsic motivation

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ABSTRACT (ENGLISH)

Aim

The aim of this study is to investigate the relationship between nurses' harmonious work passion and work-related internet information seeking. In doing so, we examine intrinsic motivation as an underlying mechanism of this relationship.

Background

Nurses seek and utilize information to respond effectively to their tasks and to develop their skills and competencies. Internet consists one of the easiest and richest sources of information. Both nurses and organizations need to identify potential antecedents of work-related internet information seeking.

Methods

Data were collected from 239 nurses and nurse assistants in a Greek University hospital and were analysed using bootstrap analysis with PROCESS macro.

Results

Harmonious work passion was positively related to intrinsic motivation and intrinsic motivation related positively to work-related internet information seeking. The mediating role of intrinsic motivation was also supported.

Conclusions

Nurses with harmonious work passion seek more regularly work-related information on the internet because they experience high levels of intrinsic motivation.

Implications for Nursing Management

Health care organizations and managers need to recruit passionate nurses and cultivate a workplace culture that will trigger higher levels of harmonious work passion. Recruitment tools and methods such as interviews, situational judgement tests or role playing could be very beneficial towards uncovering potential candidates with an elevated passion for their work.

Document 28 of 40

Curbing nurses' burnout during COVID-19: The roles of servant leadership and psychological safety

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aims

This study examines the role of servant leadership through the mechanism of psychological safety in curbing nurses' burnout during the COVID-19 pandemic.

Background

During the COVID-19 pandemic, studies have shown an increased level of stress and burnout among health care workers, especially nurses. This study responds to the call for research to explore the mechanisms of servant leadership in predicting nurses' burnout by employing the perspective of conservation of resources theory.

Methods

Through a cross-sectional quantitative research design, data were collected in three waves from 443 nurses working in Pakistan's five public sector hospitals. Data were analysed by employing the partial least squares path modelling (PLS-PM) technique.

Results

Servant leadership ($\beta = -0.318$; 95% CI = 0.225, 0.416) and psychological safety ($\beta = -0.342$; CI = 0.143, 0.350) have an inverse relationship with nurses' burnout and explain 63.1% variance.

Conclusions

Servant leadership significantly reduces nurses' burnout, and psychological safety mediates this relationship.

Implications for Nursing Management

Human resource management policies in health care must emphasize training nursing leaders in servant leadership behaviour.

Document 29 of 40

Safety attitudes build safety culture: Nurse/midwife leaders improving health care using quantitative data

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ABSTRACT (ENGLISH)

Aim

We aim to determine safety attitudes of nurses and midwives across a Local Health District in Australia and compare results 1 year later following facilitated feedback of results.

Background

Positive safety cultures are imperative for positive patient and staff outcomes. Staff member's attitude contribute to an organisations safety culture but can differ between health professional groups and across different subcultures.

Method

The Safety Attitudes Questionnaire (SAQ-Short version) was administered to all nurses and midwives within a Local Health District in NSW, Australia in 2019 and 2020. Results were facilitated back to nursing/midwifery leadership teams with an expectation of developing and enacting an action plan, based on results.

Results

Of the six domains in the SAQ-Short version, five domains scores increased significantly ($p < .001$) over the time period.

Conclusions

Measures over time are important to establish differences in perceptions and feedback on impact of actions. Facilitated feedback of results shows meaning when nursing/midwifery leadership staff have data explained and an opportunity to discuss and plan.

Implications for Nursing Management

This study shows that facilitated feedback of quantitative survey results brings improved results when a survey is replicated. Nurse managers should enact a contextualized action plan with teams based on survey results to influence improvement in safety attitudes of staff.

Document 30 of 40

Predicting nurses' occupational commitment and turnover intention: The role of autonomous motivation and supervisor and coworker behaviours

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ABSTRACT (ENGLISH)

Aim

To examine whether supportive supervisor (transformational leadership) and coworker (autonomy-supportive) behaviours predict occupational commitment and turnover intention over time through autonomous motivation.

Background

Nurse turnover is a serious issue in several countries, straining the efficiency of the healthcare system and compromising both the quality and accessibility of healthcare.

Method

Longitudinal data were collected over 12 months from 387 French–Canadian registered nurses. Structural equation modeling was used to test the hypothesized model.

Results

The relationships between predictors at Time 1 (supervisor and coworker behaviours) and occupational commitment and turnover intention at Time 2 are mediated by autonomous motivation at Time 1.

Conclusion

In times of global scarcity, the present findings provide insights into how the healthcare work environment acts on nurses' occupational turnover and commitment.

Implications for Nursing Management

Healthcare organizations are advised to foster supportive work environments and promote autonomous motivation to sustain the nursing workforce.

Document 31 of 40

Authentic leadership and nurses' motivation to engage in leadership roles: The mediating effects of nurse work environment and leadership self-efficacy

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Background

Leadership styles of a nurse manager have a profound influence on staff nurses' motivation to engage in formal nursing leadership roles; however, the mechanism underlying this pattern of influence remains unknown.

Aim

To assess the direct and indirect effect of nurse managers' authentic leadership on staff nurses' motivation to

engage in formal leadership roles, through the intermediary role of nurse work environment and leadership self-efficacy.

Methods

This cross-sectional study involved 1534 nurses from 24 acute care hospitals in the Sultanate of Oman.

Findings

Nurse managers' authentic leadership was associated with staff nurses' motivation to engage in formal leadership roles. Nurse practice environment and leadership self-efficacy mediated partially the association between authentic leadership and motivation to engage in formal leadership roles.

Conclusion

Results of this study underscore the value of authentic leadership in creating a healthy work environment and fostering nurses' leadership self-efficacy, resulting in greater motivation to engage in nursing leadership roles.

Implications for Nursing Management

Organizational strategies to attract nurses to undertake leadership roles should include measures to bolster authentic leadership behaviours in nurse managers through theory-driven leadership development programmes or interventions, continuing education, effective succession planning and creating a supportive work environment.

Document 32 of 40

Introducing health care professionals to systems thinking through an integrated curriculum for leading in health systems

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

In this editorial, we discuss how Oshry's (2018, 2019, 2020) Organic Systems Framework (OSF), a theory of whole human systems, was used to design a curriculum that introduces systems thinking to health care professionals. Our aim was to develop an integrated curriculum that focuses on leadership and management as practices (Mintzberg, 2013) that take place in systems (Oshry, 2018). We believe that nurse leaders and educators are well placed to design, develop and deliver such a curriculum as nurses are ubiquitous and embedded at all levels in health systems, providing them with multiple vantage points and opportunities to effect change. Nurses are accustomed to being part of and leading interdisciplinary teams (Teeling et al., 2020) and have a deep understanding and appreciation of other health care professionals' roles. This contextual awareness and recognition of their colleagues' contributions contributes to the "sociopolitical knowing" (White, 1995, p. 83) that has long been regarded as a fundamental pattern of knowing in nursing. Oshry's (2018, 2019, 2020) human systems framework has the potential to strengthen and extend this pattern of knowing for all health care professionals.

Document 33 of 40

Manager's influence on the registered nurse and nursing assistant relational quality and patient safety culture

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aims

The purpose of this study is to describe the perceptions of relational quality of the registered nurse and nursing assistant and examine how their view of the manager's influence impacts overall patient safety culture of a unit.

Background

The primary delivery of nursing care within acute care systems uses teams of registered nurses and nursing assistants.

Methods

A cross-sectional secondary analysis of data collected in the spring of 2018 using the Agency for Healthcare and Quality Hospital Survey of Patient Safety Culture and a seven-item questionnaire measuring relational quality was conducted. The sample included 1,152 responses.

Results

The manager influenced overall perceptions of safety regardless of the relational quality between the registered nurse and nursing assistant.

Conclusions

This study found manager behaviours that promote patient safety and also influence overall perceptions of patient safety culture regardless of the relational quality between the registered nurse and nursing assistant.

Implications for Nursing Management

Positive registered nurse and nursing assistant relational quality amplifies perceptions of patient safety culture, yet it is the manager's behaviours regarding safety that make the stronger contribution in building a culture of safety.

Document 34 of 40

Establishing quality evaluation system of nursing management in fever clinics: A Delphi method

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ABSTRACT (ENGLISH)

Aim

The aim of this study is to construct a quality evaluation system for fever clinic nursing management.

Background

Fever clinic is the first line of defence against the epidemic during COVID-19 in China.

Methods

Our study combines the Delphi method and the analytic hierarchy process. Delphi method was used to carry out two rounds of consultation for 18 experts, to select and revise indicators at all levels. Analytic hierarchy process was used to calculate the weight of indicators at all levels.

Results

A quality evaluation system of nursing management for fever clinics is built using Delphi method. It includes five first-level indexes, 14 second-level indexes and 82 third-level indexes. A two-round expert consultation is used to build the indicators. The recovery rates of expert questionnaires in the two rounds were, respectively, 100% and 94%, and expert authority coefficients were 0.925. The Kendall coefficients in the two rounds were, respectively, 0.205 and 0.162 ($P < .001$). The weight analysis shows that health management of nursing staff (0.2803) and disinfection isolation and treatment of medical waste (0.2803) are most important, followed by nursing post management and personnel training (0.1889), configuration and management of equipment (0.1427) and patient consultation management and nursing (0.1078).

Conclusion

The quality evaluation system of nursing management in the constructed fever clinic is used to put forward a specific, objective and quantifiable evaluation criteria of nursing quality for fever clinic management, which can better meet the needs of epidemic prevention and control, and has a certain application and promotion value.

Implications for Nursing Management

The establishment and improvement of a quality system for fever clinic care management will help to respond to outbreaks such as COVID-19.

Compliance and barriers to the use of infection prevention and control measures among health care workers during COVID-19 pandemic in Qatar: A national survey

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ABSTRACT (ENGLISH)

Aim

To assess health care workers' compliance with infection prevention and control measures in different health care sectors in Qatar during COVID-19 pandemic.

Background

Being the first line of defence against COVID-19 infection, health care workers are particularly at increased risk of getting infected. Compliance with infection prevention and control measures is essential for their safety and the safety of patients.

Methods

A web-based national survey was conducted between November 2020 and January 2021 targeting all health care workers in governmental, semi-governmental and private health care sectors.

Results

Of 1,757 health care workers, 49.9% were between 30 and 39 years of age; the majority (47.5%) were nurses. Participants reported a significant increase in the median self-rated compliance scores during the pandemic compared with before it ($p < .001$). During the pandemic, 49.7% of health care workers were fully compliant with personal protective equipment (PPE) use; 83.1% were fully compliant with hand hygiene. Overall, 44.1% were fully compliant with infection prevention and control measures (PPE and hand hygiene). Nationality, health sector, profession and frequency of interactions with suspected or confirmed COVID-19 cases were significantly associated with compliance with overall infection prevention and control measures. The most reported barriers were work overload and shortages of PPE and handwashing agents.

Conclusions

Compliance of health care workers with infection prevention and control measures needs further improvement.

Implications for Nursing Management

Frequent quality checks, provision of adequate supplies and behaviour change interventions are recommended strategies for hospital and nursing administrators to improve health care workers' compliance.

Document 36 of 40

Understanding the expanded nursing role in indigenous communities: A qualitative study

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

By studying an extreme context, we aim to provide an in-depth understanding of the expanded nursing role in remote aboriginal communities, its dynamics and the main barriers to its full expansion.

Background

While it is recognized that nurses play a major role in remote or rural areas, little is known about the dynamics of the expanded role and the nurses' daily practice and routines.

Methods

We conducted 49 in-depth interviews with nurses and key informants and more than 14 days of observation: two days of pre-departure training and 12 days in dispensaries and a hospital in Hudson Bay, Québec, Canada.

Results

We identified four sub-roles within the nurses' expanded role: administrative, nursing, medical and community sub-roles. This typology allowed us to document the evolving and dynamic nature of the role as well as the individual, organisational and community barriers that limit its expansion.

Conclusion

This typology represents the first attempt to gain an in-depth understanding of the enlarged nursing role in northern Québec and of the complexity of the daily nursing routines and dynamics. We believe it to be relevant for other contexts, such as rural areas, even if nurses there do not always take on all four sub-roles during their nursing experience.

Implications for nursing management

Our paper has significant practical implications for different stakeholders—educators, directors of nursing, recruiters, regulators and policymakers—as it may help with identifying the education and training requirements for developing specific sub-roles, overcoming obstacles to widening the expanded role or better allocating the resources needed based on the predominant sub-role in different contexts. More broadly, this study shows that, when properly regulated, extending professional nursing boundaries does not put the patient at risk and enables professionals to develop their practice. It represents a textbook case for rethinking our contemporary health care systems.

Document 37 of 40

Nursing staff ratio and skill mix in Swedish emergency departments: A national cross-sectional benchmark study

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

The aim of this study is to describe ratio and skill mix for nursing staff in Swedish emergency departments over a specific 24-h period.

Background

The link between number of patients per nursing staff and missed nursing care is well described within the in-hospital setting, showing association with negative outcomes such as increased mortality. Potential association within the emergency department setting is still unexplored.

Method

This is a national descriptive cross-sectional benchmark study.

Results

The majority ($n = 54$; 89%) of Swedish emergency departments participated. The patients-per-registered nurse ratio varied between the shifts, from 0.3 patients to 8.8 patients (mean 3.2). The variation of patients per licenced practical nurse varied, from 1.5 to 23.5 patients (mean 5.0). The average skill mix was constant at around 60% registered nurses and 40% licenced practical nurses.

Conclusion

The varying ratios for patient per registered nurse and licenced practical nurse in Swedish emergency departments are noteworthy. Furthermore, the patient flow and nursing staff numbers did not match one another, resulting in higher nursing staff ratios during the evening shift.

Implications for Nursing Management

Findings can be used to improve rosters in relation to crowding, to manage the challenging recruitment and retention situation for nursing staff and to improve patient safety.

Document 38 of 40

Fall prevention education to reduce fall risk among community-dwelling older persons: A systematic review

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ABSTRACT (ENGLISH)

Objectives

This review aims to identify types of the existing fall prevention education (FPE) and their effectiveness in promoting fall risk awareness, knowledge and preventive fall behaviour change among community-dwelling older people.

Background

FPE is a cost-effective and helpful tool for reducing fall occurrences.

Evaluation

This is a systematic review study using electronic searches via EBSCOHost® platform, ScienceDirect, Scopus and Google Scholar in March 2021. The review protocol was registered with PROSPERO (CRD42021232102). The Preferred Reporting Items for Systematic reviews and Meta-Analyses (PRISMA) statement flow chart guided the search strategy. Articles published from January 2010 to March 2021 were included for quality appraisal using the 'Transparent Reporting of Evaluations with Non-randomised Designs' (TREND) and the 'Consolidated Standards of Reporting Trials' (CONSORT) statement for randomised controlled trial studies.

Key issues

Six FPE studies selected emphasised on personal health status, exercise and environmental risk factors. These studies reported an increase in fall risk awareness or knowledge and a positive change in fall preventive behaviours. Two studies included nurses as educators in FPE.

Conclusion

FPE evidently improved awareness or knowledge and preventive fall behaviour change among older adults. Nurses are in great potential in planning and providing FPE for older adults in community settings.

Implications for Nursing Management

Expand nurses' roles in fall prevention programmes in community settings by using high-quality and evidence-based educational tools. Highlight the nurse's role and collaborative management in FPE.

Document 39 of 40

Nurses' perceptions of emotional intelligence in the clinical setting: A qualitative systematic review

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

The aim of the study is to explore available literature on nurses'/midwives' perceptions of emotional intelligence in the clinical setting.

Background

Emotional intelligence is a crucial skill in nursing practice but little is known about nurses' perceptions of it.

Evaluation

Eight electronic databases (CINAHL, Cochrane, Embase, ProQuest Dissertations and Theses Global, PsycInfo, PubMed, Scopus and Web of Science) were searched until November 2020. Quality appraisal was performed using the Critical Appraisal Skills Program Checklist. Data analysis was conducted using Sandelowski and Barroso's two-step approach of meta-summary and meta-synthesis.

Key issues

Five themes emerged from the 17 included studies: (1) understanding emotional intelligence in clinical nursing, (2) nurses' utilization of emotional intelligence, (3) benefits of being an emotionally intelligent nurse, (4) barriers to developing emotional intelligence and (5) recommendations to enhance emotional intelligence.

Conclusions

Nurses expressed interest in enhancing their emotional intelligence, and they identified barriers and provided

corresponding recommendations to support their endeavours. Future studies should be geographically distributed and include nurses from all sectors of the profession to amass a holistic and comprehensive conceptual understanding of emotional intelligence.

Implications for Nursing Management

Policy makers and nursing educators should tactically and successfully integrate emotional intelligence training into the nursing profession and curricula.

Document 40 of 40

'The office of disaster management' nurse managers' experiences during COVID-19: A qualitative interview study using thematic analysis

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

The purpose of this study was to understand the experiences of nurse managers during the COVID-19 pandemic.

Background

There is a growing body of knowledge about the experiences of clinical nurses during COVID-19. However, there is less evidence about the experiences of nurse managers during the pandemic.

Methods

Eight nurse managers, from acute care and outpatient settings, completed semistructured interviews about how their roles had changed during the pandemic, how they felt about these changes, and what had gone well or been difficult. Each participant was interviewed once, for 20–60 min. We used thematic analysis methods to analyse the interview transcripts.

Findings

Nurse managers had to coordinate care in a context of uncertainty and guidance that changed frequently. Participants found that their roles and responsibilities either expanded to include more duties, or they were asked to take on a completely new role, with no orientation or training. Nurse managers were expected to provide support to their staff and patients, but did not necessarily receive support themselves. Participants were expected to plan simultaneously for care during the pandemic and for a return to normal working conditions. These factors contributed to challenging and difficult participant experiences of managing during COVID-19.

Conclusion

Nurse managers' experiences during COVID-19 are influenced by changes to their roles and the support they received. Nurse managers continue to support high-quality care despite working a difficult context.

Implications for nursing management

Where possible, nurse managers can be supported to extend their roles or receive additional education and support if they are required to take on new responsibilities. Nurse managers require support in order to be a resource for their staff.

Bibliography

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

Yen, M., Patton, N., & Anderson, J. (2021). Nurse managers' learning facilitation practices: A philosophical hermeneutic study. *Journal of Nursing Management*, 29(8), 2573-2584. doi:<https://doi.org/10.1111/jonm.13417>

Aim(s)To understand how nurse managers facilitate learning in clinical workplaces.**Background**Meeting staff learning needs in the complex workplaces of contemporary health care is paramount to the delivery of safe patient care. Hospitals employ a range of strategies to address these needs. However, nurse managers' contribution to staff learning at the unit level is underexplored in contemporary literature.**Method(s)**A Gadamerian philosophical hermeneutic framework guided data collection and analysis. Thirteen nurse managers from two Australian hospitals each participated in two interviews and a period of observation.**Findings**Nurse managers' learning facilitation practices were enacted with staff individually, within teams, and through artefacts, and were shaped by their identities, perspectives on staff learning, knowledge of staff performance, and motivations. Power was revealed as a uniquely enacted driver of their learning facilitation practices.**Conclusion(s)**This paper illuminates an aspect of nurse managers' practice that has been poorly acknowledged in contemporary nursing literature. Nurse managers' learning facilitation practices were found to be complex, fluid, and embedded in their everyday work routines.**Implications for Nursing Management**Given current concerns about safety and quality in health care, this research opens up possibilities for definition and enrichment of nurse managers' practice as facilitators of learning.

Min, A., Hye, C. H., Son, S., & Lee, T. (2021). Sleep, fatigue and alertness during working hours among rotating-shift nurses in Korea: An observational study. *Journal of Nursing Management*, 29(8), 2647-2657. doi:<https://doi.org/10.1111/jonm.13446>

AimsTo determine the effects of sleep parameters and fatigue on the decline in alertness of nurses across shifts.**Background**Shift work can lead to nurse fatigue owing to insufficient sleep and inadequate recovery time between shifts. Nurse fatigue has adverse effects on alertness and can affect provision of quality care.**Methods**An observational study using wrist actigraphs was conducted from 2019 to 2020. Participants were 82 rotating-shift nurses who provided direct nursing care in acute hospitals in South Korea. They wore actigraphs for 14 days to measure sleep parameters and predict hourly alertness and reported subjective fatigue before and after every shift.**Results**Nurses demonstrated shorter sleep hours, lower sleep efficiency and longer sleep latency before night shifts compared with other shifts. Fatigue was the highest before day shifts. Sleep parameters and fatigue significantly affected the steep decline in alertness in participants with alertness scores below 70.**Conclusions**Sleep parameters and fatigue level contributed to the differences in decline in alertness across shifts.**Implication for Nursing Management**Findings inform nurse managers, administrators to develop interventions to reduce fatigue, improve sleep quantity and quality and increase alertness among rotating-shift nurses. Management, institutional and individual factors should be considered when developing interventions.

Ness, M. M., Saylor, J., DiFusco, L. A., & Evans, K. (2021). Leadership, professional quality of life and moral distress during COVID-19: A mixed-methods approach. *Journal of Nursing Management*, 29(8), 2412-2422. doi:<https://doi.org/10.1111/jonm.13421>

AimTo understand the impact of professional stressors on nurses' and other health care providers' professional quality of life and moral distress as they cared for patients during the COVID-19 pandemic.**Background**Health care providers caring for patients during the COVID-19 pandemic are at increased risk of decreased professional quality of life and increased moral distress.**Methods**A convergent mixed-methods design and snowball sampling was used to collect survey data (n=171) and semi-structured interviews (n=23) among health care providers working in the inpatient setting.**Results**Perceived lack of support from executive leadership, access to personal protective equipment and constantly changing guidelines led to decreased professional quality of life and increased moral distress among health care providers.**Conclusion**Findings from this study indicate that shared governance, disaster management training and enhanced communication may assist executive leadership to reduce the likelihood of decreased professional quality of life and increased moral distress in front line health care providers.**Implications for Nursing Management**Following the principles of shared governance may assist executive leadership to promote and

acknowledge the significance of the role of health care providers at the bedside. Additionally, disaster management training and open communication are crucial to ensure that health care providers are adequately informed and supported at the bedside.

Banks, C., & Pearson, S. (2021). Personality, staff attitudes and their association with absenteeism and presenteeism in Australian public sector hospital-based nurses: A cross-sectional study. *Journal of Nursing Management*, 29(8), 2639-2646. doi:<https://doi.org/10.1111/jonm.13443>

AimTo examine how personality and attitudes to sick leave influence nurses self-reported rates of absenteeism and presenteeism.
BackgroundDespite the significant economic cost and negative impact of absenteeism and presenteeism in health care, there has been limited research looking at personality (using the five-factor model) and absenteeism and presenteeism in nurses.
MethodsA cross-sectional online survey of 320 nurses.
ResultsLow emotional stability was significantly associated with higher presenteeism. Shift work predicted more absenteeism, whereas those who believed that a culture of entitlement to sick leave existed in the health service were less likely to be absent from work. Increased work-related stress was also a significant predictor of presenteeism.
ConclusionThe results of this study highlight the role of personality, stress and attitudes in nurses' decision to be absent or present at work when they are sick.
Implications for nursing managementNurses are the largest workforce in health care settings. Reducing absenteeism and presenteeism in nursing through a greater understanding of the influencing factors will limit the economic impacts of this behaviour and improve patient safety.

Radfar, M., Masumeh Hemmati, M. P., & Mohammadi, F. (2021). The organisational and managerial challenges experienced by nurses recovered from COVID-19: A phenomenological study. *Journal of Nursing Management*, 29(8), 2353-2363. doi:<https://doi.org/10.1111/jonm.13394>

AimThis study was conducted to discover the organisational and managerial challenges of nurses recovered from COVID-19.
BackgroundNurses, who are at the front line of fighting against COVID-19, face numerous organisational and managerial challenges that impose a burden on their already heavy burden of infection. Working in challenging situations can affect the quality of nursing care.
MethodsThis qualitative study was conducted through an interpretive phenomenological approach. To collect the data, 18 semistructured interviews were held with 15 recovered nurses, which were then analysed using van Manen's method.
ResultsThe data analysis led to the extraction of four themes: nurses as victims of organisational prejudice, a profession surrounded by problems, insufficient resources for dealing with COVID-19 and post-COVID-19 development.
ConclusionThis study showed the organisational and managerial challenges of recovered nurses from COVID-19. Although these nurses had positive experiences, they needed eliminating organisational prejudice, minimizing concerns and sufficient resources to deal with the crisis.
Implications for nursing managementIt is believed that these results can be used as a guide to nurse managers to improve the experience of recovered nurses from COVID-19 by treating all employees with equal kindness, considering to their problems and minimizing burden by actively providing resources.

Ann-Christin, v. V., Göransson, K.,E., Ann-Charlotte Falk, & Nymark, C. (2021). Missed nursing care during the COVID-19 pandemic: A comparative observational study. *Journal of Nursing Management*, 29(8), 2343-2352. doi:<https://doi.org/10.1111/jonm.13392>

AimTo evaluate frequencies, types of and reasons for missed nursing care during the COVID-19 pandemic at inpatient wards in a highly specialized university hospital.
BackgroundRegistered nurse/patient ratio and nursing competence are known to affect patient outcomes. The first wave of the COVID-19 pandemic entailed novel ways for staffing to meet the expected increased acute care demand, which potentially could impact on quality of care.
MethodsA comparative cross-sectional study was conducted, using the MISSCARE Survey. A sample of nursing staff during the first wave of the COVID-19 pandemic (n = 130) was compared with a reference sample (n = 157).
ResultsFew differences between samples concerning elements of missed care and no significant differences concerning reasons for missed care were found. Most participants perceived the quality of care and the patient safety to be good.
ConclusionThe results may be explained by three factors: maintained registered nurse/patient ratio, patients' dependency levels and that nursing managers could maintain the staffing needs with a

sufficient skill mix. Implications for nursing management Nursing managers impact on the occurrence of MNC; to provide a sufficient registered nurse/patient ratio and skill mix when staffing. They play an important role in anticipatory planning and during infectious disease outbreaks.

Smith, B. W., Rojo, J., Everett, B., Montayre, J., Sierra, J., & Salamonson, Y. (2021). Professional success of men in the nursing workforce: An integrative review. *Journal of Nursing Management*, 29(8), 2470-2488.
doi:<https://doi.org/10.1111/jonm.13445>

AimTo identify and summarize evidence of objective achievements and subjective indicators associated with professional success of men in nursing.
BackgroundDespite being a minority group, men in nursing are purported to enjoy hidden advantages.
EvaluationIn this integrative review, studies from seven databases were retrieved and independently evaluated using the quality appraisal tools in accordance with PRISMA guidelines. Inductive content analysis and narrative synthesis were conducted, guided by the aim of this review.
Key issuesIn total, 12 studies published between 1987 and 2021 were included. Two themes with related subthemes supporting or refuting professional success of men were identified. These were (a) evidence of professional success and (b) challenges to professional success.
ConclusionAs a minority group, men are highly visible in nursing, which is a double-edged sword. Although men were overrepresented in senior nursing positions of higher salaries than women, they also experienced gender stereotyping, prejudice, and discrimination, which reduced the duration of men staying in a specific nursing position.
Implications for Nursing ManagementFindings of this study highlighted the need for nurse leaders to proactively address specific gender issues that are unique to men in the nursing workforce.

Almeida Neves, T. M., Pedro Miguel Santos, D. P., Lopes Rodrigues, V. J., & João Manuel Garcia, N. G. (2021). Nurse staffing in portuguese public hospitals. *Journal of Nursing Management*, 29(8), 2557-2564.
doi:<https://doi.org/10.1111/jonm.13415>

AimThis study aims to contribute to the knowledge of nurse staffing in hospital settings in central and northern Portugal.
BackgroundNurse staffing is a critical factor for the quality and safety of health care and is still an understudied topic in Portugal.
MethodA cross-sectional study was conducted with a sample of 850 nurses from 12 public hospitals in the central and northern regions of Portugal.
ResultsNurse staffing in these hospital units is insufficient, especially in internal medicine units and central hospitals. Nurses' perceptions are in line with the objective data.
ConclusionsThe shortage of nurses is a horizontal issue that is especially serious in internal medicine units and central hospitals and a potential threat to the quality of care.
Implications for Nursing ManagementThe results stress the need for an urgent leadership intervention in nurse staffing levels in the hospitals analysed in this study. Contextual knowledge about nurse staffing is essential for decision-making and supporting health and human resource management policies.

Zanini, M., Catania, G., Ripamonti, S., Watson, R., Romano, A., Aleo, G., . . . Bagnasco, A. (2021). The WeanCare nutritional intervention in institutionalized dysphagic older people and its impact on nursing workload and costs: A quasi-experimental study. *Journal of Nursing Management*, 29(8), 2620-2629.
doi:<https://doi.org/10.1111/jonm.13435>

AimThe aim of this study is to explore how a nutritional intervention that improves the biochemical and functional profile of dysphagic older people impacts on nursing workload and costs for nursing homes.
BackgroundDysphagic institutionalized older people particularly at risk of malnutrition require more intensive support from nursing staff and higher costs for nursing homes.
MethodThis is an open pre-post longitudinal multicentre quasi-experimental study without a control group.
ResultsThere is a significant reduction in the number of enemas (from 3.51 to 1.11 enemas), with an average nursing workload reduction from 52 to 16min per patient every month. Each nurse also spent 20h less per patient every month spoon-feeding. This resulted in nursing staff cost savings.
ConclusionsThe nutritional intervention led to a significantly better quality of life for the patients manifested through increased independence and social engagement. This reduced workload for nursing staff and costs for nursing home administrators.
Implications for Nursing ManagementSensitive, targeted nutritional interventions have the potential to improve nursing home residents' quality of life and enable a more efficient use of resources. This study revealed

reduced workload and cost savings due to less time spent administering enemas and spoon-feeding, in addition to reduced malnutritional consequences.

Baskin, R. G., & Bartlett, R. (2021). Healthcare worker resilience during the COVID-19 pandemic: An integrative review. *Journal of Nursing Management*, 29(8), 2329-2342. doi:<https://doi.org/10.1111/jonm.13395>

AimThe purpose of this review was to examine resilience among healthcare workers during the coronavirus-disease-2019 (COVID-19) pandemic.**Background**The COVID-19 pandemic has caused an unprecedented strain on healthcare workers internationally. Rising infection rates, inadequate personal protective equipment, and the lack of availability of hospital beds has resulted in further deterioration of the already-fragile mental health of healthcare workers. Resilient workers have lower rates of burnout and improved patient outcomes.**Evaluation**PubMed and the Cumulative Index to Nursing and Allied Health Literature databases were searched using the terms resilience, nurse and COVID-19 to identify studies on resilience during the COVID-19 pandemic. Results were organized by outcome measures for comparison.**Key Issues**Resilience scores among frontline healthcare workers worldwide during the COVID-19 pandemic in the studies reviewed were overall found to be in the moderate range. Data from the United States showed a decrease in nurse resilience, whereas participants from China had increased resilience compared with pre-pandemic levels.**Conclusions**Building resilience in nurses and other healthcare workers can serve as a protective factor against negative outcomes related to the job, including burnout, anxiety and depression, and can improve patient outcomes.**Implications for Nursing Management**Strategies for building resilience in healthcare workers are discussed.

Caroline Hunt-O'Connor, Moore, Z., Patton, D., Nugent, L., Avsar, P., & O'Connor, T. (2021). The effect of discharge planning on length of stay and readmission rates of older adults in acute hospitals: A systematic review and meta-analysis of systematic reviews. *Journal of Nursing Management*, 29(8), 2697-2706. doi:<https://doi.org/10.1111/jonm.13409>

AimTo examine the effectiveness of discharge planning on length of stay and readmission rates among older adults in acute hospitals.**Background**Discharge planning takes place in all acute hospital settings in many forms. However, it is unclear how it contributes to reducing patient length of stay in hospital and readmission rates.**Methods**Seven systematic reviews were identified and examined. All of the systematic reviews explored the impact of discharge planning on length of stay and readmission rates.**Results**A limited meta-analysis of the results in relation to length of stay indicates positive finding for discharge planning as an intervention (MD = -0.71 (95% CI -1.05, -0.37; p = .0001)). However, further analysis of the broader findings in relation to length of stay indicates inconclusive or mixed results. In relation to readmission rates both meta-analysis and narrative analysis point to a reduced risk for older people where discharge planning has taken place (RR = 0.78 (95% CI: 0.72, 0.84; p = .00001)). The ability to synthesize results however is severely hampered by the diversity of approaches to research in this area.**Implications for Nursing Management**It is unclear what impact discharge planning has on length of stay of older people. Indeed, while nurse managers will be interested in gauging this impact on throughput and patient flow, it is questionable if length of stay is the correct outcome to measure when studying discharge planning as good discharge planning may increase length of stay. Readmission rates may be a more appropriate outcome measure but standardization of approach needs to be considered in this regard. This would assist nurse managers in assessing the impact of discharge planning processes.

Cao, X., Li, J., & Gong, S. (2021). Effects of resilience, social support, and work environment on turnover intention in newly graduated nurses: The mediating role of transition shock. *Journal of Nursing Management*, 29(8), 2585-2593. doi:<https://doi.org/10.1111/jonm.13418>

AimThe aim of this work was to examine the mediating role of transition shock on the relationships between resilience, social support, work environment, and turnover intention in newly graduated nurses.**Background**Reports assessing the associations between nurses' resilience, social support, work environment, and turnover intention, both directly and through the mediating effect of transition shock, are scarce.**Methods**This was a cross-sectional study, which recruited 361 Chinese newly graduated nurses with <1 year of work experience.**Results**Resilience,

social support, and work environment directly and significantly predicted transition shock (direct effect -0.158 to -0.350 , $p < .01$). Resilience, work environment, and transition shock directly and significantly affected turnover intention (direct effect -0.118 to -0.257 , $p < .05$). Transition shock mediated the relationships between resilience, social support, work environment, and turnover intention indirectly and significantly (indirect effect -0.019 to -0.041 , $p < .05$). **Conclusions**The results suggest that nurse managers could enhance resilience and social support and establish a positive work environment to reduce transition shock and turnover intention. **Implications for Nursing Management**Nurse managers could continuously provide resilience training and develop a supportive workplace climate for newly graduated nurses to facilitate smooth transition into clinical practice, could alleviate their transition shock and turnover intention.

Allard, K., Hasselgren, C., & Dellve, L. (2021). Gender equality and managers' work in elderly and social care: A structural equation modelling approach. *Journal of Nursing Management*, 29(8), 2689-2696.
doi:<https://doi.org/10.1111/jonm.13396>

AimThe study explores whether, and how, gender equality is associated with key aspects related to operative managers' improvement work. We explore the possible associations between gender equality and; prioritization of social regulations in operative decision-making, engagement in operative improvement work, group dynamics challenges and collaboration between managers and subordinates. **Background**Regarding organizational relations and preconditions for providing good care and developing operative work in the social and elderly care sector, the value of having organizational gender equality is unknown. **Method**Associations were analysed using structural equation modelling of questionnaire data. The questionnaire was distributed to first-line managers in a large city in Sweden ($n = 598$, response rate 56%). **Results**Positive perceptions of organizations' gender equality were significantly associated with more engagement in operative improvement work, fewer group dynamics challenges and higher priority of social regulations in unit decision-making, also when controlling for confounders. Gender equality had no association with managers' collaboration with subordinates in this study. **Conclusion(s)**This study demonstrates that equal opportunities for male and female workers could benefit operative managers' improvement work. **Implications for Nursing Management**Organizations that strive to improve conditions for operative work, which strengthen preconditions for service development, should include values of gender equality.

Hoedl, M., Eglseer, D., & Bauer, S. (2021). Associations between personal protective equipment and nursing staff stress during the COVID-19 pandemic. *Journal of Nursing Management*, 29(8), 2374-2382.
doi:<https://doi.org/10.1111/jonm.13400>

AimThis study gives insights into the association between the use of personal protective equipment (PPE), wearing time of masks and stress among frontline nursing staff during the COVID-19 pandemic. **Background**PPE can have physical consequences like headache and pain, which could result in increased nurse stress levels. **Methods**A total of 2600 nurses participated in this online survey. The questionnaire is based on literature and includes the perceived level of stress scale. **Results**We found no significant association between the use of PPE and stress. Nurses who wore masks for more than 8 h had significant higher stress levels than those who used the masks for a shorter period. **Conclusions**The duration of wearing masks is associated with nurse's stress level. Our findings can help nurses to argue a higher frequency of breaks and a maximum duration of mask usage in their organisations. **Implications for Nursing Management**We recommend that nursing managers implement practical strategies such as a mask break task force. This task force could promote awareness for mask breaks and recommend and allocate rooms or locations such as balconies for mask breaks.

Bujacz, A., Rudman, A., Gustavsson, P., Dahlgren, A., & Tucker, P. (2021). Psychosocial working conditions of shiftworking nurses: A long-term latent transition analysis. *Journal of Nursing Management*, 29(8), 2603-2610.
doi:<https://doi.org/10.1111/jonm.13430>

AimThis study aimed to identify profiles of working conditions to which nurses were exposed to over time and investigate how changes in working conditions relate to shiftworking and health. **Background**Previous studies rarely addressed the issue of working conditions development over long periods and the effects of such development on

nurses' health. Methods Data from a national cohort of nurses in Sweden (N=2936) were analysed using a person-centred analytical approach—latent profile and latent transition analysis. Results Nurses report better psychosocial working conditions as they progress into mid-career. Shiftworking nurses experience poorer working conditions than their dayworking counterparts and tend to move from shiftwork to daywork as they progress into mid-career. In mid-career, nurses in work environments characterized by low autonomy and support tend to report poorer health outcomes. Conclusion Current analyses suggest that shiftworking nurses are particularly in need of interventions that address poor work environments. Not only do they experience more negative psychosocial working conditions than their dayworking counterparts, but they do so while having to contend with demanding schedules. Implications for Nursing Management The findings highlight that organisational interventions should target different aspects of the work environment for nurses in diverse stages of their careers.

Karakaya, P., Sönmez, S., & Aşık, E. (2021). A phenomenological study of nurses' experiences with maternal guilt in turkey. *Journal of Nursing Management*, 29(8), 2515-2522. doi:<https://doi.org/10.1111/jonm.13401>

Aim This study aims to describe nurses' views on what it is like to be a working mother in Turkey. Background Most mothers are in the workforce but continue to fulfil their traditional roles at home. This emerges as an important factor causing mothers to try to find a balance between work and home. Method For this purpose, a semi-structured form was used in face-to-face interviews conducted with 17 participants. A phenomenological design was preferred in this qualitative study. Results The findings obtained from the study revealed the six themes of 'the sense of inadequacy/helplessness, the sense of responsibility, the strong desire to have a positive effect, gender role stereotypes, the choice between achieving a successful career and being a good mother, but with a sense of depletion'. Conclusion The results obtained from the study of nurses in Turkey have shed light on how policies should be developed to eliminate work–life barriers in realizing the roles of motherhood. Implications for Nursing Management The study results will guide nurse managers in taking the steps needed to incorporate arrangements that will result in balanced conduct of work and home for nurses.

Hanan, H. A., Wolf, A., Öhlén, J., & Olausson, S. (2021). Managerial and organisational prerequisites for the integration of palliative care in the intensive care setting: A qualitative study. *Journal of Nursing Management*, 29(8), 2715-2723. doi:<https://doi.org/10.1111/jonm.13436>

Aim To explore the association of organizational structures when integrating palliative care in intensive care units. Background Palliative care within intensive care settings has been widely recognized as an area requiring improvement when caring for patients and their families. Despite this, intensive care units continue to struggle to integrate palliative care. Methods A qualitative descriptive methodology was used. Data were collected through research interviews with 15 managers and 36 health care professionals working in intensive care. The data were analysed adopting constant comparative analysis. Results This study provides insight into a diverse range of perspectives on organizational structure in the context of facilitation and the challenges posed. Three themes were identified: Do not resuscitate policy as a gateway to palliative care, facilitating family members to enable participation and support and barriers for palliative care in intensive care unit as a result of intensive care organization. Conclusions In fostering a sustainable organizational culture and practice development in intensive care, the findings indicate the need for specific palliative care policies and implementation strategies tailored according to context. Implications for nursing management Management has a responsibility to facilitate dialogue within any multidisciplinary team regarding palliative care and, in particular, to focus on 'do not resuscitate' policies as a gateway into this conversation.

Carthy, V. M., Goodwin, J., Saab, M. M., Kilty, C., Meehan, E., Connaire, S., . . . O'Donovan, A. (2021). Nurses and midwives' experiences with peer-group clinical supervision intervention: A pilot study. *Journal of Nursing Management*, 29(8), 2523-2533. doi:<https://doi.org/10.1111/jonm.13404>

Aim This study aimed to evaluate differences in supervisees' understanding of clinical supervision and their perceptions of organisational functioning before and after engaging in peer-group clinical supervision. Background Protected reflective time allows discussion of complex issues affecting health care. Peer-

group clinical supervision is one model of clinical supervision that could facilitate this, but it is poorly understood. Methods A pre–post intervention pilot study was performed. The intervention was delivered over a 12-month period. Data were collected using surveys on demographic and work-related factors and experience of clinical supervision pre- and post intervention. Results Adaptability increased significantly between the pre- and post surveys. The post survey data showed finding time for clinical supervision scoring lowest with open-ended comments reinforcing this. The supervisees found the sessions to offer a safe place despite initial concerns. Conclusion The peer-group model of clinical supervision allowed supervisees to build a rapport and trust with their colleagues and share experiences. Implications for Nursing Management The benefits to participating in peer-group clinical supervision traversed the individual and organisation. These data support the implementation of such sessions while addressing workload and time pressures to aid participation.

Ericka Sanner-Stiehr, Stevanin, S., Mikkonen, S., & Kvist, T. (2021). Job satisfaction and generational nursing characteristics among registered nurses in the united states, italy and finland: Results of a survey study. *Journal of Nursing Management*, 29(8), 2364-2373. doi:<https://doi.org/10.1111/jonm.13397>

Aims The aim of this study is to describe job satisfaction and multigenerational nursing characteristics between nurses in the United States, Italy and Finland. Background Job satisfaction and work characteristics may be viewed differently among nurses of different generations and countries. Methods Data were collected on the Kuopio University Hospital Job Satisfaction Scale and Multidimensional Nursing Generations Questionnaire. A total of 1,433 usable surveys were returned and analysed using multivariate analysis of variance. Results Nurses in the United States were most satisfied in all subareas of job satisfaction. Across all generations and countries, Leadership scores were most consistent. Results did not show any generational similarities on job satisfaction or generational work characteristics that held constant across all countries. Scores on dimensions indicating intergenerational conflict were highest in the United States and lowest in Finland. Measures indicating good intergenerational relationships and teamwork were highest in Finland and lowest in the United States. Conclusions Country impacted job satisfaction and multigenerational characteristics more than generational cohort. Implications for Nursing Management Nurse managers and leaders leading multigenerational teams occupy a pivotal role in multigenerational teamwork and attitudes toward change.

Nigenda, G., Lee, G., Aristizabal, P., Walters, G., & Rosa A Zárata-Grajales. (2021). Progress and challenges for advanced practice nursing in mexico and the united kingdom. *Journal of Nursing Management*, 29(8), 2461-2469. doi:<https://doi.org/10.1111/jonm.13413>

Aim The aim of this study is to compare the advanced practice nursing development in Mexico with the United Kingdom. Background In spite of the involvement of global and local bodies to establish and develop advanced practice nursing worldwide, progress remains variable due to the lack of homogeneity in health care systems and policies. Evaluation Using thematic analysis from interviews of 29 health care professionals in Mexico, we identified four major issues that impact on the development of advanced practice nursing: (a) workforce, (b) organizational and institutional, (c) regulatory and legal and (d) academic and educational. Key Issues Learning from the UK experience in relation to overcoming some of these issues has been insightful in terms of how advanced practice nursing skills in Mexican nurses can be developed. Conclusions Mexico is still in early stages of the development of APN. Based on the UK experience, the government may have to move forward to support higher level training, create labour market positions, establish new nursing functions, promote task-shifting and particularly implement solid regulation. Implications for Nursing Management The development of advanced practice nursing represents important challenges for training and practice of nursing in Mexico and the United Kingdom; therefore, interested actors will have to reach key agreements that could work as the foundations of an assertive planning process.

