



Report Information from ProQuest

29 September 2023 02:16

TABLE OF CONTENTS

Search Strategy.....	vii
1. Compassion satisfaction and compassion fatigue in frontline nurses during the COVID-19 pandemic in Wuhan, China.....	1
2. The relationship between the conflict management strategies and ethical leadership behaviours of nurse managers perceived by nurses.....	2
3. Pathological narcissism, interpersonal cognitive distortions, and workplace bullying among nurses: A cross-sectional study.....	3
4. A cross sectional study of nurses' perceptions of nurse leaders' internal crisis communication during the COVID-19 pandemic.....	3
5. Relationships among basic psychological needs, organizational commitment, perceived authentic leadership and turnover intention in Korean nurses: A cross-sectional study.....	4
6. The predicting effects of professional governance and structural empowerment on job satisfaction among Jordanian nurses: A cross-sectional study.....	5
7. Business acumen for nursing leaders: An exploratory qualitative study.....	6
8. Leadership in the context of digital health services: A concept analysis.....	7
9. Professional commitment, resilience and intent to leave the profession among nurses during the COVID-19 pandemic - a descriptive study.....	7
10. The moderating effect of burnout on professionalism, values and competence of nurses in Saudi Arabia amidst the COVID-19 pandemic: A structural equation modelling approach.....	8
11. Lessons learned and recommendations from the COVID-19 pandemic: Content analysis of semi-structured interviews with intensive care unit nurse managers in the United Arab Emirates.....	9
12. Perceptions of US nurses and nurse leaders on authentic nurse leadership, healthy work environment, intent to leave and nurse well-being during a second pandemic year: A cross sectional study.....	10
13. Experiences of patients with rheumatoid arthritis during and after COVID-19-induced quarantine in terms of physical activity and health status: A qualitative study.....	11
14. (Re)defining nursing leadership: On the importance of parrhèsia and subversion.....	12
15. The role of organizational support and self-efficacy on work engagement among registered nurses in Jordan: A descriptive study.....	13
16. Moral sensitivity and person-centred care among mental health nurses in South Korea: A cross-sectional study.....	14
17. Mediator effects of psychological empowerment between ethical climate and innovative culture on performance and innovation in nurses.....	15
18. The status of ethical behaviour in clinical nursing in three Chinese hospitals: A qualitative interview study.....	16
19. The perception of nursing leaders towards communication and relationship management competencies in using digital platforms during COVID-19 in Qatar: A cross-sectional study.....	16
20. The integration of care ethics and nursing workload: A qualitative systematic review.....	17
21. Hospital nurses' empathy and moral sensitivity toward elderly care: A cross-sectional study.....	18

TABLE OF CONTENTS

22. Changes in distress and turnover intentions among hospital-based nurses working during the first 8 months of the COVID-19 pandemic in Denmark: A prospective questionnaire study.....	19
23. Nursing leaders' perceptions of the state of nursing leadership and the need for nursing leadership education reform: A qualitative content analysis from South Korea.....	20
24. The relationship between moral distress levels and ethical climate perceptions of PICU nurses.....	21
25. The contribution of professional autonomy in advancing ethical behaviour: A narrative review of studies in nursing.....	21
26. Nursing students' care of and attitudes towards lesbian, gay, bisexual, trans, and intersex people in times of COVID-19 in Spain: A cross-sectional study.....	22
27. Effect of humble leadership on proactive work behaviour: The mediating role of psychological empowerment among nurses.....	24
28. Medical–surgical nurse leaders' experiences with safety culture: An inductive qualitative descriptive study.....	25
29. Emergency nurses' attitudes, perceptions about personal protective equipment and willingness to care for COVID-19 patients: A descriptive, cross-sectional study.....	25
30. Work-related communication mediates the relationship between perceived diversity climate and psychological empowerment among part-time nurses: A cross-sectional study.....	26
31. The effectiveness of the Ethics Quarter intervention on the ethical activity profile of nurse managers: A randomized controlled trial.....	27
32. Burnout, resilience and psychological flexibility in frontline nurses during the acute phase of the COVID-19 pandemic (2020) in Madrid, Spain.....	28
33. Effects of an ethics education program on nurses' moral efficacy in an acute health care facility.....	29
34. Compassion fatigue and compassion satisfaction among Chinese palliative care nurses: A province-wide cross-sectional survey.....	30
35. Nurse leaders' experiences of professional responsibility towards developing nursing competence in general wards: A qualitative study.....	31
36. Understanding the causes and consequences of envy among nurses: A scoping review.....	32
37. Health and social care frontline leaders' perceptions of competence management in telemedicine in Finland: An interview study.....	32
38. Towards a new conceptual model for nurses' organizational well-being: An integrative review.....	33
39. The impact of psychological capital on turnover intention among Chinese nurses: A moderated mediation model.....	34
40. Nurses' perceptions of hourly rounding in Jordanian hospitals: A national survey.....	35
41. Work environment and mental health in nurse assistants, nurses and health executives: Results from the AMADEUS study.....	36
42. Ethical dilemmas experienced by nurses while caring for patients during the COVID-19 pandemic: An integrative review of qualitative studies.....	37
43. Role of self-efficacy in nursing organizational climate: A way to develop nurses' humanistic practice ability.....	38

TABLE OF CONTENTS

44. Financial competencies as investigated in the nursing field: Findings of a scoping review.....	38
45. Disciplinary processes for nurses, from organizational supervision to outcomes: A document analysis of a regulatory authority's decisions.....	39
46. RESPONDER: A qualitative study of ethical issues faced by critical care nurses during the COVID-19 pandemic.....	40
47. Nurses' ethical leadership and related outcome variables: Systematic review and meta-analysis.....	41
48. Factors contributing to burnout among nurses at a district hospital in Namibia: A qualitative perspective of nurses.....	42
49. Factors facilitating or inhibiting the capacity for effective leadership among front-line nurse managers: A scoping review.....	43
50. Knowledge sharing behaviour among critical care nurse specialists: A cross-sectional study.....	44
51. Primary care nurses' perception of leadership and the influence of individual and work setting characteristics: A descriptive study.....	44
52. Social support and job satisfaction in nursing staff: Understanding the link through role ambiguity.....	45
53. A scoping review of strategies used to recruit and retain nurses in the health care workforce.....	46
54. Picking the 'proper hat?' Emerging ethical dilemmas while juggling nursing and research roles.....	47
55. Nurses' freedom of expression: Rights, obligations and responsibilities.....	48
56. Relationship between psychological ownership of the nursing profession and turnover intention: A correlational survey among Taiwanese nurses.....	49
57. Time to re-envisage integrity among nurse leaders.....	50
58. Impact of nurses' emotional labour on job stress and emotional exhaustion amid COVID-19: The role of instrumental support and coaching leadership as moderators.....	51
59. Nursing management of the critical thinking and care quality of ICU nurses: A cross-sectional study.....	52
60. Guiding nurse managers in supporting nurses in dealing with the ethical challenge of caring.....	53
61. Effect of a group-based acceptance and commitment therapy programme on the mental health of clinical nurses during the COVID-19 sporadic outbreak period.....	54
62. Toxic leadership behaviour of nurse managers on perceived job satisfaction and productivity of nursing workforce in sub-Saharan Ghana: A multi-centre cross-sectional study.....	55
63. Recruitment of internationally trained nurses: Time for a global model for shared responsibility.....	55
64. Moral distress and moral injury and their interplay as a challenge for leadership and management: The case of Croatia.....	56
65. Effects of job embeddedness and nursing working environment on turnover intention among trauma centre nurses: A cross-sectional study.....	57
66. Global prevalence of presenteeism in the nursing workforce: A meta-analysis of 28 studies from 14 countries.....	58
67. Improvement of the psychosocial support for frontline nurses in public hospitals during COVID-19 pandemic.....	59
68. Clinical competency and psychological empowerment among ICU nurses caring for COVID-19 patients: A cross-sectional survey study.....	60

TABLE OF CONTENTS

69. Status and associations of nursing practice environments in intensive care units: A cross-sectional study in China.....	61
70. Work readiness: Its determinants and association with work-related outcomes among new graduate nurses.....	62
71. Nurse entrepreneurs' ethical concerns: A qualitative inquiry of the pursuit of opportunity.....	63
72. The influence of professional identity on work engagement among nurses working in nursing homes in China.....	63
73. The Covid-19 pandemic and cultural competence: Global implications for managers, nurses and healthcare workers during major health disasters and emergencies.....	64
74. Home-based care nurses' lived experiences and perceived competency needs: A phenomenological study.....	65
75. Nurse leaders' work-related well-being—Relationships to a superior's transformational leadership style and structural empowerment.....	66
76. The relationship between organizational ethical climate and components of nursing error reporting in selected hospitals of Tehran University of Medical Sciences in 2020.....	67
77. The impact of COVID-19 on long-term care facilities and their staff in Israel: Results from a mixed methods study.....	68
78. Nursing leadership from crisis to postpandemic.....	68
79. Revisiting the roles of neonatal intensive care unit nurses towards vision 2030 of Saudi Arabia: A descriptive phenomenological study.....	69
80. Using the theory of planned behaviour to explain junior nurses' and final-year student nurses' intention to care for COVID-19 patients in China: A multisite cross-sectional study.....	70
81. Virtue ethics in health care teams; its time has come: Review of the nursing virtue ethics literature.....	71
82. Promoting nurses' and midwives' ethical responsibilities towards vulnerable people: An alignment of research and clinical practice.....	71
83. Nurse managers' challenges and opportunities in the COVID-19 pandemic crisis: A qualitative descriptive study.....	72
84. Balancing honesty and benevolence in dementia care: A commentary on therapeutic lies and codes of ethics.....	73
85. Negative and positive psychological experience of frontline nurses in combatting COVID-19: A qualitative study.....	74
86. The importance of management in promoting hospital staff's mental well-being during the COVID-19 pandemic—A survey.....	75
87. A year after COVID-19: Its impact on nurses' psychological well-being.....	76
88. Bibliometric analysis of core competencies associated nursing management publications.....	77
89. Managing during the COVID-19 pandemic: A cross-sectional study of health care workers' perceived organizational support and its consequences on their compassion, resilience and turnover intention.....	78
90. The experience of moral distress by chief nurse officers during the COVID-19 pandemic: A descriptive phenomenological study.....	79

TABLE OF CONTENTS

91. The relationships of ethical climate, physician–nurse collaboration and psychological empowerment with critical care nurses' ethical conflict in China: A structural equation model.....	80
92. Evaluation of the Brief Coping Orientation to Problems Experienced scale and exploration of coping among primary health care nurses during COVID-19.....	81
93. Embracing and sustaining telehealth progress: The role of the nurse manager.....	82
94. Experiences with dignity among older people confined to beds living in a nursing home: A qualitative descriptive study.....	83
95. Authentic leadership and innovation behaviour among nurses in China: A mediation model of work engagement.....	84
96. Kirkpatrick's evaluation of the effect of a nursing innovation team training for clinical nurses.....	85
97. Coping with job stress for hospital nurses during the COVID-19 crisis: The joint roles of micro-breaks and psychological detachment.....	86
98. In Nightingale's footsteps: A qualitative analysis of the impact of leadership development within the clinical learning environment.....	86
99. Leadership: Directions for sustaining ethical practice.....	87
100. Workplace violence and the risk of post-traumatic stress disorder and burnout among nurses: A systematic review and meta-analysis.....	88
Bibliography.....	90

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.

Compassion satisfaction and compassion fatigue in frontline nurses during the COVID-19 pandemic in Wuhan, China

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ABSTRACT (ENGLISH)

Aim

The aim of this study is to investigate the compassion satisfaction and compassion fatigue among Chinese frontline nurses during the COVID-19 pandemic in Wuhan, China and to explore the related factors.

Background

Frontline nurses undertake a huge nursing workload with a risk of infection, causing great pressure on them and making them face a risk of compassion fatigue during the pandemic.

Methods

A cross-sectional online survey was conducted from 9 March to 15 March 2020. A total of 1582 nurses caring for critical patients with COVID-19 participated. Compassion satisfaction and compassion fatigue (comprising burnout and secondary traumatic stress) were assessed with the Professional Quality of Life Scale, and resilience was measured with the Chinese 10-item Connor-Davidson Resilience Scale.

Results

Moderate levels of compassion satisfaction (36.99 ± 6.71), burnout (24.14 ± 5.33) and secondary traumatic stress (24.53 ± 5.24) were experienced by frontline nurses. Resilience and perceived work pressure were the main predictors.

Conclusions

Frontline nurses demonstrated a moderate level of compassion satisfaction and compassion fatigue.

Implications for nursing management

The compassion fatigue of frontline nurses should be considered. Strategies aiming to reduce stress and enhance resilience, such as training about psychological adjustment, developing professional skills and creating a supportive workplace environment, are several options.

The trial is not registered. This study is a cross-sectional study, and according to China's clinical trial registration standards, such studies are not required to be registered. So the trial is not registered. However, oral consent was obtained from the ethics committee of the hospital before this study was conducted.

The relationship between the conflict management strategies and ethical leadership behaviours of nurse managers perceived by nurses

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ABSTRACT (ENGLISH)

Aim

The aims of this study were to determine nurse managers' level of ethical leadership perceived by nurses and to examine its relationship with conflict management strategies.

Background

Ethical leadership is about how managers use their power in their decisions and actions, and its source is based on moral and ethical authority. Therefore, it is important to understand the impact of ethical behaviours of nurse managers in the work environment on determining conflict management strategies.

Method

The data of this descriptive, correlational, and cross-sectional study were collected face-to-face from 285 nurses between April–June 2019. The data collection instruments included the introductory information form, the Ethical Leadership Scale, and The Rahim Organizational Conflict Inventory-II.

Results

Ethical leadership scores perceived by nurses in nurse managers were found 3.78, and the highest score was obtained from the behavioural ethics subscale ($3.81 \pm .91$). In conflict management strategies perceived by nurses, it was determined that they got highest scores from collaborating style ($3.76 \pm .90$) and lowest scores from competing style ($2.90 \pm .94$). There was no significant relationship only between ethical leadership and its subscales and competing ($r = -.038/-0.41$, $p > .05$). In other subscales, there were positive, moderate, and highly significant relationships ($r = .466-.747$, $p < .001$). The rate of explanatoriness of communicative ethics subscale in conflict management strategies ranged from 22.3% to 58.0%.

Conclusions

The study shows that communicative ethics subscale significantly affects the conflict management strategies of nurse managers. Therefore, it is important for nurse managers to communicate bilaterally and be a role model for nurses.

Implications for Nursing Management

Ethical leaders value trust and respect in their interactions with employees and reflect what appropriate behaviour to the situation is. Nurses who perceive that their managers demonstrate ethical leadership behaviours will also evaluate their role in conflict resolution. On the other hand, the power-based, aggressive, noncompromising domination approach that the person imposes on others is not associated with the ethical leadership perception towards their managers by nurses and is a strategy that should not be preferred. Therefore, nurse managers who use appropriate conflict management strategies were seen as a role model by nurses.

Pathological narcissism, interpersonal cognitive distortions, and workplace bullying among nurses: A cross-sectional study

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

The aim of this work is to examine whether nurses' pathological narcissism and interpersonal cognitive distortions predict workplace bullying when controlling for organizational culture, work-related factors, and demographic variables.

Background

To eradicate workplace bullying, a multifaceted holistic approach to identify potential predictors is needed. Nurses' narcissistic behaviours negatively affect collegial relationships and the organization. Furthermore, interpersonal cognitive distortions have been demonstrated to directly affect bullying and victimization.

Methods

Responses from 236 nurses to an online survey were analysed. The Pathological Narcissism Inventory, Interpersonal Cognitive Distortions Scale, Positive Nursing Organizational Culture Measurement Tool, and The Negative Acts Questionnaire-Revised were used to measure the key variables.

Results

A multiple regression analysis revealed that pathological narcissism ($\beta = .33, p < .001$) had the greatest effect on nurses' workplace bullying, followed by positive organizational culture ($\beta = -.31, p < .001$), interpersonal cognitive distortions ($\beta = .17, p = .028$), marital status ($\beta = -.15, p = .020$), and position ($\beta = -.12, p = .047$).

Conclusions

Although prejudice or stigma surrounding narcissistic personalities should be avoided, nurses should be aware of and manage such characteristics so that they do not become a factor in workplace bullying.

Implications for Nursing Management

There is a need to protect nurses from workplace bullying and create a positive organizational culture by recognizing narcissistic traits and preparing intervention strategies that support improvement.

A cross sectional study of nurses' perceptions of nurse leaders' internal crisis communication during the COVID-19 pandemic

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ABSTRACT (ENGLISH)

Aim

The aim of this study is to describe nurse perceptions of nurse leaders' internal crisis communication during the COVID-19 pandemic.

Background

Internal communication is a vital part of nurse leaders' work, even more so during crises such as the COVID-19 pandemic.

Method

This is a cross-sectional study design. The data were collected from 204 Finnish nurses in February 2021. A questionnaire developed in this study consisted of 29 items measuring internal crisis communication and seven demographic variables. The relationships between the variables were examined with cross-tabulation, a chi-squared test and non-parametric tests. Factor structure was evaluated with exploratory factor analysis and reliability with Cronbach's alpha.

Results

Nurses perceived the *timeliness* of communication highest and *interaction* the lowest. Nurses from intensive care, acute care and operative rooms gave highest evaluations for the *content* of communication and *timeliness*. Nurses working with COVID-19 patients daily or weekly evaluated the highest level of *false communication*.

Conclusion

Nurse leaders' internal crisis communication was timely, especially in the most critical units dealing with the pandemic. The study highlighted the importance of considering a unit's special needs for internal crisis communication. Interaction between nurse leaders and nursing staff during periods of crisis needs improvement.

Implications for Nursing Management

Nurse leaders' successful and emphatic communication is important in supporting nurses in managing a crisis.

Relationships among basic psychological needs, organizational commitment, perceived authentic leadership and turnover intention in Korean nurses: A cross-sectional study

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ABSTRACT (ENGLISH)

Aim

This study determined the relationships of satisfaction and frustration with basic psychological needs, organizational commitment, perceived authentic leadership and turnover intention in nurses in South Korea.

Background

Minimizing nurse turnover is essential for improving the quality of nursing care and patient safety.

Methods

This was a cross-sectional, correlational pilot study of 216 nurses at a university hospital in South Korea. Data were collected with a self-report questionnaire, from 1 to 15 September 2020. Collected data were analysed using SPSS 24.0.

Results

Multiple regression analysis revealed that clinical experience (3 to 5 years, $\beta=2.35$, $p=.019$; 5 to 10 years, $\beta=2.23$, $p=.026$), subjective workload (severe, $\beta=2.10$, $p=.036$; extreme, $\beta=2.84$, $p=.005$), psychological needs frustration ($\beta=0.35$, $p<.001$), organizational commitment ($\beta=-0.17$, $p=.011$) and perceived authentic nurse leadership ($\beta=-0.14$, $p=.030$) were found to have significant effects on nurses' turnover intention.

Conclusions

The results suggest that it is necessary to create a transparent work environment based on authentic leadership and consider individual frustrations with regard to basic psychological needs and organizational commitments.

Implications for Nursing Management

This study offers a new approach to reducing nurses' turnover. A strategy is needed for efficient nursing staffing management to assist with reduction of nurses' turnover intentions.

Document 6 of 100

The predicting effects of professional governance and structural empowerment on job satisfaction among Jordanian nurses: A cross-sectional study

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

This study aimed to investigate the role of professional governance and empowerment in predicting nurses' job satisfaction.

Background

Nurses can lead the way to enhance health care quality for all if they work in safe, satisfying and empowering

environments. Professional governance and structural empowerment are associated with favourable work conditions and environments. However, studies addressing the predicting effects of professional governance and structural empowerment on job satisfaction are still limited.

Methods

A cross-sectional design was applied. Online self-reported questionnaires were completed by 126 nurses. The analysis consisted of descriptive statistics, Pearson *r* correlation and hierarchical multiple regression to address the research aim.

Results

Job satisfaction moderately correlated with structural empowerment ($r = .40, p < .001$) and professional governance ($r = .30, p < .001$). The final regression model revealed that 30% of the variation in job performance scores can be predicted by professional governance, structural empowerment and some demographic characteristics ($R^2 = .30, F = 8.67, p < .001$).

Conclusions

Working in an environment that incorporates empowerment conditions, genuine support and valuable opportunities will increase the nurse's job satisfaction. Additionally, nurses will have higher job satisfaction if they have their voices heard.

Implications for Nursing Management

Nurse managers should properly assess the existing situation in each institution, implement already-tested-for-effectiveness and efficiency interventions and create new ones based on nurses'-specific needs.

Document 7 of 100

Business acumen for nursing leaders: An exploratory qualitative study

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

The aim of this study was to explore the status of and need for business acumen of nurse leaders.

Background

Health systems globally continue to reform to deliver better care while working within sustainable budgets. However, beyond leadership and management expertise, nurse leaders need strong business acumen to appreciate the complexity of the system.

Method

Two groups, emerging nurse leaders and established health system leaders, were interviewed for their perspective on four elements related to business acumen.

Results

Business in healthcare was defined and therefore valued with variation across both groups. Adequate business education for nurse leaders was considered lacking by both groups. Inconsistent business acumen was seen as a barrier for nursing inclusion at the system level.

Conclusions

Business acumen is a skillset more valuable for the nursing profession than the current educational preparation allows, creating a reputational barrier for nursing's full participation in health system-level leadership, but is considered an opportunity for the future.

Implications for Nursing Management

Improving the foundation business acumen across the nursing profession will not only raise the profile of nurse leader capability to input and influence across the health system but also improve the wider nursing team's understanding around nurse leader advocacy and decision making.

Document 8 of 100

Leadership in the context of digital health services: A concept analysis

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ABSTRACT (ENGLISH)

Aim

To define and clarify the concept of leadership in the context of digital health services using Walker's and Avant's concept analysis model.

Background

Conceptualizing leadership in the context of digital health services is needed to deliver higher quality services and advance research.

Method

Searches were conducted of MEDLINE (Ovid), Scopus, CINAHL (EBSCO) and ProQuest (ABI/INFORM). Empirical articles were included if they reported *attributes*, *antecedents* or *consequences* of leadership in the study context. A total of 4037 references were identified; 23 were included.

Results

Leadership attributes concerned leaders' behaviour, roles and qualities. Antecedents concerned informatics skills and competence, information and tools, understanding care systems and their complexity and education. Consequences related to organization, professionals and patient and care.

Conclusion

Based on our results, the term 'e-leadership' should be more widely utilized in nursing practice and research.

Implications for nursing management

Nurse leaders need to be strong leaders; they need to be visionary and use strategic thinking to develop existing and new digital solutions. By becoming e-leaders, nurse leaders may increase the successful development and implementation of eHealth and benefit clinicians and patients.

Document 9 of 100

Professional commitment, resilience and intent to leave the profession among nurses during the COVID-19 pandemic - a descriptive study

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

The three-component model of commitment, resilience and selected nurse characteristics were tested as predictors of nurses' intent to leave the profession.

Background

In the wake of the COVID-19 pandemic, news reports suggest that a mass exodus of nursing professionals is occurring.

Method

This nonexperimental, descriptive, correlational, predictive study used a cross-sectional approach to collect survey data from a convenience sample of 189 registered nurses (RNs) who were providing direct patient care in adult inpatient units with a high likelihood of admitting patients diagnosed with COVID-19 and met other eligibility requirements.

Results

Most (73.5%) plan to remain in the nursing profession and feel highly resilient. Only affective commitment demonstrated a significant relationship to the intention to leave the nursing profession.

Conclusions

The study was conducted after the pandemic had been in effect for a prolonged time, and it is likely the nurses with the intent to leave the profession had already left. The findings provide a glimpse of a sample of nurses drawn from a population likely much different from only a few months prior.

Implications for Nursing Management

Strategies to retain nurses should include efforts to strengthen professional commitment and build resilience.

Document 10 of 100

The moderating effect of burnout on professionalism, values and competence of nurses in Saudi Arabia amidst the COVID-19 pandemic: A structural equation modelling approach

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

To examine the moderating effect of burnout on the relationship between nurses' competence, professional competence and professional values.

Background

There is a preponderance of burnout studies of nurses before and during the COVID-19 pandemic. However, little is known about burnout's moderating influence on nurses' professionalism, competence and values during the ongoing pandemic.

Methods

This study used a correlational, cross-sectional design and convenience sampling to recruit 809 Saudi nurses employed in four government hospitals. Four self-report instruments were used to collect data from August 2021 to March 2022. Spearman Rho, structural equation modelling and multi-group moderation analysis were used to analyse the data.

Results

Most of the participants had high burnout. There was a moderate to high correlation between the dimensions of professional competence, nurse professional values, burnout and nurse competence. Both professional competence and nurse professional values significantly affected nurse competence. Nurse professional values also had a direct effect on professional competence. Professional competence and nurse professional values on nurse competence may vary among those with low, moderate and high levels of burnout, suggesting the moderating effect of burnout.

Conclusions

The positive impacts of nurse professional values and professional competence on nursing competence were validated in this study, as was the evidence of burnout's moderating effect on the studied connections. To avoid burnout, it is necessary to increase organizational knowledge and support for nurses, their working conditions and the environment through strategies that promote well-being and empowerment.

Implications for nursing management

Nurse managers can implement policies to help nurses minimize burnout and improve their professional values and competence. Management policies may be considered include increased staffing, opportunities to improve technical abilities through education and vocational training programs, and increased diversity of job assignments.

Document 11 of 100

Lessons learned and recommendations from the COVID-19 pandemic: Content analysis of semi-structured interviews with intensive care unit nurse

managers in the United Arab Emirates

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

This study aims to explore how nursing services were managed and provided in intensive care units during the COVID-19 pandemic and clarify the management lessons learned.

Background

The surge in the number of patients with COVID-19 worldwide and the unpredictability of new variants mean the voices of nurse managers who participated in fighting the pandemic in intensive care units must be considered. Health care systems need specific plans to face similar future crises.

Method

This is a descriptive, qualitative, narrative study using indirect content analysis.

Results

We analysed 37 intensive care unit nurse managers' reflections on lessons learned from the COVID-19 pandemic. Four themes were extracted: restructuring organisations' resources, issues with family-centred care, education and training and policy reforms.

Conclusions

Promising strategies for Emirati intensive care units in planning for responses to future crises include maximizing organisation resources, boosting family-centred care, providing in-service training for nurses and policy reform.

Implications for Nursing Management

Our findings will support health care leaders, educators, policymakers and researchers to improve the management of similar pandemic situations. This study presents fundamental data concerning the subjective experiences of intensive care unit nurse managers. These experiences may inform development of multi-dimensional strategies including: ensuring the adequacy of projected supplies, space and nursing workforce; establishing communication protocols; and reforming existing policies.

Document 12 of 100

Perceptions of US nurses and nurse leaders on authentic nurse leadership, healthy work environment, intent to leave and nurse well-being during a second pandemic year: A cross sectional study

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ABSTRACT (ENGLISH)

Aim

The main aim of this study was to determine the perceptions of clinical nurses and nurse leaders about authentic nurse leadership, work environment, pandemic impact, well-being and intent to leave their position and profession during the second year of the pandemic.

Background

This research team studied the variables pre-pandemic and in year one of the pandemic. As the pandemic continued, subsequent reports of workforce instability, deteriorating work environment and vulnerable well-being called for an understanding of the current state to inform needed actions by leadership.

Methods

This study is a cross-sectional, descriptive, correlational analysis using national survey data from 1795 US clinical nurses and nurse leaders in the fall of 2021.

Results

Pandemic impact was high, authentic nurse leadership was present, healthy work environment was not present and nurse well-being was at-risk and negatively correlated to both healthy work environment and authentic nurse leadership. Within our sample, 61.8% of nurses had no intention to leave their positions, and 82.5% had no intention to leave the profession. Compared with clinical nurses, nurse managers had significantly higher scores on all instruments.

Conclusions

The findings of this study support leadership as positively related to a healthy work environment. Authentic nurse leadership, a healthy work environment and nurse well-being are all critical components of efforts to stabilize the nursing workforce as we recover and rebuild post-pandemic.

Implications for Nursing Management

This is a call to action for leadership that will serve the goals of retaining nurses, rebuilding work environments and improving well-being.

Document 13 of 100

Experiences of patients with rheumatoid arthritis during and after COVID-19-induced quarantine in terms of physical activity and health status: A qualitative study

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ABSTRACT (ENGLISH)

Aim

The aim of this study was to explore experiences of people with rheumatoid arthritis during and after COVID-19-induced quarantine in terms of physical activity and health status.

Background

Rheumatoid arthritis affects multiple facets of the person, both physically and psychologically. Physical activity is considered a safe and effective intervention to improve symptoms and systemic manifestations of rheumatoid arthritis. In the context of the COVID-19, countries like Spain were forced to impose restrictions on mobility, prohibiting outings even to perform physical activity.

Methods

Structured interviews were conducted and developed using the Tampa Scale for Kinesiophobia-11 questionnaire. Data were analysed using a six-step thematic analysis.

Results

The results make it clear that even though the patients declared that physical activity is essential for them to deal with their disease, most of the participants affirmed that they significantly reduced their levels of physical activity during the pandemic.

Conclusions

Physical activity should be promoted in people, even in difficult times, to improve disease outcomes, well-being and mental health.

Implications for Nursing Management

Knowing the experiences of these patients enables nursing managers to develop interventions that ensure the delivery of comprehensive nursing care regarding physical activity and health status, in future situations like this pandemic.

Document 14 of 100

(Re)defining nursing leadership: On the importance of parrhèsia and subversion

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ABSTRACT (ENGLISH)

Aim

Through a review of philosophical and theoretical constructs, this paper offers insight and guidance as to ways in which nurse leaders may operationalize advocacy and an adherence to nursing's core ethical values.

Background

The US health care system works in opposition to core nursing values. Nurse leaders are obliged to advocate for the preservation of ethical care delivery.

Evaluation

This paper draws upon the philosophies of Fromm, Foucault, and Deleuze and Guattari to critically review the functions of nurse leaders within a capitalist paradigm.

Key issue

Key emergent issues in the paper include health care and capitalism and the nurse leader's obligations towards advocacy.

Conclusion

The nurse leader acts as parrhèsia in viewing truth telling as a duty critical to improving the lives of patients. Ramifications of the decisions by those in power have even greater impact in institutions that serve those with little to no political agency.

Implications for Nursing Management

The nurse leader has a freedom and platform that their patients do not and must take the courageous risk of choosing to speak. This paper serves as a call to action for nurse leaders to urgently address the current state of US health outcomes.

Document 15 of 100

The role of organizational support and self-efficacy on work engagement among registered nurses in Jordan: A descriptive study

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ABSTRACT (ENGLISH)

Aim

The aim of the current study was to examine the relationship between work engagement and perceived organisational support and self-efficacy among registered nurses in Jordanian hospitals.

Background

Nurses constitute the backbone of the health care system. Work engagement among nurses is critical due to its various positive outcomes: it enhances job satisfaction, job performance, organisation commitment and emotional health. According to the job demand–resource model, perceived organisational support and self-efficacy increase work engagement.

Method

A cross-sectional, descriptive and correlational design and multistage cluster sampling were implemented. A total of 186 registered nurses were recruited. Self-administered questionnaires were used to collect data from the

participants.

Results

Nurses showed an average level of work engagement. The dedication subscale showed the highest score among the three subscales representing work engagement. The results showed that perceived organisational support and self-efficacy were positively correlated with work engagement ($p < .01$).

Conclusion

Perceived organisational support and self-efficacy correlated positively with work engagement.

Implications for nursing management

An effort should be made to provide a supportive work environment by offering training programmes, sufficient job resources and positive feedback, which, in turn, improve nurses' work attitudes, self-efficacy, perception of the work environment and intention to stay in a health organisation. This study is a descriptive study and has an IRB number 766-2019.

Document 16 of 100

Moral sensitivity and person-centred care among mental health nurses in South Korea: A cross-sectional study

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ABSTRACT (ENGLISH)

Aim

To identify the predictors of mental health nurses' person-centred care, including moral sensitivity.

Background

Person-centred care meets patients' ethical needs by protecting their autonomy and dignity and respecting their choices; it is essential to enhance patient outcomes. Therefore, it is important to identify the predictors of the practice of advocating patients' rights and dignity and providing person-centred care among mental health nurses to foster competency and ensure the highest quality of care.

Methods

This cross-sectional study included 220 mental health nurses in South Korea. It measured their general and work-related characteristics, moral sensitivity, and person-centred care. Multiple regression analysis was conducted to identify the person-centred care predictors.

Results

The most potent person-centred care predictor was moral sensitivity ($\beta = .35, p < .001$). Other predictors included prior biomedical ethics education ($\beta = .15, p = .013$) and marital status ($\beta = .14, p = .025$). The regression model had 28.0% explanatory power.

Conclusions

Mental health nurses' moral sensitivity must be increased to improve their person-centred care.

Implications for Nursing Management

Nurses should receive continuous education to remain aware of and maintain a high level of moral sensitivity and be

encouraged to continue the person-centred practice. Organizational and policy support is needed to promote the practice of person-centred care in the workplace.

Document 17 of 100

Mediator effects of psychological empowerment between ethical climate and innovative culture on performance and innovation in nurses

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ABSTRACT (ENGLISH)

Aims

This study investigates the effects of ethical climate and innovative culture on the hospital nurses' job performance and innovative behaviour with the mediating factor of psychological empowerment.

Background

Hospital nurses have an opportunity to embrace innovative behaviours and increase their performance through a positive ethical climate and innovative culture. Understanding nurses' psychological empowerment in the workspace context that impacts innovation has not been a focus for hospital leadership.

Methods

A cross-sectional study based on a questionnaire design was used for data collection and analysis. The data are collected through a voluntary survey—selected by a convenience sampling method—of 393 nurses from University Hospital. The Structural Equation Model and Bootstrap method test the study's hypotheses. A STROBE checklist was used for reporting.

Results

Ethical climate and innovative culture predict job performance and innovative behaviour with the mediating role of psychological empowerment. Moreover, psychological empowerment decreases the predictive power of ethical climate and innovative culture separately but increases the nurses' job performance and innovative culture.

Conclusions

Ethical climate and innovative culture significantly positively affect job performance and innovative behaviour. Additionally, the mediating effect of psychological empowerment increases job performance and innovative behaviour more than the effects of ethical climate and innovative culture.

Implications for Nursing Management

Nurses need to be prepared to practice safely, accurately and compassionately by translating moral values into rules of the nursing profession, where innovation increases at an astonishing rate. Nurse leaders and hospital managers should establish ethical norms as the consensus of ultimate criteria of validity of the rational analysis of tasks or

particular nursing practice concepts, with an innovative culture by empowering nurses exceedingly in their workplace.

Document 18 of 100

The status of ethical behaviour in clinical nursing in three Chinese hospitals: A qualitative interview study

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ABSTRACT (ENGLISH)

Aim

We aim to explore the status of nurses' ethical behaviours in clinical practice and what contributes to nurses' unethical behaviours.

Background

Nurses' ethical behaviours strongly impact the nurse–patient relationship and the quality of nursing services. Therefore, we must understand the status of clinical nurses' ethical behaviours and the causes of nurses' unethical behaviours.

Methods

Focus group and in-depth semistructured interviews were conducted with 21 head nurses and nine nurses, respectively. The data were analysed by content analysis.

Results

The analysis revealed seven themes: lack of awareness of the protection of patients' privacy; violation of patients' autonomy; improper communication; failure to protect the patient's best interests; lack of moral emotion; lack of psychological care for special patients; and causes of unethical behaviour.

Conclusions

The present situation of ethical nursing behaviour is not optimistic, and there are still many unethical nursing behaviours in clinical work. There are many reasons for unethical behaviours. Efforts should be made related to nurses, patients, workload, the ethical climate and rules and regulations to improve the situation.

Implications for Nursing Management

Nursing managers can improve ethical behaviour by strengthening nurses' ethics studies, enhancing nurses' professional identity and social status, optimizing the allocation of nursing human resources, creating a good ethical climate and improving relevant rules and regulations.

Document 19 of 100

The perception of nursing leaders towards communication and relationship management

competencies in using digital platforms during COVID-19 in Qatar: A cross-sectional study

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ABSTRACT (ENGLISH)

Aim

To evaluate nursing leaders' perception of communication and relationship management competencies while using digital platforms during the COVID-19 pandemic.

Background

Nursing leaders can achieve effective leadership by mastering these competencies leading to an overall improvement in the quality of nursing care. The COVID-19 pandemic has brought numerous challenges in communication, and digital platforms have been widely used in healthcare settings to mitigate contagion.

Design

Cross-sectional.

Methods

The study was conducted between February and March 2021. A survey was adopted from the American Organization of Nurse Executives (AONE) and was sent to nursing leaders in Qatar through email.

Results

A total of 250 nurse leaders were invited to participate, but only 116 responded (RR 46.4%). The male participants represented a more significant proportion of 64.10%. Influencing behaviour, relationship management and effective communication had the lowest scores, which indicates low competency.

Conclusions

Despite obtaining satisfying scores, nursing leaders in Qatar should strive for professional development and knowledge acquisition to improve their communications and relationship management competencies.

Implications for Nursing Management

Healthcare organizations must understand that nursing leaders should strive for professional development and knowledge acquisition to improve their communication and management.

Document 20 of 100

The integration of care ethics and nursing workload: A qualitative systematic review

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ABSTRACT (ENGLISH)

Aim

The aim of this review was to explore literature from January 2017 to December 2021 for specific aspects of care ethics related to nursing workload in the acute care setting.

Background

High nursing workload is associated with adverse outcomes for nurses as well as patients. Nursing workload goes beyond patient-to-nurse ratios and encompasses patient, nurse and organizational factors.

Evaluation

This qualitative systematic review was conducted according to the Joanna Briggs Institute Manual for Evidence Synthesis. The four features of care ethics related to nursing workload guided the review of qualitative studies in MEDLINE, CINAHL and PsycINFO, and synthesized findings were presented in the four phases of caring.

Key Issues

Key issues include ethical dilemmas, time pressure, shared moral burden and managerial support.

Conclusion

To reduce nursing workload, a care ethics perspective can provide solutions through fortifying interprofessional relationships and enhancing empathetic actions.

Implications for Nursing Management

Situational, individual and team approaches to management allows for incorporation of personal values and ethics of care to support patient-centred care. Leadership initiating conversations and being proactive about workload can lead to an improved work environment for both the nurse and the nurse manager.

Document 21 of 100

Hospital nurses' empathy and moral sensitivity toward elderly care: A cross-sectional study

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ABSTRACT (ENGLISH)

Aim

The aim of this study is to explore factors that influence elderly caring attitudes, with a focus on empathy and moral sensitivity.

Background

Medical and nursing needs of the elderly have escalated as a consequence of changes induced by aging and the associated diseases and disabilities.

Method

A cross-sectional study involving 229 nurses from four general hospitals in South Korea was conducted. Questionnaires assessing demographic and work experience information, empathy (Empathy Construct Rating Scale), moral sensitivity (Korean version of the Moral Sensitivity Questionnaire) and elderly caring (Elderly Caring

Attitude Scale) were used. Data were analysed using multiple regression analysis.

Results

The factors influencing the caring attitudes of nurses were empathy, moral sensitivity, preference for geriatric nursing and experience with continuing education in geriatric nursing. The explanatory power of this regression model was 59.4%.

Conclusions

Strategies to enhance empathy and moral sensitivity of nurses and education related to geriatric nursing might help improve elderly caring attitudes.

Implications for Nursing Management

Continued education in geriatric nursing should be provided for nurses caring for the elderly. In terms of nursing management and education, it is necessary to consider and develop strategies to improve the empathy and moral sensitivity of nurses toward elderly patients.

Document 22 of 100

Changes in distress and turnover intentions among hospital-based nurses working during the first 8 months of the COVID-19 pandemic in Denmark: A prospective questionnaire study

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ABSTRACT (ENGLISH)

Aim

To describe changes in distress among Danish hospital-based nurses during the early month of the COVID-19 pandemic and to examine predictors of distress and turnover intentions.

Background

Outbreak of infectious diseases such as the COVID-19 pandemic can increase the likelihood that health professionals suffer from poor mental health even after the outbreak.

Methods

A prospective study among 426 Danish hospital-based nurses during the early month of the pandemic. Participants completed self-administered questionnaires regarding mental health and COVID-19 worries, as well as turnover intentions.

Results

Nurses with brief work experience reported higher increase in distress. Feeling unsafe at work, having low trust in management and being anxious for relatives were associated with increased distress. Finally, feeling unsafe at work, being anxious for relatives and having low trust in management were predictors of intention to change job.

Conclusion

This study suggests that the subjective experiences of uncertainty in work during the COVID-19 pandemic have more impact on nurses' distress than COVID-19 related conditions at hospitals. Finally, the study provides empirical support for the association between COVID-19-related worries and turnover intentions.

Implication for nursing management

Knowledge of risk factors for psychological distress as well as predictors of turnover intention is necessary and may provide nurses and health-care systems with the ability to respond better against future pandemics and to retain nurses in the organization and in the profession.

Document 23 of 100

Nursing leaders' perceptions of the state of nursing leadership and the need for nursing leadership education reform: A qualitative content analysis from South Korea

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ABSTRACT (ENGLISH)

Aim

This study aimed to clarify nursing leaders' perceptions of nursing leadership education and practice.

Background

Leadership is an essential competency that is required in nursing practice. It is also necessary to pay more attention to the development of nurses' leadership to improve patient safety and outcomes.

Methods

Participants were 15 nursing leaders. We adopted qualitative content analysis for data collected through individual and/or focus group interviews and analysed using the process of coding, condensing and categorizing.

Results

The results revealed the following five major themes with categories: (1) nursing leadership—commitment to nurses, the nursing profession and the organisation; (2) nursing leadership abilities—competency and compatibility, personality and traits; (3) importance of nursing leadership education to enhance educational efficiency and to nurture next-generation nursing leaders; (4) difficulties in nursing leadership education: lack of perception and difficulty of implementation; and (5) strategies for nursing leadership education: contents and methods.

Conclusions

Nursing leaders' perception of nursing leadership was extended to nurses, organisations and nursing professions. Competency, capability, innate personality and traits are required nursing abilities that are acquired through education.

Implications for Nursing Management

Experience and theoretical-based nursing leadership education should be introduced gradually and systematically

from the beginning of nurses' careers.

Document 24 of 100

The relationship between moral distress levels and ethical climate perceptions of PICU nurses

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ABSTRACT (ENGLISH)

Background

The organizational climate in paediatric intensive care units is specific to the conditions of the patient, and there may be a relationship between the ethical climate perception and moral distress levels of the nurses working in this unit.

Aim

The research aim was to examine the relationship between the moral distress levels and their perceptions of hospital ethical climate of paediatric intensive care unit nurses.

Methods

This research was aimed a descriptive, cross-sectional and correlational type with 239 paediatric intensive care unit nurses of public, university and training and research hospitals in Turkey. Research data were evaluated with mean, Pearson correlation and multiple linear regression analysis.

Results

The total score of moral distress scale was 106.36 ± 53.63 , and of the hospital ethical climate scale was 100.60 ± 14.41 . A moderate negative relationship was found between nurses' moral distress levels and ethical climate perceptions, ethical climate perception explained moral distress levels with a 12% variance and this significance came from the physicians sub-dimension.

Conclusions

The moral distress levels of paediatric intensive care nurses were below the average, and their ethical climate perceptions were above the average. It was seen that the physicians sub-dimension was an important explanatory on the total moral distress.

Implication for Nursing Management

In order to eliminate the moral distress arising from the hospital ethical climate, practices should be developed to increase the cooperation between nursing and physicians.

Document 25 of 100

The contribution of professional autonomy in advancing ethical behaviour: A narrative review of studies in nursing

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ABSTRACT (ENGLISH)

Aim

This article explores moral disagreements between nurses and physicians; specifically, we aim to analyse professional nurses' practice in navigating these conflicts.

Background

Nurses face morally challenging situations while caring for patients when their views on treatments and care may contradict those of physicians. It is important that nurses represent patients' perspectives and are partners in the care decision-making process.

Evaluation

A narrative review was conducted by including peer-reviewed articles in English. A literature search was conducted using the Web of Science database and Google Scholar search engine from 1 December 2021 to 10 February 2022.

Key issues

A total of 27 articles published between 2009 and 2021 were included in the analysis. The following themes were explored in this article: areas in which moral disagreements occur and how these disagreements shape physician–nurse relationships, differences in the status of professional autonomy in nursing in the Baltic states and Nordic countries, and potential directions for nurses' involvement in the decision-making process regarding moral disagreements in nursing practice.

Conclusions

Moral disagreements between nurses and physicians most often occur in situations related to treatment and/or care strategies as well as end-of-life decisions. Nurses' participation in the decision-making process and physicians' willingness to consider nurses' perspectives play a fundamental role in navigating moral conflicts because nurses possess a body of knowledge about their patients that differs from that of physicians. This knowledge is just as worthy as physician knowledge. Considering the level of professional autonomy in specific regions, nurses' involvement in decision-making regarding particular patients' care in the Baltic states seems to be relatively low compared to that in the Scandinavian countries, where nurses have a much wider space for independent decision-making.

Implications for Nursing Management

Complex moral situations that require the input of both physicians and nurses must be examined and addressed. Several processes may assist in fostering nurses' contributions to decision-making, among which training to effectively deal with morally complex situations and creating an atmosphere conducive to collaboration between physicians and nurses are particularly important.

Nursing students' care of and attitudes towards lesbian, gay, bisexual, trans, and intersex people in times of COVID-19 in Spain: A cross-sectional study

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ABSTRACT (ENGLISH)

Objective

The objective of this work is to measure the knowledge and attitudes of Catalan nursing students regarding lesbian, gay, bisexual, trans, and intersex (LGBTI) patients, as well as their perception of specific training in this area, according to their internship modalities, sociodemographic circumstances, and academic background during the COVID-19 pandemic.

Background

During the COVID-19 pandemic, the Spanish Government created the “Health-Aid” internship: A paid alternative to curricular internships. There is extensive evidence that paid work environments perpetuate negative attitudes towards LGBTI patients.

Method

A cross-sectional survey aimed at Catalan nursing students. The “Attitudes Towards and Knowledge About Lesbian, Gay, Bisexual, Trans and Intersex Patients” questionnaire was adapted. A descriptive study and backward regression models were constructed.

Results

Three hundred thirty-seven students, mean age 23.80 years (SD: 5.17) participated; 85% women and 54 (16%) completing the Health Aid internship modality. More than 50% did not attend specific training on the care of the lesbian, gay, bisexual, trans, and intersex population. Differences between internship modalities showed higher values in the curricular internship group: Attitudes ($U=6526.50$, $p=.031$) and training perception ($U=5926.50$, $p=.008$).

Conclusions

Nursing students' attitudes towards lesbian, gay, bisexual, trans, and intersex patients and their perception of specific training on care for this population were negatively influenced by the paid Health Aid internship during the pandemic.

Implications for Nursing Management

Even under dire circumstances, clinical training must be properly managed to address the specific health needs of vulnerable populations, such as lesbian, gay, bisexual, trans, and intersex patients. Paid internships in emergency scenarios may impede these objectives.

Document 27 of 100

Effect of humble leadership on proactive work behaviour: The mediating role of psychological empowerment among nurses

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ABSTRACT (ENGLISH)

Aim

This study was designed to determine the effect of humble leadership on nurses' proactive behaviours at work through psychological empowerment.

Background

Nurse leaders' humility has a profound effect on enhancing nurses' proactive work behaviour; yet, the mechanism underlying this pattern of effect remains unknown.

Methods

A descriptive cross-sectional study was conducted in all nine Universal Health Insurance hospitals in Port Said, Egypt. Using scales for assessing leader humility, psychological empowerment and proactive behaviour at work, 316 nurses were surveyed. Regression analyses and structural equation models were used to examine the study hypothetical model.

Results

The results revealed that humble leadership, psychological empowerment and proactive work behaviour were significantly positively correlated. Psychological empowerment fully mediated the relationship between humble leadership and proactive work behaviour.

Conclusion

This study emphasized the value of humble leadership in psychologically empowering nurses, which results in greater proactive work behaviour.

Implication for Nursing Management

Nurse managers should lead their nursing staff with humility, which could increase the level of nurses' psychological empowerment and proactive behaviours at work, which will be reflected positively on the staffs and the organization.

Medical–surgical nurse leaders' experiences with safety culture: An inductive qualitative descriptive study

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

The aim of this study is to describe safety culture as experienced by medical–surgical nurse leaders.

Background

Safety culture remains a barrier in safer patient care. Nurse leaders play an important role in creating and supporting a safety culture.

Methods

We used an inductive qualitative descriptive study using semistructured interviews, document review and observations in a Midwestern community hospital in the United States.

Results

Results of the study are as follows: making sure nurses are keeping patients safe, making sure nurses have nursing interventions in place, expecting nurses to stop unsafe acts or escalate when they feel uncomfortable, making sure nurses have what they need to provide safe care, organization prioritizes patient safety and making sure nurses are learning and growing emerged as themes describing safety culture.

Conclusions

Nurse leaders made sure patients were safe by making sure everyone was doing their best to provide safe care. Insufficient time, too many priorities, insufficient resources, poor physician behaviours and lack of respect for their role emerged as barriers to leading a safety culture.

Implications for Nursing Management

Organizations must remove barriers for nurse leaders to develop and lead a safety culture. Nurse leaders must learn to advocate successfully for safe nursing care and professional work environments.

Emergency nurses' attitudes, perceptions about personal protective equipment and willingness to care for COVID-19 patients: A descriptive, cross-sectional study

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ABSTRACT (ENGLISH)

Aims

This study investigated emergency nurses' attitudes and perceptions about personal protective equipment and their association with the willingness to care for COVID-19 patients.

Background

Emergency nurses are at increased risk for COVID-19 infection as frontline workers and must wear personal protective equipment while attending suspected and confirmed COVID-19 patients.

Methods

In September 2021, 188 nurses in four emergency departments completed online questionnaires.

Results

Multivariable logistic regression demonstrated that as perceptions of COVID-19 infection risk increased by 1 point, 26% of nurses were willing to care of COVID-19 patients. The willingness to care for COVID-19 patients increased in their attitudes by 1.16 point and perceptions by 1.08 points about PPE.

Conclusions

Perceptions of the risk of infection exposure and confidence in safety of personal protective equipment are associated with nurses' willingness to care for COVID-19 patients.

Implications for Nursing Management

Nurse managers need to assess nurses' needs for safety and provide a supportive climate to mitigate their concerns regarding infection risk and encourage nurses' willingness to care for patients. Nurse managers should provide precise guidelines on correct personal protective equipment use. Repetitive training on personal protective equipment should be provided to encourage nurses' adaptation to its use.

Document 30 of 100

Work-related communication mediates the relationship between perceived diversity climate and psychological empowerment among part-time nurses: A cross-sectional study

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ABSTRACT (ENGLISH)

Aim

This study investigates which work-related communication mediates the relationship between diversity climate and psychological empowerment among part-time nurses.

Background

Part-time nurses' high psychological empowerment is desirable because it may lead to high quality nursing practice.

Methods

Anonymous self-report questionnaires or web-based surveys were used to measure diversity climate (Climate for Inclusion Scale), psychological empowerment (Japanese version of the Psychological Empowerment Scale) and work-related communication (scale developed in this study). The respondents were part-time nurses from departments with shift work in six Japanese hospitals having over 200 beds. The surveys were conducted from September to October 2020. Multiple regression analyses and a significance test of indirect effects were then conducted.

Results

Among the work-related communication components, 'expressing thoughts about their work' fully mediated the relationship between diversity climate and psychological empowerment.

Conclusions

It is important for part-time nurses to be actively 'expressing thoughts about their work' to enhance their psychological empowerment. Positive diversity climate is also important because it allows part-time nurses to express their thoughts regarding work.

Implications for Nursing Management

Managers can enhance part-time nurses' psychological empowerment by encouraging them to express their work-related opinions based on the diversity climate.

Document 31 of 100

The effectiveness of the Ethics Quarter intervention on the ethical activity profile of nurse managers: A randomized controlled trial

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ABSTRACT (ENGLISH)

Aim

To test the effectiveness of a new ethics educational e-learning intervention, Ethics Quarter, in supporting nurse managers' ethical activity profile.

Background

Health care organisations need evidence-based ethics interventions to support nurse managers' ethical activity profile.

Methods

A parallel-group, individually randomized controlled trial was conducted in 2020. Finnish nurse managers nationwide [members of the Union of Health and Social Care Professionals in Finland (Tehy) trade union] were randomly allocated to intervention ($n=169$) or control group ($n=172$). The intervention group participated in the Ethics Quarter comprising twelve 15-min evidence-based educational 'quarters' spread over 6 weeks. The control group had standard organisational ethics structures. The primary and secondary outcomes were ethical activity profile and ethics knowledge, respectively. The Consolidated Standards of Reporting Trials (CONSORT) statement for study design and reporting was adopted.

Results

Ethical activity profile showed statistically significant differences in mean changes between the groups from baseline to 10 weeks: all five dimensions were statistically significantly higher in the intervention group compared with the control group ($p<.0001$).

Conclusion

The Ethics Quarter was effective in increasing nurse managers' ethical activity profile.

Implications for Nursing Management

Applying this ethics educational e-learning intervention would benefit nursing management education and health care organisations.

Trial Registration

clinicaltrials.gov: NCT04234503.

Document 32 of 100

Burnout, resilience and psychological flexibility in frontline nurses during the acute phase of the COVID-19 pandemic (2020) in Madrid, Spain

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Background

In April 2020, Spain was the country with the highest number of patients infected by COVID-19 in Europe. The pressure on health care providers has had a direct impact on nurses and their mental health.

Aim

The aim of this study is to demonstrate the causal relationship between resilience, acceptance, experiential avoidance, psychological inflexibility and burnout syndrome, all of which are measured with validated questionnaires.

Methods

This was designed as a transversal correlational study with nurses who worked during the acute phase of the pandemic in public hospitals in the Community of Madrid with patients diagnosed with COVID-19 in COVID-19 medical hospitalization units, emergency services and intensive care units. Google Forms was used to obtain an informed consent sheet, socio-demographic variables and the following questionnaires: 10 CD-Risk, Connor-Davidson Risk Resilience Scale, Acceptance and Action Questionnaire-II and the Maslach Burnout Inventory.

Results

The final sample included 375 nurses with a high number of consecutive days of direct exposure to an infected patient and a very high number of consecutive days without rest; almost 18% suffered from COVID-19. The nurses presented medium levels of resilience, medium levels of experiential avoidance and medium levels as measured for emotional exhaustion, personal accomplishment and depersonalization. We also found a predictive correlation between all the dimensions of the burnout questionnaire in relation to the data obtained from the resilience questionnaire.

Conclusions

There is a direct and predictive relationship between the resilience that nurses had during the acute phase of the pandemic and their capacity for acceptance, experiential avoidance, psychological inflexibility and burnout syndrome.

Implications for Nursing Management

The scores show the necessity to implement preventive measures to avoid fatal psychological consequences for nurses.

Document 33 of 100

Effects of an ethics education program on nurses' moral efficacy in an acute health care facility

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

This study aimed to evaluate an ethics education program developed to increase moral efficacy among nurses in an acute health care facility.

Background

Moral distress among nurses can cause serious problems in terms of hospital organisations and patient safety. To reduce moral distress and promote professional confidence in nursing practice, a strategic intervention program is needed.

Methods

An ethics education program introduced methods to increase self-efficacy in accordance with Bandura's social cognitive theory. Eight nurses were recruited from 2017 to 2019, and all conversations and discussions regarding the ethics consultation were recorded on IC recorders and analysed qualitatively.

Results

Four core categories—Convinced to take an active role in ethical issues; Progressed in nursing practice with ethical agency; Experienced professional transformation; and Empowered by the presence of colleagues—emerged as outcomes of the ethics education program that related to moral efficacy.

Conclusions

The four core outcome categories suggested that the participants had gained confidence after taking part in the ethical education program.

Implications for nursing management

The results of the participants' described behaviours and actions suggested that they would be proactive in contributing to reductions in moral distress in the future.

Document 34 of 100

Compassion fatigue and compassion satisfaction among Chinese palliative care nurses: A province-wide cross-sectional survey

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ABSTRACT (ENGLISH)

Aims

We aim to explore the prevalence and potential facilitators and inhibitors of compassion fatigue and compassion satisfaction among Chinese palliative care nurses.

Background

Nurses with compassion fatigue may suffer from health-related problems, causing decreased work efficiency and quality of care. Palliative care nurses are especially at risk of compassion fatigue due to close contact with terminal patients.

Methods

A province-wide cross-sectional survey using convenience sampling was conducted among 318 palliative care nurses at 25 hospitals and healthcare institutions in Sichuan Province, China. Data were collected using demographic questionnaire and five scales: Professional Quality of Life Scale, General Self-Efficacy Scale,

Perceived Social Support Scale, Simplified Coping Style Questionnaire, and Connor-Davison Resilience Scale. Data analyses including descriptive statistics, *t*-test, one-way ANOVA, simple linear regression, and multiple linear regression.

Results

Mean scores (SD) for burnout, secondary traumatic stress, and compassion satisfaction were 25.42 (4.75), 26.08 (5.72), and 35.67 (5.77), respectively. Related factors predicted 40.30%, 27.10%, and 35.4% of the variance in the model of burnout, secondary traumatic stress, and compassion satisfaction, respectively (all $p < .001$).

Conclusions

The levels of burnout and secondary traumatic stress among Chinese palliative care nurses were higher than those among other types of nurses. Social support, resilience, positive coping, family recognition of work, and income satisfaction are inhibitors of compassion fatigue among palliative care nurses.

Implications for Nursing Management

Nursing administrators and educators should consider providing effective and targeted strategies (e.g. ongoing training and psychological interventions) to decrease compassion fatigue among palliative care nurses based on the cultural and ethical settings.

Document 35 of 100

Nurse leaders' experiences of professional responsibility towards developing nursing competence in general wards: A qualitative study

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ABSTRACT (ENGLISH)

Aim

To explore nurse leaders' experiences of professional responsibility to facilitate nursing competence in general wards.

Background

Nurse leaders are responsible for maintaining high levels of competence among nurses to improve patient safety.

Methods

Qualitative analysis was conducted between February and April 2019 using semi-structured interview data from 12 nurse leaders in surgical and medical wards at three Norwegian hospitals.

Results

Four main themes were identified: struggle to achieve nursing staff competence; focus on operational and budgetary requirements rather than professional development; demands to organize sick leaves and holiday periods; and challenges in facilitating professional development.

Conclusion

Nurse leaders felt that their responsibilities were overwhelming and challenging. They witnessed more support for current administrative tasks than for the implementation of professional development. Additionally, unclear work instructions from the employer provided few opportunities to facilitate professional development. Hospital management failed to ensure quality of care and patient safety in general wards by not supporting the strengthening

of nurses' professional competence and preventing turnover.

Implications for Nursing Management

Management may integrate formal work instructions that clarify nurse leaders' responsibilities as professional developers, allowing nurse leaders to meet their obligation of maintaining adequate professional competence among nursing staff in general wards.

Document 36 of 100

Understanding the causes and consequences of envy among nurses: A scoping review

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ABSTRACT (ENGLISH)

Aim

This scoping review presents an overview of the causes and consequences of envy among clinical nurses.

Background

Many nurses in the United States have in recent years left their permanent positions for temporary agency assignments that pay higher salaries. Although greed seems like a likely explanation for the rise in travel nursing, humans tend to have a particular interest in wanting what others have.

Evaluation

A five-stage scoping review framework and the PRISMA-ScR checklist guided this review.

Key issues

Social comparison and malicious envy are prevalent among nurses. Envy is a powerful emotion that affects human communication and behaviour in organizations. Scholars have underexplored the potential benefits of leveraging benign envy in the nursing context.

Conclusion

The results highlight the relational nature of envy. Social comparison and envy provide an insight that suggests that nurses who change jobs are not necessarily greedy. They may be seeking the right mix of tangible and intangible rewards.

Implications for Nursing Management

Greed and envy can motivate nurses to change jobs. Although envy and greed may produce the same outcome, they are qualitatively different. The motivation to change jobs alludes to nurses' desire to have better control of their professional and personal lives.

Document 37 of 100

Health and social care frontline leaders' perceptions of competence management in telemedicine in Finland: An interview study

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

This work aims to describe competence management in telemedicine from the perspective of health and social care frontline leaders.

Background

The increasing use of services in health and social care is a challenging aspect of modern telemedicine; it requires staff to develop relevant professional competence and good telemedicine practices.

Methods

The study was conducted using thematic interviews of frontline leaders from primary health care, specialized medical care and social care ($n=10$) in the spring of 2021. The data were analysed by inductive content analysis.

Results

The following main categories were identified: Activities of frontline leaders while managing competence in telemedicine, promotion of community learning, competence management in determining telemedicine content, and recognizing health and social care professionals' competence in telemedicine.

Conclusions

Achieving the goals set for telemedicine requires ensuring that knowledge from leaders is widely disseminated and shared and that staff are adequately trained. The results can be utilized in the practical work of other telemedicine and in the development of their operations.

Implications for Nursing Management

Managing competence in telemedicine requires from the leaders an encouraging attitude and improved personal interactions in the work community.

Document 38 of 100

Towards a new conceptual model for nurses' organizational well-being: An integrative review

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ABSTRACT (ENGLISH)

Aim

The aim of this study is to summarize conceptual models of nurses' organizational well-being and identify common variables among them.

Background

To understand how the characteristics of an organizational context affect workers' well-being, numerous conceptual models have been developed. Such models have been conceptualized in various working contexts other than health care and not always considering the particularities of the profession of nursing.

Evaluation

This integrative review was conducted using the resources of PubMed, CINAHL, Scopus and the Cochrane Library, up until March 2022, and by applying a modified version of Cooper's five-stage methodology, in accordance with the PRISMA guideline.

Key issues

Six reference models focused on different organizational variables and used to evaluate nurses' organizational well-being were identified: the Effort-Reward Imbalance (ERI) model; the Job Demands-Resources (JD-R) model; the Utriainen et al. model; the Demands-Resources and Individual-Effects (DRIVE) model; the Well-Being, Health-Promoting Lifestyle and Work Environment Satisfaction (WHS) model and the Nursing Worklife Model (NWM).

Conclusion

There is no consensus in the nursing literature on an all-encompassing conceptual model of nurses' organizational well-being or on working environment characteristics to be studied or monitored for defining nurses' well-being.

Implications for nursing management

Coming to a consensus on the definition of a nurses' organizational well-being model and its variables would facilitate nursing management in monitoring and intervening on nurses' work-life quality and in improving nursing performance and caring outcomes.

Document 39 of 100

The impact of psychological capital on turnover intention among Chinese nurses: A moderated mediation model

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ABSTRACT (ENGLISH)

Aims

This study examined how the mediating effect of psychological distress and the moderating role of social support influence the connection between psychological capital and turnover intention among Chinese nurses.

Background

Nurses play a crucial role in medical and health services, but turnover intentions are common among them.

Methods

A cross-sectional survey was conducted involving 4865 nurses in China. The Chinese Psychological Capital Questionnaire, Depression, Anxiety and Stress Scale, Social Support Rating Scale, and Turnover Intention Scale were used to gather data. Bootstrap and simple slope methods were used to test the mediating effect of psychological distress and the moderating effect of social support.

Results

Psychological capital had a significant direct impact on turnover intention among nurses ($B=-0.040$, $t=-10.032$, $p<.001$). Psychological distress had a mediation effect of 46.89% between psychological capital and turnover intention. Moreover, social support had a moderating role in the relationship between psychological distress and psychological capital and between psychological distress and turnover intention.

Conclusions

Psychological capital correlated negatively with psychological distress and turnover intention and indirectly influenced turnover intention through psychological distress. Social support moderated the first and second half of the path in the mediating model of psychological distress. These findings have implications for early intervention for and the prevention of turnover intention in nurses.

Implications for Nursing Management

This study's findings can inform the design of effective nurse support programmes to reduce the impact of psychological distress on turnover intention among nurses.

Document 40 of 100

Nurses' perceptions of hourly rounding in Jordanian hospitals: A national survey

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ABSTRACT (ENGLISH)

Aim

This study aims to explore nurses' perceptions of hourly rounding in Jordanian hospitals.

Background

Hourly rounding is a standardized and systematic process conducted by nurses to anticipate and address needs in

hospitalized patients. The evidence on hourly rounding is mixed, and research is needed to affirm the benefits of implementing hourly rounding across different contexts.

Method

A cross-sectional correlational design was used. A convenient sample of 1378 nurses was recruited from one military hospital, two university-affiliated hospitals, four governmental hospitals and four private hospitals in Jordan. The Hourly Rounding Questionnaire was used to collect data. Descriptive statistics, *t* test, one-way ANOVA and Kruskal–Wallis *H* test were used to analyse the data.

Results

The highest agreements between nurses were on the items related to the implementation of hourly rounding in terms of 'preventing patient falls' 1211 (87.9%), 'preventing hospital-acquired pressure ulcers' 1201 (87.2%) and 'addressing patients' position' 1199 (87%). The lowest agreements between nurses were on the items related to the involvement of nurses in the decision-making process and sense of ownership 268 (19.4%) and the availability of continued support and resources 239 (17.3%). Female nurses, nurses who often work on a shift rotation, nurses working in private hospitals and respiratory units had a positive perception of hourly rounding.

Implications for Nursing Management

Findings will inform nursing leaders and policy developers about the implementation of hourly rounding from nurses' perspectives. A protocol should accompany hourly rounding for robust evaluation to measure the impact of this process change with the involvement of nurses in the decision-making process.

Document 41 of 100

Work environment and mental health in nurse assistants, nurses and health executives: Results from the AMADEUS study

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

This study aimed to explore work environment and mental health in nurse assistants, nurses and health executives in a national large-scale study.

Background

We have data for physicians but not for other health care workers categories.

Methods

A total of 6935 participants were recruited between May and June 2021 by professional mailings and professional networks.

Results

All professional categories reported high rates of high psychological demand (>90%), low social support (>60%),

burnout (50% to 60%), exposure to potentially morally injurious events (>40%) and depression (approximately 30%). Surgery nurses reported the highest exposure to potentially morally injurious events. Major depression was identified in approximately 30% of participants in all categories, but less than 10% reported consuming antidepressants. A total of 31% to 49% of participants reported sleep disorders and 16% to 21% reported consuming regularly hypnotics. Physicians reported high hazardous drinking behaviour and nurse assistant high smoking rates.

Conclusions and Implications for Nursing Management

Our results suggest that preventing burnout and depression in health care workers is a priority. To reach this goal, nursing managers could develop some interventions to reduce psychological demand and increase personal accomplishment and social support between colleagues, and prevent sustained bullying at the workplace and health risk behaviours. These interventions should be further developed and evaluated.

Document 42 of 100

Ethical dilemmas experienced by nurses while caring for patients during the COVID-19 pandemic: An integrative review of qualitative studies

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

This study aimed to identify ethical dilemmas faced by nurses while caring for patients during the COVID-19 pandemic.

Background

Nurses express several concerns during disease outbreaks, some of which are related to ethical dilemmas.

Evaluation

It is an integrative review in which four databases were searched. Critical appraisal tools and PRISMA guidelines were used. Content analysis was performed to analyse the obtained data.

Key issues

A total of 14 studies were identified. The results are presented into four categories: concerns with beneficence–nonmaleficence; awareness of need for autonomy; challenges to justice; and coping with ethical dilemmas.

Conclusion

While caring for patients during the COVID-19 pandemic, nurses often put their own health and that of their families at risk. The ethical dilemmas faced by nurses are mainly caused by the lack of Protective Personal Equipment (PPE), shortages of medical supplies and personnel and the uncertainties that permeate an environment threatened by a new and highly contagious disease such as COVID-19.

Implications for nursing management

This review provides information that can inspire nurse managers working during the COVID-19 pandemic to support and empower nurses to act in accordance with ethical principles, which is important in order for nurses to protect themselves while providing efficient and effective care.

Role of self-efficacy in nursing organizational climate: A way to develop nurses' humanistic practice ability

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

This study aimed to investigate the impact of self-efficacy on the relationship between organizational climate and humanistic practice ability (HPA) in Chinese nurses.

Background

To date, studies on the effect of organizational climate on nursing care have focused on care outcomes rather than care processes. Thus, this effect remains poorly understood.

Methods

A total of 757 participants were sampled from three tertiary hospitals in Guangdong Province from November to December 2019; subsequently, they completed a structured electronic questionnaire. A structural equation model was used to explore the impact of nursing organizational climate on nurses' HPA.

Results

A total of 688 valid questionnaires were collected. The nurses' average HPA score was 107.82 (*SD* 12.47). There was a positive correlation between organizational climate and HPA ($r = .409$, $p < .05$). Additionally, self-efficacy mediated this relationship ($p < .01$).

Conclusions

This study provides new insights into nursing organizational climate, self-efficacy and nurses' HPA.

Implications for Nursing Management

The significant mediating effect of self-efficacy suggests that managers should implement nurse professional development programmes using targeted strategies to foster greater self-efficacy, which could improve the quality of care and nurse–patient relationships.

Financial competencies as investigated in the nursing field: Findings of a scoping review

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ABSTRACT (ENGLISH)

Aim(s)

This study aims to map the extent of the research activity in the field of financial competencies and nursing and identify main patterns, advances, gaps, and evidence produced to date.

Background

Financial competencies are important indicators of professionalism and may influence the quality of care in nursing; moreover, these competencies are the basis of health care sustainability. Despite their relevance, studies available on financial competencies in the nursing field have not been mapped to date.

Evaluation

A scoping review was guided according to (a) the Preferred Reporting Items for Systematic Reviews and Meta-Analyses extension for Scoping Review and (b) the Patterns, Advances, Gaps and Evidence for practice and Research recommendations framework.

Key issue(s)

A total of 21 studies were included. Main research patterns have been developing/evaluating the effectiveness of education programmes and investigating the nurse's role in the context of financial management, challenges and needs perceived by them, and tool validation to assess these competencies. The most frequently used concept across studies was 'financial management competencies' ($n=19$).

Conclusion(s)

The sparse production of studies across countries suggests that there is a need to invest in this research field.

Implications for nursing management

Nurses with managerial roles should invest in their financial competencies by requiring formal training both at the academic and at the continuing education levels. They should also promote educational initiatives for clinical nurses, to increase their capacity to contribute, understand, and manage the emerging financial issues.

Document 45 of 100

Disciplinary processes for nurses, from organizational supervision to outcomes: A document analysis of a regulatory authority's decisions

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ABSTRACT (ENGLISH)

Aim

This study aims to explore the disciplinary processes for nurses, from organizational supervision to final decisions by the Finnish regulatory authority.

Background

Regulatory authorities are responsible for protecting the public, by ensuring that they receive safe, competent and ethical nursing care, but little is known about the disciplinary processes for nurses.

Methods

This is a retrospective document analysis of 296 disciplinary decisions by the Finnish regulatory authority from 2007 to 2016. The data were analysed using a quantitative design with descriptive statistics.

Results

We studied 204 disciplined nurses (81.4% female) with a mean age of 43.5 years. The disciplinary process comprised organizational supervision, complaints, investigations and decisions. Nurses with substance abuse issues were more likely to face criminal investigations and receive temporary decisions. The process lasted from under 1 month to years and could have profound effects on nurses, colleagues and nurse managers and compromise patient safety.

Conclusion

This study identified key factors that could inform the disciplinary processes for nurses. More knowledge is needed about how organisations ensure patient safety when unprofessional conduct is suspected.

Implications for Nursing Management

Retaining nursing professionals is vital due to global shortages, and more attention should be paid to organizational supervision and support for nurses during disciplinary processes.

Document 46 of 100

RESPONDER: A qualitative study of ethical issues faced by critical care nurses during the COVID-19 pandemic

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ABSTRACT (ENGLISH)

Aims

To identify and understand ethical challenges arising during COVID-19 in intensive care and nurses' perceptions of how they made "good" decisions and provided "good" care when faced with ethical challenges and use of moral resilience.

Background

Little is known about the ethical challenges that nurses faced during the COVID-19 pandemic and ways they responded.

Design

Qualitative, descriptive free-text surveys and semi-structured interviews, underpinned by appreciative inquiry.

Methods

Nurses working in intensive care in one academic quaternary care centre and three community hospitals in Midwest United States were invited to participate. In total, 49 participants completed free-text surveys, and seven participants completed interviews. Data were analysed using content analysis.

Results

Five themes captured ethical challenges: implementation of the visitation policy; patients dying alone; surrogate decision-making; diminished safety and quality of care; and imbalance and injustice between professionals. Four themes captured nurses' responses: personal strength and values, problem-solving, teamwork and peer support and resources.

Conclusions

Ethical challenges were not novel but were amplified due to repeated occurrence and duration. Some nurses' demonstrated capacities for moral resilience, but none described drawing on all four capacities.

Implications for Nursing Management

Nurse managers would benefit from greater ethics training to support their nursing teams.

Document 47 of 100

Nurses' ethical leadership and related outcome variables: Systematic review and meta-analysis

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ABSTRACT (ENGLISH)

Aim

To investigate the outcomes and the effect sizes of ethical leadership in nursing practice.

Background

Many meta-analysis of ethical leadership have been conducted in other fields, but there are none for the effects of

ethical leadership of nurse leaders and should be investigated.

Evaluation

For a systematic literature review, we searched PubMed, EMBASE, the Cochrane Library, CINAHL, OVID, Web of Science and Korean databases for studies published in Korean or English. We used Comprehensive Meta-Analysis (CMA) 2.0 and R 3.6.2 for the meta-analysis.

Key issues

We divided the outcomes of ethical leadership into three categories and investigated the effect sizes: subordinates' perceptions of their leaders (ES=0.65), subordinates' ethical behaviours (ES=0.04) and job or organisational outcomes (ES=0.45). In addition, we identified 14 outcome variables, and transformational leadership showed the greatest effect size (ES=0.77) among them.

Conclusion

This study confirmed the positive effects of ethical nursing leadership on individual nurses' perceptions about their leaders, their jobs and organisations.

Implications for nursing management

Nursing organisations and nurse administrators should make efforts to highlight ethical leadership of nurse leaders to improve outcomes of organisational performance including individual nurses' perceptions about their leaders, their jobs and organisations.

Document 48 of 100

Factors contributing to burnout among nurses at a district hospital in Namibia: A qualitative perspective of nurses

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ABSTRACT (ENGLISH)

Aim

The aim of this study was to explore and describe the factors that contribute to burnout among nurses.

Background

Burnout remains one of the major occupational health problems, posing risks to human health globally. In Namibia, there has been growing public criticism of nurses, stating that they are rude or act in a manner that does not show professionalism towards their clients. Reasons for such unprofessional behaviour could be linked to negative attitudes on the part of nurses towards their clients, resulting from burnout syndrome.

Method

A qualitative, exploratory, descriptive and contextual research design was followed as the basis for conducting the study. Using a purposive sampling technique, a sample of 20 nurses was selected from a population of 69 nurses employed in this setting. This sample size was determined by the saturation of data as reflected in repeating themes. Data were collected using individual semi-structured interviews and were analysed using qualitative thematic analysis.

Results



The following three themes emerged: understanding the concept of burnout, factors leading to burnout and creating a conducive environment as a corrective measure to address burnout and to advance nurses.

Conclusions

Burnout is indeed real and affects nurses' performance negatively. Burnout has a negative impact on the well-being of nurses both physically and emotionally, which has the potential to compromise staff performance, productivity and the quality of patient care. Burnout among nurses is linked to many stressors such as poor staff management, inadequate resources, lack of support and lack of wellness programmes in the workplace.

Implications for Nursing Management

Strengthening communication between frontline health workers and management by engaging and involving them more in decision making in matters that concern them is anticipated to address poor staff management, enhance staff performance and improve the quality of patient care. Staff wellness programmes in the workplace are believed to be a good coping mechanism to address work-related pressure and tensions, and they are believed to resolve some work-related stress that may result in increased staff productivity.

Document 49 of 100

Factors facilitating or inhibiting the capacity for effective leadership among front-line nurse managers: A scoping review

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ABSTRACT (ENGLISH)

Aims

The purpose of this scoping review is to map and synthesize research studies addressing the factors that impact leadership behaviours of front-line nurse managers.

Background

Leadership is a fundamental component of the role of front-line nurse managers. Ineffective leadership is associated with costly outcomes; thus, organizations seek effective strategies to facilitate consistent demonstration of leadership behaviours.

Evaluation

Using a scoping review methodology, findings from 26 empirical studies were mapped to identify barriers and facilitators of leadership among front-line nurse managers. Major categories included personal and environmental factors with subthemes of personal characteristics, competencies and social support.

Key Issues

Available evidence captures the influence of personal characteristics, education, competency and formal social support on leadership capacity. The role of informal social support was not captured.

Conclusions

Multiple personal and environmental factors influence the capacity for leadership behaviours among front-line nurse managers. Strategies such as leadership development programmes, mentorship and peer support programmes, and work environments that support relational and structural support may increase leadership capacity for front-line nurse managers.

Implications for Nursing Management

Senior nurse leaders can use the results of this review to guide implementation of evidence-based strategies to recruit and retain front-line nurse managers.

Document 50 of 100

Knowledge sharing behaviour among critical care nurse specialists: A cross-sectional study

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ABSTRACT (ENGLISH)

Aims

To investigate the knowledge sharing behaviour of critical care nurse specialists and identify potential influencing factors.

Background

The specialist knowledge of critical care nurses is an important resource for the nursing team. It is necessary to investigate influencing factors of knowledge sharing behaviour of them.

Methods

Convenience sampling was used to conduct an investigation involving critical care nurse specialists from three provinces in China between October 2018 and June 2019. Practice Environment Scale, Competency Inventory for Registered Nurses, Knowledge Self-efficacy Scale, and knowledge sharing behaviour scale were utilized.

Results

The knowledge sharing behaviour score of critical care nurse specialists was 64.84 ± 11.53 . The results of the regression analysis showed that the level of education, position, involvement of nurses in hospital affairs, knowledge, self-efficacy, sex, average number of night shifts per month, years engaged in nursing work, type of employment, leadership skills, critical thinking ability and manpower and material resources accounted for 45.9% of the variance.

Conclusions

Critical care nurse specialists exhibited limited knowledge sharing behaviour. Therefore, interventions based on the dependent variables are necessary.

Implications for Nursing Management

Knowledge sharing behaviour of critical care nurse specialists remains at a low level. Hence, it is necessary to encourage their greater participation according to associated factors.

Document 51 of 100

Primary care nurses' perception of leadership and the influence of individual and work setting characteristics: A descriptive study

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ABSTRACT (ENGLISH)

Aims

The aim of this study is to describe primary care nurses' perceptions of their formal leaders' leadership behaviours and outcomes and explore differences based upon nurses' individual and work setting characteristics.

Background

Formal nursing leadership is positively associated with patient, nurse workforce and organizational outcomes, yet no studies have examined primary care nurses' perception of formal leadership behaviours and outcomes in the United States.

Methods

Cross-sectional survey data from 335 primary care nurses were analysed to assess perceived leadership behaviours associated with transformational, transactional and passive-avoidant leadership styles, perceived leadership outcomes and individual and work setting characteristics.

Results

Positive leadership behaviours (transformational) were lower than those reported for other settings. There were significant differences in nurses' perceptions of their leaders' leadership behaviours and outcomes based upon individual and work setting characteristics.

Conclusion

This study confirmed differences in perception of leadership and that individual and work setting characteristics influence nurses' perception of their leaders in primary care.

Implications for Nursing Management

Leaders must be versatile and consider the unique needs of each staff member and the influence of clinic characteristics.

Social support and job satisfaction in nursing staff: Understanding the link through role ambiguity

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ABSTRACT (ENGLISH)

Aim

This study aimed to analyse the mediator effect of role ambiguity between social support from supervisor and colleagues and job satisfaction in Portuguese nursing staff.

Background

Few studies have analysed the processes through which social support increases job satisfaction in the nursing context.

Design

A cross-sectional design using questionnaires.

Method

A total of 124 registered nurses and 130 certified nursing assistants participated in the study. Mediation analysis was performed by calculating percentile confidence intervals (10,000 resamples).

Results

Mediation analysis revealed a partial mediation between social support and job satisfaction through role ambiguity. The direct effect was greater in the case of supervisor support.

Conclusions

Social support is a crucial resource in the nursing work context with a beneficial effect on well-being (e.g. reducing role stress) and job satisfaction.

Implications for Nursing Management

Managers of hospitals and health units can establish the organizational bases to facilitate this process, considering the importance of the role of the supervisors and colleagues in the provision of high levels of instrumental and socio-emotional support.

Document 53 of 100

A scoping review of strategies used to recruit and retain nurses in the health care workforce

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ABSTRACT (ENGLISH)

Aims

This article reports the results of a scoping review to identify initiatives for improving recruitment and retention of nurses in health care and ascertain their effectiveness.

Background

The global shortage of nurses has results in greater competition for vacant posts and an increased need to retain existing post holders. While there are a large number of publications discussing ways to improve recruitment and retention, the effectiveness of these needs to be established.

Evaluation

Thirteen papers met the inclusion criteria. There was no literature identified focusing on recruitment and only one paper reported a formal evaluation of a retention initiative.

Key issues

Five themes summarized the initiatives for retaining nurses: leadership and support, ongoing professional development, recognition, work environment and flexible scheduling.

Conclusion

While strategies have been proposed to retain nurses, there is a dearth of evidence supporting the effectiveness of these.

Implications for Nursing Management

Although there is a lack of evaluations of retention strategies, the review identified a number of initiatives that warrant consideration. With the launch of the National Health Service People Plan in England in 2021, which is recommending initiatives identified in this review without robust evidence, an integrated programme of research evaluating this is recommended.

Document 54 of 100

Picking the ‘proper hat?’ Emerging ethical dilemmas while juggling nursing and research roles

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ABSTRACT (ENGLISH)

Aim

The aim of this study is to explore ethical dilemmas inherent in two potentially conflicting roles: practising nurse and researcher.

Background

Ethical guidelines for practice and research in nursing have been widely discussed. Yet examining ethical dilemmas that emerge from engaging in the dual role of nurse–researcher is rare.

Method

A qualitative approach was employed, using semi-structured interviews with 15 nurse–researchers. Data were analysed using thematic analysis.

Results

One theme emerged with three subthemes of nurse–researcher role definitions: primarily nurse, primarily researcher and combined nurse–researcher. Each subtheme had three dimensions: (a) how ethical dilemmas were expressed in encounters with role colleagues, (b) coping strategies and (c) implications for nurse–researchers.

Conclusion

Primarily nurses or primarily researchers experienced conflict in encounters with role colleagues, developed less effective coping strategies and reported impaired well-being. Conversely, combined nurse–researchers said each role nourished the other.

Implications for nursing management

Nursing policymakers and managers should support the nurse–researcher role by developing a code of ethics that acknowledges the dual role's inherent dilemmas, assimilate organisational routines and roles that support nursing research and encourage forums for discussing staff dilemmas.

Document 55 of 100

Nurses' freedom of expression: Rights, obligations and responsibilities

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ABSTRACT (ENGLISH)

Aim

This commentary aims to spark debate on the ethical, legal, professional and institutional challenges faced by nurses' use and interactions when using traditional, mass and social media.

Background

Freedom of expression is a core value of democratic systems. However, it appears to be a complex right when exercised by nurses in traditional media and/or during online interactions. Active use of these types of media can help promote healthcare incentives and reach larger audiences, or even influence public policy. Nevertheless, with the increase in social media use, some nurses have been found to have engaged in unprofessional practices, which, in some serious cases, have led to their dismissal.

Evaluation

We identified specific instances of conflicts—most commonly related to breach of privacy, inappropriate interactions on social media or a simple lack of knowledge or guidance regarding its use—and formal complaints concerning

nurses' freedom of expression.

Key Issues

While nursing codes do exist, professional guidelines concerning the use of mass and social media are still much needed. With the advent of social media, there may be ambiguity regarding how nurses engage with and make use of these platforms. In order to ensure that nurses interact professionally with any form of media, clear ethical, legal and professional frameworks of use are needed. Specific codes exist, such as the new ICN code of ethics or the NMC code, among other initiatives, but more comprehensive guidance is needed in order to support nurses in using better judgement regarding their media interactions. While the existence of such frameworks may not fix the problem of incorrect use, it can help those nurses looking for clear guidance when interacting with mass media or using social media. Also, it is important that more professionals are aware that such guidance exists, since understanding the limits and dangers of certain interactions would ultimately protect nurses' and patients' rights.

Conclusion

The increasing use of media platforms by nurses calls for further professional guidance regarding its professional utilization. To date, limited guidance exists to support media interactions. In an interconnected world that favours media interaction in both professional and private spheres, the development and widespread dissemination of clear guidance for professionals must also detail two essential points: how professionals can better interact with media platforms and also how they can avoid having unethical media interactions in the first place.

Implications for Nursing Management

The existence of a solid, comprehensive framework for generalized media use should ensure that nurses can exercise their right to freedom of expression. Clearer limitations should support nurses' professional presence and interactions in the media.

Document 56 of 100

Relationship between psychological ownership of the nursing profession and turnover intention: A correlational survey among Taiwanese nurses

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ABSTRACT (ENGLISH)

Aims

The aim of this study is to examine the relationship between psychological ownership of the nursing profession and turnover intention.

Background

There is a severe shortage of nurses worldwide. Research is needed to understand how nurses' intention to leave hospitals and the nursing profession can be alleviated.

Methods

This study adopted a cross-sectional design and a survey method. Proportionate random sampling was used to ensure sample representativeness. This study surveyed 430 registered nurses in a medical centre in Taiwan between December 2021 and January 2022. We used Turnover Scale and Self-Efficacy Scale and developed Having a Place Scale.

Results

Psychological ownership comprises three dimensions: self-efficacy, nurse identity and 'having a place' in the nursing profession. This research is the first to examine how these three dimensions of psychological ownership of the nursing profession are related to the intention to leave a hospital or the nursing profession. Self-efficacy and 'having a place' are negatively related to nurses' intention to leave a hospital ($r = -.23$ and $-.31$, $p < .001$). Nurse identity is negatively related to nurses' intention to leave the nursing profession ($r = -.38$, $p < .001$). Intention to leave a hospital is positively related to nurses' intention to leave the profession ($r = .76$, $p < .001$).

Conclusion

The findings provide novel insights for retaining nurses. Nurse managers could use strategies such as including nurses in making workplace decisions and encouraging them to personalize their workspace.

Implications for Nursing Management

Nurse managers can enhance nurses' self-efficacy and sense of 'having a place' to retain nurses in hospitals, while enhancing nurse identity to retain nurses in the profession.

Document 57 of 100

Time to re-envisage integrity among nurse leaders

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ABSTRACT (ENGLISH)

Aim

This paper highlights integrity as a central tenet in the journey of ethical leadership among nurse leaders and dialogue as a way of working within integrity.

Background



Nurse leaders play a critical role in ensuring ethically sound, safe patient care by supporting staff and fostering positive working environments. Although there is an abundance of literature on leadership, no universally accepted leadership theory exists. Hence, it can be difficult to apply leadership theory and principals to real-life clinical practice.

Evaluation

From the literature, it is evident that integrity is a crucial aspect of leadership. This paper proposes suggestions for nurturing integrity and fostering open and honest dialogue.

Key issues

Globally, public health care is complex and evolving and effective nursing leadership is paramount to meet public health needs and support health care systems.

Conclusion

This paper explores integrity with leadership, re-envisaging personal and professional integrity as a portal to authentic leadership, which has human relationships and dialogue at its core.

Implications for Nursing Management

Nurse leaders need support in guiding the nursing profession and promoting ethically sound patient care. The true nature of leadership is dialogue, and nurturing a culture of listening and openness at different levels within an organisation is crucial.

Document 58 of 100

Impact of nurses' emotional labour on job stress and emotional exhaustion amid COVID-19: The role of instrumental support and coaching leadership as moderators

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ABSTRACT (ENGLISH)

Aim

This study examines Pakistan nurses' emotional labour and stress in health care emergencies, specifically their emotional exhaustion and availability of support of organization and management to alleviate the effects.

Background

As COVID-19 pandemic has been declared a global outbreak and many countries have enacted medical emergencies, this has increased job demands and expected desired emotional expressions from frontline workers. Such high levels of job demand contribute to various stress reactions among employees.

Methods

Authors applied a longitudinal design, using an experimental approach, to collect data from 319 nurses serving in 107 government hospitals in Pakistan. The authors surveyed nurses at two time points with the interval of 3 months by using an online questionnaire tool. At one time, they asked nurses to report on emotional labour, stress and

exhaustion. In the second phase, after providing supports (during interval phase) at different levels, the authors repeated the same scales from same participants in addition to instrumental support and coaching leadership. Data were processed using SPSS-Amos for elementary analysis and SPSS-process macro software for robustness and hypotheses testing.

Results

The findings indicate that job stress fully mediates the relationship between surface acting and emotional exhaustion in controlled phase and partially mediates in intervention phase. Furthermore, in intervention phase, instrumental support moderates and alleviates positive effects of emotional labour on job stress, and coaching leadership moderates and lessens positive effects of job stress on emotional exhaustion.

Conclusion

This research concludes that health care organizations can alleviate emotional exhaustion caused by emotional labour and job stress amid emergencies by providing support at different levels: organizational and managerial. However, the effectiveness of these supports depends on high to low levels.

Implications for Nursing Management

This study demonstrates that to handle and support emotional labour and job stress to avoid emotional exhaustion in health care emergencies, organizational supports matter. Support at organizational level can include instrumental support. At managerial level, holding a coaching leadership style can foster external facets of management while uplifting the internal support qualities of confidence and self-awareness that improve the individuals' ability to lead; work with paradox and uncertainty.

Document 59 of 100

Nursing management of the critical thinking and care quality of ICU nurses: A cross-sectional study

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ABSTRACT (ENGLISH)

Aim

To explore the effectiveness of a digital learning management system in enhancing intensive care unit nurses' critical care knowledge and critical thinking tendency.

Background

Learning intensive care unit knowledge and skills is essential for the continuing education of nurses, and impacts patient health outcomes. Enhancing intensive care unit nurses' critical care abilities is a medical care quality concern in clinical practice.

Methods

A cross-sectional study was conducted with 212 participants to investigate the effects of a digital learning system on care quality.

Results

After the implementation of the digital learning system, intensive care unit nurses' critical care knowledge and critical thinking skills increased significantly. High-level nurses had higher critical thinking scores. All participants associated critical care knowledge with improved quality of care.

Conclusion

The digital learning management system enhanced intensive care unit nurses' critical care knowledge. Optimizing nursing care safety and quality requires that nursing staff to be at an adequate level, which improves their critical care ability.

Implications for Nursing Management

A well-designed digital learning management system with structured classes may allow intensive care unit nurses to learn effectively and can be used for continuing education. These results are of interest to nursing management staff who want to invest in the continued professional development of intensive care unit nurses to improve critical care knowledge, critical thinking skills, care quality, and health care value.

Document 60 of 100

Guiding nurse managers in supporting nurses in dealing with the ethical challenge of caring

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ABSTRACT (ENGLISH)

Aim(s)

This study aims to present the theory of resigning in supporting nurse managers in dealing with nurses' ethical challenge of caring.

Background

In a COVID-19 era, nurses continue to be ethically challenged in maintaining safe patient care. Nurse managers play a critical role supporting staff in responding to the complexities of working in, under resourced environments.

Evaluation

Literature suggests care delivery is compromised in times of staff shortages, lack of resources and increased demands on nurses. Examining caring behaviours through the theoretical lens of the theory of resigning enables nurse managers to understand nurses' behaviours, cultivating supportive working environments.

Key issue(s)

Nurses strive to provide quality, safe care but are sometimes unable to give the level or type of care they wish, due to the presence of constraints.

Conclusion(s)

This paper provides suggestions for nurse managers in dealing with nurses' daily moral distress arising from working within constraints while still trying to provide safe care.

Implications for Nursing Management

Nurse managers need to develop greater insights into the ethical dilemmas nurses experience and support them to temporarily realign beliefs and values, while continuing to work within constraints. Understanding ethical dilemmas of

Effect of a group-based acceptance and commitment therapy programme on the mental health of clinical nurses during the COVID-19 sporadic outbreak period

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

To develop and implement of a group-based acceptance and commitment therapy programme in helping clinical nurses with mental health problems during the sporadic COVID-19 outbreak period.

Background

In the face of the continuing COVID-19 pandemic, clinical nurses have a high risk of mental health issues.

Methods

A quasi-experimental design was used. Two hundred twenty-six nurses were recruited from four general hospitals to receive 10 sessions of acceptance and commitment therapy programme. The Symptom Checklist-90, Perceived Stress Scale and Connor–Davidson Resilience Scale were used to assess nurses' mental health symptom, perceived stress and psychological resilience at pre-intervention and 4-week post-intervention.

Results

The mean attendance sessions was 5.78. The Symptom Checklist-90 score was significantly lower at post-intervention than pre-intervention ($P < 0.01$), and there were no significant changes of perceived stress and psychological resilience. There were significant correlations among the changed rates of mental health, perceived stress and psychological resilience ($P < 0.01$).

Conclusion

The acceptance and commitment therapy programme was effective in relieving mental health symptoms for clinical nurses and could protect clinical nurses' perceived stress and psychological resilience. However, a randomized controlled trial is needed to confirm the findings.

Implication for Nursing Management

To facilitate clinical nurses' psychological health in crisis situation, nursing management team should provide and allocated appropriate resources to support the healthcare providers.

Toxic leadership behaviour of nurse managers on perceived job satisfaction and productivity of nursing workforce in sub-Saharan Ghana: A multi-centre cross-sectional study

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ABSTRACT (ENGLISH)

Aim

This study aimed at assessing the nature and effect of toxic leadership of nurse managers on the perceived job satisfaction and productivity of the nursing workforce.

Background

Nursing job outcomes such as job satisfaction and productivity are influenced by various factors in the nursing practice environment including leadership. Due to rising health care expenses and depleting material resources, the productivity of nurses that is expected to improve the efficiency of health care organizations is mostly low. Managers' toxic behaviour towards nurses affects their job satisfaction and subsequently low productivity.

Method

A multi-centre, cross-sectional descriptive design was used. Validated tools were used to collect data from participants, and data were analysed using descriptive, correlation, and hierarchical linear regressions.

Results

Registered nurses appraised the leadership behaviour of nurse managers to be toxic, with most managers exhibiting narcissistic leadership behaviour. Though all the components of toxic leadership behaviour of manager and job satisfaction were associated with the perceived productivity of the nurses; only intemperate leadership behaviour of the managers ($\beta = -.301, p < .005$), and job satisfaction ($\beta = .296, p < .001$) significantly predicted perceived productivity among nurses ($R^2 = .238, F_{(7, 922)} = 41.088, p < .001$).

Conclusion

Nurse managers' leadership behaviours were toxic. Nurses' job satisfaction and all components of managers' toxic leadership behaviour influenced productivity.

Implications for Nursing Management

There should be a policy developed to guide the creation and maintenance of efficient nursing leadership to enhance job satisfaction and productivity among nurses.

Recruitment of internationally trained nurses: Time for a global model for shared responsibility

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ABSTRACT (ENGLISH)

The World Health Organization (WHO) has highlighted an estimated shortfall of about 6 million nurses worldwide (Organization, 2020). This nursing shortage threatens the quality, effectiveness, and sustainability of health care systems and is expected to increase post-COVID, particularly in low- and middle-income countries (Aluttis et al., 2014; Buchan & Catton, 2020; Shaffer et al., 2020). The global mobility of nurses and associated recruitment competition compounds this problem (Aluttis et al., 2014; Buchan & Catton, 2020; Shaffer et al., 2020), and low-income countries may be disproportionately impacted by nurses migrating for better opportunities (Rolle Sands et al., 2020; Shaffer et al., 2020). Generally, health care professionals, especially nurses and physicians, are highly mobile and global. A deeper understanding of global health workforce mobility is necessary to mitigate shortages and ensure adequately staffed health care systems. This paper explores current global trends in nurse mobility and offers insights into challenges and solutions to ensure adequate staffing and mitigate shortages in the post-COVID era.

Document 64 of 100

Moral distress and moral injury and their interplay as a challenge for leadership and management: The case of Croatia

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ABSTRACT (ENGLISH)

Aim

We aim to investigate the interplay between moral distress and moral injury among nurses working in palliative and oncology wards and to assess its impact on nursing leadership.

Background

The past 2 years have been particularly challenging for nurses and nursing leaders in Croatia. The coronavirus disease pandemic and the subsequent earthquakes in the country significantly impacted the work of nurses. Moral distress has been well-known to nursing professionals, but recent studies warn about confounding it with moral injury and their possible intercorrelation, deserving more attention from an empirical perspective.

Methods

We conducted quantitative cross-sectional research in palliative and oncology wards in 11 Croatian health care facilities on 162 nurses, using a questionnaire and paper/pencil method over 6 months (1 January 2021 to 1 July 2021). The questionnaire consisted of three parts: sociodemographic data, a Measure of moral distress for health care professionals and Moral injury symptoms scale for health care professionals. The research protocol was approved by the Ethics committee of the Catholic University of Croatia under no. 1-21-04.

Results

The findings of our study demonstrated that the current average levels of moral distress might be characterized as low, but the moral injury symptoms are severe. The results of our study bring interesting novel insights, such as the strong correlation between moral distress and moral injury, but also in terms of nurses' decision to leave or consider leaving their position. The nurses who experience higher levels of moral distress experience severe symptoms of moral injury, while nurses who score higher in moral distress and moral injury have left, considered or consider leaving their positions.

Conclusions

This study highlighted the need to pay attention to the emerging phenomenon of moral injury that has been unaddressed and overshadowed by moral distress, their intercorrelation, and the importance of addressing them timely and adequately within health care organizations with their leadership and management.

Implications for Nursing Management

These findings provide a significant insight that may assist nursing managers and leaders to act and respond in time to develop various prevention and mitigation measures and help resolve situations leading to moral distress or moral injury.

Document 65 of 100

Effects of job embeddedness and nursing working environment on turnover intention among trauma centre nurses: A cross-sectional study

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ABSTRACT (ENGLISH)

Aim

To investigate the effects of job embeddedness and nursing working environment on trauma centre nurses' turnover intention.

Background

Trauma centre nurses have higher average turnover intention than hospital nurses. However, factors that increase the turnover intention of trauma centre nurses remain unexplored.

Methods

This cross-sectional study was conducted from August to October 2019, with 120 trauma centre nurses working at three trauma centres in B, D and U cities using measures of demographic characteristics, job embeddedness, nursing working environment and turnover intention.

Results

The mean turnover intention score was 3.60/5 points. There were significant correlations among turnover intention and fit, sacrifice, foundation for quality nursing, ability and leadership of nursing managers, cooperation of nurses and doctors, nurse participation in hospital management and sufficient manpower and material support. Turnover intention was predicted by nurse participation in hospital management, gender, clinical experience and fit, which explained 54%.

Conclusions

Factors that influence nurses' turnover intention at trauma centres were gender, clinical experience, job fit and, especially, nurses' participation in hospital management, which had the most effect on the nursing working environment.

Implications for Nursing Management

To expand participation of trauma centre nurses, hospital management systems and organisational culture need improvement.

Document 66 of 100

Global prevalence of presenteeism in the nursing workforce: A meta-analysis of 28 studies from 14 countries

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aims

This study aimed to estimate the overall presenteeism prevalence in the nursing workforce.

Background

Nurses are more prone to presenteeism, which is associated with adverse outcomes for both nurses and patients. However, comprehensive information on the global prevalence of presenteeism in nursing workforce is lacking.

Evaluation

Seven databases were systematically searched without year or language restrictions in July 2021. Studies that reported the prevalence rate of presenteeism among nurses were included. A meta-analysis was performed using a random-effects model.

Key issues

A total of 28 studies from 14 countries were included. The overall pooled estimate of presenteeism prevalence among nursing workforce was 49.2% (95% CI: 0.411, 0.574). Subgroup analyses showed that the prevalence of presenteeism was higher when the reporting time frame was >1 month and <1 year compared with ≤1 month or ≥1 year.

Conclusion

The results of this meta-analysis showed the substantial prevalence of presenteeism in the nursing workforce with variations across different reporting time frames.

Implication for Nursing Management

The findings can be used to support nurse managers, administrators and policymakers in recognizing the prevalence of presenteeism and developing relevant prevention strategies against presenteeism among global nursing workforce.

Document 67 of 100

Improvement of the psychosocial support for frontline nurses in public hospitals during COVID-19 pandemic

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ABSTRACT (ENGLISH)

Aim

The aim of this study was to explore and describe the psychosocial support for frontline nurses during the COVID-19 pandemic in the Tshwane district, Gauteng Province, South Africa.

Background

The COVID-19 pandemic has brought a lot of psychosocial distress for frontline nurses taking care of COVID-19 patients. The frontline nurses were scared of being infected with COVID-19, or exposing their families and loved ones to the risk of infection. A high number of nurses were infected with COVID-19, and some died due to the virus.

Evaluation

This study followed a qualitative, explorative, and descriptive research design. Data were collected using semi-structured interviews and individual interviews were conducted. Seventeen participants, who consisted of all categories of nurses taking care of COVID-19 patients, were interviewed until data saturation was reached. Non-

probability sampling method was used as a technique to select the participants. Data were analysed using Tesch's method of open coding.

Key issues

The following five themes are identified: (1) acknowledgement, appreciation, and recognition of frontline nurses, (2) conducive managerial practices, (3) debriefing and training of frontline nurses, (4) human resources support, and (5) psychological and social support for frontline nurses and their families.

Conclusion

The implementation of the psychosocial support for frontline nurses taking care of COVID-19 patients is critical in improving patient care.

Implications for nursing management

The findings of this study should alert nurse managers to plan the best way to support frontline nurses caring for COVID-19 patients.

Document 68 of 100

Clinical competency and psychological empowerment among ICU nurses caring for COVID-19 patients: A cross-sectional survey study

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ABSTRACT (ENGLISH)

Aim

This study aimed to determine clinical competency and psychological empowerment among ICU nurses caring for COVID-19 patients.

Background

Nurses need clinical competency (skills pertaining to knowledge, reasoning, emotions and communication) and psychological empowerment (regard for one's organisational role and efforts) to deliver quality care.

Methods

This cross-sectional study was conducted with 207 nurses working in ICUs in Iran. A clinical competency survey instrument consisting of basic demographic questions and the Spreitzer psychological empowerment questionnaire was completed online. Descriptive and inferential statistics were used to analyse the data in SPSS software version 13 to address the primary research question.

Results

There was a significant positive relationship between clinical competency and psychological empowerment ($r = .55$, $p < .001$). Clinical competency had a significant positive relationship with work experiences ($r = .17$, $p = .01$).

Conclusion

Clinical competency has been tied to nurse health and quality of care. Given the significant positive relationship between clinical competency and psychological empowerment, attention must be given to ways to psychologically empower nurses.

Implications for Nursing Management

Nursing managers can consider the promotion of psychological empowerment related to its significant positive relationship to clinical competency. Psychological empowerment can be bolstered through the promotion of servant leadership, organisational justice and empowering leadership practices.

Document 69 of 100

Status and associations of nursing practice environments in intensive care units: A cross-sectional study in China

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Objective

The objective of this study is to investigate the status and associations of nursing practice environments in intensive care units of tertiary hospitals and provide suggestions for improvement.

Background

Nursing shortage is an urgent global problem and a concern in China. Intensive care unit nurses have been reported to have one of the highest rates of burnout; however, their comprehensive perceptions of nursing practice environments have not yet been examined.

Methods

The Nursing Practice Environment Scale was used to conduct a questionnaire-based survey of 1,523 intensive care unit nurses from 22 tertiary hospitals in China. The data collection was conducted in 2020.

Results

The overall score for the nursing practice environment was 77.042 ± 19.682 (where 100 was the highest possible score). The three highest scoring dimensions were quality management, clinical nursing professionalism and professional improvement, whereas the three lowest-scoring dimensions were hospital management participation, remuneration package and social status. Educational background, position, gender and hospital type were significantly associated with nurses' satisfaction with the working environment.

Conclusion

Chinese nurses in the intensive care units of tertiary hospitals reported relatively satisfactory nursing practice environments, but the scale scores in dimensions such as hospital management participation, remuneration package and social status remained low.

Implications for nursing management

Understanding the status and associations of the nursing practice environment in intensive care units provides

evidence that new policies are needed. Furthermore, managers are responsible for supervising and ensuring that nursing practice environments meet the criteria necessary to improve job satisfaction.

Document 70 of 100

Work readiness: Its determinants and association with work-related outcomes among new graduate nurses

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ABSTRACT (ENGLISH)

Aims

This study aimed to identify determinants of work readiness and to assess the influences of work readiness on work-related outcomes in graduate nurses.

Background

Higher work readiness facilitates smoother role transitions of new graduate nurses. However, determinants of work readiness had not been fully examined. In addition, the relationships between work readiness and work-related outcomes, such as coping self-efficacy and occupational commitment, are also crucial but had not been assessed.

Methods

We recruited 794 graduate nurses and assessed their work readiness before working as nurses. After they commenced their work, we assessed their occupational commitment, coping self-efficacy and intention to remain. All assessments were conducted online.

Results

There were 728 (92%) female respondents. The mean scores and standard deviation (SD) of work readiness, coping self-efficacy, occupational commitment and intention to remain were 261.51 (SD: 45.40), 30.30 (SD: 6.13), 81.65 (SD: 11.56) and 11.01 (SD: 2.36), respectively. Based on a regression analysis, determinants of work readiness were positive school climate, student leadership experience, nursing as the primary choice of discipline and perceived influences of COVID-19 on the honorability of being a nurse and the willingness to be a nurse ($p < .001$). Moreover, after adjusted by all demographics and characteristics variables, higher work readiness would result in higher coping self-efficacy (estimated coefficient=0.06, $p < .001$), occupational commitment (estimated coefficient=0.06, $p < .001$) and intention to remain (estimated coefficient=0.01, $p = .002$).

Conclusion

Work readiness is a composite concept affected by psychosocial and environmental factors, which can predict new graduate nurses' future self-efficacy, occupational commitment and intention to remain.

Implications for Nursing Management

The management of new graduate nurses when they begin to work could target their work readiness. Transition programmes that consider our identified determinants can be provided to those who show lower work readiness.

Nurse entrepreneurs' ethical concerns: A qualitative inquiry of the pursuit of opportunity

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ABSTRACT (ENGLISH)

Aim

This study explores how nurse entrepreneurs' ethical concerns influence their pursuit of entrepreneurial opportunities.

Background

Nurse entrepreneurs break norms to challenge the status quo in health care, and entrepreneurship in health care is associated with dubious morals. Thus, nurse entrepreneurs have struggled to gain support and acceptance for their work.

Method

This qualitative study relies on in-depth, narrative interviews with 11 nurse entrepreneurs developing nine different ventures. The interviews are analysed using theoretical thematic analysis, leaning on the ethics of care theory.

Results

The analysis reveals two stages of ethical concerns: (1) ethical concerns leading to an entrepreneurial opportunity and (2) ethical concerns while engaged in an opportunity formation.

Conclusion

This study shows that nurse entrepreneurs respond to health care issues in line with ethics of care and the ICN Code of Ethics. Nurse entrepreneurs are particularly concerned with doing no harm when developing their ideas and this fear could potentially deter nurses from acting entrepreneurially. 'The mantra of caring ethics' is a more suitable ethical guideline for (future) nurse entrepreneurs.

Implications for Nursing Management

This study has implications for the moral image of nurse entrepreneurs. This is important for nursing managers, as several of them are nurse entrepreneurs themselves or employ and lead nurses who wish to pursue entrepreneurial opportunities to improve health care.

The influence of professional identity on work engagement among nurses working in nursing homes in China

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ABSTRACT (ENGLISH)

Aim

To assess the influence of professional identity on work engagement among nurses working in nursing homes in China.

Background

China is faced with an increasingly ageing population. There is a shortage of adequately trained nursing personnel and a high turnover rate among nurses. Work engagement is a key factor in improving nurses' performance and improving professional identity is critical to increase work productivity and satisfaction.

Methods

We conducted a cross-sectional survey of 272 nurses working in nursing homes. And the data were analysed by descriptive analyses, univariate analysis and Multiple regression analyses.

Results

The overall average work engagement score was 3.99 ± 1.04 . Professional identity was the only factor that significantly influenced the 'vigour' and 'absorption' of nurses. Age, ethnicity and professional identity were significant predictors of 'dedication'.

Conclusions

A positive professional identity can lead to a better work engagement among nurses working in nursing homes in China.

Implications for Nursing Management

To enhance the work engagement of nurses working in nursing homes, nursing leaders should create a respectful and equal work environment, create a favourable image of the industry and the profession and strengthen training to improve the professional identity.

Document 73 of 100

The Covid-19 pandemic and cultural competence: Global implications for managers, nurses and healthcare workers during major health disasters and emergencies

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ABSTRACT (ENGLISH)

On 24 March 2022, the European Transcultural Nursing Association (ETNA) delivered its first virtual conference titled 'Global nursing, midwifery and social care responses and challenges to Covid-19 pandemic during 2020-21'. As the president of ETNA, I invited speakers from every continent to address the focus of the conference from the lens of their national culture, emphasizing challenges and responses of their choice. It was no surprise that they all spoke about the enormity of this health catastrophe that caught everyone unprepared. They all spoke about the confusion and the lack of guidance and resources, but surprisingly, they all spoke about the existence of inequalities, discrimination and exclusion, all of which are inextricably linked to cultural competence (<http://europeantransculturalnurses.eu/conference/>).

Document 74 of 100

Home-based care nurses' lived experiences and perceived competency needs: A phenomenological study

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ABSTRACT (ENGLISH)

Aim

The aim of this work is to explore home-based care nurses' practice experiences in order to understand their competency and needs.

Background

The demand for home-based care is increasing in many countries. Nurses perform a broader range of competencies with a significant degree of independence in home-based care. However, little is known about nurses' day-to-day experiences and their perceived competency and needs.

Methods

The study adopted a descriptive phenomenological design. Individual interviews with 17 nurses from four service

providers were performed. Colaizzi's analysis method was used for data analysis. Reflective diary approaches were adopted to guide the bracketing process.

Results

Following data analysis, four themes emerged: (1) Full spectrum of patient care, (2) autonomy in nursing practice, (3) beliefs in person-centred care and (4) enhancing supportive systems.

Conclusion

Findings suggest a need for better understanding of the broader scope of nursing practice in home-based care to improve nurses' transition experience. This includes performing autonomous assessments, making decisions and managing social related matters.

Implications for nursing management

It should be a priority to identify a clear scope of practices in home-based nursing care in order for organizations to improve nurses' readiness for and experiences in home-based care. Nursing leaders should also expand practical experience opportunities in home-based care to transitioning nurses with supportive workplace systems.

Document 75 of 100

Nurse leaders' work-related well-being—Relationships to a superior's transformational leadership style and structural empowerment

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ABSTRACT (ENGLISH)

Aims

To describe how nurse leaders' work-related well-being is related to a superior's transformational leadership style and structural empowerment.

Background

The demanding role of nurse leader means that these professionals experience emotional exhaustion and challenges with work-life balance. They can also be influenced by the leadership style of their own superiors.

Methods

A cross-sectional questionnaire using two internationally validated scales, namely, the Transformational Leadership Scale and Conditions For Work Effectiveness Questionnaire-II, was used. Statistical methods were applied during data analysis.

Results

A total of 155 nurse leaders participated completed the questionnaire. The participants' work-related well-being scores ranged from 8 to 10. The participants felt that their superiors employ transformational leadership. The dimension of feedback and rewards received the lowest scores, whereas the nurse leaders reported moderate overall empowerment levels. A nurse leader's work-related well-being was positively correlated with structural empowerment and their superior's leadership style.

Conclusions

Despite the fact that nurse leaders reported relatively high levels of work-related well-being, more attention should be paid on the feedback and rewards and on the support of superiors as they positively influence the work-related well-being.

Implications for Nursing Management

Transformational leadership should be supported in organisations and through education as it strengthens work-related well-being and structural empowerment of nurse leaders.

Document 76 of 100

The relationship between organizational ethical climate and components of nursing error reporting in selected hospitals of Tehran University of Medical Sciences in 2020

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ABSTRACT (ENGLISH)

Aim

The aim of this study was to investigate the relationship between organizational ethical climate and components of nursing error reporting in selected hospitals of Tehran University of Medical Sciences in 2020.

Background

Error reporting is considered as a strategic indicator for error prevention.

Method

This is a cross-sectional and correlational study that was conducted on 336 samples who had been selected by stratified random sampling method. Data were analysed by SPSS-16 software, using descriptive and inferential statistics such as Mann–Whitney *U* and Kruskal–Wallis tests.

Results

The results of this study showed a significant and direct relationship between the organizational ethical climate and components of nursing error reporting ($p < .05$).

Conclusion

It is imperative for nursing managers in all management levels to remove barriers to nursing error reporting by using ethical climate strategies.

Implications for Nursing Management

It is difficult to obtain accurate statistics on medical errors and their causes in developing countries; therefore, nursing managers should provide the necessary conditions for formal, principled, and complete reporting of nursing errors for nurses without causing fear of punishment.

The impact of COVID-19 on long-term care facilities and their staff in Israel: Results from a mixed methods study

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ABSTRACT (ENGLISH)

Aim

We examined the impact of COVID-19 regarding organizational and management issues at Israeli long-term care facilities.

Background

Residents in facilities were very vulnerable to significant disease and mortality during COVID-19.

Methods

A survey of 52 facilities in Israel was conducted in 2020, consisting of closed- and open-ended questions. Mixed methods were used to analyze data both quantitatively and qualitatively.

Results

Three main effects emerged: worsened financial status of long-term-care facilities resulting from high expenditures for preventive measures and reduced revenue due to deaths and fewer resident admissions, increased workload due to decreased workforce and additional duties, and negative mental health effects on staff because of increased workload and the conflict between maintaining good clinical practice and following COVID-19 regulations.

Conclusion

The development of government directives needs to take into account potential conflicts between the directives and quality care principles and to provide a balanced approach that assures humane care. Facilities and their staff lacked adequate pandemic-related guidance and support.

Implications for Nursing Management

The results highlight the need to address staff shortages and training, to provide more support and clearer guidance to facilities and their staff, and to devise a framework and strategies for future health crises.

Nursing leadership from crisis to postpandemic

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ABSTRACT (ENGLISH)

For more than 2 years, health care systems all over the world have been struggling with the COVID-19 pandemic. Nurse leaders and their staff have had to make rapid decisions in unprecedented situations and swiftly change work programs and procedures. It has been a time of crisis leadership (Turnipseed & VandeWaa, 2022).

Document 79 of 100

Revisiting the roles of neonatal intensive care unit nurses towards vision 2030 of Saudi Arabia: A descriptive phenomenological study

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

The study aimed to revisit the roles of nurses working in the neonatal intensive care unit in a specific university hospital located in the Eastern Region to pursue Saudi Vision 2030—to provide excellent quality of life and well-being for its national citizens.

Background

The neonatal intensive care unit is one of the most crucial hospital units caring for high-risk neonates with conditions like pre- and post-maturity and congenital anomalies. The nurses' experiences are vital to achieving the Saudi Vision 2030's Health Sector Transformation Strategy.

Methods

Descriptive Phenomenology. Data collection utilized semi-structured individual interviews with sixteen (16) neonatal intensive care unit nurses for 10 months from March 2019 to January 2020. Colaizzi Method was used in data analysis, and the COREQ criteria list was utilized in data reporting.

Results

Three major themes emerged from the participants' narratives: (1) 'mokadem alreayah alshamela': holistic caregiver;

(2) 'muzawed malomat': information provider; and (3) 'yad almusaadah': helping hand.

Conclusion

Revisiting the various roles will align neonatal intensive care unit nurses' critical characteristics towards Saudi Vision 2030, focusing solely on improving service providers' quality and safety principles and skills.

Implication for Nursing Management

Revisiting the roles of the neonatal intensive care unit nurses would provide an alignment to the goals and objectives of the future initiatives of Saudi Arabia towards its Vision 2030.

Document 80 of 100

Using the theory of planned behaviour to explain junior nurses' and final-year student nurses' intention to care for COVID-19 patients in China: A multisite cross-sectional study

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ABSTRACT (ENGLISH)

Aim

To explore junior nurses' and final-year student nurses' intention to care for COVID-19 patients amidst the Delta COVID-19 variant outbreak in China using the theory of planned behaviour (TPB) as a framework.

Background

The COVID-19 pandemic has intensified global nursing shortage. Junior nurses and final-year student nurses represent the backbone of the future frontline nursing workforce. The TPB is a valid theoretical model for predicting nurses' caring behaviours.

Methods

A 47-item self-administered questionnaire was disseminated online to a convenience sample of 547 junior nurses and final-year student nurses located in 13 regions across mainland China.

Results

Approximately 63.4% of the participants intended to care for COVID-19 patients voluntarily and 65.6% by non-voluntary assignment. The TPB model significantly predicted 45% of the variance in behavioural intention, subjective norms being the strongest predictor. Gender, vaccination status and ethical perceptions regarding frontline work significantly correlated with the intention to provide care.

Conclusions

Our findings highlight the importance of social, organisational and family support underpinning future junior nurses' professional commitment in times of public health crisis.

Implications for nursing management

Pandemic-tailored workplace training programmes for nurses/student nurses that emphasize on self-care and ethical

issue discussions are warranted. Hospital managers should collaborate with community partners to offer additional family support for nurses in need.

Document 81 of 100

Virtue ethics in health care teams; its time has come: Review of the nursing virtue ethics literature

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ABSTRACT (ENGLISH)

Aim

To summarize and evaluate the nursing virtue ethics literature, examine how virtue ethics has been applied to health care teams, offer a new framework to guide understanding and development of virtuous health care teams and offer recommendations to nurse leaders.

Background

With the unprecedented levels of incivility and turnover in the post-COVID-19 world, virtue ethics may provide an innovative approach for nursing leaders working to rebuild healthy practice environments.

Evaluation

An integrative review yielded articles from eight databases using PRISMA guidelines. Level of evidence and quality were assessed using the Johns Hopkins tools.

Key Issues

Virtue ethics has been of interest to the health care community predominantly as a concept. Most articles focused on debating whether virtue ethics belongs in nursing. Virtue ethics offers a creative strategy for leaders to attract and retain nurses.

Conclusion

There is a dearth of research on virtue ethics and nursing. One study empirically uncovered and validated a framework for virtue ethics in health care teams.

Implications for Nursing Management

To rebuild strong health care teams, nurse leaders can model virtue ethics using an empirically derived framework while coaching their teams to do the same. Doing so holds the promise of reengaging staff and rebuilding healthy practice environments.

Document 82 of 100

Promoting nurses' and midwives' ethical responsibilities towards vulnerable people: An alignment of research and clinical practice

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

To stimulate discussion and debate about the inclusion of vulnerable populations in primary research to inform practice change and improve health outcomes.

Background

Current research practices to safeguard vulnerable people from potential harms related to power imbalances may in fact limit the generation of evidence-based practice.

Evaluation

The authors draw on their experience working and researching with a recognized group of vulnerable people, incarcerated pregnant women, to provide insight into the application of ethics in both research and clinical practice. In a novel approach, the ethical principles are presented in both contexts, articulating the synergies between them. Suggestions are presented for how individuals, managers and organizations may improve research opportunities for clinical practitioners and enhance the engagement of vulnerable people to contribute to meaningful practice and policy change.

Key Issues

Ethical practice guidelines may limit the ability to create meaningful change for vulnerable populations, who need authentic system change to achieve good health outcomes.

Conclusion

Inclusive research and practice are essential to ensuring a strengths-based approach to healthcare and addressing health needs of the whole population. Health systems and models of care recognizing the diverse lives and health needs of the broader population demand practical, sustainable support from clinical managers.

Implications for Nursing Management

Practical suggestions for clinical managers to support point of care research is provided, embedding vulnerable voices in policy, practice development and care provision.

Document 83 of 100

Nurse managers' challenges and opportunities in the COVID-19 pandemic crisis: A qualitative descriptive study

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ABSTRACT (ENGLISH)

Aim

The study was conducted to understand the experiences of nurse managers with regard to the difficulties and opportunities they encountered during the pandemic.

Background

Although many studies have been carried out to understand how nurses were affected in the COVID-19 pandemic, there are few studies that treat the experiences of nurse managers.

Methods

In this qualitative descriptive study with 19 nurse managers working in pandemic management at a university hospital in Turkey during the first three waves of the pandemic, data were collected between April and July 2021 using the semi-structured interview method. Content analysis was performed to analyse the data.

Results

Six themes were identified with respect to the experiences of nurse managers during the pandemic. These themes were initial reactions to the crisis, ineffective crisis management, excessive workload, the moral burden in decision-making, support of colleagues and other multidisciplinary team and nurse manager empowerment.

Conclusions

The nurse managers had difficulties in their managerial roles during the pandemic. However, they also viewed the crisis as an opportunity because they were able to note the deficiencies in management at all levels of the hospital and their leadership and decision-making roles took on more importance.

Implications for nursing management

Nurse managers may use the results of this study to be prepared for the continuing COVID-19 pandemic and any other emergency circumstances that they may have to face in the future.

Document 84 of 100

Balancing honesty and benevolence in dementia care: A commentary on therapeutic lies and codes of ethics

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim(s)

This commentary suggests that within the context of dementia care, the revision of nursing codes of ethics to accommodate the acceptability of therapeutic lies under limited circumstances may be appropriate.

Background

Therapeutic lies (a prosocial lie) are told in the best interests of a person with dementia, to avoid distress or harm that may be derived from an act of truth-telling. However, their acceptability remains a contentious issue and is not reflected in nursing codes.

Evaluation

Nursing codes are reviewed in conjunction with empirical research on prosocial and therapeutic lies and how nurses interpret and implement codes.

Key issues

Prosocial lies are perceived to be ethically preferable when truth-telling causes unnecessary harm. However, nurses may feel conflicted using therapeutic lies believing honesty to be obligatory.

Conclusion

Codes may benefit from revision, by acknowledging the permissibility of therapeutic lies under limited circumstances. This may assist nurses with ethical decision-making and potentially reduce distress in this challenging area of practice.

Implications for Nursing Management

It may be beneficial for nurse managers to initiate discussions with staff regarding unnecessary harm and therapeutic lies. Nurse managers may also wish to advocate for the revision of codes as suggested in the commentary.

Document 85 of 100

Negative and positive psychological experience of frontline nurses in combatting COVID-19: A qualitative study

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aims

To qualitatively explore potential experience among frontline nurses who had been fighting against the COVID-19 infection since the outbreak.

Background

Disasters are often sudden and uncertain. Since the COVID-19 outbreak in Wuhan city, local frontline nurses had been responsible for treatment of COVID-19 for several months. Qualitative study was required to assess complex multi-component psychological experiences among frontline nurses.

Methods

Twenty local frontline nurses were recruited from a designated hospital of COVID-19 treatment. We conducted semi-structured interview using phenomenological method. Descriptive phenomenological method was applied for thematic analysis.

Results

Twenty female frontline nurses (aged 24 to 43 years old) were interviewed. Two broader themes, negative and positive, were identified. Negative experience included refusal and helplessness (refusal to work at frontline, shortage of confidence in working and helplessness), fear and anxiety, excessive miss, and other health issues. Positive experience included improved interpersonal relationship, sublimation of personal faith and strength, changes in understanding meaning of life and new possibility.

Conclusion

Both positive and negative psychological response were observed, which can provide evidence based clues for making essential strategies and policy.

Implications for Nursing Management

Understand subjective experience of frontline nurses can establish evidence for development of effective psychological intervention. Nursing administrator should consider the nurses' psychological experience comprehensively to promote psychological growth and lower post-traumatic psychological burden.

Document 86 of 100

The importance of management in promoting hospital staff's mental well-being during the COVID-19 pandemic—A survey

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ABSTRACT (ENGLISH)

Aim

To describe hospital staff's experiences of management actions to promote their mental well-being during the COVID-19 pandemic. Mental well-being was examined on the basis of four entities: level of anxiety, support and encouragement from the manager, and the opportunity to discuss concerns about COVID-19 with the manager.

Background

The workload of COVID-19 affects the mental well-being of staff. However, there is limited data on managers' actions to promote their mental well-being during the pandemic.

Methods

A cross-sectional study was used to collect survey data ($n=1995$) among staff working in two specialized medical

care hospitals. To gain deeper understanding related issues, the survey included open questions, which were answered by 178 participants.

Results

The results indicate that those staff who felt they had received support, encouragement, and the opportunity to discuss of COVID-19 worries with a manager experienced less anxiety.

Conclusions

The study provides an insight into managers' actions to promote staff's mental well-being during the COVID-19 pandemic.

Implications for Nursing Management

The manager's actions have a significant effect on the anxiety levels of staff. During the pandemic, the well-being of staff is a priority that should be visible to both hospital administrators and policymakers.

Document 87 of 100

A year after COVID-19: Its impact on nurses' psychological well-being

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ABSTRACT (ENGLISH)

Background

Nurses' burnout and psychological well-being are a significant concern during the pandemic.

Aims

The aim of this study is to (i) examine the level of burnout, anxiety, depression, perceived stress and self-rated health for nurses at two time-points, 2020 and 2021, and (ii) examine the socio-demographic characteristics, work-related factors and perceived workplace support factors in relation to the level of burnout.

Methods

This is a cross-sectional study with a longitudinal approach. A convenience sample of registered nurses who worked in an acute care tertiary hospital in Singapore were surveyed during two time-points. Participants' health, socio-demographic characteristics, work-related factors and perceived workplace support factors were collected.

Results

Among the 179 nurses, there was a significant increase in burnout level, poorer self-rated health and reduced job dedication. A decrease in the percentage of nurses who *felt appreciated at work* was reported in 2021 ($p=0.04$). Nurses who felt their team was not working well together were 3.30 times more likely to experience burnout (95% CI 1.12 to 9.69; $p=0.03$). Nurses who reported that they *never felt appreciated* by their department/hospital were 8.84 times more likely to experience burnout (95% CI 2.67 to 29.21; $p<0.001$). Nurses with poorer self-rated health were more likely to report burnout (95% CI: 1.32–6.03; $p=0.008$).

Conclusion

Nurses had an increased experience of burnout, reduced job dedication and poorer self-rated health after the outbreak.

Implications for Nursing Management

Interventions at the departmental and organizational levels are needed to improve the workplace support. Strategies to support nurses' psychological well-being during the aftermath of COVID-19 are vital to managing nurses' burnout and improving job dedication and self-rated health.

Document 88 of 100

Bibliometric analysis of core competencies associated nursing management publications

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ABSTRACT (ENGLISH)

Aims

This study aimed to identify high-impact papers on global nursing to determine and analyse the publication of articles on core competencies in nursing-related journals and the research trends in the era of globalization.

Background

Bibliometrics has been shown to be an effective method for analysing publications. Through bibliometrics, nursing managers and researchers can understand the trends of high-impact international nursing core competencies research, identify mainstream research directions and obtain relevant knowledge and information, thereby facilitating the translation of research outcomes into nursing management practice.

Evaluation

The study adopted bibliometric analysis and the VOSviewer software to explore dynamic publication trends and analyse the current situation of nursing research from a comprehensive development perspective, which was realized by searching for nursing core competencies papers in the Web of Science (WoS) database, calculating citations and determining the trends of the most influential papers.

Key issues

Nursing core competencies research grew rapidly between 1997 and 2022. Countries with the most core competencies publications were the United States, England, Australia and Canada. The *Journal of Nursing Management* has attracted substantial attention from researchers worldwide. Education, Management and Nurses were the most frequently used keywords in the study. A total of 534 papers were retrieved from the WoS database with the main research fields, including nursing, business economics, public environmental occupational health and health care science services.

Conclusion

Equipping nursing graduates with core competencies has always been an important goal of global medical and nursing education. This study analysed papers across 35 years, most of which were published in the *Journal of*

Nursing Management. In addition, the study identified some of the main research topics of nursing management, such as the integration of education with nursing management and the cultivation of nurses' core competencies. The study also provides a fresh review of highly cited articles. The results of the study show that high-quality articles play the role of improving both the quality and the quantity of related research. By analysing the trends of the research on core competencies, this study lays a bibliometric foundation for researchers regarding international journals, hot topics and relevant fields. In addition, the highly cited articles reveal new perspectives for the nursing field, providing inspiration for nursing management and education researchers.

Implications for Nursing Management

This study provides scholars and managers with an overview of the current situation of nursing management research and the development of benchmark journals. The study provides researchers not only with a better understanding of various international journals, allowing them to transition out of traditional thinking in the era of science and technology, but also with innovative thinking by combining research with nursing management. The results of this study invite nursing managers to study relevant topics of core competencies and integrate information technology to education, management and nurses, thereby contributing to nursing management and educational research.

Document 89 of 100

Managing during the COVID-19 pandemic: A cross-sectional study of health care workers' perceived organizational support and its consequences on their compassion, resilience and turnover intention

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ABSTRACT (ENGLISH)

Aim

The aim of this study is to evaluate health care professionals' perceived organizational support and its effect on their compassion, resilience and turnover intention in the United Arab Emirates.

Background

The COVID-19 pandemic exerted unprecedented pressure on health care systems, professionals and management systems. Health care organizations begin to explore their roles and function in relation to risks and resilience, in addition to ascertain what level of organization support they are providing to their workers.

Methods

A cross-sectional study was conducted with a questionnaire administered to 538 health care workers, to examine their personal resources and organizational support during the pandemic.

Results

A total of 37.7% of nurses were found to have a moderate level of resilience, logistic regression showed that being married is a protective factor against resigning from the profession (OR= 0.462, $P = .012$, 95% CI: 0.254–0.842), and health care workers who perceived higher organizational support were approximately 50% less likely to have a turnover intention (OR= 0.506, $P = .009$, 95% CI: 0.303–0.845). Multiple linear regression model indicated significantly higher resilience among physicians ($\beta = 0.12$, $P < .05$) and allied health care practitioners ($\beta = 0.12$, $P = .022$). Organizational support had a significant positive relationship with resilience scores ($\beta = 0.20$, $P < .001$); adequate training was significantly related to higher compassion levels ($\beta = 0.11$, $P < .05$) and high organizational support scores were associated with increased compassion scores ($\beta = 0.27$, $P < .001$).

Conclusions

Front-line health care workers reported moderate organizational support during the pandemic, commensurately reflected in moderate levels of personal resilience and self-compassion. Continued and better support is vital for employee sustainability and the increased health system performance, including quality of care and patient outcomes.

Implications for nursing management

Nurse managers should help health care workers improve self-care strategies by strengthening personal resources, including shortened duty hours, offering adequate break time, providing a safe work climate and purveying adequate personal protective equipment and supplies to combat infections. They should build an empathetic work environment through understanding the needs of staff, helping tackle their work stress and sustaining cultures of compassion through promoting rewarding and flexibility strategies. Moreover, policymakers and nurse managers should create a rewarding culture for nurses and other health care workers to increase their commitment to their jobs.

Document 90 of 100

The experience of moral distress by chief nurse officers during the COVID-19 pandemic: A descriptive phenomenological study

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ABSTRACT (ENGLISH)

Aim

The aim of this study is to explore the moral distress experiences of nurse officers during the COVID-19 pandemic.

Background

Moral distress has emerged as a challenge for nurses and nurse leaders, revealing the need for health professionals and health care managers to examine, understand and deal with moral distress in Nurse leaders.

Methods

It is a descriptive phenomenological study that used content analysis.

Results

Thirteen chief/assistant nurse officers were interviewed, and four themes were identified: being a manager in the pandemic, situations that cause moral distress, effects of moral distress and factors that reduce moral distress.

Conclusion

Faced with various expectations, such as the management of unusual and uncertain processes, and the management of the psychological responses of both employees and themselves, chief nurse officers struggled significantly to maintain their moral integrity and experienced moral distress during the COVID-19 pandemic.

Implications for Nursing Management

Extraordinary situations such as pandemics have factors that led to moral distress for a Chief Nursing Officer (CNO). Health care systems in which nurse managers are excluded from decision-making processes have a traditional hierarchical structure that ignores CNOs professional autonomy, contributing to the development of moral distress. Therefore, CNOs should engage in self-reflection to recognize their own moral distress experiences, examine the existing health system to identify the factors that cause moral distress and take actions to implement changes to eliminate these factors. To cope with moral distress, CNOs should also improve their communication skills, team collaboration skills and the use of scientific knowledge and take responsibility in their managerial role.

Document 91 of 100

The relationships of ethical climate, physician–nurse collaboration and psychological empowerment with critical care nurses' ethical conflict in China: A structural equation model

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aims

To explore the relationships of ethical climate, physician–nurse collaboration and psychological empowerment with ethical conflict in critical care nurses.

Background

Ethical conflict is a major ethical issue in nursing practice. Little research has been done on the associated factors from both organizational and personal perspectives, especially in China.

Methods

From October 2021 to March 2022, we collected the data from 342 critical care nurses in three tertiary general hospitals in China via questionnaires about four variables (ethical climate, physician–nurse collaboration, psychological empowerment and ethical conflict). Data were analysed using Spearman's correlation and a structural equation model through statistical product and service solutions (SPSS) and analysis of moment structure (AMOS).

Results

Critical care nurses' ethical conflict showed a negative correlation with ethical climate ($r=-0.351$), physician–nurse collaboration ($r=-0.347$) and psychological empowerment ($r=-0.259$) (all $p<0.001$). Physician–nurse collaboration partially mediated the relationship between ethical climate and ethical conflict. Additionally, physician–nurse collaboration and psychological empowerment served as sequential mediators in the association.

Conclusions

These findings suggested that negative ethical climate can lead to poor physician–nurse collaboration and ultimately ethical conflict. The intermediary role of psychological empowerment and physician–nurse collaboration was also identified.

Implications for Nursing Management

Nursing managers should use the study as a fundamental basis to evaluate factors that can affect nurses' ethical conflict and develop effective strategies to mitigate this issue, which may help improve nurses' wellbeing and quality of patient care.

Document 92 of 100

Evaluation of the Brief Coping Orientation to Problems Experienced scale and exploration of coping among primary health care nurses during COVID-19

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

This study aimed to explore primary health care nurses' coping strategies and evaluate the psychometric properties of the Brief Coping Orientation to Problems Experienced (COPE) scale.

Background

Primary health care nurses are experiencing significant COVID-19-related psychological impacts. Beyond understanding the impacts, there is a need to explore coping strategies.

Methods

This online cross-sectional survey was completed by 359 Australian primary health care nurses between October and December 2020.

Results

Factor analysis revealed seven factors (support, disengagement and venting, humour, positive reframing, acceptance, substance use and spiritual/religious beliefs) (Cronbach's alpha > .69). There was an association between age, years of nursing and years of primary health care nursing and the factors of 'support', 'disengagement and venting' and 'positive reframing'. Years of experience were also associated with the factor 'humour'. Urban respondents had higher scores for the 'support' factor.

Conclusions

The Brief COPE scale is a valid and reliable tool for assessing primary health care nurses' coping. As demographic characteristics impact the coping strategies that nurses use, supports need to be tailored to optimize their impact.

Implications for Nursing Management

Nurse managers need to consider the workforce demographics when designing and implementing support strategies. The Brief COPE can identify current coping strategies and inform interventions to build coping capacity.

Document 93 of 100

Embracing and sustaining telehealth progress: The role of the nurse manager

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

The World Health Organization (WHO, 2010) views telehealth as the delivery of care by health professionals, where distance is a critical factor, using information and communication technologies for the exchange of valid information for the diagnosis, treatment and prevention of disease and injuries, research, and evaluation. The WHO (2021) also uses the term 'digital health' in relation to telehealth and posits that this is the field of knowledge and practice associated with the development and use of digital technologies to improve health. For this editorial, the term telehealth will be used to encompass a range of terms used, including telemedicine/digital health.

Document 94 of 100

Experiences with dignity among older people confined to beds living in a nursing home: A qualitative descriptive study

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

The aim of this study is to explore the concept of dignity from the experience of older people with limited mobility and confined to beds while living in a nursing home.

Background

Nursing staff have an important impact on the dignity of those older people confined to beds in nursing homes. Individuals' uniqueness with respecting dignity should be ensured.

Methods

A qualitative descriptive study was conducted. The study was carried out with 19 older people who were immobile and confined to bed and living in nursing homes. The individual in-depth interviews were conducted between July and October 2021. Inductive thematic analysis was used to synthesize data.

Results

The main theme 'Dignity of older people confined to bed' emerged from subthemes 'Emotions', 'Lived experience' and 'Failure to maintain care'. The participants expressed their dissatisfaction towards the nursing staff's disrespectful care, which evoked feelings of insignificance and inferiority.

Conclusion

Undignified and disrespectful nursing care can cause feelings of suffering, sadness and anger in older people confined to their beds. Nurses must listen to this group of older people and learn from their experiences. Compassionate, person-centred care with kindness and empathy should be provided by all those providing and

receiving care in nursing homes.

Implications for Nursing Management

To provide dignified care, nursing staff must understand the importance of person-centred, individually oriented nursing care for older people living with immobility in nursing homes.

Document 95 of 100

Authentic leadership and innovation behaviour among nurses in China: A mediation model of work engagement

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

The purpose of this study was to explore the effect of authentic leadership on nurses' innovation behaviour and the mediating role of work engagement.

Background

Encouraging nurses to generate more innovation behaviours has become an important development direction for improving the quality of nursing services.

Method

We employed a self-report questionnaire to collect data in Jinan City, China. A total of 2018 valid surveys were obtained. Hierarchical multiple regression model analysis was conducted to test the study hypothesis.

Result

The mean values of authentic leadership were 55.72 and 35.29, respectively. It shows that nurses can perceive the authenticity of managers, and their innovation behaviours need to be improved. Work engagement was found to have partially mediating effect on the relationship between authentic leadership and innovation behaviour.

Conclusion

Results suggest the importance of developing nurse managers' authentic leadership to foster nurses' work engagement and innovation behaviour.

Implications for nursing management

Hospitals should enhance authentic leadership by designing leadership training programmes and establishing authentic culture. In addition, nursing managers can also foster nursing innovation through improvements in work engagement.

The study data were collected via questionnaires, and we sent out questionnaires with informed consent forms to the study subjects. All valid subjects signed the consent forms and agreed to join this study. In addition, the questionnaires were collected anonymously, and all the subjects' information is strictly confidential. More importantly, the data are only used for research and do not involve any commercial interests.

Kirkpatrick's evaluation of the effect of a nursing innovation team training for clinical nurses

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

This study aims to design a 100-h training programme for nursing innovation teams and to evaluate the effect of this training programme using Kirkpatrick's model.

Background

The innovative capability of nurses is a powerful driver for the development of the nursing discipline, and it is currently at a low to medium level in China. Innovation competency development has become a research trend in nurses' in-service education, but only changes in nursing innovation behaviours before and after training have been evaluated. The cascading, continuous assessment tools are rarely used.

Methods

This is a quasi-experimental research design: pretest and posttest design. Totally, 61 clinical nurses from Hangzhou Hospital of Traditional Chinese Medicine were enrolled for innovation training. This innovation team training programme consisted of a 36-h theoretical training phase and a 64-h collaborative training phase. The four levels of Kirkpatrick's model, that is, reaction, learning, behaviour, and result, were applied for the evaluation together with questionnaires.

Results

At reaction level, the nurses' attendance was over 85% in two phases. The differences between nurse organizational innovation climate scores of tested nurses before and after training were statistically significant ($t=-22.559$, $P<.001$). At learning level, there were statistically significant differences between nurses' innovation self-efficacy scale scores of tested nurses before and after training ($t=-16.832$, $P<.001$). At behaviour level, the nursing innovation behaviour scale scores of tested nurses were significantly higher after training ($t=-18.950$, $P<.001$) than before the training. At result level, the clinical nurse innovation ability of tested nurses after the training were higher than before the training ($t=-26.275$, $P<.001$). The numbers of patent applications, granted patents, application for scientific research projects, sponsored scientific research projects, and papers published by team members after the training were larger than those before training ($Z=-2.032$, $P=.042$).

Conclusion

Kirkpatrick's model can evaluate the effectiveness of nursing innovation training for clinical nurses. The nursing innovation training is beneficial to improve nurses' innovation capacity, organizational innovation climate and innovation self-efficacy, and nursing innovation behaviour and promote the output of research and innovation projects.

Implications for Nursing Management

Managers can flexibly develop training modules with regional characteristics based on this programme to effectively improve the innovation ability of clinical nurses, thus meeting the urgent demand for innovative nursing talents and

the rapid development of nursing disciplines.

Document 97 of 100

Coping with job stress for hospital nurses during the COVID-19 crisis: The joint roles of micro-breaks and psychological detachment

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

To examine a mediated moderation of the effects of micro-break activity and psychological detachment on the relationship between job stress and work engagement among hospital nurses.

Background

Nursing burnout, compassion fatigue and job stress have been relatively constant issues in nursing for at least the past decade—and the pervasiveness of the COVID-19 pandemic is intensifying them, which may lead to new challenges to work engagement.

Methods

We tested our model using a time-lagged design to collect data from supervisor–subordinate dyads in seven public hospitals located in southern China, and 263 nurses and 58 head nurses in this survey. Confirmatory factor analysis, Pearson's correlation and hierarchical multiple regression were carried out.

Results

The results showed that the adverse impact of job stress on work engagement disappeared when nurses engaged in high levels of micro-break activity. Moreover, the moderating role of micro-break activity was mediated by psychological detachment.

Conclusions

Micro-break activity and psychological detachment play joint roles in helping nurses to cope with job stress.

Implications for Nursing Management

Nurse managers should change their negative attitude toward micro-break activity (if it exists) and help nurses find opportunities for detachment under high-pressure environment.

Document 98 of 100

In Nightingale's footsteps: A qualitative analysis of the impact of leadership development within the clinical learning environment

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ABSTRACT (ENGLISH)

Aim

To identify and describe the impact areas of a newly developed leadership development programme focussed on positioning leaders to improve the student experience of the clinical learning environment.

Background

There is a need to consider extending traditional ways of developing leaders within the clinical learning in order to accommodate an increased number of students and ensure their learning experience is fulfilling and developmental. The Florence Nightingale Foundation implemented a bespoke leadership development programme within the clinical learning environment. Identifying the areas of impact will help to inform organisational decision making regarding the benefits of encouraging and supporting emerging leaders to undertake this type of programme.

Method

For this qualitative descriptive study, eight health care professionals who took part in a bespoke leadership development programme were interviewed individually and then collectively. The Florence Nightingale Foundation fellowship/scholarship programme is examined to determine impact.

Results

Two key themes were described in relation to impact of the programme. These were 'Personal Development' and 'Professional Impact'. The two key themes comprised several subthemes. The notion of time and space to think was subsumed within each theme.

Conclusion

Data highlights that the Florence Nightingale Foundation programme had a distinct impact on participants by transforming thinking and increasing self-confidence to enable changes to make improvements both within their organisations and at national level.

Implications for Nursing Management

Health care managers must continue to invest in building leadership capacity and capability through programmes that can help position individuals to realize their potential to positively influence health outcomes and wider society.

Document 99 of 100

Leadership: Directions for sustaining ethical practice

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ABSTRACT (ENGLISH)

Internationally, nurses serve a broad spectrum of the community through the provision of healthcare. The nursing profession is generally trusted by this community. Trust is achieved through ethical nursing practice. Recently, in 2021, the ICN published the revised edition of the Code of Ethics for Nurses. The ICN Code of Ethics for Nurses is a 'statement of the ethical values, responsibilities and professional standards of nurses'. It guides nurses to acknowledge the vulnerability of the people that we serve. It emphasizes the fundamental importance of being aware, and appropriately responding to ethical issues and concerns is commensurate with professional practice. Specifically, for nurse leaders and managers, the ICN code advocates that leaders seek to create environments where ethical conduct is sustained. By this, reference is made to leaders being sensitive to others needs, encouraging open dialogue and providing support to their teams (https://www.icn.ch/system/files/2021-10/ICN_Code-of-Ethics_EN_Web_0.pdf).

Document 100 of 100

Workplace violence and the risk of post-traumatic stress disorder and burnout among nurses: A systematic review and meta-analysis

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[ProQuest document link](#)

ABSTRACT (ENGLISH)

Aim

This review examined the association between workplace violence and the risk of post-traumatic stress disorder (PTSD) and burnout among nurses.

Background

The extent to which workplace violence is associated with an increased risk of PTSD and burnout in nurses remains unclear.

Evaluation

We searched nine electronic databases (PubMed, Cochrane, Embase, Web of Science, CINAHL, PsycINFO, Chinese Biomedical, China National Knowledge Internet and WANFANG).

Key issues

Overall, 114 full-text studies were identified; 43 met the inclusion criteria, of which 10 were included in the meta-analysis. Compared to their counterparts with non-exposure to workplace violence, nurses experiencing it had 2.13 and 2.25 times higher odds of reporting PTSD and burnout after adjusting the confounding factors. Additionally, the moderator and mediator factors might help reduce the risk of both in this population.

Conclusion

This study indicated that workplace violence increases the risk of PTSD and burnout.

Implications for Nursing Management

Our review identified the magnitude of the association between exposure to workplace violence and the reported symptoms of PTSD and burnout in nurses. Furthermore, multi-targeted efforts directed at the identified social/organizational, task-related and individual resources might help mitigate their harmful impact in the aforementioned population.

Bibliography

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

Wang, X., Defang, W., Xiaoli, G., Jinrui, C., Weidi, W., Liu, J., . . . Wang, H. (2022). Compassion satisfaction and compassion fatigue in frontline nurses during the COVID-19 pandemic in wuhan, china. *Journal of Nursing Management*, 30(7), 2537-2548. doi:<https://doi.org/10.1111/jonm.13777>

AimThe aim of this study is to investigate the compassion satisfaction and compassion fatigue among Chinese frontline nurses during the COVID-19 pandemic in Wuhan, China and to explore the related factors.
BackgroundFrontline nurses undertake a huge nursing workload with a risk of infection, causing great pressure on them and making them face a risk of compassion fatigue during the pandemic.
MethodsA cross-sectional online survey was conducted from 9 March to 15 March 2020. A total of 1582 nurses caring for critical patients with COVID-19 participated. Compassion satisfaction and compassion fatigue (comprising burnout and secondary traumatic stress) were assessed with the Professional Quality of Life Scale, and resilience was measured with the Chinese 10-item Connor-Davidson Resilience Scale.
ResultsModerate levels of compassion satisfaction (36.99 ± 6.71), burnout (24.14 ± 5.33) and secondary traumatic stress (24.53 ± 5.24) were experienced by frontline nurses. Resilience and perceived work pressure were the main predictors.
ConclusionsFrontline nurses demonstrated a moderate level of compassion satisfaction and compassion fatigue.
Implications for nursing managementThe compassion fatigue of frontline nurses should be considered. Strategies aiming to reduce stress and enhance resilience, such as training about psychological adjustment, developing professional skills and creating a supportive workplace environment, are several options.
The trial is not registered. This study is a cross-sectional study, and according to China's clinical trial registration standards, such studies are not required to be registered. So the trial is not registered. However, oral consent was obtained from the ethics committee of the hospital before this study was conducted.

Handan, A., Gül, D., & Baykal, Ü. (2022). The relationship between the conflict management strategies and ethical leadership behaviours of nurse managers perceived by nurses. *Journal of Nursing Management*, 30(7), 2370-2378. doi:<https://doi.org/10.1111/jonm.13840>

AimThe aims of this study were to determine nurse managers' level of ethical leadership perceived by nurses and to examine its relationship with conflict management strategies.
BackgroundEthical leadership is about how managers use their power in their decisions and actions, and its source is based on moral and ethical authority. Therefore, it is important to understand the impact of ethical behaviours of nurse managers in the work environment on determining conflict management strategies.
MethodThe data of this descriptive, correlational, and cross-sectional study were collected face-to-face from 285 nurses between April–June 2019. The data collection instruments included the introductory information form, the Ethical Leadership Scale, and The Rahim Organizational Conflict Inventory-II.
ResultsEthical leadership scores perceived by nurses in nurse managers were found 3.78, and the highest score was obtained from the behavioural ethics subscale ($3.81 \pm .91$). In conflict management strategies perceived by nurses, it was determined that they got highest scores from collaborating style ($3.76 \pm .90$) and lowest scores from competing style ($2.90 \pm .94$). There was no significant relationship only between ethical leadership and its subscales and competing ($r: -.038/- .041, p > .05$). In other subscales, there were positive, moderate, and highly significant relationships ($r: .466-.747, p < .001$). The rate of explanatoriness of communicative ethics subscale in conflict management strategies ranged from 22.3% to 58.0%.
ConclusionsThe study shows that communicative ethics subscale significantly affects the conflict management strategies of nurse managers. Therefore, it is important for nurse managers to communicate bilaterally and be a role model for nurses.
Implications for Nursing ManagementEthical leaders value trust and respect in their interactions with employees and reflect what appropriate behaviour to the situation is. Nurses who perceive that their managers demonstrate ethical leadership behaviours will also evaluate their role in conflict resolution. On the other hand, the power-based, aggressive, noncompromising domination approach that the person imposes on others is not associated with the ethical leadership perception towards their managers by nurses and is a strategy that should not be preferred. Therefore, nurse managers who use appropriate conflict management strategies were seen as a role model by nurses.

Jang, S. J., & Lee, H. (2022). Pathological narcissism, interpersonal cognitive distortions, and workplace bullying among nurses: A cross-sectional study. *Journal of Nursing Management*, 30(7), 3051-3059. doi:<https://doi.org/10.1111/jonm.13706>

AimThe aim of this work is to examine whether nurses' pathological narcissism and interpersonal cognitive distortions predict workplace bullying when controlling for organizational culture, work-related factors, and demographic variables.
BackgroundTo eradicate workplace bullying, a multifaceted holistic approach to identify potential predictors is needed. Nurses' narcissistic behaviours negatively affect collegial relationships and the organization. Furthermore, interpersonal cognitive distortions have been demonstrated to directly affect bullying and victimization.
MethodsResponses from 236 nurses to an online survey were analysed. The Pathological Narcissism Inventory, Interpersonal Cognitive Distortions Scale, Positive Nursing Organizational Culture Measurement Tool, and The Negative Acts Questionnaire-Revised were used to measure the key variables.
ResultsA multiple regression analysis revealed that pathological narcissism ($\beta = .33$, $p < .001$) had the greatest effect on nurses' workplace bullying, followed by positive organizational culture ($\beta = -.31$, $p < .001$), interpersonal cognitive distortions ($\beta = .17$, $p = .028$), marital status ($\beta = -.15$, $p = .020$), and position ($\beta = -.12$, $p = .047$).
ConclusionsAlthough prejudice or stigma surrounding narcissistic personalities should be avoided, nurses should be aware of and manage such characteristics so that they do not become a factor in workplace bullying.
Implications for Nursing ManagementThere is a need to protect nurses from workplace bullying and create a positive organizational culture by recognizing narcissistic traits and preparing intervention strategies that support improvement.

Petra-Maria Kämäräinen, Nurmeksela, A., & Kvist, T. (2022). A cross sectional study of nurses' perceptions of nurse leaders' internal crisis communication during the COVID-19 pandemic. *Journal of Nursing Management*, 30(7), 2503-2513. doi:<https://doi.org/10.1111/jonm.13707>

AimThe aim of this study is to describe nurse perceptions of nurse leaders' internal crisis communication during the COVID-19 pandemic.
BackgroundInternal communication is a vital part of nurse leaders' work, even more so during crises such as the COVID-19 pandemic.
MethodThis is a cross-sectional study design. The data were collected from 204 Finnish nurses in February 2021. A questionnaire developed in this study consisted of 29 items measuring internal crisis communication and seven demographic variables. The relationships between the variables were examined with cross-tabulation, a chi-squared test and non-parametric tests. Factor structure was evaluated with exploratory factor analysis and reliability with Cronbach's alpha.
ResultsNurses perceived the timeliness of communication highest and interaction the lowest. Nurses from intensive care, acute care and operative rooms gave highest evaluations for the content of communication and timeliness. Nurses working with COVID-19 patients daily or weekly evaluated the highest level of false communication.
ConclusionNurse leaders' internal crisis communication was timely, especially in the most critical units dealing with the pandemic. The study highlighted the importance of considering a unit's special needs for internal crisis communication. Interaction between nurse leaders and nursing staff during periods of crisis needs improvement.
Implications for Nursing ManagementNurse leaders' successful and emphatic communication is important in supporting nurses in managing a crisis.

Hwang, J., Song, E. K., & Ko, S. (2022). Relationships among basic psychological needs, organizational commitment, perceived authentic leadership and turnover intention in Korean nurses: A cross-sectional study. *Journal of Nursing Management*, 30(7), 2176-2184. doi:<https://doi.org/10.1111/jonm.13546>

AimThis study determined the relationships of satisfaction and frustration with basic psychological needs, organizational commitment, perceived authentic leadership and turnover intention in nurses in South Korea.
BackgroundMinimizing nurse turnover is essential for improving the quality of nursing care and patient safety.
MethodsThis was a cross-sectional, correlational pilot study of 216 nurses at a university hospital in South Korea. Data were collected with a self-report questionnaire, from 1 to 15 September 2020. Collected data were analysed using SPSS 24.0.
ResultsMultiple regression analysis revealed that clinical experience (3 to 5 years, $\beta = 2.35$, $p = .019$; 5 to 10 years, $\beta = 2.23$, $p = .026$), subjective workload (severe, $\beta = 2.10$, $p = .036$; extreme, $\beta = 2.84$, $p = .005$), psychological needs frustration ($\beta = 0.35$, $p < .001$), organizational commitment ($\beta = -0.17$, $p = .011$) and perceived authentic nurse leadership ($\beta = -0.14$, $p = .030$) were found to have significant effects on nurses' turnover

intention. **Conclusions** The results suggest that it is necessary to create a transparent work environment based on authentic leadership and consider individual frustrations with regard to basic psychological needs and organizational commitments. **Implications for Nursing Management** This study offers a new approach to reducing nurses' turnover. A strategy is needed for efficient nursing staffing management to assist with reduction of nurses' turnover intentions.

Ta'an, W., F., Mohammed Munther Al-Hammouri, & Rababah, J. A. (2022). The predicting effects of professional governance and structural empowerment on job satisfaction among Jordanian nurses: A cross-sectional study. *Journal of Nursing Management*, 30(7), 3013-3021. doi:<https://doi.org/10.1111/jonm.13698>

Aim This study aimed to investigate the role of professional governance and empowerment in predicting nurses' job satisfaction. **Background** Nurses can lead the way to enhance health care quality for all if they work in safe, satisfying and empowering environments. Professional governance and structural empowerment are associated with favourable work conditions and environments. However, studies addressing the predicting effects of professional governance and structural empowerment on job satisfaction are still limited. **Methods** A cross-sectional design was applied. Online self-reported questionnaires were completed by 126 nurses. The analysis consisted of descriptive statistics, Pearson r correlation and hierarchical multiple regression to address the research aim. **Results** Job satisfaction moderately correlated with structural empowerment ($r = .40, p < .001$) and professional governance ($r = .30, p < .001$). The final regression model revealed that 30% of the variation in job performance scores can be predicted by professional governance, structural empowerment and some demographic characteristics ($R^2 = .30, F = 8.67, p < .001$). **Conclusions** Working in an environment that incorporates empowerment conditions, genuine support and valuable opportunities will increase the nurse's job satisfaction. Additionally, nurses will have higher job satisfaction if they have their voices heard. **Implications for Nursing Management** Nurse managers should properly assess the existing situation in each institution, implement already-tested-for-effectiveness and efficiency interventions and create new ones based on nurses'-specific needs.

Rafferty, C., Anne-Marie Sassenberg, & Anita Bamford-Wade. (2022). Business acumen for nursing leaders: An exploratory qualitative study. *Journal of Nursing Management*, 30(7), 2681-2688. doi:<https://doi.org/10.1111/jonm.13672>

Aim The aim of this study was to explore the status of and need for business acumen of nurse leaders. **Background** Health systems globally continue to reform to deliver better care while working within sustainable budgets. However, beyond leadership and management expertise, nurse leaders need strong business acumen to appreciate the complexity of the system. **Method** Two groups, emerging nurse leaders and established health system leaders, were interviewed for their perspective on four elements related to business acumen. **Results** Business in healthcare was defined and therefore valued with variation across both groups. Adequate business education for nurse leaders was considered lacking by both groups. Inconsistent business acumen was seen as a barrier for nursing inclusion at the system level. **Conclusions** Business acumen is a skillset more valuable for the nursing profession than the current educational preparation allows, creating a reputational barrier for nursing's full participation in health system-level leadership, but is considered an opportunity for the future. **Implications for Nursing Management** Improving the foundation business acumen across the nursing profession will not only raise the profile of nurse leader capability to input and influence across the health system but also improve the wider nursing team's understanding around nurse leader advocacy and decision making.

Laukka, E., Pölkki, T., & Kanste, O. (2022). Leadership in the context of digital health services: A concept analysis. *Journal of Nursing Management*, 30(7), 2763-2780. doi:<https://doi.org/10.1111/jonm.13763>

Aim To define and clarify the concept of leadership in the context of digital health services using Walker's and Avant's concept analysis model. **Background** Conceptualizing leadership in the context of digital health services is needed to deliver higher quality services and advance research. **Method** Searches were conducted of MEDLINE (Ovid), Scopus, CINAHL (EBSCO) and ProQuest (ABI/INFORM). Empirical articles were included if they reported attributes, antecedents or consequences of leadership in the study context. A total of 4037 references were identified; 23 were included. **Results** Leadership attributes concerned leaders' behaviour, roles and qualities.

Antecedents concerned informatics skills and competence, information and tools, understanding care systems and their complexity and education. Consequences related to organization, professionals and patient and care. Conclusion Based on our results, the term 'e-leadership' should be more widely utilized in nursing practice and research. Implications for nursing management Nurse leaders need to be strong leaders; they need to be visionary and use strategic thinking to develop existing and new digital solutions. By becoming e-leaders, nurse leaders may increase the successful development and implementation of eHealth and benefit clinicians and patients.

Kleier, J. A., Lawrence, C., Cavanaugh, G., Schivinski, E., Holland, S., & Bruewer, J. (2022). Professional commitment, resilience and intent to leave the profession among nurses during the COVID-19 pandemic - a descriptive study. *Journal of Nursing Management*, 30(7), 2577-2584. doi:<https://doi.org/10.1111/jonm.13788>

Aim The three-component model of commitment, resilience and selected nurse characteristics were tested as predictors of nurses' intent to leave the profession. Background In the wake of the COVID-19 pandemic, news reports suggest that a mass exodus of nursing professionals is occurring. Method This nonexperimental, descriptive, correlational, predictive study used a cross-sectional approach to collect survey data from a convenience sample of 189 registered nurses (RNs) who were providing direct patient care in adult inpatient units with a high likelihood of admitting patients diagnosed with COVID-19 and met other eligibility requirements. Results Most (73.5%) plan to remain in the nursing profession and feel highly resilient. Only affective commitment demonstrated a significant relationship to the intention to leave the nursing profession. Conclusions The study was conducted after the pandemic had been in effect for a prolonged time, and it is likely the nurses with the intent to leave the profession had already left. The findings provide a glimpse of a sample of nurses drawn from a population likely much different from only a few months prior. Implications for Nursing Management Strategies to retain nurses should include efforts to strengthen professional commitment and build resilience.

Rizal Angelo, N. G., Berdida, D. J. E., Villagrancia, H. N., Sage, M. R., Cornejo, L. T. O., Nashi Masnad, A. R., . . . Asmaa Mohammed, A. A. (2022). The moderating effect of burnout on professionalism, values and competence of nurses in Saudi Arabia amidst the COVID-19 pandemic: A structural equation modelling approach. *Journal of Nursing Management*, 30(7), 2523-2536. doi:<https://doi.org/10.1111/jonm.13754>

Aim To examine the moderating effect of burnout on the relationship between nurses' competence, professional competence and professional values. Background There is a preponderance of burnout studies of nurses before and during the COVID-19 pandemic. However, little is known about burnout's moderating influence on nurses' professionalism, competence and values during the ongoing pandemic. Methods This study used a correlational, cross-sectional design and convenience sampling to recruit 809 Saudi nurses employed in four government hospitals. Four self-report instruments were used to collect data from August 2021 to March 2022. Spearman Rho, structural equation modelling and multi-group moderation analysis were used to analyse the data. Results Most of the participants had high burnout. There was a moderate to high correlation between the dimensions of professional competence, nurse professional values, burnout and nurse competence. Both professional competence and nurse professional values significantly affected nurse competence. Nurse professional values also had a direct effect on professional competence. Professional competence and nurse professional values on nurse competence may vary among those with low, moderate and high levels of burnout, suggesting the moderating effect of burnout. Conclusions The positive impacts of nurse professional values and professional competence on nursing competence were validated in this study, as was the evidence of burnout's moderating effect on the studied connections. To avoid burnout, it is necessary to increase organizational knowledge and support for nurses, their working conditions and the environment through strategies that promote well-being and empowerment. Implications for nursing management Nurse managers can implement policies to help nurses minimize burnout and improve their professional values and competence. Management policies may be considered include increased staffing, opportunities to improve technical abilities through education and vocational training programs, and increased diversity of job assignments.

Fatma, R. A., Dias, J. M., Yateem, N. A., Subu, M. A., & Mohannad, A. R. (2022). Lessons learned and recommendations from the COVID-19 pandemic: Content analysis of semi-structured interviews with intensive care

unit nurse managers in the united arab emirates. *Journal of Nursing Management*, 30(7), 2479-2487.
doi:<https://doi.org/10.1111/jonm.13677>

AimThis study aims to explore how nursing services were managed and provided in intensive care units during the COVID-19 pandemic and clarify the management lessons learned.**Background**The surge in the number of patients with COVID-19 worldwide and the unpredictability of new variants mean the voices of nurse managers who participated in fighting the pandemic in intensive care units must be considered. Health care systems need specific plans to face similar future crises.**Method**This is a descriptive, qualitative, narrative study using indirect content analysis.**Results**We analysed 37 intensive care unit nurse managers' reflections on lessons learned from the COVID-19 pandemic. Four themes were extracted: restructuring organisations' resources, issues with family-centred care, education and training and policy reforms.**Conclusions**Promising strategies for Emirati intensive care units in planning for responses to future crises include maximizing organisation resources, boosting family-centred care, providing in-service training for nurses and policy reform.**Implications for Nursing Management**Our findings will support health care leaders, educators, policymakers and researchers to improve the management of similar pandemic situations. This study presents fundamental data concerning the subjective experiences of intensive care unit nurse managers. These experiences may inform development of multi-dimensional strategies including: ensuring the adequacy of projected supplies, space and nursing workforce; establishing communication protocols; and reforming existing policies.

Raso, R., Fitzpatrick, J. J., & Masick, K. (2022). Perceptions of US nurses and nurse leaders on authentic nurse leadership, healthy work environment, intent to leave and nurse well-being during a second pandemic year: A cross sectional study. *Journal of Nursing Management*, 30(7), 2699-2706. doi:<https://doi.org/10.1111/jonm.13712>

AimThe main aim of this study was to determine the perceptions of clinical nurses and nurse leaders about authentic nurse leadership, work environment, pandemic impact, well-being and intent to leave their position and profession during the second year of the pandemic.**Background**This research team studied the variables pre-pandemic and in year one of the pandemic. As the pandemic continued, subsequent reports of workforce instability, deteriorating work environment and vulnerable well-being called for an understanding of the current state to inform needed actions by leadership.**Methods**This study is a cross-sectional, descriptive, correlational analysis using national survey data from 1795 US clinical nurses and nurse leaders in the fall of 2021.**Results**Pandemic impact was high, authentic nurse leadership was present, healthy work environment was not present and nurse well-being was at-risk and negatively correlated to both healthy work environment and authentic nurse leadership. Within our sample, 61.8% of nurses had no intention to leave their positions, and 82.5% had no intention to leave the profession. Compared with clinical nurses, nurse managers had significantly higher scores on all instruments.**Conclusions**The findings of this study support leadership as positively related to a healthy work environment. Authentic nurse leadership, a healthy work environment and nurse well-being are all critical components of efforts to stabilize the nursing workforce as we recover and rebuild post-pandemic.**Implications for Nursing Management**This is a call to action for leadership that will serve the goals of retaining nurses, rebuilding work environments and improving well-being.

Laura Ramos-Petersen, Jonatan García-Campos, Banwell, G., Ana Belén Ortega-Ávila, Gabriel Gijon-Nogueron, & Andrés Reinoso-Cobo. (2022). Experiences of patients with rheumatoid arthritis during and after COVID-19-induced quarantine in terms of physical activity and health status: A qualitative study. *Journal of Nursing Management*, 30(7), 2568-2576. doi:<https://doi.org/10.1111/jonm.13784>

AimThe aim of this study was to explore experiences of people with rheumatoid arthritis during and after COVID-19-induced quarantine in terms of physical activity and health status.**Background**Rheumatoid arthritis affects multiple facets of the person, both physically and psychologically. Physical activity is considered a safe and effective intervention to improve symptoms and systemic manifestations of rheumatoid arthritis. In the context of the COVID-19, countries like Spain were forced to impose restrictions on mobility, prohibiting outings even to perform physical activity.**Methods**Structured interviews were conducted and developed using the Tampa Scale for Kinesiophobia-11 questionnaire. Data were analysed using a six-step thematic analysis.**Results**The results make it clear that even

though the patients declared that physical activity is essential for them to deal with their disease, most of the participants affirmed that they significantly reduced their levels of physical activity during the pandemic. **Conclusions** Physical activity should be promoted in people, even in difficult times, to improve disease outcomes, well-being and mental health. **Implications for Nursing Management** Knowing the experiences of these patients enables nursing managers to develop interventions that ensure the delivery of comprehensive nursing care regarding physical activity and health status, in future situations like this pandemic.

Jenkins, D., Burton, C., & Holmes, D. (2022). (Re)defining nursing leadership: On the importance of parrhèsia and subversion. *Journal of Nursing Management*, 30(7), 2147-2153. doi:<https://doi.org/10.1111/jonm.13520>

Aim Through a review of philosophical and theoretical constructs, this paper offers insight and guidance as to ways in which nurse leaders may operationalize advocacy and an adherence to nursing's core ethical values. **Background** The US health care system works in opposition to core nursing values. Nurse leaders are obliged to advocate for the preservation of ethical care delivery. **Evaluation** This paper draws upon the philosophies of Fromm, Foucault, and Deleuze and Guattari to critically review the functions of nurse leaders within a capitalist paradigm. **Key issue** Key emergent issues in the paper include health care and capitalism and the nurse leader's obligations towards advocacy. **Conclusion** The nurse leader acts as parrhèsia in viewing truth telling as a duty critical to improving the lives of patients. Ramifications of the decisions by those in power have even greater impact in institutions that serve those with little to no political agency. **Implications for Nursing Management** The nurse leader has a freedom and platform that their patients do not and must take the courageous risk of choosing to speak. This paper serves as a call to action for nurse leaders to urgently address the current state of US health outcomes.

Zaid Al-Hamdan, & Haneen, B. I. (2022). The role of organizational support and self-efficacy on work engagement among registered nurses in Jordan: A descriptive study. *Journal of Nursing Management*, 30(7), 2154-2164. doi:<https://doi.org/10.1111/jonm.13456>

Aim The aim of the current study was to examine the relationship between work engagement and perceived organisational support and self-efficacy among registered nurses in Jordanian hospitals. **Background** Nurses constitute the backbone of the health care system. Work engagement among nurses is critical due to its various positive outcomes: it enhances job satisfaction, job performance, organisation commitment and emotional health. According to the job demand–resource model, perceived organisational support and self-efficacy increase work engagement. **Method** A cross-sectional, descriptive and correlational design and multistage cluster sampling were implemented. A total of 186 registered nurses were recruited. Self-administered questionnaires were used to collect data from the participants. **Results** Nurses showed an average level of work engagement. The dedication subscale showed the highest score among the three subscales representing work engagement. The results showed that perceived organisational support and self-efficacy were positively correlated with work engagement ($p < .01$). **Conclusion** Perceived organisational support and self-efficacy correlated positively with work engagement. **Implications for nursing management** An effort should be made to provide a supportive work environment by offering training programmes, sufficient job resources and positive feedback, which, in turn, improve nurses' work attitudes, self-efficacy, perception of the work environment and intention to stay in a health organisation. This study is a descriptive study and has an IRB number 766-2019.

Jang, S. J., Kim, E. H., & Lee, H. (2022). Moral sensitivity and person-centred care among mental health nurses in south Korea: A cross-sectional study. *Journal of Nursing Management*, 30(7), 2227-2235. doi:<https://doi.org/10.1111/jonm.13554>

Aim To identify the predictors of mental health nurses' person-centred care, including moral sensitivity. **Background** Person-centred care meets patients' ethical needs by protecting their autonomy and dignity and respecting their choices; it is essential to enhance patient outcomes. Therefore, it is important to identify the predictors of the practice of advocating patients' rights and dignity and providing person-centred care among mental health nurses to foster competency and ensure the highest quality of care. **Methods** This cross-sectional study included 220 mental health nurses in South Korea. It measured their general and work-related characteristics, moral

sensitivity, and person-centred care. Multiple regression analysis was conducted to identify the person-centred care predictors. Results The most potent person-centred care predictor was moral sensitivity ($\beta = .35$, $p < .001$). Other predictors included prior biomedical ethics education ($\beta = .15$, $p = .013$) and marital status ($\beta = .14$, $p = .025$). The regression model had 28.0% explanatory power. Conclusions Mental health nurses' moral sensitivity must be increased to improve their person-centred care. Implications for Nursing Management Nurses should receive continuous education to remain aware of and maintain a high level of moral sensitivity and be encouraged to continue the person-centred practice. Organizational and policy support is needed to promote the practice of person-centred care in the workplace.

Akkoç, İ., Türe, A., Arun, K., & Okun, O. (2022). Mediator effects of psychological empowerment between ethical climate and innovative culture on performance and innovation in nurses. *Journal of Nursing Management*, 30(7), 2324-2334. doi:<https://doi.org/10.1111/jonm.13849>

Aims This study investigates the effects of ethical climate and innovative culture on the hospital nurses' job performance and innovative behaviour with the mediating factor of psychological empowerment. Background Hospital nurses have an opportunity to embrace innovative behaviours and increase their performance through a positive ethical climate and innovative culture. Understanding nurses' psychological empowerment in the workspace context that impacts innovation has not been a focus for hospital leadership. Methods A cross-sectional study based on a questionnaire design was used for data collection and analysis. The data are collected through a voluntary survey—selected by a convenience sampling method—of 393 nurses from University Hospital. The Structural Equation Model and Bootstrap method test the study's hypotheses. A STROBE checklist was used for reporting. Results Ethical climate and innovative culture predict job performance and innovative behaviour with the mediating role of psychological empowerment. Moreover, psychological empowerment decreases the predictive power of ethical climate and innovative culture separately but increases the nurses' job performance and innovative culture. Conclusions Ethical climate and innovative culture significantly positively affect job performance and innovative behaviour. Additionally, the mediating effect of psychological empowerment increases job performance and innovative behaviour more than the effects of ethical climate and innovative culture. Implications for Nursing Management Nurses need to be prepared to practice safely, accurately and compassionately by translating moral values into rules of the nursing profession, where innovation increases at an astonishing rate. Nurse leaders and hospital managers should establish ethical norms as the consensus of ultimate criteria of validity of the rational analysis of tasks or particular nursing practice concepts, with an innovative culture by empowering nurses exceedingly in their workplace.

Wang, S., Jiang, Z., Zhang, Z., Chen, L., Zhao, X., Wang, F., . . . Yang, X. (2022). The status of ethical behaviour in clinical nursing in three Chinese hospitals: A qualitative interview study. *Journal of Nursing Management*, 30(7), 2424-2433. doi:<https://doi.org/10.1111/jonm.13810>

Aim We aim to explore the status of nurses' ethical behaviours in clinical practice and what contributes to nurses' unethical behaviours. Background Nurses' ethical behaviours strongly impact the nurse–patient relationship and the quality of nursing services. Therefore, we must understand the status of clinical nurses' ethical behaviours and the causes of nurses' unethical behaviours. Methods Focus group and in-depth semistructured interviews were conducted with 21 head nurses and nine nurses, respectively. The data were analysed by content analysis. Results The analysis revealed seven themes: lack of awareness of the protection of patients' privacy; violation of patients' autonomy; improper communication; failure to protect the patient's best interests; lack of moral emotion; lack of psychological care for special patients; and causes of unethical behaviour. Conclusions The present situation of ethical nursing behaviour is not optimistic, and there are still many unethical nursing behaviours in clinical work. There are many reasons for unethical behaviours. Efforts should be made related to nurses, patients, workload, the ethical climate and rules and regulations to improve the situation. Implications for Nursing Management Nursing managers can improve ethical behaviour by strengthening nurses' ethics studies, enhancing nurses' professional identity and social status, optimizing the allocation of nursing human resources, creating a good ethical climate and improving relevant rules and regulations.

Daradkeh, L. F., Villar, R. C., & Nashwan, A. J. (2022). The perception of nursing leaders towards communication and relationship management competencies in using digital platforms during COVID-19 in Qatar: A cross-sectional study. *Journal of Nursing Management*, 30(7), 2707-2714. doi:<https://doi.org/10.1111/jonm.13722>

AimTo evaluate nursing leaders' perception of communication and relationship management competencies while using digital platforms during the COVID-19 pandemic.
BackgroundNursing leaders can achieve effective leadership by mastering these competencies leading to an overall improvement in the quality of nursing care. The COVID-19 pandemic has brought numerous challenges in communication, and digital platforms have been widely used in healthcare settings to mitigate contagion.
DesignCross-sectional.
MethodsThe study was conducted between February and March 2021. A survey was adopted from the American Organization of Nurse Executives (AONE) and was sent to nursing leaders in Qatar through email.
ResultsA total of 250 nurse leaders were invited to participate, but only 116 responded (RR 46.4%). The male participants represented a more significant proportion of 64.10%. Influencing behaviour, relationship management and effective communication had the lowest scores, which indicates low competency.
ConclusionsDespite obtaining satisfying scores, nursing leaders in Qatar should strive for professional development and knowledge acquisition to improve their communications and relationship management competencies.
Implications for Nursing ManagementHealthcare organizations must understand that nursing leaders should strive for professional development and knowledge acquisition to improve their communication and management.

Waterfield, D., & Barnason, S. (2022). The integration of care ethics and nursing workload: A qualitative systematic review. *Journal of Nursing Management*, 30(7), 2194-2206. doi:<https://doi.org/10.1111/jonm.13723>

AimThe aim of this review was to explore literature from January 2017 to December 2021 for specific aspects of care ethics related to nursing workload in the acute care setting.
BackgroundHigh nursing workload is associated with adverse outcomes for nurses as well as patients. Nursing workload goes beyond patient-to-nurse ratios and encompasses patient, nurse and organizational factors.
EvaluationThis qualitative systematic review was conducted according to the Joanna Briggs Institute Manual for Evidence Synthesis. The four features of care ethics related to nursing workload guided the review of qualitative studies in MEDLINE, CINAHL and PsycINFO, and synthesized findings were presented in the four phases of caring.
Key IssuesKey issues include ethical dilemmas, time pressure, shared moral burden and managerial support.
ConclusionTo reduce nursing workload, a care ethics perspective can provide solutions through fortifying interprofessional relationships and enhancing empathetic actions.
Implications for Nursing ManagementSituational, individual and team approaches to management allows for incorporation of personal values and ethics of care to support patient-centred care. Leadership initiating conversations and being proactive about workload can lead to an improved work environment for both the nurse and the nurse manager.

Bo-Song Kim, Lee, M., & Jang, S. J. (2022). Hospital nurses' empathy and moral sensitivity toward elderly care: A cross-sectional study. *Journal of Nursing Management*, 30(7), 2138-2146. doi:<https://doi.org/10.1111/jonm.13442>

AimThe aim of this study is to explore factors that influence elderly caring attitudes, with a focus on empathy and moral sensitivity.
BackgroundMedical and nursing needs of the elderly have escalated as a consequence of changes induced by aging and the associated diseases and disabilities.
MethodA cross-sectional study involving 229 nurses from four general hospitals in South Korea was conducted. Questionnaires assessing demographic and work experience information, empathy (Empathy Construct Rating Scale), moral sensitivity (Korean version of the Moral Sensitivity Questionnaire) and elderly caring (Elderly Caring Attitude Scale) were used. Data were analysed using multiple regression analysis.
ResultsThe factors influencing the caring attitudes of nurses were empathy, moral sensitivity, preference for geriatric nursing and experience with continuing education in geriatric nursing. The explanatory power of this regression model was 59.4%.
ConclusionsStrategies to enhance empathy and moral sensitivity of nurses and education related to geriatric nursing might help improve elderly caring attitudes.
Implications for Nursing ManagementContinued education in geriatric nursing should be provided for nurses caring for the elderly. In terms of nursing management and education, it is necessary to consider and develop strategies to improve the empathy and moral sensitivity of nurses toward elderly patients.

Nielsen, B. K., Caroline, T. M., Morten, D. T., & Mehlsen, M. (2022). Changes in distress and turnover intentions among hospital-based nurses working during the first 8 months of the COVID-19 pandemic in Denmark: A prospective questionnaire study. *Journal of Nursing Management*, 30(7), 2557-2567. doi:<https://doi.org/10.1111/jonm.13781>

AimTo describe changes in distress among Danish hospital-based nurses during the early month of the COVID-19 pandemic and to examine predictors of distress and turnover intentions.
BackgroundOutbreak of infectious diseases such as the COVID-19 pandemic can increase the likelihood that health professionals suffer from poor mental health even after the outbreak.
MethodsA prospective study among 426 Danish hospital-based nurses during the early month of the pandemic. Participants completed self-administered questionnaires regarding mental health and COVID-19 worries, as well as turnover intentions.
ResultsNurses with brief work experience reported higher increase in distress. Feeling unsafe at work, having low trust in management and being anxious for relatives were associated with increased distress. Finally, feeling unsafe at work, being anxious for relatives and having low trust in management were predictors of intention to change job.
ConclusionThis study suggests that the subjective experiences of uncertainty in work during the COVID-19 pandemic have more impact on nurses' distress than COVID-19 related conditions at hospitals. Finally, the study provides empirical support for the association between COVID-19-related worries and turnover intentions.
Implication for nursing managementKnowledge of risk factors for psychological distress as well as predictors of turnover intention is necessary and may provide nurses and health-care systems with the ability to respond better against future pandemics and to retain nurses in the organization and in the profession.

Hae-Ok Kim, Lee, I., & Byoung-Sook Lee. (2022). Nursing leaders' perceptions of the state of nursing leadership and the need for nursing leadership education reform: A qualitative content analysis from South Korea. *Journal of Nursing Management*, 30(7), 2216-2226. doi:<https://doi.org/10.1111/jonm.13596>

AimThis study aimed to clarify nursing leaders' perceptions of nursing leadership education and practice.
BackgroundLeadership is an essential competency that is required in nursing practice. It is also necessary to pay more attention to the development of nurses' leadership to improve patient safety and outcomes.
MethodsParticipants were 15 nursing leaders. We adopted qualitative content analysis for data collected through individual and/or focus group interviews and analysed using the process of coding, condensing and categorizing.
ResultsThe results revealed the following five major themes with categories: (1) nursing leadership—commitment to nurses, the nursing profession and the organisation; (2) nursing leadership abilities—competency and compatibility, personality and traits; (3) importance of nursing leadership education to enhance educational efficiency and to nurture next-generation nursing leaders; (4) difficulties in nursing leadership education: lack of perception and difficulty of implementation; and (5) strategies for nursing leadership education: contents and methods.
ConclusionsNursing leaders' perception of nursing leadership was extended to nurses, organisations and nursing professions. Competency, capability, innate personality and traits are required nursing abilities that are acquired through education.
Implications for Nursing ManagementExperience and theoretical-based nursing leadership education should be introduced gradually and systematically from the beginning of nurses' careers.

Küçükkeleşçe, G. E., Tuba Koç Özkan, & Selda Ateş Beşirik. (2022). The relationship between moral distress levels and ethical climate perceptions of PICU nurses. *Journal of Nursing Management*, 30(7), 2416-2423. doi:<https://doi.org/10.1111/jonm.13871>

BackgroundThe organizational climate in paediatric intensive care units is specific to the conditions of the patient, and there may be a relationship between the ethical climate perception and moral distress levels of the nurses working in this unit.
AimThe research aim was to examine the relationship between the moral distress levels and their perceptions of hospital ethical climate of paediatric intensive care unit nurses.
MethodsThis research was aimed a descriptive, cross-sectional and correlational type with 239 paediatric intensive care unit nurses of public, university and training and research hospitals in Turkey. Research data were evaluated with mean, Pearson correlation and multiple linear regression analysis.
ResultsThe total score of moral distress scale was 106.36 ± 53.63 , and of the

hospital ethical climate scale was 100.60 ± 14.41 . A moderate negative relationship was found between nurses' moral distress levels and ethical climate perceptions, ethical climate perception explained moral distress levels with a 12% variance and this significance came from the physicians sub-dimension. **Conclusions** The moral distress levels of paediatric intensive care nurses were below the average, and their ethical climate perceptions were above the average. It was seen that the physicians sub-dimension was an important explanatory on the total moral distress. **Implication for Nursing Management** In order to eliminate the moral distress arising from the hospital ethical climate, practices should be developed to increase the cooperation between nursing and physicians.

Poškutė, M., Bartkienė, A., Fatkulina, N., & Gefenas, E. (2022). The contribution of professional autonomy in advancing ethical behaviour: A narrative review of studies in nursing. *Journal of Nursing Management*, 30(7), 2301-2307. doi:<https://doi.org/10.1111/jonm.13842>

Aim This article explores moral disagreements between nurses and physicians; specifically, we aim to analyse professional nurses' practice in navigating these conflicts. **Background** Nurses face morally challenging situations while caring for patients when their views on treatments and care may contradict those of physicians. It is important that nurses represent patients' perspectives and are partners in the care decision-making process. **Evaluation** A narrative review was conducted by including peer-reviewed articles in English. A literature search was conducted using the Web of Science database and Google Scholar search engine from 1 December 2021 to 10 February 2022. **Key issues** A total of 27 articles published between 2009 and 2021 were included in the analysis. The following themes were explored in this article: areas in which moral disagreements occur and how these disagreements shape physician–nurse relationships, differences in the status of professional autonomy in nursing in the Baltic states and Nordic countries, and potential directions for nurses' involvement in the decision-making process regarding moral disagreements in nursing practice. **Conclusions** Moral disagreements between nurses and physicians most often occur in situations related to treatment and/or care strategies as well as end-of-life decisions. Nurses' participation in the decision-making process and physicians' willingness to consider nurses' perspectives play a fundamental role in navigating moral conflicts because nurses possess a body of knowledge about their patients that differs from that of physicians. This knowledge is just as worthy as physician knowledge. Considering the level of professional autonomy in specific regions, nurses' involvement in decision-making regarding particular patients' care in the Baltic states seems to be relatively low compared to that in the Scandinavian countries, where nurses have a much wider space for independent decision-making. **Implications for Nursing Management** Complex moral situations that require the input of both physicians and nurses must be examined and addressed. Several processes may assist in fostering nurses' contributions to decision-making, among which training to effectively deal with morally complex situations and creating an atmosphere conducive to collaboration between physicians and nurses are particularly important.

Ramon-Sebastián Torrente-Jimenez, Angel Gasch-Gallén, Ariadna, G. S., Eva Fernández Lamelas, & Maria Feijoo-Cid. (2022). Nursing students' care of and attitudes towards lesbian, gay, bisexual, trans, and intersex people in times of COVID-19 in Spain: A cross-sectional study. *Journal of Nursing Management*, 30(7), 2633-2641. doi:<https://doi.org/10.1111/jonm.13821>

Objective The objective of this work is to measure the knowledge and attitudes of Catalan nursing students regarding lesbian, gay, bisexual, trans, and intersex (LGBTI) patients, as well as their perception of specific training in this area, according to their internship modalities, sociodemographic circumstances, and academic background during the COVID-19 pandemic. **Background** During the COVID-19 pandemic, the Spanish Government created the "Health-Aid" internship: A paid alternative to curricular internships. There is extensive evidence that paid work environments perpetuate negative attitudes towards LGBTI patients. **Method** A cross-sectional survey aimed at Catalan nursing students. The "Attitudes Towards and Knowledge About Lesbian, Gay, Bisexual, Trans and Intersex Patients" questionnaire was adapted. A descriptive study and backward regression models were constructed. **Results** Three hundred thirty-seven students, mean age 23.80 years (SD: 5.17) participated; 85% women and 54 (16%) completing the Health Aid internship modality. More than 50% did not attend specific training on the care of the lesbian, gay, bisexual, trans, and intersex population. Differences between internship modalities showed higher values in the curricular internship group: Attitudes ($U=6526.50$, $p=.031$) and training perception ($U=5926.50$, $p=$

.008).ConclusionsNursing students' attitudes towards lesbian, gay, bisexual, trans, and intersex patients and their perception of specific training on care for this population were negatively influenced by the paid Health Aid internship during the pandemic.Implications for Nursing ManagementEven under dire circumstances, clinical training must be properly managed to address the specific health needs of vulnerable populations, such as lesbian, gay, bisexual, trans, and intersex patients. Paid internships in emergency scenarios may impede these objectives.

Heba E El-Gazar, Zoromba, M. A., Abeer, M. Z., Abualruz, H., & Abousoliman, A. D. (2022). Effect of humble leadership on proactive work behaviour: The mediating role of psychological empowerment among nurses. *Journal of Nursing Management*, 30(7), 2689-2698. doi:<https://doi.org/10.1111/jonm.13692>

AimThis study was designed to determine the effect of humble leadership on nurses' proactive behaviours at work through psychological empowerment.**Background**Nurse leaders' humility has a profound effect on enhancing nurses' proactive work behaviour; yet, the mechanism underlying this pattern of effect remains unknown.**Methods**A descriptive cross-sectional study was conducted in all nine Universal Health Insurance hospitals in Port Said, Egypt. Using scales for assessing leader humility, psychological empowerment and proactive behaviour at work, 316 nurses were surveyed. Regression analyses and structural equation models were used to examine the study hypothetical model.**Results**The results revealed that humble leadership, psychological empowerment and proactive work behaviour were significantly positively correlated. Psychological empowerment fully mediated the relationship between humble leadership and proactive work behaviour.**Conclusion**This study emphasized the value of humble leadership in psychologically empowering nurses, which results in greater proactive work behaviour.**Implication for Nursing Management**Nurse managers should lead their nursing staff with humility, which could increase the level of nurses' psychological empowerment and proactive behaviours at work, which will be reflected positively on the staffs and the organization.

Harton, L., & Skemp, L. (2022). Medical–surgical nurse leaders' experiences with safety culture: An inductive qualitative descriptive study. *Journal of Nursing Management*, 30(7), 2781-2790. doi:<https://doi.org/10.1111/jonm.13775>

AimThe aim of this study is to describe safety culture as experienced by medical–surgical nurse leaders.**Background**Safety culture remains a barrier in safer patient care. Nurse leaders play an important role in creating and supporting a safety culture.**Methods**We used an inductive qualitative descriptive study using semistructured interviews, document review and observations in a Midwestern community hospital in the United States.**Results**Results of the study are as follows: making sure nurses are keeping patients safe, making sure nurses have nursing interventions in place, expecting nurses to stop unsafe acts or escalate when they feel uncomfortable, making sure nurses have what they need to provide safe care, organization prioritizes patient safety and making sure nurses are learning and growing emerged as themes describing safety culture.**Conclusions**Nurse leaders made sure patients were safe by making sure everyone was doing their best to provide safe care. Insufficient time, too many priorities, insufficient resources, poor physician behaviours and lack of respect for their role emerged as barriers to leading a safety culture.**Implications for Nursing Management**Organizations must remove barriers for nurse leaders to develop and lead a safety culture. Nurse leaders must learn to advocate successfully for safe nursing care and professional work environments.

Ha-Ra Jang, & Ji-Soo Kim. (2022). Emergency nurses' attitudes, perceptions about personal protective equipment and willingness to care for COVID-19 patients: A descriptive, cross-sectional study. *Journal of Nursing Management*, 30(7), 2514-2522. doi:<https://doi.org/10.1111/jonm.13720>

AimsThis study investigated emergency nurses' attitudes and perceptions about personal protective equipment and their association with the willingness to care for COVID-19 patients.**Background**Emergency nurses are at increased risk for COVID-19 infection as frontline workers and must wear personal protective equipment while attending suspected and confirmed COVID-19 patients.**Methods**In September 2021, 188 nurses in four emergency departments completed online questionnaires.**Results**Multivariable logistic regression demonstrated that as perceptions of COVID-19 infection risk increased by 1 point, 26% of nurses were willing to care of COVID-19

patients. The willingness to care for COVID-19 patients increased in their attitudes by 1.16 point and perceptions by 1.08 points about PPE. Conclusions Perceptions of the risk of infection exposure and confidence in safety of personal protective equipment are associated with nurses' willingness to care for COVID-19 patients. Implications for Nursing Management Nurse managers need to assess nurses' needs for safety and provide a supportive climate to mitigate their concerns regarding infection risk and encourage nurses' willingness to care for patients. Nurse managers should provide precise guidelines on correct personal protective equipment use. Repetitive training on personal protective equipment should be provided to encourage nurses' adaptation to its use.

Susuki, T., Kida, R., Takemura, Y., Ichikawa, N., Kunie, K., & Koyanagi, H. (2022). Work-related communication mediates the relationship between perceived diversity climate and psychological empowerment among part-time nurses: A cross-sectional study. *Journal of Nursing Management*, 30(7), 3041-3050. doi:<https://doi.org/10.1111/jonm.13703>

Aim This study investigates which work-related communication mediates the relationship between diversity climate and psychological empowerment among part-time nurses. Background Part-time nurses' high psychological empowerment is desirable because it may lead to high quality nursing practice. Methods Anonymous self-report questionnaires or web-based surveys were used to measure diversity climate (Climate for Inclusion Scale), psychological empowerment (Japanese version of the Psychological Empowerment Scale) and work-related communication (scale developed in this study). The respondents were part-time nurses from departments with shift work in six Japanese hospitals having over 200 beds. The surveys were conducted from September to October 2020. Multiple regression analyses and a significance test of indirect effects were then conducted. Results Among the work-related communication components, 'expressing thoughts about their work' fully mediated the relationship between diversity climate and psychological empowerment. Conclusions It is important for part-time nurses to be actively 'expressing thoughts about their work' to enhance their psychological empowerment. Positive diversity climate is also important because it allows part-time nurses to express their thoughts regarding work. Implications for Nursing Management Managers can enhance part-time nurses' psychological empowerment by encouraging them to express their work-related opinions based on the diversity climate.

Laukkanen, L., Suhonen, R., Poikkeus, T., Löyttyniemi, E., & Helena Leino-Kilpi. (2022). The effectiveness of the ethics quarter intervention on the ethical activity profile of nurse managers: A randomized controlled trial. *Journal of Nursing Management*, 30(7), 2126-2137. doi:<https://doi.org/10.1111/jonm.13411>

Aim To test the effectiveness of a new ethics educational e-learning intervention, Ethics Quarter, in supporting nurse managers' ethical activity profile. Background Health care organisations need evidence-based ethics interventions to support nurse managers' ethical activity profile. Methods A parallel-group, individually randomized controlled trial was conducted in 2020. Finnish nurse managers nationwide members of the Union of Health and Social Care Professionals in Finland (Tehy trade union] were randomly allocated to intervention (n= 169) or control group (n= 172). The intervention group participated in the Ethics Quarter comprising twelve 15-min evidence-based educational 'quarters' spread over 6 weeks. The control group had standard organisational ethics structures. The primary and secondary outcomes were ethical activity profile and ethics knowledge, respectively. The Consolidated Standards of Reporting Trials (CONSORT) statement for study design and reporting was adopted. Results Ethical activity profile showed statistically significant differences in mean changes between the groups from baseline to 10 weeks: all five dimensions were statistically significantly higher in the intervention group compared with the control group (p=<.0001). Conclusion The Ethics Quarter was effective in increasing nurse managers' ethical activity profile. Implications for Nursing Management Applying this ethics educational e-learning intervention would benefit nursing management education and health care organisations. Trial Registration clinicaltrials.gov: NCT04234503.

Raquel Jiménez-Fernández, Inmaculada Corral-Liria, Bibiana Trevissón-Redondo, Daniel Lopez-Lopez, Marta Losa-Iglesias, & Ricardo Becerro-de-Bengoa-Vallejo. (2022). Burnout, resilience and psychological flexibility in frontline nurses during the acute phase of the COVID-19 pandemic (2020) in madrid, spain. *Journal of Nursing Management*, 30(7), 2549-2556. doi:<https://doi.org/10.1111/jonm.13778>

BackgroundIn April 2020, Spain was the country with the highest number of patients infected by COVID-19 in Europe. The pressure on health care providers has had a direct impact on nurses and their mental health.**Aim**The aim of this study is to demonstrate the causal relationship between resilience, acceptance, experiential avoidance, psychological inflexibility and burnout syndrome, all of which are measured with validated questionnaires.**Methods**This was designed as a transversal correlational study with nurses who worked during the acute phase of the pandemic in public hospitals in the Community of Madrid with patients diagnosed with COVID-19 in COVID-19 medical hospitalization units, emergency services and intensive care units. Google Forms was used to obtain an informed consent sheet, socio-demographic variables and the following questionnaires: 10 CD-Risk, Connor-Davidson Risk Resilience Scale, Acceptance and Action Questionnaire-II and the Maslach Burnout Inventory.**Results**The final sample included 375 nurses with a high number of consecutive days of direct exposure to an infected patient and a very high number of consecutive days without rest; almost 18% suffered from COVID-19. The nurses presented medium levels of resilience, medium levels of experiential avoidance and medium levels as measured for emotional exhaustion, personal accomplishment and depersonalization. We also found a predictive correlation between all the dimensions of the burnout questionnaire in relation to the data obtained from the resilience questionnaire.**Conclusions**There is a direct and predictive relationship between the resilience that nurses had during the acute phase of the pandemic and their capacity for acceptance, experiential avoidance, psychological inflexibility and burnout syndrome.**Implications for Nursing Management**The scores show the necessity to implement preventive measures to avoid fatal psychological consequences for nurses.

Ishihara, I., Inagaki, S., Osawa, A., Umeda, S., Hanafusa, Y., Morita, S., & Maruyama, H. (2022). Effects of an ethics education program on nurses' moral efficacy in an acute health care facility. *Journal of Nursing Management*, 30(7), 2207-2215. doi:<https://doi.org/10.1111/jonm.13579>

AimThis study aimed to evaluate an ethics education program developed to increase moral efficacy among nurses in an acute health care facility.**Background**Moral distress among nurses can cause serious problems in terms of hospital organisations and patient safety. To reduce moral distress and promote professional confidence in nursing practice, a strategic intervention program is needed.**Methods**An ethics education program introduced methods to increase self-efficacy in accordance with Bandura's social cognitive theory. Eight nurses were recruited from 2017 to 2019, and all conversations and discussions regarding the ethics consultation were recorded on IC recorders and analysed qualitatively.**Results**Four core categories—Convinced to take an active role in ethical issues; Progressed in nursing practice with ethical agency; Experienced professional transformation; and Empowered by the presence of colleagues—emerged as outcomes of the ethics education program that related to moral efficacy.**Conclusions**The four core outcome categories suggested that the participants had gained confidence after taking part in the ethical education program.**Implications for nursing management**The results of the participants' described behaviours and actions suggested that they would be proactive in contributing to reductions in moral distress in the future.

Li, J., Wang, Q., Chang, G., Luo, L., & Hu, X. (2022). Compassion fatigue and compassion satisfaction among chinese palliative care nurses: A province-wide cross-sectional survey. *Journal of Nursing Management*, 30(7), 3060-3073. doi:<https://doi.org/10.1111/jonm.13708>

AimsWe aim to explore the prevalence and potential facilitators and inhibitors of compassion fatigue and compassion satisfaction among Chinese palliative care nurses.**Background**Nurses with compassion fatigue may suffer from health-related problems, causing decreased work efficiency and quality of care. Palliative care nurses are especially at risk of compassion fatigue due to close contact with terminal patients.**Methods**A province-wide cross-sectional survey using convenience sampling was conducted among 318 palliative care nurses at 25 hospitals and healthcare institutions in Sichuan Province, China. Data were collected using demographic questionnaire and five scales: Professional Quality of Life Scale, General Self-Efficacy Scale, Perceived Social Support Scale, Simplified Coping Style Questionnaire, and Connor-Davison Resilience Scale. Data analyses including descriptive statistics, t-test, one-way ANOVA, simple linear regression, and multiple linear regression.**Results**Mean scores (SD) for burnout, secondary traumatic stress, and compassion satisfaction were 25.42 (4.75), 26.08 (5.72), and 35.67 (5.77), respectively. Related factors predicted 40.30%, 27.10%, and 35.4% of the variance in the model of burnout, secondary traumatic stress, and compassion satisfaction, respectively (all $p < .001$).**Conclusions**The levels of burnout

and secondary traumatic stress among Chinese palliative care nurses were higher than those among other types of nurses. Social support, resilience, positive coping, family recognition of work, and income satisfaction are inhibitors of compassion fatigue among palliative care nurses. Implications for Nursing Management Nursing administrators and educators should consider providing effective and targeted strategies (e.g. ongoing training and psychological interventions) to decrease compassion fatigue among palliative care nurses based on the cultural and ethical settings.

Signe, G. J., Myrvang, T., Laila, S. R., Rønning, G., & Vatne, S. (2022). Nurse leaders' experiences of professional responsibility towards developing nursing competence in general wards: A qualitative study. *Journal of Nursing Management*, 30(7), 2743-2750. doi:<https://doi.org/10.1111/jonm.13745>

AimTo explore nurse leaders' experiences of professional responsibility to facilitate nursing competence in general wards.
BackgroundNurse leaders are responsible for maintaining high levels of competence among nurses to improve patient safety.
MethodsQualitative analysis was conducted between February and April 2019 using semi-structured interview data from 12 nurse leaders in surgical and medical wards at three Norwegian hospitals.
ResultsFour main themes were identified: struggle to achieve nursing staff competence; focus on operational and budgetary requirements rather than professional development; demands to organize sick leaves and holiday periods; and challenges in facilitating professional development.
ConclusionNurse leaders felt that their responsibilities were overwhelming and challenging. They witnessed more support for current administrative tasks than for the implementation of professional development. Additionally, unclear work instructions from the employer provided few opportunities to facilitate professional development. Hospital management failed to ensure quality of care and patient safety in general wards by not supporting the strengthening of nurses' professional competence and preventing turnover.
Implications for Nursing ManagementManagement may integrate formal work instructions that clarify nurse leaders' responsibilities as professional developers, allowing nurse leaders to meet their obligation of maintaining adequate professional competence among nursing staff in general wards.

Gan, I. (2022). Understanding the causes and consequences of envy among nurses: A scoping review. *Journal of Nursing Management*, 30(7), 2825-2832. doi:<https://doi.org/10.1111/jonm.13695>

AimThis scoping review presents an overview of the causes and consequences of envy among clinical nurses.
BackgroundMany nurses in the United States have in recent years left their permanent positions for temporary agency assignments that pay higher salaries. Although greed seems like a likely explanation for the rise in travel nursing, humans tend to have a particular interest in wanting what others have.
EvaluationA five-stage scoping review framework and the PRISMA-ScR checklist guided this review.
Key issuesSocial comparison and malicious envy are prevalent among nurses. Envy is a powerful emotion that affects human communication and behaviour in organizations. Scholars have underexplored the potential benefits of leveraging benign envy in the nursing context.
ConclusionThe results highlight the relational nature of envy. Social comparison and envy provide an insight that suggests that nurses who change jobs are not necessarily greedy. They may be seeking the right mix of tangible and intangible rewards.
Implications for Nursing ManagementGreed and envy can motivate nurses to change jobs. Although envy and greed may produce the same outcome, they are qualitatively different. The motivation to change jobs alludes to nurses' desire to have better control of their professional and personal lives.

Myllymäki, S., Laukka, E., & Kanste, O. (2022). Health and social care frontline leaders' perceptions of competence management in telemedicine in Finland: An interview study. *Journal of Nursing Management*, 30(7), 2724-2732. doi:<https://doi.org/10.1111/jonm.13740>

AimThis work aims to describe competence management in telemedicine from the perspective of health and social care frontline leaders.
BackgroundThe increasing use of services in health and social care is a challenging aspect of modern telemedicine; it requires staff to develop relevant professional competence and good telemedicine practices.
MethodsThe study was conducted using thematic interviews of frontline leaders from primary health care, specialized medical care and social care (n=10) in the spring of 2021. The data were analysed by inductive content analysis.
ResultsThe following main categories were identified: Activities of frontline leaders while managing

competence in telemedicine, promotion of community learning, competence management in determining telemedicine content, and recognizing health and social care professionals' competence in telemedicine. **Conclusions** Achieving the goals set for telemedicine requires ensuring that knowledge from leaders is widely disseminated and shared and that staff are adequately trained. The results can be utilized in the practical work of other telemedicine and in the development of their operations. **Implications for Nursing Management** Managing competence in telemedicine requires from the leaders an encouraging attitude and improved personal interactions in the work community.

Valerio, D. B., Fiorini, J., Gioiello, G., Zaghini, F., & Sili, A. (2022). Towards a new conceptual model for nurses' organizational well-being: An integrative review. *Journal of Nursing Management*, 30(7), 2833-2844. doi:<https://doi.org/10.1111/jonm.13750>

Aim The aim of this study is to summarize conceptual models of nurses' organizational well-being and identify common variables among them. **Background** To understand how the characteristics of an organizational context affect workers' well-being, numerous conceptual models have been developed. Such models have been conceptualized in various working contexts other than health care and not always considering the particularities of the profession of nursing. **Evaluation** This integrative review was conducted using the resources of PubMed, CINAHL, Scopus and the Cochrane Library, up until March 2022, and by applying a modified version of Cooper's five-stage methodology, in accordance with the PRISMA guideline. **Key issues** Six reference models focused on different organizational variables and used to evaluate nurses' organizational well-being were identified: the Effort-Reward Imbalance (ERI) model; the Job Demands-Resources (JD-R) model; the Utriainen et al. model; the Demands-Resources and Individual-Effects (DRIVE) model; the Well-Being, Health-Promoting Lifestyle and Work Environment Satisfaction (WHS) model and the Nursing Worklife Model (NWM). **Conclusion** There is no consensus in the nursing literature on an all-encompassing conceptual model of nurses' organizational well-being or on working environment characteristics to be studied or monitored for defining nurses' well-being. **Implications for nursing management** Coming to a consensus on the definition of a nurses' organizational well-being model and its variables would facilitate nursing management in monitoring and intervening on nurses' work-life quality and in improving nursing performance and caring outcomes.

Xiao, S., Shi, L., Huang, L., Zhao, S., Ou, W., Zhang, J., . . . Zhang, C. (2022). The impact of psychological capital on turnover intention among chinese nurses: A moderated mediation model. *Journal of Nursing Management*, 30(7), 3031-3040. doi:<https://doi.org/10.1111/jonm.13702>

Aims This study examined how the mediating effect of psychological distress and the moderating role of social support influence the connection between psychological capital and turnover intention among Chinese nurses. **Background** Nurses play a crucial role in medical and health services, but turnover intentions are common among them. **Methods** A cross-sectional survey was conducted involving 4865 nurses in China. The Chinese Psychological Capital Questionnaire, Depression, Anxiety and Stress Scale, Social Support Rating Scale, and Turnover Intention Scale were used to gather data. Bootstrap and simple slope methods were used to test the mediating effect of psychological distress and the moderating effect of social support. **Results** Psychological capital had a significant direct impact on turnover intention among nurses ($B = -0.040$, $t = -10.032$, $p < .001$). Psychological distress had a mediation effect of 46.89% between psychological capital and turnover intention. Moreover, social support had a moderating role in the relationship between psychological distress and psychological capital and between psychological distress and turnover intention. **Conclusions** Psychological capital correlated negatively with psychological distress and turnover intention and indirectly influenced turnover intention through psychological distress. Social support moderated the first and second half of the path in the mediating model of psychological distress. These findings have implications for early intervention for and the prevention of turnover intention in nurses. **Implications for Nursing Management** This study's findings can inform the design of effective nurse support programmes to reduce the impact of psychological distress on turnover intention among nurses.

Hamdan, K., Zahran, Z., Allari, R. S., & Shaheen, A. (2022). Nurses' perceptions of hourly rounding in jordanian hospitals: A national survey. *Journal of Nursing Management*, 30(7), 2945-2956.

AimThis study aims to explore nurses' perceptions of hourly rounding in Jordanian hospitals.
BackgroundHourly rounding is a standardized and systematic process conducted by nurses to anticipate and address needs in hospitalized patients. The evidence on hourly rounding is mixed, and research is needed to affirm the benefits of implementing hourly rounding across different contexts.
MethodA cross-sectional correlational design was used. A convenient sample of 1378 nurses was recruited from one military hospital, two university-affiliated hospitals, four governmental hospitals and four private hospitals in Jordan. The Hourly Rounding Questionnaire was used to collect data. Descriptive statistics, t test, one-way ANOVA and Kruskal–Wallis H test were used to analyse the data.
ResultsThe highest agreements between nurses were on the items related to the implementation of hourly rounding in terms of 'preventing patient falls' 1211 (87.9%), 'preventing hospital-acquired pressure ulcers' 1201 (87.2%) and 'addressing patients' position' 1199 (87%). The lowest agreements between nurses were on the items related to the involvement of nurses in the decision-making process and sense of ownership 268 (19.4%) and the availability of continued support and resources 239 (17.3%). Female nurses, nurses who often work on a shift rotation, nurses working in private hospitals and respiratory units had a positive perception of hourly rounding.
Implications for Nursing ManagementFindings will inform nursing leaders and policy developers about the implementation of hourly rounding from nurses' perspectives. A protocol should accompany hourly rounding for robust evaluation to measure the impact of this process change with the involvement of nurses in the decision-making process.

Lucas, G., Colson, S., Boyer, L., Gentile, S., & Fond, G. (2022). Work environment and mental health in nurse assistants, nurses and health executives: Results from the AMADEUS study. *Journal of Nursing Management*, 30(7), 2268-2277. doi:<https://doi.org/10.1111/jonm.13599>

AimThis study aimed to explore work environment and mental health in nurse assistants, nurses and health executives in a national large-scale study.
BackgroundWe have data for physicians but not for other health care workers categories.
MethodsA total of 6935 participants were recruited between May and June 2021 by professional mailings and professional networks.
ResultsAll professional categories reported high rates of high psychological demand (>90%), low social support (>60%), burnout (50% to 60%), exposure to potentially morally injurious events (>40%) and depression (approximately 30%). Surgery nurses reported the highest exposure to potentially morally injurious events. Major depression was identified in approximately 30% of participants in all categories, but less than 10% reported consuming antidepressants. A total of 31% to 49% of participants reported sleep disorders and 16% to 21% reported consuming regularly hypnotics. Physicians reported high hazardous drinking behaviour and nurse assistant high smoking rates.
Conclusions and Implications for Nursing ManagementOur results suggest that preventing burnout and depression in health care workers is a priority. To reach this goal, nursing managers could develop some interventions to reduce psychological demand and increase personal accomplishment and social support between colleagues, and prevent sustained bullying at the workplace and health risk behaviours. These interventions should be further developed and evaluated.

Ferreira Aydogdu, A. L. (2022). Ethical dilemmas experienced by nurses while caring for patients during the COVID-19 pandemic: An integrative review of qualitative studies. *Journal of Nursing Management*, 30(7), 2245-2258. doi:<https://doi.org/10.1111/jonm.13585>

AimThis study aimed to identify ethical dilemmas faced by nurses while caring for patients during the COVID-19 pandemic.
BackgroundNurses express several concerns during disease outbreaks, some of which are related to ethical dilemmas.
EvaluationIt is an integrative review in which four databases were searched. Critical appraisal tools and PRISMA guidelines were used. Content analysis was performed to analyse the obtained data.
Key issuesA total of 14 studies were identified. The results are presented into four categories: concerns with beneficence–nonmaleficence; awareness of need for autonomy; challenges to justice; and coping with ethical dilemmas.
ConclusionWhile caring for patients during the COVID-19 pandemic, nurses often put their own health and that of their families at risk. The ethical dilemmas faced by nurses are mainly caused by the lack of Protective Personal Equipment (PPE), shortages of medical supplies and personnel and the uncertainties that permeate an

environment threatened by a new and highly contagious disease such as COVID-19. Implications for nursing management This review provides information that can inspire nurse managers working during the COVID-19 pandemic to support and empower nurses to act in accordance with ethical principles, which is important in order for nurses to protect themselves while providing efficient and effective care.

Bu, M., Ma, H., Zhai, H., Ma, Y., & Xu, N. (2022). Role of self-efficacy in nursing organizational climate: A way to develop nurses' humanistic practice ability. *Journal of Nursing Management*, 30(7), 2107-2115. doi:<https://doi.org/10.1111/jonm.13516>

Aim This study aimed to investigate the impact of self-efficacy on the relationship between organizational climate and humanistic practice ability (HPA) in Chinese nurses. **Background** To date, studies on the effect of organizational climate on nursing care have focused on care outcomes rather than care processes. Thus, this effect remains poorly understood. **Methods** A total of 757 participants were sampled from three tertiary hospitals in Guangdong Province from November to December 2019; subsequently, they completed a structured electronic questionnaire. A structural equation model was used to explore the impact of nursing organizational climate on nurses' HPA. **Results** A total of 688 valid questionnaires were collected. The nurses' average HPA score was 107.82 (SD 12.47). There was a positive correlation between organizational climate and HPA ($r = .409$, $p < .05$). Additionally, self-efficacy mediated this relationship ($p < .01$). **Conclusions** This study provides new insights into nursing organizational climate, self-efficacy and nurses' HPA. **Implications for Nursing Management** The significant mediating effect of self-efficacy suggests that managers should implement nurse professional development programmes using targeted strategies to foster greater self-efficacy, which could improve the quality of care and nurse-patient relationships.

Bayram, A., Pokorná, A., Ličen, S., Beharková, N., Saibertová, S., Wilhelmová, R., . . . Palese, A. (2022). Financial competencies as investigated in the nursing field: Findings of a scoping review. *Journal of Nursing Management*, 30(7), 2801-2810. doi:<https://doi.org/10.1111/jonm.13671>

Aim(s) This study aims to map the extent of the research activity in the field of financial competencies and nursing and identify main patterns, advances, gaps, and evidence produced to date. **Background** Financial competencies are important indicators of professionalism and may influence the quality of care in nursing; moreover, these competencies are the basis of health care sustainability. Despite their relevance, studies available on financial competencies in the nursing field have not been mapped to date. **Evaluation** A scoping review was guided according to (a) the Preferred Reporting Items for Systematic Reviews and Meta-Analyses extension for Scoping Review and (b) the Patterns, Advances, Gaps and Evidence for practice and Research recommendations framework. **Key issue(s)** A total of 21 studies were included. Main research patterns have been developing/evaluating the effectiveness of education programmes and investigating the nurse's role in the context of financial management, challenges and needs perceived by them, and tool validation to assess these competencies. The most frequently used concept across studies was 'financial management competencies' ($n = 19$). **Conclusion(s)** The sparse production of studies across countries suggests that there is a need to invest in this research field. **Implications for nursing management** Nurses with managerial roles should invest in their financial competencies by requiring formal training both at the academic and at the continuing education levels. They should also promote educational initiatives for clinical nurses, to increase their capacity to contribute, understand, and manage the emerging financial issues.

Papinaho, O., Arja Häggman-Laitila, Pasanen, M., & Kangasniemi, M. (2022). Disciplinary processes for nurses, from organizational supervision to outcomes: A document analysis of a regulatory authority's decisions. *Journal of Nursing Management*, 30(7), 2957-2967. doi:<https://doi.org/10.1111/jonm.13679>

Aim This study aims to explore the disciplinary processes for nurses, from organizational supervision to final decisions by the Finnish regulatory authority. **Background** Regulatory authorities are responsible for protecting the public, by ensuring that they receive safe, competent and ethical nursing care, but little is known about the disciplinary processes for nurses. **Methods** This is a retrospective document analysis of 296 disciplinary decisions by the Finnish regulatory authority from 2007 to 2016. The data were analysed using a quantitative design with descriptive statistics. **Results** We studied 204 disciplined nurses (81.4% female) with a mean age of 43.5 years. The

disciplinary process comprised organizational supervision, complaints, investigations and decisions. Nurses with substance abuse issues were more likely to face criminal investigations and receive temporary decisions. The process lasted from under 1 month to years and could have profound effects on nurses, colleagues and nurse managers and compromise patient safety. Conclusion This study identified key factors that could inform the disciplinary processes for nurses. More knowledge is needed about how organisations ensure patient safety when unprofessional conduct is suspected. Implications for Nursing Management Retaining nursing professionals is vital due to global shortages, and more attention should be paid to organizational supervision and support for nurses during disciplinary processes.

Morley, G., Copley, D. J., Field, R., Zelinsky, M., & Albert, N. M. (2022). RESPONDER: A qualitative study of ethical issues faced by critical care nurses during the COVID-19 pandemic. *Journal of Nursing Management*, 30(7), 2403-2415. doi:<https://doi.org/10.1111/jonm.13792>

Aims To identify and understand ethical challenges arising during COVID-19 in intensive care and nurses' perceptions of how they made "good" decisions and provided "good" care when faced with ethical challenges and use of moral resilience. Background Little is known about the ethical challenges that nurses faced during the COVID-19 pandemic and ways they responded. Design Qualitative, descriptive free-text surveys and semi-structured interviews, underpinned by appreciative inquiry. Methods Nurses working in intensive care in one academic quaternary care centre and three community hospitals in Midwest United States were invited to participate. In total, 49 participants completed free-text surveys, and seven participants completed interviews. Data were analysed using content analysis. Results Five themes captured ethical challenges: implementation of the visitation policy; patients dying alone; surrogate decision-making; diminished safety and quality of care; and imbalance and injustice between professionals. Four themes captured nurses' responses: personal strength and values, problem-solving, teamwork and peer support and resources. Conclusions Ethical challenges were not novel but were amplified due to repeated occurrence and duration. Some nurses' demonstrated capacities for moral resilience, but none described drawing on all four capacities. Implications for Nursing Management Nurse managers would benefit from greater ethics training to support their nursing teams.

Kim, S., Jeong, S. H., & Seo, M. H. (2022). Nurses' ethical leadership and related outcome variables: Systematic review and meta-analysis. *Journal of Nursing Management*, 30(7), 2308-2323. doi:<https://doi.org/10.1111/jonm.13726>

Aim To investigate the outcomes and the effect sizes of ethical leadership in nursing practice. Background Many meta-analysis of ethical leadership have been conducted in other fields, but there are none for the effects of ethical leadership of nurse leaders and should be investigated. Evaluation For a systematic literature review, we searched PubMed, EMBASE, the Cochrane Library, CINAHL, OVID, Web of Science and Korean databases for studies published in Korean or English. We used Comprehensive Meta-Analysis (CMA) 2.0 and R 3.6.2 for the meta-analysis. Key issues We divided the outcomes of ethical leadership into three categories and investigated the effect sizes: subordinates' perceptions of their leaders (ES=0.65), subordinates' ethical behaviours (ES=0.04) and job or organisational outcomes (ES=0.45). In addition, we identified 14 outcome variables, and transformational leadership showed the greatest effect size (ES=0.77) among them. Conclusion This study confirmed the positive effects of ethical nursing leadership on individual nurses' perceptions about their leaders, their jobs and organisations. Implications for nursing management Nursing organisations and nurse administrators should make efforts to highlight ethical leadership of nurse leaders to improve outcomes of organisational performance including individual nurses' perceptions about their leaders, their jobs and organisations.

Ashipala, D. O., & Nghole, T. M. (2022). Factors contributing to burnout among nurses at a district hospital in Namibia: A qualitative perspective of nurses. *Journal of Nursing Management*, 30(7), 2982-2991. doi:<https://doi.org/10.1111/jonm.13693>

Aim The aim of this study was to explore and describe the factors that contribute to burnout among nurses. Background Burnout remains one of the major occupational health problems, posing risks to human health

globally. In Namibia, there has been growing public criticism of nurses, stating that they are rude or act in a manner that does not show professionalism towards their clients. Reasons for such unprofessional behaviour could be linked to negative attitudes on the part of nurses towards their clients, resulting from burnout syndrome. Method A qualitative, exploratory, descriptive and contextual research design was followed as the basis for conducting the study. Using a purposive sampling technique, a sample of 20 nurses was selected from a population of 69 nurses employed in this setting. This sample size was determined by the saturation of data as reflected in repeating themes. Data were collected using individual semi-structured interviews and were analysed using qualitative thematic analysis. Results The following three themes emerged: understanding the concept of burnout, factors leading to burnout and creating a conducive environment as a corrective measure to address burnout and to advance nurses. Conclusions Burnout is indeed real and affects nurses' performance negatively. Burnout has a negative impact on the well-being of nurses both physically and emotionally, which has the potential to compromise staff performance, productivity and the quality of patient care. Burnout among nurses is linked to many stressors such as poor staff management, inadequate resources, lack of support and lack of wellness programmes in the workplace. Implications for Nursing Management Strengthening communication between frontline health workers and management by engaging and involving them more in decision making in matters that concern them is anticipated to address poor staff management, enhance staff performance and improve the quality of patient care. Staff wellness programmes in the workplace are believed to be a good coping mechanism to address work-related pressure and tensions, and they are believed to resolve some work-related stress that may result in increased staff productivity.

Frangieh, J., & Jones, T. (2022). Factors facilitating or inhibiting the capacity for effective leadership among front-line nurse managers: A scoping review. *Journal of Nursing Management*, 30(7), 2653-2669. doi:<https://doi.org/10.1111/jonm.13776>

Aims The purpose of this scoping review is to map and synthesize research studies addressing the factors that impact leadership behaviours of front-line nurse managers. Background Leadership is a fundamental component of the role of front-line nurse managers. Ineffective leadership is associated with costly outcomes; thus, organizations seek effective strategies to facilitate consistent demonstration of leadership behaviours. Evaluation Using a scoping review methodology, findings from 26 empirical studies were mapped to identify barriers and facilitators of leadership among front-line nurse managers. Major categories included personal and environmental factors with subthemes of personal characteristics, competencies and social support. Key Issues Available evidence captures the influence of personal characteristics, education, competency and formal social support on leadership capacity. The role of informal social support was not captured. Conclusions Multiple personal and environmental factors influence the capacity for leadership behaviours among front-line nurse managers. Strategies such as leadership development programmes, mentorship and peer support programmes, and work environments that support relational and structural support may increase leadership capacity for front-line nurse managers. Implications for Nursing Management Senior nurse leaders can use the results of this review to guide implementation of evidence-based strategies to recruit and retain front-line nurse managers.

Xu, B., Yang, W., Li, S., Tong, Z., & Lin, Z. (2022). Knowledge sharing behaviour among critical care nurse specialists: A cross-sectional study. *Journal of Nursing Management*, 30(7), 2881-2888. doi:<https://doi.org/10.1111/jonm.13573>

Aims To investigate the knowledge sharing behaviour of critical care nurse specialists and identify potential influencing factors. Background The specialist knowledge of critical care nurses is an important resource for the nursing team. It is necessary to investigate influencing factors of knowledge sharing behaviour of them. Methods Convenience sampling was used to conduct an investigation involving critical care nurse specialists from three provinces in China between October 2018 and June 2019. Practice Environment Scale, Competency Inventory for Registered Nurses, Knowledge Self-efficacy Scale, and knowledge sharing behaviour scale were utilized. Results The knowledge sharing behaviour score of critical care nurse specialists was 64.84 ± 11.53 . The results of the regression analysis showed that the level of education, position, involvement of nurses in hospital affairs, knowledge, self-efficacy, sex, average number of night shifts per month, years engaged in nursing work, type of employment, leadership skills, critical thinking ability and manpower and material resources accounted for 45.9%

of the variance. Conclusions Critical care nurse specialists exhibited limited knowledge sharing behaviour. Therefore, interventions based on the dependent variables are necessary. Implications for Nursing Management Knowledge sharing behaviour of critical care nurse specialists remains at a low level. Hence, it is necessary to encourage their greater participation according to associated factors.

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