Effect of Educational Program about Organizational Support on Nurses' Work Performance

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Abstract

Background: Perceived organizational support is one of the main concepts that have a considerable impact on organization, it affects all organizational policies The study aims to examine the effect of an educational program about organizational support on nurse's work performance Design: Quasi experimental research design used in carrying out this study. Setting: This study conducted at Nasser Institute Hospital. Subjects: Study subjects included all staff nurses who a year work (their total number is 125 staff nurses). Tools of data collection: Data in this study was collected by using three types of tools, namely work performance questionnaire & organizational support scale and knowledge regarding organizational support questionnaire. Results: The current study denoted that, more than three -fifths (62.4%) and about two-thirds (59.2%) of the studied staff nurses perceived (high work) performance at post-test and follow-up phase respectively. Also, more than two-thirds (69.6% & 67.2%) of the studied staff nurses perceived high organizational support at post-test and follow-up phase (respectively). Conclusion: Statistically significant positive correlation between work performance, knowledge, and organizational support during pre, post & three months follow up among the studied staff nurses. Recommendations: Hospital administrators and nurse administrators must provide training programs to maintain or enhance thriving at work for nurses. Implementing work life balance policies and distributing of assignment among staff nurses according to their abilities and need.

Keywords: Educational Program, Nurses' work performance, Organizational support,

Introduction

Organizational support (OS) one of the main concepts that have a considerable impact on organizational, it affects all organizational policies. Creating appropriate work conditions, Supervisor support, appropriate rewards and justice in the workplace that are human values leads to the improvement of one's self-esteem, personal growth of staff nurse Resulting in existence of physical, mental, emotional, and spiritual wellbeing. According to the conservation of resources theory (COR), because of the desire to retain and protect what is valued, individuals are accustomed to bring in resources to prevent the loss of resources, which means high

organizational support could magnify the positive relationship between practice environment and well-being and eventually lead to low turnover intentionally (Sheng et al. 2023).

highly perceived level Α organizational support may aid to restore the balance between the benefits awarded by the organization and the contributions of the individual. In general, the perceived organizational support has a positive reflection on employees and the institution; staff tends to perform better with organizational support. Furthermore, there are various forms for organizational support such as emotional provision support, of opportunities,

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encourages being autonomous and encouraging performing appropriate decision (Morsy, & Ebraheem, 2020). Organizational support theory explains that an organization shows its concern towards its staff nurse through its agents who create a cooperative situation and develops facilities for nurses on the behalf of the organization. Also, it guarantees to the nurses that the organization will provide necessary support and will not leave them alone in stressful situations (Li et al., 2022).

Perceived organizational support (POS) has been considered as an important factor that influences nurse attitudes, behaviors and organizational performance. Perceived support from the organization depends on the belief of nurses that the organization recognizes their contributions and cares for their well-being. Perceived organizational support is therefore an effective tool to help organization build beneficial nurse relationships and inspire workers to work hard (El said et al., 2019).

Working in a positive setting makes nurses more able to report their errors. Thus, they will also decrease the incidence of risky situations that can lead to a variety of costs. In addition to this, the nurses' belief that contributions to their organizations are being assessed and importance is attached to their welfare by their organizations reduces intentions turnover (Abo habieb Elwkeel, 2021). Performance is crucial for nurses, organizations, and colleges, and similar nurses feel self-efficacy, satisfaction, and motivation when tasks are appropriately accomplished. Work-related stress is one of the most influential factors that are negatively affecting performance because the nurse has direct exposure to the stress, which creates lower job satisfaction and decreased quality of job output. Nurses' work performance is based

on many individual factors, namely; abilities, knowledge, skills, experience, and personality. It is up to a nurse that how he/she performs highly in a job, had high productivity, and provides excellent results. Nurse satisfaction can be measured with the help of factors like job satisfaction and absenteeism. If the staff nurse is performing well, the overall image of the company is boosted. Also, nurses perform well if they are satisfied with their work. So, they will not leave the work, which shows their faith in the management that they are taking care of their nurses (Danish et al., 2019)

Organizational support positively affects nurses' work performance, increases nurses' emotional attachment to the organization, and improves organizational commitment. It also fosters a sense of responsibility to contribute achievement of organizational advantages and goals, which lowers the likelihood of leaving. Organizational support is essential for nurses' work performance and results in an increased effort to fulfill organizational goals. Enhancing perceived organizational support in the workplace will promote the retention of competent nurse managers and their performance. Support generally consists of family- supportive policies developed by organizations, and family- supportive supervisors who provide help and understanding based on their interpersonal relationships with subordinates (Li et al.2023).

Furthermore, the use of organizational support within organizations is the assessment of nurses' work contributions and psychological well-being after receiving aid from the organization to meet their social—emotional needs. To and Huang (2022) emphasized that perceived organizational support could relieve nurses' stress and encourage efficient work. Chen and Eyoun

(2021) found that perceived organizational support could play a positive role in reducing nurses' emotional exhaustion and providing guidance for autonomy. Jin and Tang (2021), considered whether nurses could engage in work more effectively depending on the perception of organizational support obtained from individuals' strong short-term resilience. Similarly, believed that organizational support is a kind of job resource, which helps to cultivate nurses' sense of self-efficacy, intrinsic motivation, and positive emotion. This is because nurses gain positive selfesteem, recognition, sense of belonging, and respect through organizational support (Charoensukmongkol & Suthatorn, 2022).

Finally, Nurses play a critical role in delivering exemplary health care. For nurses to perform at their best, they need to experience high engagement, which can be achieved by providing them necessary organizational support and proper working environment. So, the importance of good relations between superiors and subordinates, autonomy and freedom to employees in performing their jobs and support and guidance from superiors increasing commitment levels of nurses which results in nurses delivering high-quality service (López-Ibort, et al., 2021).

Shared decision making is defined as the pattern of the distribution of authority for the decision and the activities that govern the nursing practice policy and the practice environment (Havens DS, Vasey J 2005). . Key organizations and the new legislation are promoting staff nurse involvement in the decision making about the nursing practice and patient care as a long- term strategy to improve the culture of the work environment (Havens DS, Vasey J.2003).

Significance of study:

There is no study in Benha Faculty of educational about nursing program organizational support so this study will be conducted to, **Improving** the performance of nurses to ensure that health interventions efficiently are delivered continues to be a major challenge for health care organization. In the nursing context, nurses require organizational support to keep them intrinsically motivated since the delivery of patient care is complex (Fairchild, 2010). With organizational support, nurses are able to succeed in continuing their professional development (Bradley et al., 2005). In fact, there is rising indication that when registered nurses perceive more support, they are likely to be happier with their job and plan to stay with their present hospital. In addition, sufficient organizational support allows nurses to pay out extra time with their patients (Hinno et al., 2009).

Because nursing is a stressful profession organization support may have protected nurses from the harmful effects of stress by enhancing their self-esteem and communicating that the organization cared for their well-being (Cheng-min and Bor-wen, 2009). Perceived organizational support Perceived organizational support strengthens nurses' beliefs that the organization recognizes and rewards which increased the performance or expected behaviors (Al-Homayan et al., **2013).** The issues of organizational support and factors affecting performance are not addressed. Therefore, adequately necessary to generate relevant evidence through a detailed study to guide health strategies organization to develop improving the performance of health workers. The obvious solution is to monitor the performance of nurses and suggest ways of improving their motivation and subsequently their performance.

Research aim:

This study aimed to examine the effect of an educational program about organizational support on nurse's work performance through:

- 1- Assessing level of organizational support pre and post implementing the organizational support program.
- 2- Assessing nurses' work performance pre and post implementing the organizational support program and follow up post 3 months.
- 3- Designing the educational program about organizational support.
- 4- Implementing an organizational support program based on the result of assessment.
- 5- Measuring the effect of an educational program about organizational support on nurses work performance.

Research hypothesis:

Nurse's perception regarding organizational support could be significantly implementation improved post the organizational support educational program, work performance among nurses could be enhanced post the implementation of organizational support educational program.

Subjects and Methods:

Research design:

Quasi experimental research design used in carrying out this research with pre-test immediate post-test and follow up test (post 3 months).

Study Settings:

This study conducted at Nasser Institute Hospital affiliated to Specialized Medical Centers. Provides inpatient and outpatient services to all categories of our community. This hospital consists of 432 beds divided to four separate buildings because of re-innovation process. The **first** building is Oncology center, The second building is Gama Knife center, The third building is Hyperbaric unit and the last building is the main building has Inpatient services consists of eight floors with 25 departments and 40 out-patient clinics. The study was conducted at 16 departments from above mentioned setting at internal departments in Nasser Institute Hospital are: Open heart surgery department, Multiple Sclerosis department, Cardiology unit, general surgical department, Medical department, Urology department, Liver transplant department, Neurological department, Neurosurgery department, department, Pediatric oncology surgical oncology department ,Orthopedic vertebral surgery department, Hematology ,Hemodialysis department department, Oncology department.

Subjects:

Study subjects included all staff nurses who have at least one year work in the units from the above mentioned setting (their total number is 125 staff nurses).

Tools of Data collection:

Data for present study was collected using the following three tools, namely Organizational Support scale, Work Performance Questionnaire, and Knowledge regarding organizational support questionnaire.

1ST tool: Organizational Support scale:

Developed by the researchers based on (Eisenberger et al., 1986, Eisenberger et al., 2002, Safaa, 2019). It aimed at assessing nursing organizational support. It consisted of two parts:

Part I: Personal characteristics, such as age, gender, educational qualification, marital status, years of experience, training courses.

Part II: It consists of 47-items divided in 3 dimensions:

- Organizational support dimension consists of 14 Items
- Supervision support dimension consists of 19 Items
- Justice dimension: consists of 14 Items.

Scoring system:

It used a 7-point Likert scale that rating nurses' responses as (1) strongly-disagree, (2) disagree, (3) somewhat disagree, (4) neither agree nor disagree and (5) somewhat agree, (6) agree, (7) strongly agree. Negative items were reverses score. Additionally, 1-4 on the 7-point Likert scale (< 60%) are classified as low, 5 on the 7-point Likert scale (\ge 60% to < 75%) as moderate, and 6 & 7 on the 7-point Likert scale (\ge 75%) as high (Abdel Azize et al., 2023) and (statistics).

The 1st is a low level, which computed if the total score is less than 60%.

- The 2nd is moderate level, which computed if total score is equal or more than 60 % to less than 75%.
- The 3rd is high level, which computed if total score is equal or more than 75 %.

2nd Tool: Work Performance Questionnaire:

Developed by the researchers based on (World Health Organization, 2002). It aimed at assessing nursing work performance. It consists of 42 items divided under 12 dimensions)

The part of yes or no and Likert scale, currently work situations 6 items, kinds of work 7 items, category of your job 2 items,

number of people you supervise 2 items, number of hours expected 1 items, Number of actual hours 3 items, Work experience 5 items, time management 7 items, Experience of work you have7 items, Performance appraisal 3 items, Salary 1 item.

Scoring system:

It used a 5-point Likert scale that rating nurse' responses as (1) none of the time, (2) little of the time, (3) some time, (4) most of the time and (5) all the time. Negative items were reverses. Additionally, 1-2 on the 5-point Likert scale (< 60%) are classified as low, 3 on the 5-point Likert scale ($\ge 60\%$ to < 75%) as moderate, and 4 & 5 on the 5-point Likert scale ($\ge 75\%$) as high (statistics.)

3rd Tool: Knowledge regarding organizational support questionnaire:

It consists of 9 dimensions and (30 items): Organizational support (4 items), Decision-making(3 items), Communication skills (4 items), Empowering (3 items), work performance (4 items), Assessment needs (3 items), leadership (3 items), professional health (3 items) and stress management (4 items).

Scoring system:

The total grades for each item were summed up and then converted into a percentage score. Two grades given for correct answer and one grade given for incorrect answer. It classified in to two levels (El said et al., 2019).) and (statistics).

Satisfactory knowledge, it computed if total score is equal or more than 75 %

Unsatisfactory knowledge computed if the total score is less than 75%.

Administrative design:

An official permission was obtained from the dean of Faculty of Nursing, Banha University to the director of the study setting through official letter sent to the general manger of Nasser Institute Hospital, assured complete confidentiality of the obtained information. And the study would not affect in any way the work or jeopardize patient care the researchers met the nurses to explain the aim of the work and expected benefits and discussed with them the time for data collection and program implementation were also determined based on their views, to gain their approval and cooperation.

Validity of tools:

The tools were then tested for its validity and reliability distributed to a jury group of five professors in the field of Administration to judge content validity (the clarity, comprehension, and the accuracy) of the tools. This group included one professor worked at Ain Shams Faculty of Nursing and also one assistant professor, one professor worked at Cairo Faculty of Nursing - administration department, one assistant professor worked at Helwan Faculty of Nursing - administration department, one professor worked Damanhur Faculty of Nursing. Modification and para-freezing were done based on experts' opinion. The self-administrative questionnaire sheet questionnaire was translated into Arabic to ensure proper under- stand of all staff nurses finally, modifications were done in the light of their valuable comments such as modifying some words to give the most appropriate meaning for the phrase which were not clear.

Reliability:

Alpha Cronbach test used to estimate the consistency of measurement tool (1) for organizational support scale 0.999, for tool (2) work performance questionnaire 0.998, for tool (3) knowledge regarding

organizational support questionnaire total 0.980.

Ethical consideration:

- The study was conducted with careful attention to ethical standards of research and rights of the participants.
- The study has approval from ethical committee in faculty of Nursing Banha University

Informed consent:

The respondents right was protected by ensuring voluntary participation, so oral informed consents were obtained from the participants. Study subject were assured that anonymity and confidentiality were guaranteed and they informed that they allowed choosing to participate or not in the study and that they have the right to withdraw from the study at any time.

Scientific honesty:

To ensure scientific honesty, the researchers put references as it to avoid bias.

Pilot study:

A pilot study was carried out on about 10% of study subjects (12 nurse). The aim is to test the clarity, feasibility and understand ability of the tool and estimating time needed for filling it out (20-25 minutes)

No modifications are required, subjects who participated in pilot study **were included** in the main study subjects.

Field work:

Assessment phase:

The actual field work started at the beginning of (May 2022 till the end of November 2022) to assess the study subjects (staff nurses) knowledge regarding the organizational support making before implementation of the educational program.

The researchers was a viable at the previously mentioned setting to collect base line data.

At the beginning the researchers welcomed the study subjects (staff nurses) gave them a brief

idea about the aim of the activity of the program for all study subjects.

- The time required for filling the questionnaire was around (20-25) minutes.

Planning phase:

- Based on baseline data obtained from pretest assessment and relevant review of literature, the program was developed by the researchers this was one month (MAY 2022).
- An educational program was developed based on determined needs and relevant review of literature.
- Program reconstruction in a form of printed Arabic form and included different topics to enhance organizational support knowledge and performance, also the researchers prepared power point presentation of the topics.
- Different instructional strategies, method of teaching, media method of evaluation were selected to suite the subjects need and achieve the objective and content of the program.
- The teaching sessions were achieved by using available resources, relevant content and instructional strategies for each session. Different methods of teaching were used as lecture, group discussion, dash board, and brain storming, activities, hand out paper are prepared by the researchers and distributed to study subjects in first day of the educational program about organizational support.

Implementation phase:

This phase was initiated from beginning of JUNE 2022 to end of July. The researchers visited mentioned setting all days then the researchers divided the subjects to (5) groups cover about 25 nurses. The teaching time for every session 10 hours distributed to (5)

sessions. These sessions were repeated with the same to each group of nurses.

The duration of each session 2 hours, achieving by using available resources, relevant content and instructional strategies for each session daily from Saturday to Thursday from 10:00am to 12:00 pm for about two months from beginning of June to the end of July. Each session was repeated till the end of educational program about organizational support.

Evaluation phase:

During the evaluation phase the educational program was conducted at the Nasser Institute Training Center. The program was given to staff nurses at different time and they were collected with a list to their names and if some of them were busy, they have another time for providing an education program about organizational support that are suitable to their work time.

During this phase the effect of the education program was evaluated immediate evaluation included, immediate post program implemented for all subjects using the same tool which used before the program.

- Follow up post three months of program implementation, all the study tools were applied for nurses to test the follow up gain in subject's knowledge and performance regarding organizational support.

The time of the data collection lasted for three months from the beginning of month (from October till to November 2022).

Statistical analysis:

Data entry and analysis were performed using SPSS statistical package version 25. Categorical variables were expressed as number and percentage while continuous variables were expressed as (mean ±SD). Chi-Square (x2) was used to test the association

between row and column variable of qualitative data.

The ANOVA test was used to compare mean in normally distributed quantitative variables in more than two groups. While T test used to compare mean in normally distributed quantitative variables in two groups. Pearson correlation was done to measure correlation between quantitative variables.

For all tests, a two-tailed p-value ≤ 0.05 was considered statistically significant, P-value ≤ 0.01 was considered highly statistically significant. While p-value> 0.05 was considered not significant.

Eta square $(\eta 2)$ is used to measure the effect size. The referential framework for identifying the effect size for Anova-test value.

Results:

Table (1): Shows personal characteristics among the studied staff nurses, it shows that more than half (54.4%) of the age of the studied staff nurses was ≤ 30 years old, with a mean age of 31.20 ± 6.13 . Considering gender, more than half (57.6%) of them were female with a male to female ratio is 0.7:1. Regarding education, more than two-fifths (42.4%) of them were holding a technical certificate. In relation to marital status, three fifth (60.8%) of them were married. Concerning occupation, slightly less than three fifth (58.4%) of the studied staff nurses were technical nurses. Considering years of experience, more than two fifths (40%) of them had an experience ranging from 5 to 10 years old with a mean of 10.11 ± 5.88 . Finally, regarding training courses, three fifth (60%) of the studied staff nurses didn't attend training courses.

Table (2): Illustrates mean score of total organizational support during pre, post & three months follow up among the studied staff

nurses. It denotes that during the phase of postest, the studied staff nurses gained higher mean score of total organizational support (268.8 + 69.7) followed by follow-up test (259.0 + 75.0) as compared to phase of pretest (173.5 + 43.0). In addition to presence of highly statistically significant difference at F=83.4, P=0.000.

Table (3): Clarifies effect size and $\eta 2$ of educational program on organizational support during pre, post & three months follow up among the studied staff nurses. It calcifies that educational program have a positive large effect size on total organizational support during pre, post & three months follow up at $\eta 2=0.310$. As when Eta-square value = 0.01 to < 0.06, the effect is considered weak, when it = 0.06 to < 0.14, the effect is considered medium and when it \geq 0.14 the effect is large. Therefore, this provides enough evidence to support research hypothesis.

Table (4): Illustrates mean score of **total work performance** during pre, post & three months follow up among the studied staff nurses. It denotes that during the phase of postest, the studied staff nurses gained higher mean score of **total work performance** (102.6 + 26.3) followed by follow-up test (98.13 + 25.9) as compared to phase of pre-test (69.61 + 10.17). In addition to presence of highly statistically significant difference at F=82, P=0.000

Table (5): Clarifies effect size and $\eta 2$ of educational program regarding organizational support on **work performance** during pre, post & three months follow up among the studied staff nurses. It calcifies that educational program regarding organizational support have a positive large effect size on total **work performance** during pre, post & three months follow up at $\eta 2 = 0$. 306. As when Eta-square value = 0.01 to < 0.06, the effect is considered weak, when it = 0.06 to <

0.14, the effect is considered medium and when it ≥ 0.14 the effect is large. Therefore, this provides enough evidence to support research hypothesis no statistically significant relation between decision-making and staff nurses' socio-demographic characteristics.

Table (6): Clarifies effect size of $\eta 2$ of educational program on knowledge regarding organizational support during pre, post & three months follow up among the studied staff nurses. It calcifies that educational program regarding organizational support have a positive large effect size on total **knowledge** regarding organizational support during pre, post & three months follow up at $\eta 2=0.470$.

As when Eta-square value = 0.01 to < 0.06, the effect is considered weak, when it = 0.06 to < 0.14, the effect is considered medium and when it ≥ 0.14 the effect is large Therefore, this provides enough evidence to support research hypothesis.

Table (7): Clarifies that there was a highly statistically significant positive correlation between work ,knowledge and organizational support during pre, post & three months follow up among the studied staff nurses at (r ranged from 0.446 to 0.960 and P= 0.000) respectively.

Table (1): Number and percentage distribution of the studied staff nurses regarding to their personal characteristics (n=125)

Nurses	s' characteristics	No.	0/0
Age (year)	■ ≤30	68	54.4
	■ >30≤40	45	36.0
	■ >40≤50	10	8.0
	• > 50	2	1.6
	■ Mean± SD		31.20 ± 6.13
Gender	■ Male	53	42.4
	■ Female	72	57.6
	 Male to female ratio 		0.7:1
Qualification	 Secondary school 	30	24.0
	■ Technical	53	42.4
	Bachelor	42	33.6
Marital status	Married	76	60 .8
	■ Single	46	36.8
	■ Widow	3	2.4
Occupation	Nurses	125	100
Years of	■ < 5	31	24.8
experience	■ ≥5<10	50	40.0
	■ ≥10<15	20	16.0
	■ ≥15	24	19.2
	■ Mean ± SD		10.11 ± 5.88
Training courses	• Yes	50	40.0
	■ No	75	60.0

Table (2): Mean score of total organizational support during pre, post & three months follow up among the studied staff nurses (n=125)

Items		Pre	Post	3 months	F-	P-
				follow up	test	Value
		$\overline{\mathbf{x}} \stackrel{\pm}{=} \mathbf{SD}$	$\overline{\mathbf{x}} \stackrel{+}{=} \mathbf{SD}$	$\overline{\mathbf{x}} \stackrel{+}{=} \mathbf{SD}$		
 Organizational 	Low	46.90 [±] 6.24	41.62 [±] 8.46	37.39 [±] 11.8	56.9	0.000^{**}
support	Moderat	67.12 [±] 3.69	67.00 ± 3.63	66.06 [±] 3.81		
	e					
	High	78.91 [±] 4.76	91.70 [±] 7.72	90.38 [±] 8.10		
	Total	56.51 [±] 12.8	80.13 [±] 20.58	77.13 [±] 22.37		
Supervision	Low	68.05 [±] 6.30	56.48 [±] 11.50	50.70 [±] 16.0	60.3	0.021*
support	Moderat	91.13 [±] 5.15	91.41 [±] 4.75	90.39 [±] 5.43		
	e					
	High	112.7 [±] 11.82	125.1 ⁺ 10.5	122.5 ⁺ 11.24		
	Total	76.45 [±] 15.11	109.0 [±] 28.19	104.6 [±] 30.3		
Justice	Low	29.30 [±] 9.77	41.2 [±] 8.87	37.3 [±] 11.94	118	0.000^{**}
	Moderat	72.50 ± 0.527	67.88 [±] 3.62	68.36 [±] 4.14		
	e					
	High	90.50 [±] 3.22	91.90 [±] 7.94	91.15 [±] 7.56		
	Total	40.59 [±] 24.12	79.72 [±] 21.03	77.23 [±] 22.34		
Total	Low	153.2 [±] 13.0	138.5 [±] 28.1	125.3 [±] 39.8	83.4	0.000**
	Moderat	225.9 [±] 10.9	225.8 [±] 12.6	223.7 [±] 13.0		
	е					
	High	266.5 [±] 19.2	308.7 [±] 26.1	303.1 [±] 27.6		
	Total	173.5 [±] 43.0	268.8 ⁺ 69.7	259.0 ± 75.0		

^{*}Significant $p \le 0.05$ **Highly significant $p \le 0.01$

F: ANOVA Test

Table 3: Effect size and η^2 of educational program on organizational support during pre, post & three months follow up among the studied staff nurses (n=125)

Interval	Mean	SD	F Test	P value	Н	η2	Effect size
Pre-test	173.5	43.07	83.4	0.000***	0.556	0.310	Large
Post-test	268.8	69.77					effect
Follow up	259.0	75.04					
Total	233.8	77.03					

^{*}Significant p ≤ 0.05 Large effect size ≥ 0.14

^{**}Highly significant p ≤ 0.01 F: ANOVA Test

Medium effect size = 0.06 to < 0.14Small effect size = 0.01 to < 0.06

Table (4): Mean score of total work performance during pre, post & three months follow up among the studied staff nurses (n=125)

Items	Items		Post	3 months	F- test	P-
				follow up		Value
		$\overline{\mathbf{x}} \stackrel{+}{=} \mathbf{SD}$	$\overline{\mathbf{x}} \stackrel{+}{=} \mathbf{SD}$	$\overline{\mathbf{x}} \stackrel{\scriptscriptstyle \pm}{=} \mathbf{SD}$		
Time management	Low	14.56 ± 3.2	16.83 ± 2.47	16.57 ± 2.53	142.5	0.000^{**}
	Moderate	21.56 [±] 1.26	22.62 [±] 1.76	22.43 [±] 1.67		
	High	29.00 ± 0.0	32.51 [±] 3.32	31.23 [±] 3.53		
	Total	15.57 ± 4.0	27.60 [±] 7.11	26.33 ± 6.92		
Performance	Low	5.36 ± 1.56	7.40 ± 0.82	6.42 [±] 0.769	3.92	0.021*
appraisal	Moderate	10.38 ± 0.74	9.91 [±] 0.91	9.37 [±] 0.675		
	High	13.55 ± 1.0	14.0 [±] 1.31	13.69 [±] 1.44		
	Total	11.36 ± 2.5	12.18 ± 2.78	11.27 ± 3.04		
Performance	Low	14.81 ± 3.27	16.33 ± 2.45	15.48 ± 1.75	90.4	0.000^{**}
appraisal comparison	Moderate	22.0 [±] 1.54	22.18 [±] 1.86	21.94 [±] 1.41		
	High	33.00 ± 2.73	32.58 [±] 3.24	31.30 ± 3.52		
	Total	17.38 ± 5.33	27.52 ± 7.17	26.32 ± 6.89		
■ Salary	Low	1.10 ± 0.00	2.00 ± 0.00	2.00 [±] 0.00	452.9	0.000^{**}
	Moderate	3.0 ± 0.00	3.00 ± 0.00	3.00 ± 0.00		
	High	0.00+00.0	4.00 ± 0.0	4.00 ± 0.00		
	Total	1.19 ± 0.50	3.10 ± 0.593	3.06 ± 0.619		
 Working experience 	Low	10.90 ± 2.83	11.73 [±] 1.90	11.65 [±] 1.85	22.1	0.000^{**}
	Moderate	16.77 [±] 1.11	15.26 ± 0.752	15.14 [±] 0.47		
	High	20.92 ± 1.99	23.01 [±] 2.55	22.53 [±] 2.48		
	Total	15.70 ± 4.71	19.60 ± 5.18	19.02 ± 5.12	1	
 Acquired experience 	Low	6.48 ± 0.96	6.59 ± 0.87	6.32 ± 0.749	56.3	0.000^{**}
	Moderate	10.14 ± 0.91	9.27 [±] 0.583	9.34 [±] 0.701		
	High	12.0 ± 0.00	14.05 [±] 1.32	13.70 [±] 1.49		
	Total	8.42 ± 2.09	11.89 ± 3.11	11.46 ± 3.12		
Total	Low	66.75 ± 8.34	63.38 ± 9.80	62.0 ± 10.33	82.0	0.000**
	Moderate	81.15 ± 3.08	82.74 [±] 5.89	82.0 [±] 5.69		
	High	101.5 [±] 2.12	120.6 ± 12.24	116.7 ± 12.5		
	Total	69.61 ± 10.17	102.6 ± 26.3	98.13 [±] 25.9	-	
	Total	69.61 ± 10.17	102.6 ± 26.3	98.13 [±] 25.9]	

^{*}Significant $p \le 0.05$

F: ANOVA Test

Table 5: Effect size and $\eta 2$ of educational program on work performance during pre, post & three months follow up among the studied staff nurses (n=125)

Interval	Mean	SD	F Test	P value	η	η2	Effect size
Pre-test	69.61	10.17	82.0	0.000^{***}	0.552	0.306	Large
Post-test	102.6	26.32					effect
Follow up	98.13	25.91					
Total	90.14	26.48					

*Significant $p \le 0.05$

**Highly significant $p \le 0.01$

F: ANOVA Test

Small effect size = 0.01 to < 0.06

Medium effect size =0.06 to < 0.14

Large effect size ≥ 0.14



^{**}Highly significant $p \le 0.01$

Table (6): Effect size and η^2 of educational program on knowledge regarding organizational support during pre, post & three months follow up among the studied staff nurses (n=125)

Interval	Mean	SD	F Test	P value	η	η2	Effect size
Pre-test	41.86	12.0	165	0.000***	0.686	0.470	Large
Post-test	59.02	4.2					effect
Follow up	57.96	6.7					
Total	52.94	11.4					

^{*}Significant $p \le 0.05$

F: ANOVA Test

Table (7): Correlation matrix between total performance, knowledge, and organizational support during pre, post & three months follow up among the studied staff nurses (n=125)

			Work performance			Organi	Organizational support			Knowledge		
Items		Pre	Post	Follow up	Pre	Post	Follow up	Pre	Post	Follow up		
nce	Pre-	r				0.822			0.652			
Work performance	test	p				0.000**			0.000**			
for	Post	r					0.960			0.446		
per	test	p					0.000**			0.000**		
ırk	Follow	r						0.950			0.539	
Š	up test	p						0.000**			0.000**	
	Pre-	r	0.822						0.773			
la E	test	p	0.000**						0.000**			
Organizational support	Post	r		0.960						0.545		
iza rt	test	p		0.000^{**}						0.000**		
Organiz support	Follow	r			0.950						0.666	
Or sup	up test	p			0.000**						0.000**	
	Pre-	r	0.652			0.773						
	test	p	0.000**			0.000**						
	Post	r		0.446			0.545					
dge	test	p		0.000**			0.000**					
Knowledge	Follow	r			0.539			0.666				
Kne	up test	p			0.000**			0.000**				

Small effect size = 0.01 to < 0.06

Medium effect size =0.06 to < 0.14

Large effect size ≥ 0.1

Discussion:

Strong organizational support can promote a sense of well-being and positive work behaviors in nurses. Nurses 'behavioral outcomes of perceived organizational support would include decreases in withdrawal behaviors such as turnover intentions and absenteeism and increases in extra-role performance. When nurses perceive organizational support, they have more ownership of their organizations and more satisfaction with their jobs. Nurses need

^{**}Highly significant $p \le 0.01$

support and acknowledgment at all levels in the organization to enhance their autonomy, which increases the productivity of the organization (Wang et al., 2023).

Nowadays nurses play an important role in providing optimum healthcare. For nurses to do their best, they need to provide the necessary organizational support and a suitable work environment. In the current rapidly changing environment, organizations face greater challenges, and they need to foster innovative behaviors to create and deliver their products and services, to remain competitive, and to lead the change process itself and to accomplish their mission, organizations provide support to their employees to innovate their processes, methods, and procedures (Mustika et al., 2020).

Discussion of the present study was presented in the following sequence: The first part; Staff nurse's personal characteristics. The second part; Work performance among the staff nurses. The third part; Organizational support among the staff nurses. The fourth part; Knowledge regarding organizational support among the staff nurses. The fifth part; Additional and correlational findings between variables under the study.

Regarding personal characteristics of the studied staff nurses, Concerning age. The present study showed that; slightly more than half of the age of the studied staff nurses was ≤ 30 years old, with a mean age. From the researchers' point of view, this result may be due to the majority of young, aged nurses are providing direct care for patients and otherwise are in the managerial level. Also, these results may be due to the administrators selected young age nurses to be able to perform mainly tasks in units effectively. This finding was in the same line with **Hashish** (2020) who carried out a study in Alexandria University, about "Nurses' perception of

organizational justice and its relationship to their workplace deviance", and reported that, more than two thirds of staff nurses was ≤ 30 years old at Main University Hospital.

On the other hand, this result was incongruent with Farghaly et al. (2019) who conducted a study in Egypt, about "The effect nurses' emotional intelligence of head educational program on nurses' motivation and organizational support" and emphasized that slightly more than half of staff nurse in the age group 30-40. Moreover, this finding was disagreed with a study conducted by Ma et al. (2023) about " Assessing the effects of organizational support, psychological capital, identification organizational on iob performance among nurses" and stated that about three fifths of studied nurses aged from 30-39 years.

Regarding educational qualification, the current study revealed that; more than two-fifths of the studied staff nurses were holding a technical certificate. From the researchers' point of view, this finding might be related to shortage of high graduated nurses attached and working at Benha University Hospital who were always busy with administrative duties.

This finding was agreed with Mahmoud et al. (2019) who reported in a study in Ain shams University, about "Organizational support and leader member exchange as perceived by staff nurses" that; slightly more than half of the studied staff nurses were holding a technical diploma certificate.

Considering years of experience, the current study showed that about two fifths of the studied staff nurses had an experience ranging from 5 to 10 years old from the researchers' point of view, this finding might be related to shortage of high graduated nurses and most of forces work at Benha University Hospitals was old graduated.

This finding was congruent with **Peng et al. (2021)** who demonstrated in study at Wuhan, China, about "Relationship between perceived organizational support and professional values of nurses: Mediating effect of emotional labor "that; about two fifths had (6 - 10) years of experiences. Otherwise, these finding were disagreement with **Aboelenein & Mostafa (2023)** who found that; about more than two fifths had (10 - 20) years of experiences.

Finally, regarding training courses, the current study showed that about two fifths of the studied staff nurses didn't attend training courses. From the researchers' point of view, this finding might be related lack of medical in-service training; education regarding such topics in hospital related diminished attention, lack of hospital resources and nurses' shortage. This finding was parallel with Hamed et al. (2018) who revealed that all studied nurses had no training course. Also, Abd Elmawla et al. (2020) who stated that all studied nurses had no training course. On the other hand, this finding was incongruent with Aboelenein & Mostafa (2023) who reported that majority of the studied staff nurses attended a training course twice and less than fifth attended a training course once.

Regarding organizational support during pre, post & three months follow up among the studied staff nurses. The present study there are highly statistically denoted, significant difference at P=0.000, which, more than two-thirds of the studied staff nurses perceived high organizational support at post-test and follow-up phase respectively. From the researchers' point of view, this finding might be related to effect of educational program. This result also could attributed to the atmosphere

environment of the Egyptian hospitals has proven to be more exposed to organizational injustice because of the shortage of nurses, work overload, and nurse managers' personal attitude and behavior's, perceiving organization support program is vital approach in governmental hospitals.

Regarding effect size and $\eta 2$ of educational program on organizational support during pre, post & three months follow up among the studied staff nurses. The current study calculated that educational programs have a positive large effect size on total organizational support during pre, post & three months follow up. The effect is considered weak, the effect is considered medium, the effect is large. Therefore, this provides enough evidence to support research hypothesis. From the researchers' point of view, this finding might be the strong need for applying perceived organization support in governmental hospital in large sample and area.

This finding was parallel with **Wang** et al. (2023) who reported in a study a bout "Nurses' sense of organizational support, Self-esteem and perceived professional benefits" that education program about Perceived organizational support was considered as the predictive variable. Also, these finding was in the same line with **Ali et al (2020)** who found that the authentic leadership training program had a positive effect on staff nurses' empowerment Related effect size and $\eta 2$ of educational program.

On the other hand, these finding was disagreement with **Rubaca** and **Khan (2020)** who conducted a study in India about "The impact of perceived organizational support and job resourcefulness on supervisor-rated contextual performance of firefighters: mediating role of job satisfaction" and revealed that values of f 2 effect size

demonstrated weak effects of perceived organizational support and job resourcefulness on contextual performance whereas strong effects on job satisfaction. However, job satisfaction was found to have medium effect size on contextual performance.

Regarding mean score of total work performance during pre, post & three months follow up among the studied staff nurses. The current study denoted that during the phase of pos-test, the studied staff nurses gained higher mean score of total work performance followed by follow-up test as compared to phase of pre-test. In addition to the presence of highly statistically significant differences.

This finding was harmony with Cho & Kim (2019) who donated in a study in about "The Korea effects of work performance, perceived organizational support and personal coping resources on job satisfaction among infusion nurses" that there is statistically significant difference after perceived organizational support on job performance. additionally, Morsy Ebraheem (2020) who reported that nearly three-fifths of staff nurses had a moderate level of the work performance. Also, almost two-thirds of staff nurses had a moderate level of perception of organizational support. Also. the outcomes ofthis demonstrated that about half of nurses had a low level of performance, and a minority of them had a high level of performance before perceived organizational support. finding may be due to workplace stressors that could impact on aspect or dimensions of nurses' jobs.

As regard effect size and $\eta 2$ of educational program on work performance during pre, post & three months follow up among the studied staff nurses. The current

study calculated that educational program regarding organizational support have a positive large effect size on total work performance during pre, post & three months follow up. As when Eta-square value, Therefore, this provides enough evidence to support research hypothesis.

This finding was Indicated with **Kim** & Cho (2022) who revealed in a study in Republic of Korea about "The effect of nurse support programs on job satisfaction and organizational behaviors among hospital nurses: A meta-analysis" That, when the effect sizes of the studies were merged, analysis using a random effect model showinterpretation.ly significant increase in job satisfaction and the overall effect size of the program, Hedge's g = 1.12, was found to be greater than 0.75 when judged by the effect size interpretation.

The effect size and η^2 of educational knowledge program on regarding organizational support during pre, post & three months follow up among the studied staff nurses. The current study calcified that educational program regarding organizational support have a positive large effect size on total knowledge regarding organizational support during pre, post & three months follow up. As when Eta-square value the effect is considered weak, the effect is considered medium, and effect is large. Therefore, this provides enough evidence to support research hypothesis.

From the researchers' point of view, this finding might be related to ,strongly effect of educational program about perceived organization support in large size.

This Finding was strongly agreed with **Kim & Cho (2022)** who revealed in a study in Republic of Korea about "The effect of nurse support programs on job satisfaction and

organizational behaviors among hospital nurses: A meta-analysis" that, after the program, some organizational behaviors and knowledge significantly increased with a large effect size, as shown by Hedge's g values, such as 0.94.

Regarding correlation between work performance and organizational support. The current study clarified that, there was a highly statistically significant positive correlation between work performance, organizational support during pre, post & three months follow up among the studied staff respectively. This nurses finding accordance with El said et al. (2023) who revealed that, there was a statistically significant positive correlation between levels of nurses' perception regarding organizational support and their work performance and affirmed that perceived organizational support for work balance was positively correlate and impact on the job performance and nurses' workflow of dual career couples.

Conclusion:

Regarding total work performance during pre, post & three months follow up among the studied staff nurses. The current study denoted that, more than three -fifths and about two-thirds of the studied staff nurses perceived high work performance at post-test and follow-up phase respectively. While the minority of them perceived high work performance at a pre-test phase. Also, more than two-thirds of the studied staff nurses perceived high organizational support at posttest and follow-up phase respectively. While the minority of them perceived high organizational support at a pre-test phase with there was a highly statistically significant correlation between positive work performance, knowledge, and organizational

support during pre, post & three months follow up among the studied staff nurses.

Recommendations:

For Administrations

- 1. Hospitals should closely monitor the level of all factors regarding workplace, stress; motivation and other benefits will improve balance between work which in turn will give satisfaction in their personal life.
- 2. Providing an attractive system of recognition and rewards that increase sense of achievement, and personal growth.
- 3. Hospital administrators should find ways to improve nurse's perception of organizational support in order to enhance work engagement and organizational citizenship behavior.

For nurses:

- 1. Emphasizing organizational strategies for provision of caring and supportive work climate and reducing staff burnout
- 2. Nurse leaders should aim to better understand nursing work, reduce employee workload and organizational constraints and minimize workplace conflict

In the future:

Further researches are recommended.

References:

Abdel Azize, N., A. Abed, F., & A. Bayoumy, S. (2023). Relationship between organization support and nursing staff burnout in critical care units. Egyptian Journal of Health Care, 14(1), 905-918. https://doi.org/10.21608/ejhc.2023.290613

Abd Elmawla, S., Shabaan, F., & Abo Ramdan, A. (2020). Effect of educational program about authentic leadership and mindfulness factors on head nurses practice self – Evaluation. Tanta Scientific Nursing

Journal, 18(1), 110-133. https://doi.org/10.21608/tsnj.2020.107697 **Abo habieb, E., & Elwkeel, N. (2021).**

Influence of perceived organizational support, work life balance on staff nurses' workflow at main Mansoura University hospital. Assiut Scientific Nursing Journal, 0(0), 0-0. https://doi.org/10.21608/asnj.2021.52613.1089

Aboelenein, S. A., & Mostafa, S. A. M. (2023). Effect of Educational Program about Authentic Leadership for Head Nurses on Staff Nurses' Resilience and Innovation Behavior. Port Said Scientific Journal of Nursing, 10(1), 32-58.

Al-Homayan, Abdullah. Shamsudin, Faridahwati. Subramaniam, Chandrakantan. Islam, Rabiul. (2013). Effects of Job Stress and Organizational Support on the Relationship between Job Demand Resources and Nurses' Job Performance in Saudi Public Hospitals. Australian Journal of Basic and Applied Sciences, 7(10): 7-19, 2013

Ali, K. A., Raslan, H. A., Ibrahim, R. A., & Mohamed, M. A. (2020). Effect of lean management strategies on the quality of perioperative nursing roles. Egyptian Journal of Health Care, 11(3), 431-454. https://doi.org/10.21608/ejhc.2020.119025

Bradley, E. P, Campbell. P. Nolan. (2005). Nurse prescribers: Who are they and how do they perceive their role? Journal of Advanced Nursing, 51(5): 439-448.

Charoensukmongkol, P., & Suthatorn, P. (2022). How managerial communication reduces perceived job insecurity of flight attendants during the COVID-19 pandemic. Corporate Communications: An International Journal, 27(2), 368-387.

Chen, H., & Eyoun, K. (2021). Do mindfulness and perceived organizational support work? Fear of COVID-19 on restaurant frontline employees' job

insecurity and emotional exhaustion. International journal of hospitality management, 94, 102850.

Cheng-min, C. and C. Bor-wen. (2009). Relationship among personality traits, leadership behavior, and job stress in nurses in Yunlin, Taiwan. China-USA Business Review, 8(4): 51-57.

Cho, Y. S., & Kim, Y. I. (2019). The effects of work performance, perceived organizational support and personal coping resources on job satisfaction among infusion nurses in Korea. Journal of Korean Academic Society of Education. Nursing 25(1), 148-158. https://doi.org/10.5977/jkasne.2019.25.1.148 Danish, R., Ali, Q., Ali, H., & Shahid, R. (2019). Work- related stressors and teachers' performance: Evidence from teachers working in Punjab, European Scientific Journal February edition, 15(4),

El said, A., El Sayed, K., Shokeir, .. M., & Soror, .. M. (2023). Nurses' perception toward organizational change and its relation to work motivation. Tanta Scientific Nursing Journal, 30(3), 12-26. https://doi.org/10.21608/tsnj.2023.307267

1857 - 7881.

Eisenberger R, Huntington R, Hutchison S, Sowa D. (1986). Perceived organizational support. J Appl Psychol 71:500–507.

Eisenberger R , Rohdieck S (2002). Perceived organizational support: Fostering enthusiastic and productive employees American Psychological Association

Fairchild, R.M., (2010). Practical ethical theory for nurses responding to complexity in care. Nursing Ethics, 17(3): 353-362.

Farghaly Ali Mohamed, A., Abd El Aziz Omar Abdel Rahman, A., & Mostafa Fahmy Isamil, A. (2019). Effect of head nurses emotional intelligence educational program on nurses motivation and organizational support. Egyptian Journal of

Health Care, 10(4), 355-386. https://doi.org/10.21608/ejhc.2019.186762

Hamed, M. (2018). Relationship between job autonomy and organizational commitment among staff nurses in Ain Shams University Hospital. Administration. Faculty of nursing Ain shams university, X, 96-110

Hashish, E. A. A. (2020). Nurses' perception of organizational justice and its relationship to their workplace deviance. Nursing ethics, 27(1), 273-288.

Havens D,Vasey J. (2005). The impact of perceived organizational support, job satisfaction, leader-member exchange (LMX) and work-life balance on employee's turnover intention in manufacturing industry, Malaysia. Final year project, UTAR 1-194. http

Hinno, S. P, Partanen. I.J.K, Vehvi, & A, Aaviksoo. (2009). Nurses' perceptions of the organizational attributes of their practice environment in acute care hospitals. Journal of Nursing Management, 17(8): 965-974.

Jin, J., & Tang, J. (2021). Exploring the effect of perceived organizational support and resilience on Chinese pharmacists' engagement in stressful and competitive pharmaceutical work at hospitals. Saudi Pharmaceutical Journal, 29(9), 931-938.

Kim, S. Y., & Cho, M. (2022). The effect of nurse support programs on job satisfaction and organizational behaviors among hospital nurses: A meta-analysis. International Journal of Environmental Research and Public Health, 19(24), 17061. https://doi.org/10.3390/ijerph192417061

Li, M., Jameel, A., Ma, Z., Sun, H., Hussain, A., & Mubeen, S. (2022). Prism of employee performance through the means of internal support: A study of perceived organizational support. Psychology Research and Behavior Management, 15, 965-976. https://doi.org/10.2147/prbm.s346697

López-Ibort, N., Cañete-Lairla, M. A., Gil-Lacruz, A. I., Gil-Lacruz, M., & Antoñanzas-Lombarte, T. (2021). The Supervisor-Nurse Quality of the Relationship and Its Influence on Nurses' Job Satisfaction. Healthcare (Basel, Switzerland), 9(10), 1388. https://doi.org/10.3390/healthcare9101388

Huang, J., Ma, H., Zhu, X., Tan, J., & Luo, Y. (2023). Assessing the effects of organizational support, psychological organizational capital, identification on job performance among nurses: A structural equation modeling approach. BMC Health Services Research, https://doi.org/10.1186/s12913-023-23(1). 09705-z

Mahmoud Moustafa, H., Mahmoud Hassan, R., & Mohammed Badran, F. (2019). Organizational support and leader member exchange as perceived by staff nurses. Egyptian Journal of Health Care, 10(2), 441-454. https://doi.org/10.21608/ejhc.2019.260894

Morsy, M. M., & Ebraheem, S. M. (2020). Work-related stressors, coping strategies: Its relation to job performance and perceived organizational support among critical care nurses. Evidence-Based Nursing Research, 2(3).

https://doi.org/10.47104/ebnrojs3.v2i3.127

Mustika, S. I., Rahardjo, K., & Prasetya, A. (2020). The effect of perceived organizational support on knowledge sharing and innovative work behavior. Proceedings of the 2nd Annual International Conference on Business and Public Administration (AICoBPA 2019). https://doi.org/10.2991/aebmr.k.201116.012

Peng, C., Chen, Y., Zeng, T., Wu, M., Yuan, M., & Zhang, K. (2021). Relationship between perceived organizational support and professional values of nurses: Mediating effect

of emotional labor. https://doi.org/10.21203/rs.3.rs-910423/v1

Rubaca, U. and Khan, M. (2020). the impact of perceived organizational support and job resourcefulness on supervisor-rated contextual performance of firefighters: mediating role of job satisfaction. Journal of Contingencies and Crisis Management, 29(3), 281-292. https://doi.org/10.1111/1468-5973.12340

Safaa M, Mostafa (2019). Perceived Organizational Support and its Relation to Work Engagement among Staff Nurses.

Sheng, H., Tian, D., Sun, L., Hou, Y., & Liu, X. (2023). Nurse practice environment, perceived organizational support, general wellbeing, occupational burnout and turnover intention: A moderated multi-mediation model. Nursing open, 10(6), 3828–3839. https://doi.org/10.1002/nop2.1641

To, W. M., & Huang, G. (2022). Effects of equity, perceived organizational support and job satisfaction on organizational commitment in Macao's gaming industry. Management Decision, 60(9), 2433-245

Wang, M., Wang, L., & Lu, C. (2023). Nurses' sense of organizational support, Self-esteem and perceived professional benefits: A mediating model. Nursing open, 10(4), 2098

Wolrd health organization ,Ronald C,Kessler (2002). work performance quessionaire, Unversity of Michgan system . JOEM.volume 64,number 6 suppl,,june

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تأثير برنامج تعليمى عن الدعم المؤسسى على أداء الممرضين لعملهم رضا عبدالرؤف صابر _ جيهان محمد أحمد مصطفى _إحسان سعد سليمان

يعتبر الدعم المؤسسي مصدرا قادرًا على التأثير إيجابًا في الأداء من خلال الحد من الضغوطات وتشجيع الالتزام بالعمل، تناقش الباحثون كثيرا على أن الممرضين يشكلوا معتقدات عالمية حول مدى تقدير المؤسسة لإسهاماتهم ورعاية صحتهم. تساعد هذه التصورات الممرضين على تحديد إذا ما كانت منظماتهم تعترف بزيادة جهد العمل ، ومكافأة الأداء المحسن وتعزيز السلوك المبتكر. هدفت الدراسة إلى تحسين المعرفه عن الدعم المؤسسي ورفع مستوى الأداء بالعمل . تم استخدام تصميم بحث شبه تجريبي لتحقيق هدف هذه الدراسة. أجريت الدراسة في الأقسام الداخلية والخارجية بمستشفى معهد ناصر . تضمنت عينة الدراسة مجموعة من ممرضين الاقسام (عينة عشوائية من عدد 16 قسم. وتم تحديد حجم العينة أثناء وقت الدراسة حسب المعادلة وعددهم (125) تم اختيارهم من الوحدات المذكورة أعلاه. واظهرت النتائج ان أظهرت الدراسة الحالية أنه ما يزيد قليلاً عن النصف (54.4%) من عمر الممرضين أقل من 30 عامًا، بمتوسط عمر (54.4%)6.13 كما أظهرت الدراسة أن هناك علاقة إيجابية ذات دلالة إحصائية عالية بين المستوى المعرفي للبرنامج التعليمي الممرضين ودرجة أدائهم في مراحل برنامج ما بعد والمتابعة. وفسر الباحثون ذلك بأهمية برنامج استمرارية التحسين لأداء الممرضين وتقديم برامج تعليمية أكثر تم الاتفاق على هذه النتائج مع محمد (2018) الذي أشار في در استه في مستشفى جامعة المنصورة وكشف عن وجود علاقة إيجابية ذات دلالة إحصائية عالية بين مستوى معارف الممرضين وأدائهم. (مقارنه بمرحله ما قبل البرنامج. (63.5%) وخلصت الدراسة بأن تطبيق البرنامج التعليمي عن الدعم المؤسسي له فاعليه كبيره على مستوى الاداء بالعمل حيث وجد أن هناك إرتباط إيجابي ذو دلالة إحصائية عالية بين إجمالي المعلومات عن الدعم المؤسسي والأداء بالعمل في مرحلتي ما بعد البرنامج والمتابعة بعد ثلاثه شهور مقارنه بمرحله ما قبل البرنامج. وأوصت الدراسة بعقد برامج تدريبية وورش عمل بشكل دوري للممرضين حول الدعم المؤسسي لتحسين ممارستهم في أماكن الرعاية الصحية و تطبيق استر اتيجيات الدعم المؤسسي التي تركز على الممرضين وتعزز مستوى الأداء بالعمل.

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