

Person-Organization Fit and its Relation to Job performance of Nurses

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Abstract

Background: Person-organization fit plays a key role in enhancing nurses' well-being and job performance by aligning their personal values with those of the organization. **Aim:** The study aimed to assess person-organization fit and its relation to job performance of nurses. **Research design:** A descriptive correlational design was utilized to achieve the aim of the present study. **Setting:** The study was conducted in all inpatients units of medical and surgical departments at Benha University Hospital. **Subjects:** A simple random sample of 345 nurses out of 2470 who were working at above mentioned study setting. **Tools:** Two tools were used: I) Person-organization fit scale II) Nurses' Job Performance observation checklist. **Results:** Showed that more than two-fifths (43.8%) of the studied nurses had high level of person-organization fit, and the majority (80.9%) of the studied nurses had a satisfactory level of job performance. **Conclusion:** There was highly statistically significant positive correlation between total level of person-organization fit and total level of job performance among studied nurses. **Recommendations:** Provide continuous training and orientation programs to reinforce hospital values, promote role clarity. Expand research beyond nursing to all health care team and administrative staff to build a holistic view of fit across the healthcare workforce.

Keywords: Job performance - Nurses - Person-Organization Fit.

Introduction

The health organization provides health services by empowering a variety of knowledgeable and skilled individuals to handle medical conditions in an effort to promote healing and maintain good health. The health organization's complicated purpose and function required the availability of skilled human resources. One factor influencing the quality of services provided by a healthcare organization is the role of human resources as service performances. The attitude, abilities, and moral conduct of the health organization's members affect how effectively organizational governance function (Luluk & Fannidya, 2025).

Health organizations need engaged team members to be proactive, show initiative, collaborate smoothly with others, take responsibility for their own professional

development, and be committed to high-quality performance standards. To achieve these expectations, many hospitals seek nurses who feel energetic and dedicated the role of positive psychological states (i.e., work engagement) in health care behavior, which may help establish positive psychological and organizational human capital (Kilic & Gök, 2023).

The nursing profession is characterized by high stress, long hours, and emotional demands. If the hospital's values do not prioritize nurses well-being and work-life balance, nurses may experience burnout and disengagement, and rapidly changing healthcare environment. The healthcare industry is constantly evolving due to technological advancements, policy changes, and shifting patient needs. Nurses must adapt to these changes, which can create tension if the hospital's goals and the nurses' competencies do not align (Navajas-Romero et al., 2020).

Person-Organization Fit and its Relation to Job performance of Nurses

The alignment of health care members with their different health care organizations is known as person-organization (PO) fit. When there is a strong alignment, nurses are more likely to stay with the hospitals, have higher job satisfaction, and show superior performance indicators, all of which lower turnover rates. Furthermore, improved career advancement, a more forces sense of purpose, and a more satisfying work-life balance can result from a well-aligned person-organization fit. Therefore, in order to stay competitive and secure long-term success, organization must comprehend and cultivate this match as the workforce and organization continue to change **(Raddatz, 2024)**.

Person-organization fit consists of several key dimensions that reflect the compatibility between an individual and an organization. The primary dimension is value congruence, which refers to the alignment between a person's values and the organization's culture. The second dimension is goal congruence which involves the match between an individual's personal career objectives and the organization's mission. Another important dimension is personality fit, where the individual's traits align with the organizational environment. Finally, need/supplies fit which measures how well the organization satisfies the team member's personnel and professional needs. These dimensions collectively influence job satisfaction, motivation, and performance **(Rane, 2024)**.

Job performance refers to how well a person carries out the tasks and responsibilities of their job. It shows how effectively someone meets the goals and expectations set by their individual. Good job performance often includes being productive, meeting deadlines, working well with others, and showing a positive attitude. It is important because it helps the organization succeed and can also

lead to personal growth, promotions, and rewards for the staff **(Hajiali et al., 2022)**.

Job performance not only affects individual success but also impacts the overall success of a team or organization. When nurses perform well, projects run smoothly, patients are satisfied, and hospital goals are achieved more easily. On the other hand, poor job performance can lead to delays, mistakes, and lower team morale. This is why many hospitals regularly review and support nurses' performance through feedback, training, and recognition **(Fareed et al., 2022)**.

The job performance of nurses plays a vital role in the quality of healthcare services. Nurses are responsible for providing direct patient care, monitoring patient conditions, administering medications, and supporting doctors in treatment plans. Their performance is measured by their clinical skills, communication, accuracy, efficiency, and ability to handle stressful situations. High job performance in nursing leads to better patient outcomes, increased patient satisfaction, and a safer hospital environment. Factors like proper training, teamwork, workload, and support from management can greatly influence a nurse's job performance **(Wdowiak, 2023)**.

Measuring job performance helps organizations understand how well their individuals are contributing to the organization's goals. This can be done through regular evaluations, setting clear objectives, and giving constructive feedback. It also allows individuals to see where they are doing well and where they can improve. When job performance is tracked effectively, it encourages accountability and helps build a culture of continuous improvement **(Beer et al., 2022)**.

Nurses who feel a strong connection to the hospital's culture are more likely to stay long-

term. Additionally, when nurses are well-aligned with the hospital's values, they are more likely to demonstrate higher levels of professionalism, take on leadership roles, and contribute to positive changes in healthcare practices. Furthermore, hospitals that prioritize person-organization fit can tailor their training programs to better meet the specific needs and goals of their nursing staff, fostering continuous improvement and higher overall job performance (Weng et al., 2025).

Significance of the study

In organization, nurse's performance is commonly improved by ensuring the unity of organizational and nurses values. This indicated that the knowledge of person-organization fit can select nurses capable of sharing organizational values and beliefs, as well as sharing experiences deepening the fit. Furthermore, Person-organization fit showed the similar qualities good for meeting nurse's needs and performance (Jufrizen et al., 2023).

From the researchers' point of view nurses who recognize high levels of Person-organization fit describe their organization as supportive, increased the sense of belonging, and increased values that invest in professional development of its nurses, and maintains harmonious working environments within and between groups of health organizations. Nurses perform their job in an environment should be safe, healing, and humane, with respect for the rights, responsibilities, needs, and contributions of patients, their families, nurses, and all other health care. So, this study was conducted to assess person-organization fit and its relation to job performance of nurses.

Aim of the study:

The present study aimed to assess person-organization fit and its relation to job performance of nurses.

Research questions:

- 1- What are the levels of person-organization fit of nurses?
- 2- What are the levels of job performance of nurses?
- 3-Is there a relation between person-organization fit and job performance of nurses?

Subjects and methods:

Study design:

A descriptive correlational design was utilized to conduct this study.

Study setting:

The study was conducted in all inpatients units of medical and surgical departments at Benha University Hospitals.

Study subjects:

It included a simple random sample of a total of 2470 nurses at previously mentioned study settings with at least two years of experience, accepted to participate in the study and were available at the time of data collection. The study sample was 345 nurses were selected. The sample size was defined according to the following sample size formula: (Tejada and Punzalan, 2012).

$$n = \frac{N}{1 + N(e)^2}$$

(n) → The required sample size
n = 345

(N) → Total number of nurses
N = 2470

(e) → is coefficient factor = (0.05)

(1) = A constant variable

Tools of data collection:

Data of the present study was collected by using two tools namely.

Tool (I): Person-organization fit scale It consisted of two parts:

Part (1): Personal data of nurses included department, age, sex, marital status, educational qualifications and years of experience.

Part (2): It was developed by **Winters, (2015)** and modified by the researchers to assess the level of person-organization fit of nurses. It consisted of 17 items grouped under four main dimensions as the following: Value congruence (5 items), Goal congruence (3 items), Personality congruence (5 items), Needs/Supplies dimension (4 items).

Scoring system:

Responses of nurses were measured on a three points Likert Scale ranged from agree (3), neutral (2), disagree (1). Total scores were ranged from (17-51). Person-organization fit levels were determined as follows:

- High level if the total score is $\geq 75\%$ which equals (39-51) points.
- Moderate level if total score is (60% -75%) which equals (31-38) points.
- Low level if total score is $< 60\%$ which equals (17-30) points (**Abd El Aziz et al., 2024**).

Tool (II): Nurses' Job Performance observation checklist:

It was developed by **Youssif et al., (2017)** and modified by **Mahmoud et al., (2019)** and finally was modified by the researchers to assess the levels of nurse's job performance.

It consisted of 51 items grouped under eight dimensions as the following: Work habits (7 items), Staff relations and communication (6 items), Communication with patients (8 items), Nursing care plan activities (7 items), Material planning and coordination (4 items), Safety measures (9 items), Innovation (4 items), Documentation (6 items).

Scoring system:

Responses of nurses were measured on three points Likert Scale ranged from done (1), not done (0). Total scores were ranged from (0-51) cut off point was done at 75%

equals (39) from statistical view. To ensure reliability, each nurse was observed three times at different intervals. The average score was calculated using the formula

$$\text{Average score} = \frac{\text{observation(1)} + \text{observation(2)} + \text{observation(3)}}{3}$$

the final average score for each items recorded in table.

Level of job performance of nurses was determined as follows:

- Satisfactory level if the total score is $\geq 75\%$ which equals (39-51) points.
- Unsatisfactory level if the total score is $< 75\%$ which equals (0-38) points.

Administrative design:

An official permission was issued from the Dean of the Faculty of Nursing, Benha University to the Director of Benha University Hospitals for taking their permission to conduct the study and seek their support. The researchers met the nurses of each unit to determine suitable time to collect data.

Preparatory phase:

This phase started from the beginning of May 2024 to the end of July 2024 covering three months included the following:

- Reviewing the national and international related literature using journals, magazines, periodicals, textbooks, internet, and theoretical knowledge of the various aspects concerning the topic of the study.
- Developing and translating tools of data collection, inclusive leadership Questionnaire, locus of control scale.

Validity of the tools:

The tools were tested by Jury group consisted of five experts of Nursing Administration, from various Universities as follows; three Assistant professors of Nursing Administration from Benha University and two Professors of Nursing Administration from Menoufia University.

Some modifications in statements were done in tools based on comments of Jury experts such as modifying some words in some statements to give the right meaning for the phrase which did not understand clearly to arrive at the final format of the tools (for example before editing: you agree with the goals of your hospital. After editing: Be aware of the hospital's goals).

Reliability of the tools:

Reliability of tools was conducted to determine the internal consistency and homogeneity of used tools by using Cronbach's Alpha coefficient test. The value for person-organization fit scale was 0.891. While, the value for nurses' job performance observation checklist was 0.901.

Ethical considerations:

Before conducting of the study, ethical approval was obtained from Scientific Research Ethics Committee at Benha University Faculty of Nursing (Approval code: REC-NA-M5) generate ethical permission.

-The respondent rights were protected by ensuring voluntary participation, so the informed consent was obtained from each participant after explaining the aim of the study, its potential benefits, methods for filling data collection tools and expected outcomes.

-The respondent rights to withdraw from the study at any time were assured. Confidentiality of data obtained was protected by allocation code number to the questionnaire sheets. Subjects were informed that the content of the tools used for the study purpose only.

Pilot study:

A pilot study was conducted in August, 2024 to test the sequence of items feasibility, practicability and applicability of the tools, clarity of the language and to estimate the time needed for filling each tool. The average time

needed to fill scale ranged from (10:15) minutes, the average time needed to fill observation checklist ranged from (3:4) hours. It was done on 10% of the total subjects (35 nurses). There was no modification so, this sample was included in the main study.

Field work:

Data collection took about three months from September 2024 to November 2024. The researchers prepared questionnaire sheets and took the permission from heads of departments after explaining the aim and the nature of the study and the method of filling questionnaire sheets to the nurses in their departments.

- ◆ The data were collected from nurses during three days per week from 10 a.m. to 2.30 p.m.

- ◆ The average time needed to fill the scale ranged from (10:15) minutes and the observation checklist required approximately four hours. During the four hours' observation period, eight nurses typically observed around were present per shift. Observation of job performance of nurses was done three times at different intervals.

- ◆ The filled forms were revised to check their completeness to avoid any missing data.

Statistical analysis:

Data were collected, tabulated, statistically analyzed using an IBM personal computer with statistical package of social science (SPSS version: 26.0) where the following statistics were applied.

- Descriptive statistics: In which quantitative data were presented in the form of Mean, standard deviation (SD), frequency, and percentages distribution.
- Correlation (r): Was used to study association between two qualitative variables.
- Chi-square test (χ^2): Was used to study association between two qualitative variables, Fisher's exact test: to evaluate the data and examine difference between groups

- The used tests of significance included p-value test; A significance level value was considered when $p\text{-value} \leq 0.05$ and a highly significance level was considered when $p\text{-value} \leq 0.001$, non-significance when $p\text{-value} > 0.05$.

Results:

Table (1) illustrates that more than two-thirds (67.5%) of the studied nurses were working in medical department and more than three-fifths (64.1%) of them had less than 30 years old, with mean \pm SD 29.81 \pm 5.83 years. Also, more than half (58.8% & 58.3%) of them were married and females respectively. In relation to their educational qualifications, more than two-fifths (45.2%) of them had associated technical degree in nursing. According to their years of experience, about three quarters (75.1%) of them had less than 10 years of experience with mean \pm SD 2 \pm 28.

Figure (1) clarifies that more than two-fifths (43.8%) of the studied nurses had high level of person-organization fit. While, more than one third (38.8%) of them had moderate level of person-organization fit and less than one fifth (17.4%) of them had low level of person-organization fit.

Table (2) shows that the total mean score for all dimensions of person-organization fit was (37.38 \pm 7.81). The first ranking with the highest mean score was related to "Goal congruence" with mean \pm SD (7.61 \pm 1.65) that represents 84.5% of total scores. While, the last ranking with the lowest mean score was related to "Needs, supplies" with mean \pm SD (7.78 \pm 2.57) that represents (64.8%) of total scores.

Figure (2) clarifies that the majority (80.9%) of the studied nurses had satisfactory level of job performance. While, less than one fifth (19.1%) of them had unsatisfactory level of job performance.

Table (3) shows that the total mean score for all dimensions of job performance was (42.15 \pm 6.81). The first ranking with the highest mean score was related to "Communication with patients" with mean \pm SD (7.27 \pm 1.07) that represent (90.9%) of total scores. While, the last ranking with the lowest mean score was related to "Innovation" with mean \pm SD (2.06 \pm 1.34) that represent (51.5%) of total scores.

Table (4) indicates that there was highly statistical significant relation between total levels of person-organization fit and studied nurses' age and educational qualifications. In addition, there was statistical significant relation between total levels of person-organization fit department and years of experience of studied nurses.

Table (5) indicates that there was highly statistical significant relation between total job performance levels and studied nurses' educational qualifications. While, there was statistical significant relation between total job performance levels and studied nurses' age.

Table (6) demonstrates that there was highly statistically significant positive correlation between total level of person-organization fit and total level of job performance among studied nurses.

Table (1): Distribution of studied nurses according to their personal data (n=345)

| Personal data items | | No. | % |
|-----------------------------------|----------------------------------------|-------------------|-------------|
| Department | Medical | 233 | 67.5 |
| | Surgical | 112 | 32.5 |
| Age (Years) | < 30 | 221 | 64.1 |
| | 30: < 40 | 92 | 26.7 |
| | ≥40 years | 32 | 9.2 |
| | Mean± SD | 29.81±5.83 | |
| Sex | Male | 142 | 41.2 |
| | Female | 203 | 58.8 |
| Marital status | Married | 201 | 58.3 |
| | Unmarried | 144 | 41.7 |
| Educational qualifications | Nursing School Diploma | 38 | 11.0 |
| | Associated Technical degree in nursing | 156 | 45.2 |
| | Bachelor degree in nursing | 147 | 42.6 |
| | Post graduated studies | 4 | 1.2 |
| Years of experience | < 10 | 259 | 75.1 |
| | 10 years: < 20 | 48 | 13.9 |
| | ≥ 20 years | 38 | 11.0 |
| | Mean± SD | 2±28 | |

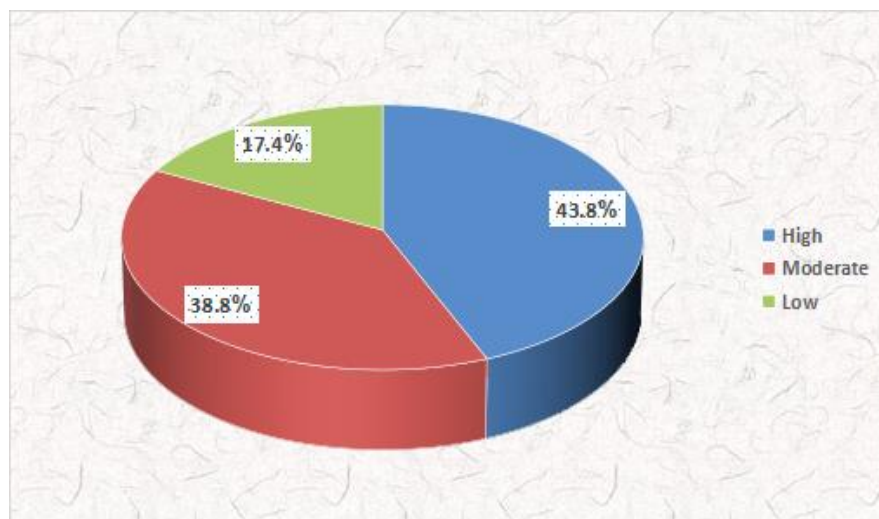


Figure (1): Total levels of person-organization fit as perceived by studied nurses

Person-Organization Fit and its Relation to Job performance of Nurses

Table (2): Total mean scores with ranking of person-organization fit dimensions among studied nurses.

| Person-organization fit dimensions | Minimum score | Maximum score | M±SD | % | Ranking |
|--------------------------------------|---------------|---------------|-------------------|------|---------|
| -Value congruence | 5 | 15 | 11.67±3.01 | 77.8 | 2 |
| -Goal congruence | 3 | 9 | 7.61±1.65 | 84.5 | 1 |
| -Personality congruence | 5 | 15 | 10.30±2.80 | 68.7 | 3 |
| -Needs, supplies | 4 | 12 | 7.78±2.57 | 64.8 | 4 |
| Total person-organization fit | 18 | 51 | 37.38±7.81 | | |

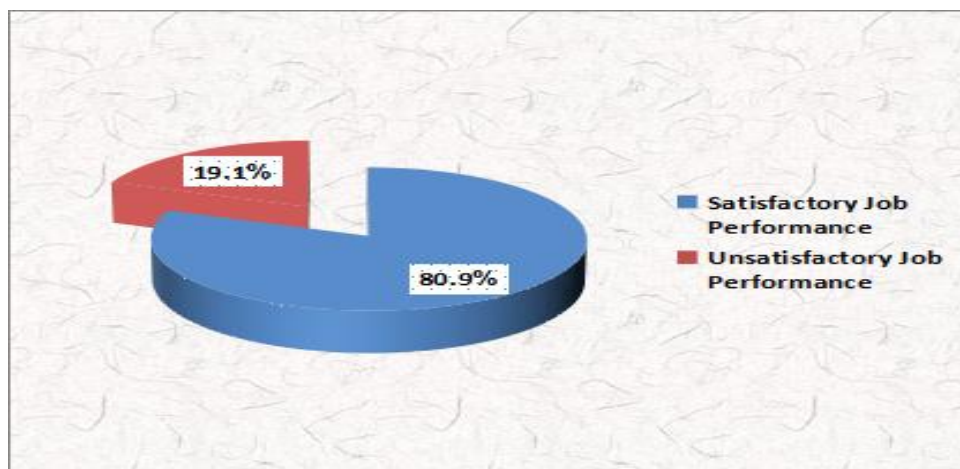


Figure (2): Total levels of job performance among studied nurses.

Table (3): Total mean scores with ranking of job performance dimensions among studied nurses.

| Job performance dimensions | Minimum score | Maximum score | M±SD | % | Ranking |
|-------------------------------------|---------------|---------------|-------------------|------|---------|
| -Work habits | 1 | 7 | 4.98±1.30 | 71.1 | 7 |
| -Staff relations and communication | 0 | 6 | 5.40±1.21 | 90.0 | 4 |
| -Communication with patients | 0 | 8 | 7.27±1.07 | 90.9 | 1 |
| -Nursing care plan activities | 1 | 7 | 5.55±1.45 | 79.3 | 6 |
| -Material planning and coordination | 0 | 4 | 3.61±0.84 | 90.3 | 3 |
| -Safety measures | 0 | 9 | 7.80±1.68 | 86.7 | 5 |
| -Innovation | 0 | 4 | 2.06±1.34 | 51.5 | 8 |
| -Documentation | 0 | 6 | 5.44±1.27 | 90.7 | 2 |
| Total job performance | 14 | 51 | 42.15±6.81 | | |

Table (4): Relation between total person-organization fit levels and personal data of studied nurses (n=345)

| Personal data items | Total Person-Organization Fit | | | | | | | |
|----------------------------------------|-------------------------------|------|------------------|------|------------|------|---------------|---------|
| | High (n=151) | | Moderate (n=134) | | Low (n=60) | | FET/ χ^2 | p-value |
| | No. | % | No. | % | No. | % | | |
| Department | | | | | | | | |
| Medical | 112 | 74.2 | 88 | 65.7 | 33 | 55.0 | 7.546 | 0.023* |
| Surgical | 39 | 25.8 | 46 | 34.3 | 27 | 45.0 | | |
| Age (years) | | | | | | | | |
| < 30 | 103 | 68.2 | 79 | 59.0 | 39 | 65.0 | 15.113 | 0.002** |
| 30: < 40 | 39 | 25.8 | 33 | 24.6 | 20 | 33.3 | | |
| ≥ 40 years | 9 | 6.0 | 22 | 16.4 | 1 | 1.7 | | |
| Sex | | | | | | | | |
| Male | 62 | 41.1 | 54 | 40.3 | 26 | 43.3 | 0.159 | 0.924 |
| Female | 89 | 58.9 | 80 | 59.7 | 34 | 56.7 | | |
| Marital status | | | | | | | | |
| Married | 84 | 55.6 | 81 | 60.4 | 36 | 60.0 | 0.768 | 0.681 |
| Unmarried | 67 | 44.4 | 53 | 39.6 | 24 | 40.0 | | |
| Educational qualifications | | | | | | | | |
| Nursing School Diploma | 13 | 8.6 | 22 | 16.4 | 3 | 5.0 | 19.632 | 0.001** |
| Associated Technical degree in nursing | 60 | 39.6 | 59 | 44.0 | 37 | 61.7 | | |
| Bachelor degree in nursing | 76 | 50.3 | 53 | 39.6 | 18 | 30.0 | | |
| Post graduated studies | 2 | 1.5 | 0 | 0.0 | 2 | 3.3 | | |
| Years of experience | | | | | | | | |
| < 10 | 120 | 79.5 | 93 | 69.4 | 46 | 76.7 | 13.249 | 0.010* |
| 10: < 20 | 16 | 10.5 | 19 | 14.2 | 13 | 21.7 | | |
| ≥ 20 | 15 | 10.0 | 22 | 16.4 | 1 | 1.6 | | |

Person-Organization Fit and its Relation to Job performance of Nurses

Table (5): Relation between total job performance levels and personal data of studied nurses (n=345)

| Personal data items | Total Job Performance | | | | | |
|----------------------------------------|-----------------------|------|-----------------------|------|---------------|---------|
| | Satisfactory (n=279) | | Unsatisfactory (n=66) | | FET/ χ^2 | p-value |
| | No. | % | No. | % | | |
| Department | | | | | | |
| Medical | 193 | 69.2 | 40 | 60.6 | 1.788 | 0.191 |
| Surgical | 86 | 30.8 | 26 | 39.4 | | |
| Age (years) | | | | | | |
| < 30 | 179 | 64.2 | 42 | 63.6 | 9.185 | 0.010* |
| 30: < 40 | 80 | 28.7 | 12 | 18.2 | | |
| ≥ 40 years | 20 | 7.1 | 12 | 18.2 | | |
| Sex | | | | | | |
| Male | 112 | 40.1 | 30 | 45.5 | 0.622 | 0.487 |
| Female | 167 | 59.9 | 36 | 54.5 | | |
| Marital status | | | | | | |
| Married | 163 | 58.4 | 38 | 57.6 | 0.016 | 0.891 |
| Unmarried | 116 | 41.6 | 28 | 42.4 | | |
| Educational qualifications | | | | | | |
| Nursing School Diploma | 24 | 8.6 | 14 | 21.2 | 16.683 | 0.001** |
| Associated Technical degree in nursing | 120 | 43.1 | 36 | 54.5 | | |
| Bachelor degree in nursing | 131 | 46.9 | 16 | 24.3 | | |
| Post graduated studies | 4 | 1.4 | 0 | 0.0 | | |
| Years of experience | | | | | | |
| < 10 | 213 | 76.3 | 46 | 69.6 | 1.672 | 0.433 |
| 10: < 20 | 38 | 13.6 | 10 | 15.2 | | |
| ≥ 20 | 28 | 10.1 | 10 | 15.2 | | |

Table (6): Correlation between total person-organization fit and total job performance scores among studied nurses.

| variables | Total Job Performance | |
|-------------------------------|-----------------------|---------|
| Total Person-Organization Fit | r | p-value |
| | 0.406 | 0.000** |

Discussion:

In the healthcare sector, person-organization fit is vital for ensuring that nurses are satisfied, perform well, and remain engaged, ultimately leading to better patient care and improved organizational outcomes. Organizations that focus on aligning nurses' values with those of the organization will likely see a reduction in turnover, an increase in job satisfaction, and improved patient experiences (Ashfaq & Hamid 2021).

Healthcare providers' job performance level is a corner stone for the productivity of healthcare organizations. Job performance is a multifaceted concept influenced by an individual's abilities, motivation, work environment, and alignment with organizational goals. In sectors like healthcare, where high-quality service and patient care are essential, maximizing job performance is critical. Healthcare organizations can enhance job performance by providing training, clear expectations, feedback, and a supportive environment where nurses feel valued and motivated to perform at their best (Mesfin, 2024).

The result of the present study covered fifth main areas as following sequence: **Firstly**; personal data of studied nurses. **Secondly**, levels of person-organization fit as perceived by studied nurses. **Thirdly**, levels of

job performance of studied nurses. **Fourthly**, relation between study variables and personal data of studied nurses and **Finally**, correlation between total levels of person-organization fit and job performance.

The results of the current study illustrates that more than two-thirds of the studied nurses were working in medical department and more than three-fifths of them had less than 30 years old. Also, more than half of them were married and females. In relation to their educational qualifications, more than two-fifths of them had associated technical degree in nursing. According to their years of experience, about three-quarters of them had less than 10 years of experience.

The results of the current study clarifies that more two-fifths of the studied nurses perceived high level of person-organization fit. While, less than one-fifth of them perceived low level of person-organization fit. From researchers's point of view, this result may be due to clear alignment between nurses goals and the hospital's mission. Staff members aim to deliver high-quality healthcare and support community well-being, which mirrors the organization's core objectives. This harmony boosts nurses motivation, satisfaction, and loyalty to the hospital.

The results of the current study is in the same line with Akkaya & Serin (2020) they

conducted a study about "The Investigation of the Relationship Between Academics' Person-Organization Fit and Burnout Levels" and found that high levels of person-organization fit. In addition to, **Soelton et al., (2020)** they conducted a study about "Reawakening perceived person-organization fit and perceived person job fit" and found that more than three-quarters of the studied nurses perceived high level of person-organization fit.

On the other side, **Kakar et al., (2023)** they conducted a study about "Person-organization fit and turnover intention: The mediating role of need-supply fit and demand-ability fit" and found that the majority of the study members had perceived low person-organization fit.

Regarding ranking with mean scores and standard deviation of person-organization fit dimensions as perceived by studied nurses. The findings of the present study shows that the first ranking with the highest mean score was related to "Goal congruence". From researchers's point of view, this result may be due to most of the nurses have practical experience in the field of work in addition to having an associated technical degree in nursing, work experience and aware of organization's goals.

While, the last ranking with the lowest mean score was related to "Needs, supplies". From researchers's point of view, this result may be due to the perception among nurses that their individual needs, such as adequate tools, fair workload distribution, or emotional and professional support, are not fully addressed by the organization. Such gaps can negatively affect nurses' perception of how well the organization supports their needs, leading to lower scores in this dimension.

This result of the current study is in the same line with **Mi et al., (2020)** who

conducted a study about "Promoting employee green behavior through the person-organization fit" and found that higher ranking of person-organization fit is goal congruence while the lower ranking is needs, supplies. While, this result of the current study is in disagreement with **Abd El Aziz et al., (2024)** who conducted a study about "Relationship between person-organization fit and organizational identification among staff nurses" and found that highest mean score of person-organization fit dimensions regarding personality/climate congruence dimension. While, the lowest mean score regarding need/supplies congruence dimension.

The results of current study clarify that the majority of the studied nurses had a satisfactory level of job performance. While, less than one fifth of them had unsatisfactory level of job performance. From researchers's point of view, this result may be due to the presence of continuous learning and training centre along with a quality assurance unit which play an important role in improving nursing performance. Attending seminars and conferences had also helped increase nurses' awareness of the importance of providing high-quality nursing care. These efforts contribute to enhancing both the knowledge and practice of nurses, leading to better patient outcomes.

This result in agreement with **Ismail et al., (2025)** they conducted a study about "Determining the Impact of Work-Life Balance and Job Satisfaction on Nurses' Performance in Teaching Hospitals" and found that a significant positive relationship exists between Work-Life Balance (WLB) and job performance among nurses, nurse had high level of job performance. Also, **Daba et al., (2024)** they conducted a study about "Job performance and associated factors among nurses working in adult emergency

departments" and found that the majority of nurses had high level of job performance.

On the other side, **Nyorong et al., (2021)** they conducted a study about "Factors affecting nurse performance at Datu Beru Takengon general hospital" and found that nurses had low job performance.

The result of the current study shows that the first ranking with the highest mean score was related to "Communication with patients". While, the last ranking with the lowest mean score was related to "Innovation". From researchers's point of view, this result may be due to adequate staffing, training, and frequent patient interaction, making communication central to nurses' roles. In contrast, the low innovation score suggests limited support, autonomy, or encouragement for new ideas. Nurses may lack time, resources, or opportunities for research and creative problem-solving.

This result is in accordance with **Bekele et al., (2022)** they conducted a study about "Patients' perceptions of nurses' communication in public hospitals" and found that the highest-ranked aspect of nursing performance was "communication with patients".

Also, this result is in agreement with **Hanafi et al., (2024)** they they conducted a study about "Innovation-enhancing high-performance work practices in Malaysian R&D organizations" and found that implementation of innovation in Malaysian organizations is still low.

The result of the current study indicate that there were highly statistical significant relation between total levels of person-organization fit and studied nurses' age and educational qualifications. In addition, there was statistical significant relation between total levels of person-organization fit

department and years of experience of studied nurses. From invistigator's point of view, this result may be due to older and more educated nurses may have clearer professional values that align better with organizational goals. Additionally, nurses with more experience or working in specific departments may adapt more easily to the organizational culture.

The result of the current study is in agreement with **Abd El Aziz et al., (2024)** who conducted a study about "Relationship between person-organization fit and organizational identification among staff nurses" and found that there were highly statistical significant relation between total levels of person-organization fit and studied nurses' age and educational qualifications.

Concerning relation between total job performance levels and personal data of studied nurses the present study showed that there was statistical significant relation between total job performance levels and studied nurses' age. While, there was highly statistical significant relation between total job performance levels and studied nurses' educational qualifications. From invistigator's point of view, this result may be due to explain as level of education, age give more knowledge and enable nurses to gain more skills.

This result in agreement with **Mohamed & Gaballah (2018)** they conducted a study about "the relationship between organizational climate and nurses' performance" and found that they mentioned that a significant relationship was found between nurses' performance and age and educational level. Otherwise, this result in disagreement with **Thabet et al., (2021)** they conducted a study about "Influence of training program implementation on nurses' performance regarding neonates invasive mechanical ventilation" and found that there

was statistically significant relation between nurses' performance and their qualification and years of experience.

Concerning correlation between person-organization fit and job performance among studied nurses the result of current study demonstrates that there was highly statistically significant positive correlation between total level of person-organization fit and total level of job performance among studied nurses. From investigator's point of view, this result may be due to when nurses' values and goals align with those of the organization, they feel more motivated, satisfied, and committed. This alignment enhances engagement and teamwork, leading to improved job performance. A supportive organizational culture also empowers nurses to perform more effectively.

The result of the current study was agreed with **Ahmed & Saad (2023)** who conducted a study about "The relationship between person-job fit and person-organization fit and their impact on employee performance in information technology sector" and indicated that person-organization fit have a significantly positive impact on employee performance.

Conclusion:

In the light of the present study findings, the study concluded that more than two-fifths of the studied nurses perceived high level of person-organization fit. While, less than one fifth of them perceived low level of person-organization fit. Also, majority of the studied nurses had satisfactory level of job performance. While, less than one fifth of them had unsatisfactory level of job performance. Moreover, there was highly statistically significant positive correlation between total level of person-organization fit and total level of job performance among studied nurses.

Recommendations:

I- At Hospital Administration level:

1. Involving nurses in hospital policies and decision-making processes enhances their job performance.
2. Ensure continuous availability of essential supplies and resources to support nurses in delivering safe and efficient patient care.
3. Providing training programs for nurses to improve their skills regarding problem solving and developing new solutions.

II- At Education level:

1. Nurses should maintain regular and transparent communication with nursing leaders and supervisors to address concerns, clarify expectations, and receive feedback for performance improvement.
2. Nurses should seek continuous education and training opportunities to enhance their creativity and critical thinking skills in clinical practice.

III - At The Research Level:

1. Expand research beyond nursing to include all health care team, and administrative staff to build a holistic view of fit across the healthcare workforce.
2. Further research is needed to examine the effect of person-organization fit on quality of patient care.
3. Further research is needed to determine barriers that hinder nurses' job performance.

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الملائمة بين الشخص والمؤسسة وعلاقتها بالأداء الوظيفي للممرضين

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تلعب الملائمة بين الشخص والمؤسسة دوراً رئيسياً في تعزيز رفاهية الممرضين وأدائهم الوظيفي من خلال موائمة قيمهم الشخصية مع قيم المؤسسة. **الهدف:** هدفت الدراسة إلى تقييم الملائمة بين الشخص والمؤسسة وعلاقتها بالأداء الوظيفي للممرضين. **تصميم البحث:** تم استخدام تصميم ارتباطي وصفي لتحقيق هدف الدراسة الحالية. **مكان الدراسة:** أجريت الدراسة في جميع وحدات المرضى الداخليين في الأقسام الطبية والجراحية بمستشفى جامعة بنها. **المشاركون في العينة:** عينة عشوائية بسيطة من ٣٤٥ ممرضة من أصل ٢٤٧٠ كانوا يعملوا في مكان الدراسة المذكورة أعلاه. **الأدوات:** تم استخدام أداتين: (١) مقياس الملائمة بين الشخص والمؤسسة (٢) قائمة مراجعة أداء الممرضين الوظيفي. **النتائج:** أظهرت أن أكثر من خمسي (٤٣,٨٪) الممرضين الذين خضعوا للدراسة لديهم مستوى عالٍ من الملائمة بين الشخص والمؤسسة، وأن غالبية (٨٠,٩٪) الممرضين الذين خضعوا للدراسة لديهم مستوى مرضٍ من الأداء الوظيفي **الاستنتاج:** وُجد ارتباط إيجابي ذو دلالة إحصائية عالية بين المستوى الإجمالي لملائمة الأفراد للمؤسسة ومستوى الأداء الوظيفي الإجمالي لدى الممرضين المشمولين بالدراسة. **التوصيات:** توفير برامج تدريب وتوجيه مستمرة لتعزيز قيم المستشفى، وتعزيز وضوح الأدوار. توسيع نطاق البحث ليشمل جميع فرق الرعاية الصحية والموظفين الإداريين، وذلك لبناء رؤية شاملة لملائمة القوى العاملة في مجال الرعاية الصحية.