

Effect of Spiritual Leadership Educational Program for Head Nurses on Staff Nurses Job Enjoyment

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Abstract

Background: Spiritual leadership is a sense of spiritual well-being that positively affects organizational outcomes such as enjoyment of work which associated with enhancing work attitudes, adaptability, and performance. **Aim of the study:** Assess spiritual leadership educational program for head nurses and its effect on staff nurses' job enjoyment. **Research Design:** A quasi-experimental design was used to achieve the aim of the present study. A quasi-experimental is an empirical interventional study used to estimate the causal effect of an intervention on target population without random assignment. **Setting:** The study was conducted at Benha University Hospital in all departments and units. **Sample:** A convenient sample of 35 head nurses, and 320 out from 1600 staff nurses. **Tools of data collection:** Data of the present study was collected by using three tools , spiritual leadership knowledge questionnaire, spiritual leadership skills questionnaire and job enjoyment questionnaire **Results:** Minority (6.3%) of studied head nurses had high knowledge level at the preprogram phase while more than three quarters 82.5% & 79.3% at post program and follow up study phases respectively, less than one quarter 16.3% of them had high spiritual leadership skills level at preprogram phase while more than three quarters (85.5 % & 81.3%) of them at post program and follow up phases respectively. Minority (6.0%) of the studied staff nurses had a high enjoyment level at preprogram phase while near to three quarters (69. 4%: 68. %) of them had a high enjoyment level at the post program and follow up phases respectively. **Conclusion:** It was concluded that spiritual leadership had positively statistically significant correlated with job enjoyment. **Recommendation:** Hospital administration should conduct a training program for different levels of nurse managers to promote spiritual leadership practices in their organization.

Keywords: Educational program ,Head nurses, Job enjoyment ,Spiritual leadership, Staff nurses.

Introduction

Health care Organizations require strong leadership and management to achieve maximum effectiveness through effective head nurses are able to influence others by developing visions of the future. These leaders inspire, motivate, and empower staff toward goal attainment in the organization (*Jahandar, 2017*). Effective leadership plays a vital role in the dynamic of these organizations. Effective leadership continued to be a critical component for organizational success and viability, especially in today's global and highly technical healthcare environment (*Mostafa, 2013*). Head nurse as spiritual leader can create an atmosphere in hospital in which leaders and followers have true sense of care

and admiration for both self and others, and only spiritual leadership has capacity to fulfill the basic needs for meaning and shared purpose of both leaders and nurses. This sense of membership and meaning leads to increased organizational commitment and autonomy (*Arshad and Abbasi, 2014*). Considering management, the nurse supervisor is responsible for maintain, preserving safety organizational climate free from conflict, supervisors are also by providing equity and implementation of hospital policies, implementation of employment agreements, and staff development, fair and ethical nursing practices, compliance with the law, the delivery of newly programs; and a supportive environment. and also, to promote staff enjoyment by supporting, motivation, solving

problems, and continuous staff training for new skills and new updates (**Bacon et al., 2021**).

Spiritual leadership has been defined as the values, attitudes, and behaviors that are necessary to intrinsically motivate oneself and others so that they have a sense of spiritual well-being through calling and membership. Spiritual leadership considers a motivating and inspiring staff nurses with an excellent vision. The Spiritual Leadership movement contains leadership serving models, staff participation and empowering them based on the philosophy of servant leadership. Spiritual leader is one who dealing with situations instead of interfering during affairs and shows inspiration as a substitute of controlling and trust instead of imposing obstacles and restrictions, independence, rather than acting, imaging and modesty rather than showing off (**Aboobaker et al., 2019**).

Spiritual leadership in nursing considered as an effective approach that improve the higher level of team creativity, organizational productivity and learning capacity which motivate the nurses' growth and development. Also encourage the nurses' sense of acceptance and inner satisfaction which has the potential to reduce the challenges in the nursing profession and create differences in nursing work environment (**Abdulgawaad, 2019 and Abdel Rahman et al., 2020**).

Enjoyment has been defined as the satisfaction of both hedonic and non-hedonic needs where hedonic needs are defined by arousal and affect, and non-hedonic needs include competence and autonomy (**Wirth, Hofer, & Schramm, 2012**). Enjoyment is seen by a number of authors as an aspect of job satisfaction and items on enjoyment are included in some job satisfaction scales in nursing. Enjoyment has been associated with the affective domain of job satisfaction. Two dimensions of job satisfaction were including cognitive which examines individual views of the job conditions and affective, which relates to individual emotional appraisal of their job or job enjoyment (**Wilkes et al., 2017**).

Job enjoyment can be defined as the sense of contentment one feels as a direct result of

being employed in a particular role. It isn't only when the nurses are content while in the workplace their job makes them feel content in life, affecting areas such as confidence and security. Job enjoyment is a must-have if manager want the employees to have a long tenure with the organization (**BasuMallick, 2021**).

Job enjoyment is in regard to one's feelings or state of mind satisfaction regarding the nature of their work. importance and nature of job enjoyment include; establishing a healthy organizational environment in an organization, job enjoyment is very important for a person's motivation and contribution to production, reducing tiredness, absenteeism and turnover, increasing organizational citizenship behaviors, higher level of job enjoyment is associated with positive outcomes and organizational commitment that defined as the nurses' level of engagement with a particular organization. It reflects peoples' attitudes towards the organizational goals and values, a desire to stay with the organization, and a willingness to expend effort on its behalf (**Albashayreh et al., 2019**).

Job enjoyment and satisfaction can be influenced by a variety of factors, such as the quality of one's relationship with supervisor, the quality of the physical environment in which they work, degree of fulfillment in their work, job enjoyment also influenced by leadership (supervisory support, top management leadership, employee relation (team interdependence, team participation, co-worker relationship) , job scope (job description, job performance, task variety, task autonomy, task orientation, salary and compensation on performance moreover, it is influenced by adequate staff training and development opportunity, stress reduction, leadership, work standards, fair rewards, and adequate authority (**Kever et al., 2018**).

Significant of the study:

In recent years, more attention has been paid to the spiritual characteristics of leadership, and how leaders establish mutual and appropriate spiritual relationships with staff. Job makes life meaningful apart from providing an income; thus, work without the

soul is disturbing and may lack in the true sense of meaning (*Moon et al,2020*). As leaders must select an appropriate leadership style, most of which focus on power and narrowly on spirit, followers must be respected and appreciated, which is achieved through spiritual leadership, in which the spiritual survival variables are meaning/calling and membership, hence this study aims to assess the relationship between spiritual leadership and job satisfaction among head nurses.

Head nurses have one of the most challenging and important leadership roles in healthcare, yet fewer bedside nurses are seeking this initial formal leadership role. The stress of leadership, fear of performance failures, and increased accountability of the role have contributed to nurses who seeking a future in leadership. Lack of interest in leadership presents a tremendous strain on the current climate of nursing practice where there is a shortage of experienced nurses compared with the demand for nursing care.² The decrease in nurses interested in leadership, coupled with a lack of leadership training for current nurse leaders, suggests that nurse executives must intervene quickly to improve and ensure the state of nursing leadership. (*Correa, Paula Bacon, Thornton,2018*)

Aim of the study:

This study aimed to assess spiritual leadership educational program for head nurses and its effect on nurses' job enjoyment.

Research hypothesis:

Spiritual Leadership educational program for Head Nurses would affect Job enjoyment among Staff Nurses.

Subjects and Methods

Research Design: A quasi-experimental design was used to achieve the aim of the present study. A quasi-experimental is an empirical interventional study used to estimate the causal effect of an intervention on target population without random assignment (*Dinardo, 2008*).

The Study Setting: The current study conducted at Benha University Hospital. In inpatients Units(35 units).

Subjects:

Subjects of the study included two groups.

Head nurses' group: 35 head nurses who was working in the study settings during the time of data collection and fulfilled the inclusion criterion of having at least two years of experience at the study setting. Nurses group: were 320 out from 1600 staff nurses who were working in the above-mentioned setting.

Sample Size: the sample size was calculated based on the following **equation:**

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

$n = N / (1 + N(e)^2)$, where "n" was sample size = 320, N was the total number of nurses.

N = 1600.

Was coefficient factor = 0.05 (*Yamane, 1967*). Sampling technique was a simple random sample through blindness selection from staff nurses in every unit at Banha university hospital.

Tools of Data Collection:

Data of the present study was collected by using three tools namely : Spiritual leadership knowledge questionnaires , spiritual leadership skills questionnaires Nurses job enjoyment scale.

Tool (I): Spiritual leadership knowledge questionnaire:

Questionnaire was developed by investigators based on literature review (*Jahandar et al., 2017*) to assess head nurses' knowledge regarding spiritual leadership. It consists of two parts, first part personal and job characteristics: It included data about study subjects including age, gender, marital status, education qualification, and years of experience. Second part spiritual leadership knowledge questionnaire:

It consisted of 23 questions in the form of multiple questions distributed as follows:

Multiple questions:

- Concept of spiritual leadership (2 questions)
- Importance of spiritual leadership (4 questions).
- Principles of spiritual leadership (2 questions).
- Spiritual leaders' characteristics (2 questions).
- Dimensions of spiritual leadership (4 questions).

- Effective environment for spiritual leaders (2 questions).
- Obstacles of spiritual leadership (2 questions).
- Role of spiritual head nurse (3 questions)

Arrange questions:

Principles of spiritual leadership (1 question).

Discuss questions:

Role of spiritual head nurse (1 question)

Scoring system:

Each question was assigned a score of (one) for correct answer and (zero) for the wrong answer. Therefore, the total score was (23 degree), knowledge total score was converted into percentages, the total level of knowledge was considered poor if percent score < 60% (<14 degree), average if percent score 60%-75% (14 to 17) and good if percent score >75% (17 degree) (Elsayed, 2013).

Tool (II): Spiritual leadership skills questionnaires:

It was developed by the investigator based on literature review (Jahandar et al., 2018) to assess the head nurses' spiritual leadership skills levels from assess head nurses and staff nurses. It consisted of 41 items divided into five main dimensions (vision 9 items, hope 7 items, altruistic love 8 items, meaning 8 items, and membership 9 items). Responses were scored based on three-point Likert Scale as follows (3) degree for "Always", (2) degree for "Sometimes" and (1) for "Never". Therefore, the total score of spiritual leadership skills was 123 degrees. A total score was converted into percent score. The level of skills was determined as the following: High level of spiritual leadership skill if the percent score >75% (> 92 degree), moderate 60-75 and low level of skill if the percent score < 60% (< 74 degree) (Ali, Ibrahim, and Diad, 2021).

Tool (111): Nurses Job Enjoyment Scale:

The scale was developed by the investigators based on related literature *Siqueira (1995)* and *Hughes et al (2009)*, to assess nurses' job enjoyment levels it consisted of (29) items divided into seven domains, pleasure (3 items), supportive relation with others (10 items),

Workplace conditions (7 items), Feeling of competence (6 items) and challenge/improvement of performance (3 items).

Scoring system:

Each statement response was measured on three-point Likert scales ranged from agree (3), Neutral (2) and Disagree (1). Therefore, the total score was converted into percentages, the total level of enjoyment was considered low if percent score < 60%, Moderate if percent score 60% - < 75% and High if percent score 75%

Validity of the tools:

The tools were tested for validity through distribution of the tools to panel of expert consisted of five experts in the field of nursing administration from different faculties of nursing in Egypt: two professors of nursing administration from Cairo University and two assistant professors of nursing administration from Tanta university and one assistant professor of nursing administration from Banha university. The necessity modification was done according to jury comments, the modifications were done in the light of their valuable comments such as modify some words to give the right meaning for the phrase which were not clear.

Reliability of tools: The reliability of the questionnaires was tested for the internal consistency using alpha coefficient as follow; spiritual leadership knowledge questionnaires (0.77), spiritual leadership skill questionnaires (0.84) and nurses' job enjoyment questionnaires (0.86)

Pilot study: pilot study was conducted in 2021, to assess tools clarity and applicability. It was done on 10% of the subjects: 7 head nurses and 20 staff nurses and because there no modification is require, they were included in study subjects. The time needed was ranged from 20-25 minute for spiritual leadership knowledge questionnaires, 25-30 minutes for spiritual leadership skills questionnaires and 25-35 minutes for nurses' job enjoyment questionnaires, it has also served in estimating the time needed for filling the different tools of data collection.

Ethical consideration: At the interview with head nurses, their assistants and nurses to

collect data, they were informed about the purpose and benefits of the study and their participation is voluntary and they have the right to refuse to participate in the study without giving any reason. In addition, confidentiality and anonymity of the subjects were assured through coding of all data

Field work: Includes the assessment phase, planning phase, implementation phase and evaluation phase. Data of the current study were collected from January 2021 to May 2021. The program was consisted of (15) hours distributed as theoretical session 11 hours and practical session 4 hours. The teaching sessions were achieved by using available resources, relevant contents and instructional strategies for each session. Different methods of teaching were used such as lecture, group discussion, and brain storming. Instructional media included, handout prepared by the investigator and distributed to all head nurses in the first day of the education program. The impact of the educational program was evaluated. Post program for all subjects using the same tools which were used before the program. Follow up after three months of program implementation.

Statistical analysis: Data were verified prior to computerized entry. (SPSS version 25.0) was used for that purpose followed by data analysis and tabulation. Descriptive statistics were applied (e.g., mean, standard deviation, frequency and percentages, Chi-square (X²).

Test of significance (paired (t) test, Pearson correlation coefficients were used for investigation of the relationships among scores). The P- value is the probability of error that indicate significance of results through observed difference. A significant level value was considered when $p < 0.01$.

Results

Table (1) shows personal and job characteristics of the studied head nurses and staff nurses that, the total studied number of head nurses was (35) regarding to age the mean age of the studied head nurses was \pm SD

32.67 ± 8.76 years old, less than half 45.7% of them were aged ≥ 40 years . As regarding to gender , 88.6% of them were females, regarding their educational qualification more than half 57.1 had bachelor degree of nursing . regarding years of experience 68,6% of them had $5 < 10$ years of experience. As it show 77.1% were married,

Also the table shows that, the total studied number of staff nurses was (320) regarding to age the mean age of the studied staff nurses was 29.85 ± 6.52 years old, more than half 52.2 % were aged $20 < 30$ years . As regarding to gender , 90.0% of them were females, regarding their educational qualification more than half 54.4 had nursing diplom degree of nursing, , regarding years of experience 44.1% of them had $5 < 10$ years of experience. more than three quarters 87.8 % were married.

Figure (1) shows that minority (6.3%) of studied head nurses had high knowledge level at the preprogram phase while more than three quarters 82.5% & 79.3% at post program and follow up study phases respectively,

Figure (2) shows that less than one quarter 16.3% of them had high spiritual leadership skills level at preprogram phase while more than three quarters (85.5 % & 81.3%) of them at post program and follow phases respectively.

Figure (3) shows that minority (6.0%) of the studied staff nurses had a high enjoyment level at preprogram phase while near to three quarters (69.4%: 68. %) of them had a high enjoyment level at the post program phase and follow up phase respectively

Table (5): demonstrates that there was highly statistical significant correlation (p value < 0.001) between total head nurses' spiritual leadership knowledge and skills staff nurses' post and follow up the program.

Table (6): demonstrates that there was highly statistical significant correlation (p value < 0.001) between total head nurses' spiritual leadership knowledge and skills staff nurses' job enjoyment post and follow up the program

Table 1: Distribution of head nurses and staff nurses regarding their personal characteristics

Variable	Head nurses(n=35)		Staff nurses(n=320)	
	No	%	No	%
Age in years				
20-<30	5	14.3	167	52.2
30-<40	14	40.0	106	33.1
≥ 40 years old	16	45.7	47	14.7
Mean ±SD	32.67±8.76		29.85±6.52	
Gender				
Female	31	88.6	288	90.0
Male	4	11.4	32	10.0
Educational level				
Baculare of nursing	20	57.1	174	54.4
Technical nursing education	10	28.6	80	25.0
Secondary nursing education	5	14.3	66	20.6
Years of experience				
< 5 years	4	11.4	128	40.0
5-< 10	24	68.6	141	44.1
≥ 10 years	7	20.0	51	15.9
Marital status				
Single	6	17.1	21	6.6
Married	27	77.1	281	87.8
Divorced	2	5.8	18	5.6

Table 2: Mean and standard deviation of head nurses spiritual leadership knowledge dimensions through the program phases (n=35).

Spiritual leadership knowledge dimensions	Pre Program	Post Program	Follow up	t (1)	P value	t (2)	P Value
	$\bar{x}\pm SD$	$\bar{x}\pm SD$	$\bar{x}\pm SD$				
Concept	0.50±0.10	3.88±0.46	2.16±0.80	12.181	<.001**	18.679	<.001**
Importance	1.28±0.66	3.82±0.56	3.42±0.96	17.361	<.001**	10.867	<.001**
Principles	0.56±0.08	1.76±0.64	1.50±1.20	11.007	<.001**	4.624	<.001**
Characteristics	0.88±0.04	2.00±0.00	1.62±0.84	5.610	<.001**	5.206	<.001**
Dimension	1.60±0.82	3.50±0.86	2.60± 1.60	9.460	<.001**	3.291	<.001**
Effective environment	0.96±0.30	1.94±0.32	1.60± 0.86	13.665	<.001**	4.157	<.001**
Obstacles	0.90±0.24	2.00±0.00	1.62± 0.84	4.650	<.001**	4.876	<.001**
Role of head nurse	1.54±0.74	3.48±0.88	2.90± 1.30	9.982	<.001**	5.379	<.001**
Head nursespiritual leadership total Knowledge	8.22±2.98	22.38±3.72	17.42 ±8.40	17.575	<.001**	6.107	<.001**

(**) Highly statistical significant $p \geq 0.001$

p1 between pre and post program

p2 between pre and follow up

Figure (1): Distribution of head nurses' total knowledge levels regarding spiritual leadership through program phases

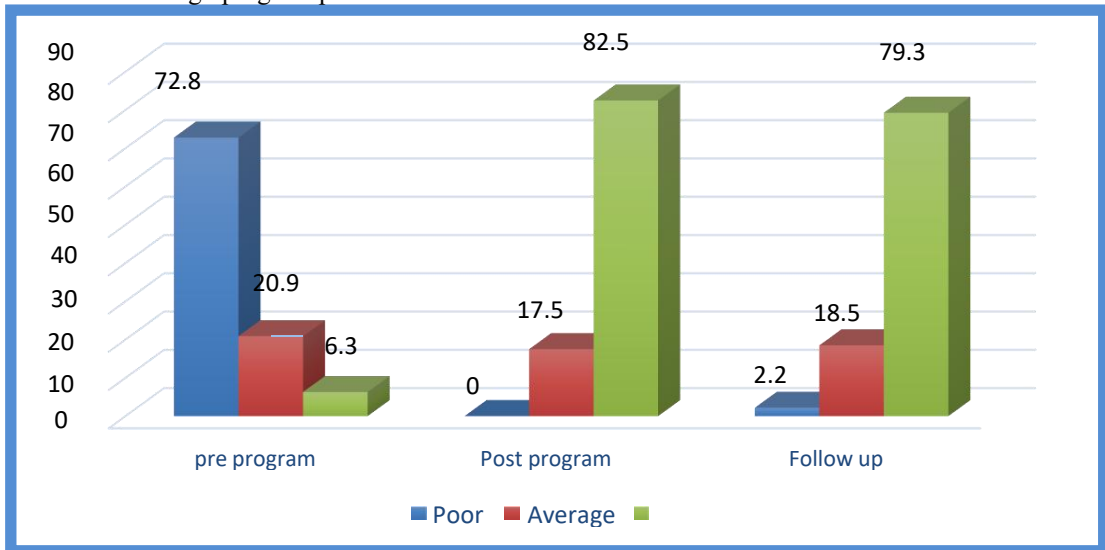


Figure (2): Distribution of head nurses' total skill levels regarding spiritual leadership through program phases

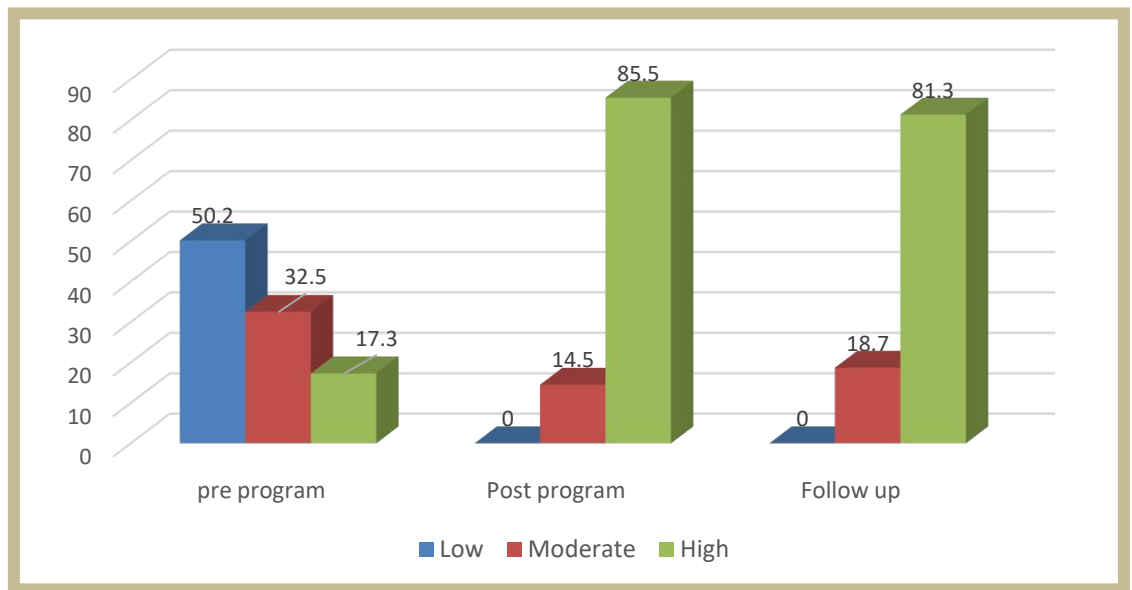


Table (3): Mean and standard deviation of head nurses' skills regarding spiritual leadership dimensions through the program phases (n=35)

spiritual leadership skills dimensions	Pre Program	Post Program	Follow up	t1 test	p- value	t2 test	p- value
	$\bar{x}\pm SD$	$\bar{x}\pm SD$	$\bar{x}\pm SD$				
Vision	10.80±4.40	25.42±3.12	24.68±4.70	16.035	<.001**	12.754	<.001**
Hope / faith	14.00±4.66	19.82±2.44	18.90±3.74	6.546	<.001**	4.862	<.001**
Altruistic love	9.28±3.70	23.04±2.48	21.88±4.30	18.276	<.001**	13.140	<.001**
Meaning / Calling	7.44±3.56	22.88±2.30	22.00±4.22	21.552	<.001**	15.602	<.001**
Membership	9.44±4.30	25.42±3.86	24.34±4.76	16.361	<.001**	13.742	<.001**
Total head nurses spiritual leadership skills	50.96±20.62	116.58±14.20	111.80±21.72	15.506	<.001**	12.018	<.001**

(**) Highly statistical significant $p \geq 0.001$ p1 between pre and post program p2 between pre and follow up

Table (4): Mean and standard deviation of staff nurses' job enjoyment dimensions through the program phases (n=320)

Staff nurses' job enjoyment Dimensions	Pre program	Post Program	Follow up	t1 test	p- value	t2 test	p- value
	$\bar{x}\pm SD$	$\bar{x}\pm SD$	$\bar{x}\pm SD$				
Pleasure	5.08±1.08	6.642±0.87	5.77±0.83	-23.364	<.001**	-9.997	<.001**
Supportive relation with others	18.66±1.84	25.06±1.69	24.40±1.96	-49.379	<.001**	-41.224	<.001**
Work place conditions	11.35±2.83	17.04±1.34	15.52±1.86	-32.353	<.001**	-21.411	<.001**
Feeling of competence	9.28±3.67	14.66±1.21	13.78± 1.14	-24.243	<.001**	-19.658	<.001**
Challenge/ improvement of Performance	5.77±0.67	7.19±1.07	6.62±1.07	-22.898	<.001**	11.548	<.001**
Total staff nurses' job enjoyment	50.16±7.32	70.61±3.13	66.11±2.96	46.02	<.001**	35.945	<.001**

(**) Highly statistical significant $p \geq 0.001$ p1 between pre and post program p2 between pre and follow up

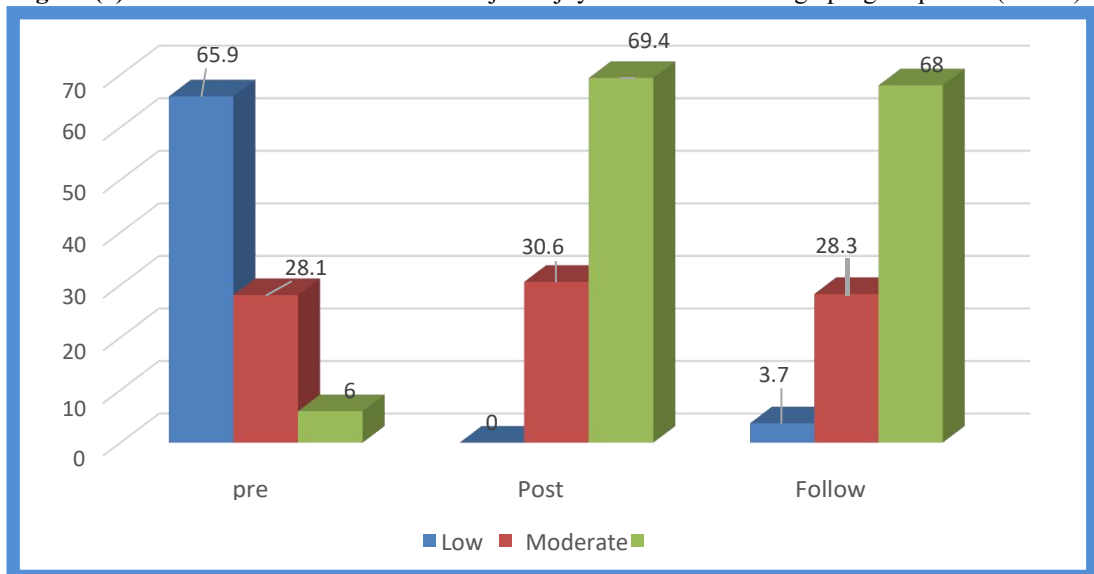
Figure (3): Distribution of staff nurses' total job enjoyment levels through program phases (n=320)

Table (5): Correlation between total head nurses' spiritual leadership knowledge and skills through program phases

Variables	Program phases		Head nurses' spiritual leadership skills
Head nurses spiritual leadership knowledge	Pre program	R	0.098
		P value	0.081 n.s
	Post program	R	0.474
		P value	<0.001**
	Follow up	R	0.310
		P value	<0.001**

(n.s) not significant at $p > 0.05$ (**) Highly statistically significant $p \geq 0.001$ **Table (6):** Correlation between total head nurses' spiritual leadership knowledge and skills as well as staff nurses' job enjoyment through program phases

Variables	Program phases		Staff nurses' job enjoyment
Head nurses spiritual leadership knowledge	Pre program	R	0.048
		P value	0.392 n.s
	Post program	R	0.598
		P value	<0.001**
	Follow up	R	0.236
		P value	<0.001**
Staff nurses' job enjoyment Head nurses' spiritual leadership skills	Pre program	R	0.080
		P value	0.151 n.s
	Post program	R	0.590
		P value	<0.001**
	Follow up	R	0.425
		P value	<0.001**

(n.s) not significant at $p > 0.05$ (**) Highly statistical significant $p \geq 0.001$

Discussion:

Spiritual leadership is a causal leadership theory that specifies the values, attitudes and behaviors necessary for intrinsically motivating one's self and others so that both have a sense of spiritual thriving through calling and membership. Vision, faith/hope and altruistic love are three key values, attitudes and behaviours of spiritual leadership (Zou et al., 2020). The study aimed to Assess spiritual leadership educational program for head nurses and its effect on staff nurses' job enjoyment

In relation to head nurses knowledge regard spiritual leadership, the finding of the present study showed that Minority of studied head nurses had high knowledge level at the preprogram phase while more than three quarters at post program and follow up study phases respectively, From investigator point of view improvement increasing in the knowledge of the head nurses could have resulted from effective interaction and feedback and using effective teaching methods that can facilitate the learning process for studied head nurses .

Finding of the present study was Agreed with (Zou et al., 2020) who conducted study about "The influence of spiritual leadership on the subjective well-being of Chinese registered nurses " they reported that the majority of employee had good knowledge regard spiritual leadership. Also with Supriyan (2017s) who conducted study about" The effect of spiritual leadership on workplace spirituality, job satisfaction (a study on nurses of Aisyiah Islamic Hospital in Malang, Indonesia) " they reported that all staff acknowledged the need for addressing spiritual leadership in formal medical education

Concerning head nurses spiritual leadership skills thorough program phases results of the present study concluded that, the minority of head nurses had high level of spiritual leadership skills at preprogram phase and it was increased to most of them at post program and follow up study phases as compared to preprogram. Result of the present study in the same line with Salah et al., (2018) who studied " The impact of nurse managers' leadership styles on ward staff" they revealed that, nursing leaders had motivated towards spiritual leadership as a strategy that can

retain highly skills ,also **Birnie, (2019)** who conducted a study about "Spiritual leaders can retain nurses" he reported that, implementation of spiritual program help nurse leaders to become highly satisfied in their role and motivated towards spiritual leadership moreover result in respect to **Jahandar et al, (2017)** who reported that, the majority of studied nurse managers had high level of spiritual leadership.

Result of the present study indicated that there was improvement in level of staff nurses' enjoyment throughout the program phases. From the investigator point of view, supportive management from head nurses to staff nurses is a key factor in promoting job enjoyment affect nurses' performance and productivity. This result was agreed with **Azazz and Elshaer (2021)** they conducted study about "The impact of spiritual leadership on employees' satisfaction: mediating role of employee commitment "the findings showed that, there was highly improvement in the nurse's enjoyment level.

Regarding correlation between head nurses' spiritual leadership knowledge, skills and staff nurses' job enjoyment level the finding indicated that there was positive correlation between leadership knowledge skills and staff nurses' job enjoyment level. From the investigators point of views spiritual leadership is promising approach to create a positive work environment, inspiring, and increase job satisfaction and enjoyment for and increase organizational success and leaders' knowledge and skills has significant effect on staff nurses job enjoyment. **Lee (2019)** concluded that the level of employees' job satisfaction is influenced by a wide variety of factors, such as organizational culture, leadership style and personnel relationships workplace social relationships, and the supervision quality

Conclusion

There was a improvement in the knowledge, skills levels of the head nurses about spiritual leadership and a highly improvement in staff nurses' enjoyment level throughout post and follow up program compared to preprogram phase. There was a highly positive statistical significant correlation between head nurses' spiritual leadership knowledge, skills score and staff nurses' job enjoyment level at post program and follow up program phases.

Recommendation

1. Nurse managers should conduct periodical meeting with nurses to discuss conferential issues facing them.
2. Developing strategies to improve job enjoyment among staff nurses especially who working at critical care units and encouraging.
3. Asessing factors affecting job enjoyment among staff nurses.

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