

Organizational Citizenship Behavior among Nurse Managers; its Relation to Staff Nurses' Structural Empowerment

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Abstract: The innovative outcomes can be achieved when personnel demonstrate organizational citizenship behavior (OCB) and through adequate structural empowerment measures that help achieving organizational goals and enhancing its effectiveness and productivity. **Purpose:** Assess organizational citizenship behavior among nurse managers and its relation to staff nurses' structural empowerment. **Design:** Descriptive correlational design was utilized in this study. **Setting:** The study was conducted at Menoufia University hospital including all 11 ICU units, all 7 OR units, all 18 inpatient departments and 1 outpatient clinics department. **Subjects:** Included all the nurse managers were 88 available at the time of the study, 377 staff nurses were selected by a systematic random sample to participate in the study. **Tools:** Organizational citizenship behavior and structural empowerment questionnaire. **Results:** The nurse managers' perception level regarding organizational citizenship behavior was high and the majority of staff nurses had a highly perception level regarding to structural empowerment and its dimensions. **Conclusion:** There was a significant positive relation between nurse managers' perception level regarding to organizational citizenship behavior and staff nurses' perception regarding to structural empowerment at Menoufia University hospital. **Recommendations:** Encourage nurse managers and staff nurses to practice and apply organizational citizenship behavior and structural empowerment as integral part of their daily work life through continuous workshops in the hospital.

Key words: *Organizational citizenship behavior, structural empowerment, nurse managers and staff nurses.*

Introduction

The healthcare sector is a dynamic environment that must constantly respond to changing knowledge and governmental policy. A permanent

lack of organizational resources and funding available to the healthcare sector has resulted in downsizing, restructuring and increased job

complexity that put the organization in great challenge to be open to change, team-oriented, proactive and learning organizations and manage human resources to get them work beyond their formal job description and contribute extra efforts manifested by organizational citizenship behavior among all nurses in the organization (Yurcu, Colakoglu & Atay , 2015) .

The feeling that the staff belongs to the organization and they act as they are one of the most important parts of the organization rather than their knowledge, abilities and experiences, is appraised as the most significant factor for the success, the overall effectiveness and revenue growth of the organizations (Yurcu, Colakoglu & Atay, 2015). By developing this behavior, the organization will be more productive as employees will perform more tasks with fewer resources and less supervision, have more integrity in dealing with patients and provide support to co-workers and hence contribute to organizational effectiveness (Ahmed, 2010).

Organizational citizenship behavior (OCB) is a term that encompasses anything positive and constructive that employees do, of their own volition, which supports co-workers and benefits the organization. Typically, employees who frequently engage in organizational citizenship behavior may not always be the top performers, but they are the ones who are known to 'go the extra mile' or 'go above and beyond' the minimum efforts required to do a merely satisfactory job. Organizational citizenship behavior has been shown to have a considerable

positive impact at the organizational level, increase productivity, efficiency and patient satisfaction, reduce costs and rates of staff turnover and absenteeism thus enhancing organizational effectiveness as the following: performance quality: 18%, performance quantity: 19%, financial efficiency indicators: 25%, customer service indicators: 38%, and approximately 20% of the variance in store profitability (Zhang, 2011).

Citizenship behavior is most required and more important in the hospital because patients need special care and positive behaviors of health personnel (doctors, nurses, pharmacists, etc.) in handling their cases. Organizational citizenship behavior has an important role in improving patients' care and morale, facilitate access to hospital goals and enhance its performance. Therefore, Organizational citizenship behavior will increase service efficiency, patient caring and satisfaction, enhancing hospital corporate image as well as results to achievement of the effective organizational performance (Sheba, 2015).

Achieving excellence in nursing requires empowered staff nurses in order to be effective in their roles, and to be more autonomous (Marquis & Huston, 2015). In a worldview of empowerment, employee's behavior is merely a response to the structural conditions they face in the work setting. Employees' behavior become more effective and organizational output increases and improves when the organization is structurally constructed to provide opportunity and

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power to all employees across all organizational levels (Manojlovich, 2014). Empowerment philosophy that is applied to any organization tends to follow risk taking behavior of employees in which each failure is a learning experience even from the failure itself.

Structural empowerment becomes important for several reasons as globalization and competition which is increasing and requiring more and more innovation. The effective manager should take actual steps to empower their employees and increase their effectiveness by sharing power with them, pushing decision making down to the lowest level in the organization to the most qualified personnel who can make the decision effectively (Lewis & Malecha, 2011).

Structural empowerment means implementing organizational strategies that support shared team governance, open communication leadership, and supportive and empathetic nursing team relationships. Structural empowerment has a positive effect on nurses' perception of empowerment at the workplace, that in turn, has a motivating effect, raises overall job satisfaction level and leads to nurses feeling a sense of control over their work, and results in more effective and efficient work behavior (Laschinger, 2011 and Moore & Wells, 2010). Creating an empowered team is a vital nurse manager's function that can significantly influence staff morale, retention and productivity, associated costs, patient care quality, and safety (Walker, Duff & Di Staso, 2011). When nurses believe that they have the skills

to handle challenging tasks and the organizational goals are in agreement with their individual goals, they will get involved in organizational citizenship behaviors (Claassen, 2010).

Significance of the study:

The success of an organization depends on the efficiency and productivity of the nurses who go a long way in contributing towards it. There are certain behaviors which are expected from an employee in the organization and are obligated on him by the rules and regulations of the organization as well as certain behaviors that go beyond the rules and regulations is called organizational citizenship behavior which facilitates the accomplishment of organizational goals by improving the commitment level of employees and enhancing the performance of the employees as well the organization (Ozturk, 2010). Nurses' behavior is merely a response to the structural conditions they face in the work setting. Access to the empowering work structures lead to nurses feeling a sense of control over their work and results in more effective and efficient work behavior (Laschinger, 2011). So the present study was carried out to assess the relationship between nurse managers' organizational citizenship behavior and staff nurses' structural empowerment.

Purpose of the study:

To assess organizational citizenship behavior among nurse managers and its relation to staff nurses' structural empowerment.

Research questions:

- 1) What is the level of organizational citizenship behavior among nurse managers in the study setting?
- 2) What is the level of staff nurses' structural empowerment in the study setting?
- 3) Is there a relationship between organizational citizenship behavior among nurse managers and staff nurses' structural empowerment in the study setting?

Subjects and method:

I-Technical design

The technical design consisted of research design, study setting, subjects and tools of data collection.

Research design:

A descriptive correlational research design was conducted to achieve the aim of the study.

Setting:

The study was conducted at Menoufia University hospital including the following areas : All 11 ICU units, all 7 OR units, all 18 inpatient departments (emergency, oncology, surgical, physiotherapy, burn, cardiac and chest, hemodialysis(pediatric and adult), hematology, specific medical (male and female),cardiac, chest, obstetric, pediatric, ophthalmology, Orthopedic , endoscopy, neonatal, urinary, poisons, cardio-catheterization, ENT, sterilization, infection control, and profit department) and 1outpatient clinics department.

Subject :

The subject included in the present study consisted of two groups namely:- The first group included: All nurse managers at the different managerial levels were available at the time of the study who was working at the pre-mentioned units at Menoufia University hospital. Total number was 88 nurse managers.The second group included: A systematic random sample of 377 staff nurses who was working at the pre-mentioned units at Menoufia University hospital.

Tools of data collection

The data for this study was collected by using two different instruments developed by the researcher after reviewing the related literature:

Instrument one: Organizational citizenship behavior questionnaire developed by (Podsakoff, MacKenzie, Moorman and Fetter, 1990) and (Sharma and Jain, 2014) and was modified by the investigator included:

- Part one: Demographic data of the respondents as age, educational preparation, position, marital status, years of nursing experiences and unit in the hospital.
- Part two :Contained items to measure nurse managers' level of the organizational citizenship behavior. It consisted of 34-items that measures five domains of organizational citizenship behavior.

Instrument two: Structural empowerment questionnaire developed by (Lashinger, 2001), contained items to measure staff nurses' level of the structural empowerment. It consisted of 19-items that measures six domains of structural empowerment.

II. Operational design

Preparatory phase

A review of the past, current Arabic and English related literature covering various aspects of the problem was done, using available books, articles, periodicals, and magazines to get informed with the research problem and develop the study tools.

The tools were distributed to a Panel of Experts consisted of five Assistant Professors in the field of Nursing Administration to judge the Content and Face validity of the tools, presented from different Faculties of Nursing affiliated to Menoufia and Tanta Universities. The period taken by the jury group lasted from the beginning of July month at 2018 to 10-8-2018.

Reliability of the tools

Cronbach's alpha for organizational citizenship behavior scale was 0.90 and structural empowerment scale was 0.87.

Pilot study

Pilot study was conducted to assess tool clarity and applicability. It had also served in estimating the time needed for filling the form. The study was tested on 10% of total subjects, (37) staff nurses and (9) nurse managers to evaluate the feasibility and clarity of the tool. There was no change was made so this sample was included in the study.

Implementation phase

Each staff nurse and nurse managers was interviewed after explaining the

purpose of the study and getting agreement of staff nurses and nurse managers to participate in the study.

Data had been collected from staff nurses and nurse managers from the above mentioned study setting.

Collection of data took one month at Menoufia University Hospital from 12-8-2018 to 12-9-2018: The researcher applied interview for study sample for five days per week.

The time needed to complete questionnaire sheet was 15:20 minutes. The appropriate time of data collection was according to type of work and workload of each department, sometimes it was in the middle of the shift and other time before the end of the shift.

Ethical considerations

The study was conducted with careful attention to ethical standards of research and rights of the participants.

Informed consent

The respondent rights were protected by ensuring voluntary participation, so the informed consent was obtained by explaining purpose, nature time of conducting the study, potential benefits of the study, how data will be collected, any invasive procedure, expected outcomes and the respondent rights to withdrawing from the research study at any time in case of violation of his rights.

Anonymity and confidentiality

The respondent was assured that the data would be treated as strictly confidential; furthermore, the respondent anonymity would be

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maintained as they would not require mentioning their names.

Scientific honesty

To ensure scientific honesty, the researcher used bracketing and intuiting to avoid bias.

III. Administrative design

Official permission was obtained from the Dean of the Faculty of Nursing to the director of Menoufia University Hospital to request permission and cooperation to conduct the study, then oral official permission had been obtained from the matron of the hospital and then from units nurse managers. The researcher fully explained the aim of the research to the nurses to get better cooperation during the implementation phase of the research; also an individual oral consent was obtained from each participant in the study after explaining the purpose of study.

IV-Statistical design

Data were statistically analyzed by using (SPSS) programs done .

Descriptive Statistics: e.g. percentage (%), mean (\bar{X}) and stander deviation (SD) for demographic characteristic .

Analytic statistics as :

Chi- square test (χ^2): Was used to study association between two qualitative variables and fisher test was used for smallest numbers .

p – Value of < 0.05 was considered statistically significant .

p- Value of < 0.001 was considered highly statistically significant.

Results

Table (1): Illustrates distribution of nurse managers regarding their socio-demographic characteristics. This table showed that the majority of nurse managers in the study sample were at age from 35 to less than 45 years (35.2%). According to nursing qualification, more than two thirds of the study sample had Bachelor degree (79.5 %). Regarding experience years, the majority of the study sample had 15 to less than 25 years (35.2%).Furthermore, in relation to marital status; the majority of the study samples were married (81.8%).

Table (2): Illustrates distribution of staff nurses regarding their socio-demographic characteristics. This table showed that the majority of staff nurses in the study sample were at age 20 to less than or 25 years (52.3%). According to nursing qualification, the majority of staff nurses of the study sample had associated degree in nurses (45.6%). Regarding experience years, the majority of the study sample had a year of experience from 5 to less than or 15 years (43.5%). Furthermore, in relation to marital status, the majority of the study samples were married (67.4%).

Table (3): Presents distribution of nurse managers according to their perception level regarding to organizational citizenship behavior and its dimensions. This table showed that the nurse managers' perception level was the highest (89.8%) regarding to conscientiousness and was moderate (40.9 %) regarding to civic virtue and stated that nurse managers' perception

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level regarding organizational citizenship behavior was high (83%).

Table (9): Illustrates relation between nurse managers' perception level regarding to organizational citizenship behavior and their socio-demographic characteristics. This table stated high statistically significant relation between nurse managers' perception level regarding to organizational citizenship behavior and their nursing qualification while there was no statistically significant relation between nurse managers' perception level regarding to organizational citizenship behavior and other their socio-demographic characteristics (age, experience years and marital status).

Table (15): Presents distribution of staff nurses according to their perception level regarding to structural empowerment and its dimensions. This table showed that the staff nurses' perception level was the highest (93.6%) regarding to access to information and the lowest (29.4%) regarding to access to resources. Also, it showed that the majority of staff nurses in the study sample had a highly perception level regarding to structural empowerment and its dimensions (84.6%).

Table (22): Illustrates relation between staff nurses' perception level regarding to structural empowerment and their socio-demographic characteristics. This table clarified that the staff

nurses' perception level regarding to structural empowerment was high among staff nurses aged at more than 35 years (87.2%). In relation to nursing qualification, the staff nurses' perception level regarding to structural empowerment was high among staff nurses in the study sample with associated degree in nurses (87.2%) and. Furthermore, according to experience years; the staff nurses' perception level regarding to structural empowerment was high among staff nurses with 5 to less than or 15 years of experience (87.8%). Associated with marital status, the staff nurses' perception level regarding to structural empowerment was high among staff nurses who were unmarried (85.4%). There was no statistically significant relation between staff nurses' perception level regarding to structural empowerment and their personal characteristics.

Figure (1): Illustrates relationship between medium score of nurse managers' perception level regarding to organizational citizenship behavior and of staff nurses' perception level regarding to structural empowerment. This figure showed that the medium score of staff nurses' perception level regarding to structural empowerment increased with the increase of nurse managers' perception level regarding to organizational citizenship behavior medium score.

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Table (1) Distribution of the studied nurse managers according to their socio-demographic characteristics (no=88).

Socio-demographic items	No	%
Age:		
20-<25	20	22.7
25-<35	27	30.7
35-<45	31	<u>35.2</u>
45+	10	11.4
Nursing qualification:		
Nursing school diploma degree	6	6.8
Associated degree in nurses	12	13.6
Bachelor degree	70	<u>79.5</u>
Experience years:		
1-<5	19	21.6
5-<15	28	31.8
15-<25	31	<u>35.2</u>
25+	10	11.4
Marital status:		
Married	72	<u>81.8</u>
Unmarried	16	18.2

Table (2) Distribution of staff nurses regarding to their socio-demographic characteristics (no=377).

Socio-demographic items	No	%
Age:		
20-<25	197	<u>52.3</u>
25-<35	141	37.4
35+	39	10.3
Nursing qualification:		
Nursing school diploma degree	119	31.6
Associated degree in nurses	172	<u>45.6</u>
Bachelor degree	86	22.8
Experience years:		
1-<5	155	41.1
5-<15	164	<u>43.5</u>
15-<25	48	12.7
25-<30	9	2.4
30+	1	0.3
Marital status:		
Married	254	<u>67.4</u>
Unmarried	123	32.6

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Table (3) Distribution of nurse managers according to their perception level regarding to organizational citizenship behavior and its dimensions (no=88).

Organizational citizenship behavior dimensions	Perception level			
	High		Moderate/Low	
	No.	%	No.	%
Conscientiousness	79	89.8	9	10.2
Civic Virtue	52	59.1	36	40.9
Altruism	78	88.6	10	11.4
Sportsmanship	75	85.2	13	14.8
Courtesy	74	84.1	14	15.9
Total organizational citizenship behavior	73	83.0	15	17.0

Table (4) Relation between nurse managers' perception level regarding to organizational citizenship behavior and their socio-demographic characteristics (no=88).

Socio-demographic items	Nurse managers' perception level regarding to organizational citizenship behavior				X ² test	P-value
	High		Moderate/Low			
	No.	%	No.	%		
Age:						
20-<25	15	75.0	5	25.0		
25-<35	20	74.1	7	25.9	5.15	0.08
35+	38	92.7	3	7.3		
Nursing qualification:						
Nursing school diploma degree	6	100.0	0	0.0		
Associated degree in nurses	6	50.0	6	50.0	11.32	0.003*
Bachelor degree	61	87.1	9	12.9		
Experience years:						
1-<5	15	78.9	4	21.1		
5-<15	20	71.4	8	28.6	5.59	0.06
15+	38	92.7	3	7.3		
Marital status:						
Married	59	81.9	13	18.1		
Unmarried	14	87.5	2	12.5	Fisher	0.73

(*) Statistically significant at p<0.05

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Table (5) Distribution of staff nurses according to their perception level regarding to structural empowerment dimensions (no=377).

Structural empowerment dimensions	Perception level regarding to structural empowerment			
	High		Low	
	No.	%	No.	%
Access to opportunity	353	93.6	24	6.4
Access to information				
Access to support	268	71.1	109	28.9
Access to resources	266	70.6	111	29.4
Formal power	280	74.3	97	25.7
Informal power	292	77.5	85	22.5
Total structural empowerment	319	84.6	58	15.4

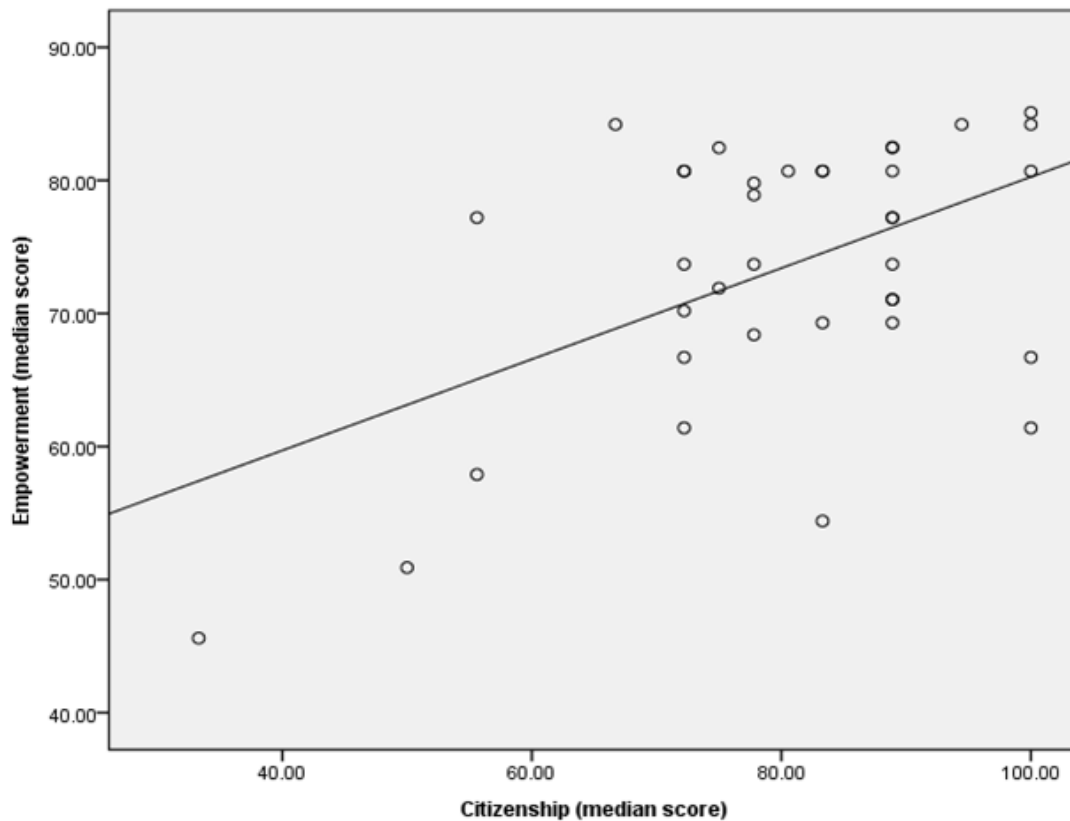
Table (6) Relation between staff nurses' perception level regarding to structural empowerment and their socio-demographic characteristics (no=377).

Socio-demographic items	Staff nurses' perception level regarding to structural empowerment				X ² test	P-value
	High		Low			
	No.	%	No.	%		
Age:						
20-<25	165	83.8	32	16.2		
25-<35	120	85.1	21	14.9	0.33	0.85
35+	34	87.2	5	12.8		
Nursing qualification:						
Nursing school diploma degree	100	84.0	19	16.0		
Associated degree in nurses	150	87.2	22	12.8	2.19	0.33
Bachelor degree	69	80.2	17	19.8		
Experience years:						
1-<5	125	80.6	30	19.4		
5-<15	144	87.8	20	12.2	3.27	0.19
15+	50	86.2	8	13.8		
Marital status:						
Married	214	84.3	40	15.7		
Unmarried	105	85.4	18	14.6	0.08	0.78

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Figure (1) Relationship between medium score of nurse managers' perception level regarding to organizational citizenship behavior and of staff nurses' perception level regarding to structural empowerment.



Discussion

Health organizations today are facing frequent developmental and technological changes that need to be adopted with financial and human resource capital and examine ways in which health professionals might flourish in their jobs and contribute to organizational performance and improved patient care quality despite the present challenges. Therefore, nursing personnel have to be assigned more work than their prescribed job description, so organizational citizenship behaviors are very important among nurse managers within a health care (Jaffery & Farooq, 2015).

Nurse managers are encouraged to structurally empower their staff nurses by increasing their control over the content, context and competence of nursing practice, increasing nurses involvement in decision making by developing professional practice models that help to achieve efficiency and effectiveness in the overall organizational levels (Gilbert, Lashinger & Leiter., 2010).

The present study aimed to assess the relationship between nurse managers' organizational citizenship behavior and staff nurses' structural empowerment.

Before discussing the results related to test the study questions, light should be

directed to socio-demographic characteristics of the studied subjects which illustrated socio-demographic characteristics of nurse managers included in the study sample in which the majority of nurse managers in the study sample have age from 35 to less than 45 years. According to nursing qualification, more than two thirds of the study sample had Bachelor degree. Regarding experience years, the majority of the study sample had 15 to less than 25 years of experience. Furthermore, in relation to marital status; the majority of the study samples were married.

Also, socio-demographic characteristics of staff nurses included in the study sample (n=377). Result showed that the majority of staff nurses in the study sample were at age 20 to less than or 25 years. According to nursing qualification, the majority of staff nurses of the study sample had technical institute diploma degree. Regarding experience years, the majority of the study sample had a year of experience from 5 to less than or 15 years. Furthermore, in relation to marital status, the majority of the study sample was married.

In relation to the perception level regarding to organizational citizenship behavior among nurse managers in the study setting, the results revealed that the majority of nurse managers in the study sample had a highly perception level regarding to organizational citizenship behavior and its dimensions and this result answer the first question of the study.

These results go in line with those of the study conducted by Kvitne (2017)

among the study participants at the University of OSLO, examining dynamic changes in Norwegian work-life who mentioned that they had significant perception level regarding to organizational citizenship behavior overtime.

Furthermore, the result of the present study agreed with the result of Gearar (2018) study that was conducted at El-Demerdash Hospital reported that more than half of nurse managers had positive perception level regarding to organizational citizenship behavior. On the same line with the present study results, Hossein & Somoyeh (2018) concluded that the perception level regarding to organizational citizenship behaviors between the study samples was higher than average.

On the opposite side, the result of the present study contraindicated with Ahmadi, Mobaraki & Yousofi (2012), Dargahi & Torabi (2017) that revealed lower than average perception level regarding to organizational citizenship behaviors among the studied nurse managers. Also, Mohammed (2017) study results reported that nearly to half of the studied nurse managers had low perception level regarding to organizational citizenship behaviors.

The present study results showed that there was highly statistical significant relation between nurse managers' perception level regarding to organizational citizenship behavior and their nursing qualification while there was no statistically significant relation between nurse managers' perception level regarding to organizational citizenship behavior and other their socio-demographic characteristics

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(age, experience years and marital status).

The results of the present study were supported by the findings of Sadodin, Daghian, Esmaily & Hooshmand (2014) found no statistically significant relation between the perception level regarding to organizational citizenship behaviors among the study samples and their demographic characteristics (age and marital status).

In addition, Fooladvandi, Esmail, Tofighi, Fooladvandi & Ramazani (2014), Hossein & Somoyeh, Geatar (2018) concluded that there was no significant statistical relation between the studied nurse managers' socio-demographic characteristics (age and work years of experience) and their perception level regarding to organizational citizenship behaviors.

On the contrary, Mahjoub, Shateri & Youzbashi (2012) Sadodin, Daghian, Esmaily & Hooshmand (2014) revealed significant relationship between the perception level regarding to organizational citizenship behaviors and the experience years of study subjects as the service years increases, employees are more probably to display organizational citizenship behaviors, in which highly experienced employees tend to help and provide their less experienced colleagues with their own experiences and have higher job commitment level.

Furthermore, the result of the present study disagreed with those of Sheba study (2015) that demonstrated statistically significant difference between all nurses' perception level regarding to organizational citizenship behaviors in relation with their years of

experience that reported that nurses' who had been in the hospital for helping others, solve their problems and would increase their commitment and thus their perception level regarding to organizational citizenship behaviors. In addition, Fooladvandi, Esmail, Tofighi, Fooladvandi & Ramazani (2014), Hossein & Somoyeh and Geatar (2018) concluded that there was no significant statistical relation between the studied nurse managers' educational level and their perception level regarding to organizational citizenship behaviors.

As concerning to the present study results showed that the majority of staff nurses in the study sample had a high perception level regarding to structural empowerment and this answer the second question of the study.

This finding was supported by Bish, Kenny & Nay and Zeglat, Aljaber & Alrawabdeh (2014) who founded that there was a medium perception level regarding to structural empowerment among the studied staff nurses. Moreover, the present study result was congruent with Yang, Liu, Chen & Pan (2014) who concluded that the staff nurses' perception level regarding to structural empowerment was medium. Furthermore, contraindicated with the present study results Guo et al (2015), Eskandari, Siahkali., Shoghli., Pazzargadi & Tafreshi (2017) revealed that staff nurses had a moderate perception level regarding to structural empowerment. Additionally, Trus, Doran, Martinkenas., Asikainen & Suominen (2018) reported that there was a moderate perception level

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regarding to structural empowerment among the studied staff nurses.

According to the present study findings there was no statistically significant relation between staff nurses' perception level regarding to structural empowerment and their socio-demographic characteristics.

This result was in agreement with Faulkner & Laschinger (2008) who mentioned that there was no significant relation between socio-demographic characteristics of the studied staff nurses and their perception level regarding to structural empowerment.

The present study finding opposed to what was founded by Armellino, Griffin & Fitzpatrick (2010) who concluded that there was significant relation between the perception level of structural empowerment among the studied registered staff nurses and their demographic characteristics. Also, Eskandari, Siahkali, Shoghli, Pazzargadi & Tafreshi (2017) revealed that there was significant relationship between the staff nurses' perception level of structural empowerment and their years of experience.

The present study showed that the medium score of staff nurses' perception level regarding to structural empowerment increased with the increase of nurse managers' perception level regarding to organizational citizenship behavior medium score, thus there was positive significant relation between them and this answer the third question of the study.

This result of the present study was congruent with Narzary & Palo and Jaffery & Farooq (2015) which stated that there was a positive significant

between the studied samples' perception level of structural empowerment and their perception level of organizational citizenship behavior. On the same line with the present study results, the study of Cheasakul & Varma (2016) and Zohrabi (2017) revealed high significant relation between the perception level of organizational citizenship behavior among participants and their perception level of structural empowerment.

While, this result is inconsistent with Bagheri, Matin & Amighi (2011) who revealed that there was no significant relation between the study subjects' perception level of structural empowerment and their perception level of organizational citizenship behavior.

Conclusion

In the light of the present study results, it can be concluded that the nurse managers' perception level regarding organizational citizenship behavior was high; the majority of staff nurses in the studied sample had a highly perception level regarding to structural empowerment and its dimensions. Finally, there was a significant positive relation between nurse managers' perception level regarding to organizational citizenship behavior and staff nurses' perception regarding to structural empowerment at Menoufia university hospital.

Recommendation

Based on the findings of the present study, the following recommendations are proposed as:

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At the administration level:

- Nurse managers should provide staff nurses with clear essential information regarding to organizational goals, rules and best functional practices through distributing guiding brochures and posters at all organizational departments.
- Nurse managers should maintain availability of resources required to help staff nurses performing their job effectively such as equipment and supplies necessary for providing quality of patient care.

At the practice level:

- Nurse managers should have clear understanding of organizational citizenship behavior and realize it's importance to patients, staff nurses and to be able to plan and achieve overall organizational goals.
- Encourage nurse managers and staff nurses to practice and apply organizational citizenship behavior as integral part of their daily work life through continuous workshops in the hospital.
- Nurse managers should be role model and encourage the health care team members (doctors-staff nurses-paramedical) to work together toward organizational goals rather than personal goals.
- Encourage nurse managers and staff nurses' effective open communication links, participation in committees, ongoing meetings.
- Improve effective formal power domain through clear defined job description, reward, and punishment and compensation system.

- Improve effective informal networks between nurse managers, staff nurses, sponsors, peers and subordinates both within and outside the organization.

At the educational level:

- Hospital administration, in collaboration with staff development department should provide continuing education programs to update and reinforce nurse managers about organizational citizenship behavior antecedents, importance, dimensions and outcomes and reinforce staff nurses information and skills about structural empowerment and finally achieve the main organizational goals.

At the research level:

- Further research is needed to assess staff nurses' perception level regarding to organizational citizenship behavior.
- Further research is needed to assess relation between nurse managers' organizational citizenship behavior and organizational productivity.

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