

Strategic Flexibility and Professionalism among Nursing Staff

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Abstract

Strategic flexibility is an instrument that helps in promoting strategic thinking, providing strategic options, and has a favorable impact on the abilities and professionalism of nursing staff. **The aim** of this study was to assess the relation between strategic flexibility and professionalism among nursing staff. **Research design:** A descriptive, correlational design was utilized in this study. **Setting:** This study was conducted in all medical-surgical departments, operating rooms and critical care units at Benha University Hospital. **The sample:** the nursing staff (n=355) consisted of two groups namely; head nurses group (n=60) and staff nurses group (n=295) and available at the time of study. **Tools:** two tools were used; Strategic flexibility questionnaire and Nurse Professionalism scale. **Results:** (75.0%) of head nurses and (56.3%) of staff nurses had a high level of strategic flexibility and (81.7%) of head nurses and (53.9%) of staff nurses had a high level of professionalism. **Conclusion:** There was a highly statistically significant positive correlation between total scores of nursing staff strategic flexibility and total scores of professionalism. **Recommendations:** The hospital administrators should establish the proper organizational framework for the development of strategic flexibility by minimizing the degree of centralization in decision-making, assigning some authority, and focus on staff engagement to foster cooperation and creating a program or setting that supports nursing professionalism and then implement it with nursing staff.

Key words: Strategic flexibility, Professionalism, Nursing staff

Introduction:

The largest group of healthcare professionals in the healthcare system, with the most crucial roles and patient interactions, are nursing staff that are representative of nurses and head nurses. Nursing is therefore seen as a professional activity demanding a great deal of responsibility as well as a great deal of attention and alertness because of the variety and complexity of the tasks played by nursing professionals (**Rangachari & Woods, 2020**).

Nursing staff are in charge of providing patients with healthcare in the world of rapid change. This needs professional performance, up-to-date knowledge and competence, fundamental management abilities, and the capacity to deliver safe, suitable, legally and ethically sound services. Thus, availability of

strategic flexibility is crucial in nursing, just like it is in many other professions (**Liu et al., 2021**).

Strategic flexibility has become a critical organizational requirement for advancement in unstable situations. In actuality, strategic flexibility is a necessary quality for staff to flourish in a competitive atmosphere by quickly adapting to attain better results. Strategic flexibility refers to the hospital's capacity to adapt to changing circumstances by advancing its goals and using its knowledge and expertise. Strategic flexibility is the hospital's capacity to adapt to different demands arising from ever-changing competitive contexts (**Malekakhlagh et al., 2022**).

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Consolidation of capacities, resource, information and coordination flexibility are necessary for strategic flexibility. Hospital's capacities and resource to apply pertinent and appropriate resources in certain areas, the former is determined by the intrinsic qualities of capacities. Information flexibility refers to the adaptability of the hospital's information and coordination system and its capacity to acquire the needed information. Coordination flexibility refers to the ability to generate new resource combinations through an internal coordination process (Al-Zamki & Suleiman, 2021).

From a functional perspective, strategic flexibility is a tool that improves strategy and operations, particularly operational excellence. It also allows for the continuous improvement of organizational processes, organizational learning, and organizational capacities and skills. From this perspective, the hospital can enhance the professionalism of its nursing staff, integrate, develop, and restructure internal and external capacities, and update their skill set on a permanent basis (Tamjid & Rakhshani, 2023).

Professional nursing practices have undergone significant change, especially in light of the growing roles of nursing staff as a result of ongoing medical advancements and the rapidly aging population. As a result, it is necessary to carefully assess the competency of the nursing staff and to increase the tasks. In the past, assessments of competency have prioritized practical knowledge and abilities; however, stressing professionalism holds equal significance. The general attitudes, behaviors, and cognitive processes of nursing staff members that make up competent nursing practice are linked to professionalism (Abate et al., 2021).

Professionalism is a fundamental aspect of all vocations and has been defined as a set of beliefs about the tasks and obligations of a

profession. The notion of professionalism among medical professionals has been evolving and growing. In any field, becoming a professional requires extensive, specialized training, getting a license, and learning to make decisions effectively. Therefore, the elements of professionalism should be determined specifically for each field rather than being shaped by the beliefs or life philosophies of staff (Ageiz et al., 2021).

Professionalism is characterized by the success of integration of these factors in nursing practice; professional advancement/development, management, professional responsibility and accountability and valuing human being which must be demonstrated by individuals from a specific profession in order to assert one's professionalism. As representatives of an acknowledged and regulated profession, nursing staff constitute a collective group that is expected to behave according to well defined standards. In addition, nursing staff are assessed based on internalized and common professional habits, attitudes, and beliefs. This therefore supports a cultural analysis of nursing professionalism. Professionals can be identified from other staff members based on these traits of professionalism (Kim & Park, 2023).

Significance of the study:

Health care settings operate in a fiercely competitive environment where rapid advancements in technology and innovation have an influence on strategy and decision-making procedures. By examining and changing organizational structures, policies, and behavioral patterns, the emphasis on strategic flexibility contributes to the improvement of organizational capacities. In actuality, strategic flexibility offers a secure setting in which the hospital may step in, grow from its mistakes, and enhance innovation. Greater organizational

commitment and job satisfaction are attained by nursing staff in hospitals with higher strategic flexibility because they can respond to dynamic and changing environments better and faster, identify patients' needs more quickly and precisely than less flexible hospitals, and provide higher-quality services more quickly. These outcomes would improve nursing duties' efficiency which leads to higher professionalism rates.

Although many studies on strategic flexibility were conducted as in Baghdad, Palestine, in Italy and examined the relation between strategic flexibility and quality of services, innovation, strategic intelligence (Faraj& Ahmed, 2020, Zahi et al., 2020, Miroschnychenko et al., 2021) and on professionalism as in China, Tokyo, Poland, Iran, Korea (Chen et al., 2019, Ichikawa et al., 2020, Marcinowicz et al., 2020, Azemiana et al., 2021, Kim & Park, 2023) using a variety of methods to target nurses based on hospital size and specialist field, but no attempts were done to address strategic flexibility and professionalism together. Thus, the researchers conducted this study to assess the relation between strategic flexibility and professionalism among nursing staff.

Aim of the study:

This study aimed to assess the relation between strategic flexibility and professionalism among nursing staff.

Research questions:

- 1- What is the level of strategic flexibility among nursing staff?
- 2- What is the level of professionalism among nursing staff?
- 3- Is there a relation between strategic flexibility and professionalism among nursing staff?

Subjects and method:

Research design:

A descriptive, correlational design was used in carrying out this study.

Setting:

This study was conducted in all medical-surgical departments/units, operating rooms and critical care units at Benha University Hospital.

Sampling:

The study subjects were the nursing staff (n=355) consisted of two groups namely; head nurses group and staff nurses group:

Head nurses group:

A convenient sample of 60 head nurses who are working in the above mentioned study setting, and agree to participate in the study.

Staff nurses group:

A simple random sample of staff nurses who are working in the above mentioned study setting with at least three years of experience and sample was calculated using the following equation (Tejada and Punzalan, 2012):

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

(n) is sample size

(N) is total sample of staff nurses.

(E) is coefficient factor = 0.05

The total number of staff nurses in the above mentioned setting were 1688 staff nurses during the time of data collection. The total number of staff nurses with at least three years of experience is 1117 so a random sample is 295 according to the pre mentioned equation.

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Tools for Data Collection:

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

First tool: Strategic flexibility questionnaire: It was developed by **Al Khalifa, (2021)** and adopted by the researchers to assess strategic flexibility among nursing staff. It consisted of two parts:-

First Part: It included personal characteristics of nursing staff as (age, gender, marital status, educational qualification, years of experience and work department).

Second Part: It was consisted of 17 items divided into four dimensions; Flexibility of Capacities (4 items), Flexibility of Resource (3 items), Flexibility of Information (5 items) and Flexibility of Coordination (5 items).

Scoring system:

Subjects' responses were scored on a three-point Likert Scale as the following (3) for agree, (2) for neutral and (1) for disagree. Scores of each dimension summed up and converted into percent scores as following: low strategic flexibility level <60% of total score, moderate strategic flexibility level → 60-75 % of total score and high strategic flexibility level → >75 % of total score.

Second tool: Nurse Professionalism scale:

It was developed by **Braganca & Nirmala (2020)** and adopted by the researchers to assess professionalism among nursing staff. It included 21 items divided into five dimensions Professional Advancement/Development (3 items), Management (6 items), Nursing Practice (6 items) and Professional Responsibility, Accountability (4 items) and Valuing Human Being (2 items).

Scoring system:

Subjects' responses were measured on a three point Likert Scale ranged as the following (3) for always, (2) for sometimes and (1) for never. The scores of each dimension summed up and converted into percent scores as following: Low professionalism level → <60% of total score, moderate professionalism level → 60-75 % of total score and high professionalism level → >75 % of total score.

Procedure:

The current study lasted six months which started from the beginning of December 2022 to the end of May 2023. It included the following: the preparatory phase, pilot study, and field of work.

The Preparatory started in December 2022 and was completed in January 2023. In this phase, the researchers reviewed the national, international, current, and past related literature, and used textbooks, articles, journals, and the internet to be acquainted with the topic of the study, subjects of the study, and tools.

Validity of the tools:

These two tools were translated into Arabic format for better understanding and examined for translation, content validity, and relevance through distribution of the tool to a jury of five Experts on field of Nursing Administration consisting of five Professors; one Professor of Nursing Administration from Tanta University and other three Professors of Nursing Administration from Zagazig University and finally one Assistant Professor of from Benha University.

Pilot study

A pilot study was carried out in February 2023 to ascertain the clarity, feasibility, and applicability of the study tools. 30 staff nurses and 6 head nurses were included in the pilot study representing 10 % of total study subjects. It has also served in estimating the time needed

for filling the tools. No modification was needed. The pilot was included in the study.

Reliability of the tools:

Reliability of the tools was applied by using Cronbach's Alpha Coefficient test to measure the internal consistency of the items composing each dimension of the two tools, Strategic flexibility questionnaire was $\alpha=0.923$ and Nurse professionalism scale was $\alpha=0.925$.

Field of work:

Data collection took about three months from the beginning of March 2023 to the end of May 2023. The researchers met nurses and explained the aim, the nature of the study, and the method of filling out the two tools. Then took oral consent. The researchers distributed the tools to the participating nursing staff to fill in work times which were determined before by the head nurse of each unit according to type of work and workload. The number of collected questionnaires from nursing staff per week ranged from 25 to 30 sheets. The participants took from 20 to 30 minutes to complete the tools. Data was collected three days /a week in the morning and afternoon shifts.

Ethical considerations:

Approval by the Scientific Research Ethics Committee of the Nursing Faculty, Benha University was done. Before beginning the study, each participant was given an informed consent form that included information on the study's goals, potential conflicts of interest and expected benefits. Confidentiality was guaranteed and the study was anonymous. The freedom to leave at any time without penalty was made known to the participants.

Statistical analysis:

The data collected were tabulated & analyzed by Statistical Package for the Social Science (SPSS version 25.0). Qualitative data were expressed as mean and standard deviation and analyzed by applying a t-test for normally distributed variables. Quantitative data were expressed as number and percentage

and analyzed by applying the chi-square test. Pearson correlation was used in the current study to investigate the relation, test the closeness of association, and compare among study variables. Statistical significance was considered at p-value ($P \leq 0.05$) and considered highly statistically significance at p-value ($P \leq 0.001$).

Results:

Table (1): Indicates that more than one third (35.0%) of the head nurses had age equal and more than 35 years old, with $X \pm S.D.$ (33.01 ± 5.17) and less than half (44.4%) of the staff nurses had age less than 25 years old, with $X \pm S.D.$ (33.22 ± 7.01). As regarding to gender, the highest percentage of head nurses and staff nurses (91.7% & 86.1%) were female respectively. As related to marital status, more than three quarters of head nurses and staff nurses (78.3% & 76.3%) were married. As regarding to educational qualifications more than half (58.3%) of the head nurses had bachelor's degree and more than half (58.0%) of staff nurses had diploma degree. According to years of experience more than one third (35.7%) of the head nurses had 10- < 15 years, with $X \pm S.D.$ (10.38 ± 5.48) and less than half (46.1%) of the staff nurses had ≥ 15 years, with $X \pm S.D.$ (12.23 ± 7.82).

Figure (1): Illustrates that; more than one third (38.3% & 39.0%) of head nurses and staff nurses worked in surgical departments, respectively.

Figure (2): Reveals that; three quarters (75.0%) of head nurses and more than half (56.3%) of staff nurses had a high level of strategic flexibility. In contrast, the lowest percentage (6.7% & 5.7%) of head nurses and staff nurses had a low level of strategic flexibility, respectively.

Table 2: Represents that the highest mean scores regarding strategic flexibility (13.45 ± 1.791 , 12.88 ± 2.22 & 12.77 ± 1.83),

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with mean percentage (89.6%, 85.8% & 85.1%) of the head nurses and staff nurses, respectively were related to flexibility of coordination and flexibility of information. While the lowest mean score (9.36 ± 1.65 & 8.37 ± 1.88) of the head nurses and staff nurses, with mean percentage (78.0% & 69.7%) was related to flexibility of capacities.

Figure (3): Illustrates that; the highest percentage (81.7%) of head nurses and more than half (53.9%) of staff nurses had a high level of professionalism. In contrast, the lowest percentage (8.3% & 2.7%) of head nurses and staff nurses had a low level of professionalism, respectively.

Table 3: Represents that the highest mean score regarding professionalism (16.21 ± 2.35 & 5.42 ± 0.75), with mean

percentage (90.1% & 90.3%) of head nurses and staff nurses were related to nursing practice and valuing human being. While the lowest mean score (9.43 ± 1.75 & 6.24 ± 1.55) of the head nurses and staff nurses, with mean percentage (78.5% & 69.3%) were related to professional responsibility, accountability and professional advancement/ development, respectively.

Table (4): Shows that there was a highly statistically significant positive correlation between dimensions of strategic flexibility and professionalism.

Table (5): Shows that there was a highly statistically significant positive correlation between total scores of nursing staff strategic flexibility and total scores of professionalism.

Table (1): Frequency distribution of nursing staff regarding their personal characteristics (n=355)

Personal characteristics		Head nurses (N=60)		Staff nurses (N=295)	
		No	%	No	%
Age	< 25 years	8	13.3	130	44.1
	25 < 30 years	12	20.0	79	26.8
	30 < 35 years	19	31.7	46	15.6
	≥ 35 years	21	35.0	40	13.5
	Mean ±SD	33.01±5.17		33.22±7.01	
Gender	Male	5	8.3	41	13.9
	Female	55	91.7	255	86.1
Marital status	Married	47	78.3	225	76.3
	Unmarried	13	21.7	70	23.7
Educational qualifications	Diploma Degree	3	5.0	171	58.0
	Technical Degree	12	20.0	60	20.3
	Bachelor Degree	35	58.3	46	15.5
	Post Graduate Studies	10	16.7	18	6.2
Years of experience	< 5 years	7	11.6	92	31.2
	5 < 10 years	21	31.0	27	9.1
	10 < 15 years	19	35.7	40	13.6
	≥15 years	13	21.7	136	46.1
	Mean ±SD	10.38±5.48		12.23±7.82	

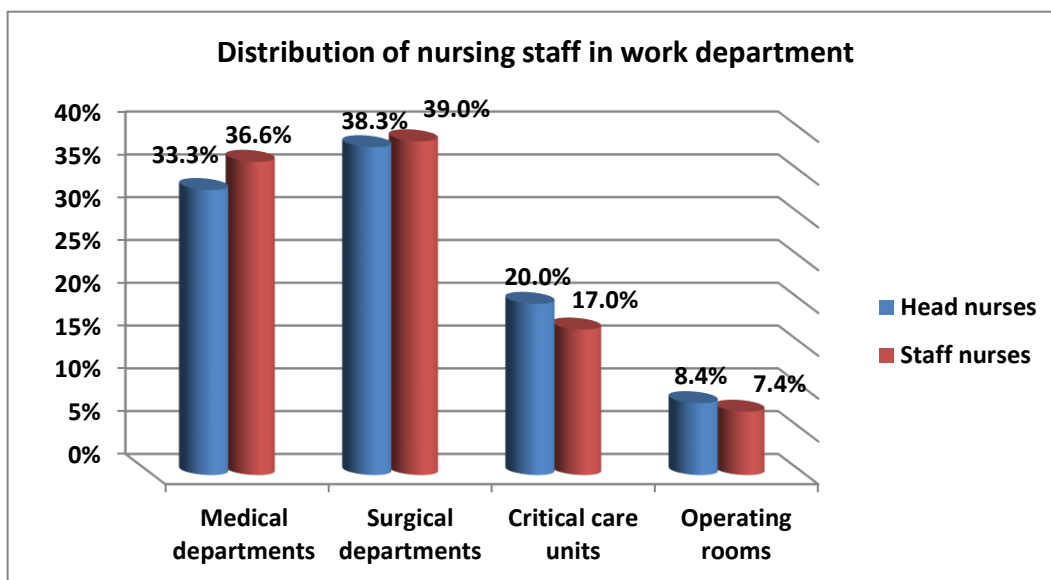


Figure (1): Distribution of nursing staff in work department

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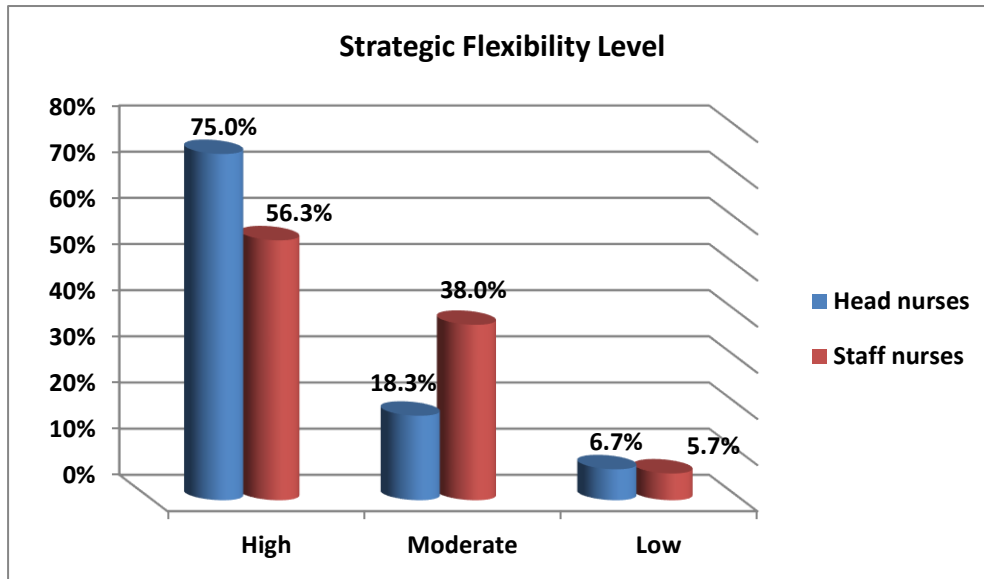


Figure (2): Total levels of strategic flexibility among nursing staff

Table (2): Mean and standard deviation of strategic flexibility among the studied nursing staff.

Strategic flexibility dimensions	Maximum score	Head nurses (N=60)	Mean %	Staff nurses (N=295)	Mean %	t-test	P value
		X ± SD		X ± SD			
Flexibility of Capacities	12	9.36±1.65	78.0	8.37±1.88	69.7	3.775	0.000**
Flexibility of Resources	9	7.26±1.60	80.6	6.90±1.51	76.6	1.649	0.100
Flexibility of Information	15	12.88±2.22	85.8	11.76±2.38	78.4	3.342	0.001**
Flexibility of Coordination	15	13.45±1.79	89.6	12.77±1.83	85.1	2.595	0.010
Total	51	42.96±6.39	84.2	39.82±6.61	78.1	3.368	0.001**

Highly statistical significant at P value ≤ 0.001

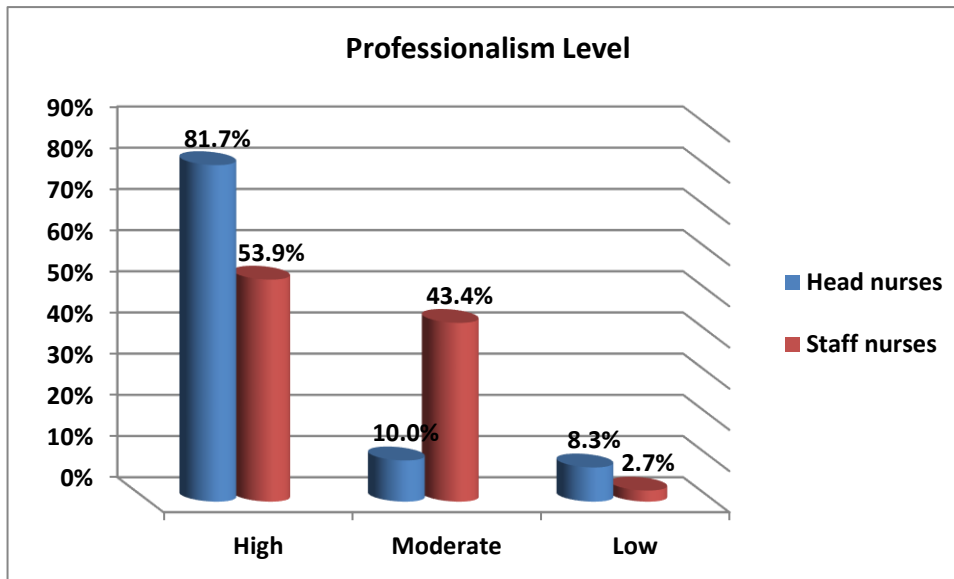


Figure (3): Total levels of professionalism among nursing staff

Table (3): Mean and standard deviation of professionalism among the studied nursing staff.

professionalism dimensions	Maximum score	Head nurses (N=60)	Mean %	Staff nurses (N=295)	Mean %	t-test	P value
		X ± SD		X ± SD			
Professional Advancement/ Development	9	7.41±1.15	82.3	6.24±1.55	69.3	5.549	0.000**
Management	18	15.28±2.89	84.8	14.10±2.79	78.3	2.968	0.003*
Nursing Practice	18	16.21±2.35	90.1	14.73±2.61	81.8	4.064	0.001**
Professional Responsibility, Accountability	12	9.43±1.75	78.5	9.55±1.70	79.5	0.519	0.604
Valuing Human Being	6	5.30±0.80	88.3	5.42±0.75	90.3	1.111	0.267
Total	63	53.65±6.96	85.1	50.05±7.77	79.4	3.318	0.001**

**Highly statistical significant at P ≤ 0. 001

* A statistical significant difference P ≤ 0.05

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Table (4): Correlation matrix between dimensions of strategic flexibility and professionalism among the studied nursing staff.

Variables	Flexibility of Capacities		Flexibility of Resources		Flexibility of Information		Flexibility of Coordination	
	r	P-value	r	P-value	r	P-value	r	P-value
Professional Advancement/ Development	0.914	0.000**	0.548	0.000**	0.638	0.000**	0.404	0.000**
Management	0.704	0.000**	0.879	0.000**	0.865	0.000**	0.561	0.000**
Nursing Practice	0.525	0.000**	0.616	0.000**	0.781	0.000**	0.862	0.000**
Professional Responsibility, Accountability	0.453	0.000**	0.753	0.000**	0.572	0.000**	0.570	0.000**
Valuing Human Being	0.139	0.001**	0.215	0.001**	0.183	0.001**	0.393	0.000**

**Correlation is a highly statistical significant $P \leq 0.001$

Table (5): Correlation between total scores of nursing staff strategic flexibility and total scores of professionalism

Variables	Strategic flexibility	
	r	P-value
Professionalism	0.909	0.000**

**Correlation is a highly statistical significant $P \leq 0.001$

Discussion:

Health care settings face many challenges that forced them to have a strategic approach in the work towards achieving their goals, and then ensuring their survival and continuity in light of a changing environment full of challenges as a result of increasing environmental uncertainty and Hospitals that seek to adopt a flexible strategy that helps overcome on all the forces that affect the work environment for achieving the goal of the hospital. Strategic flexibility is an advantage that helps improve the performance of professionalism which is a major requirement and an indicator to the success of the organization (Tamjid, & Rakhshani, 2023).

This study aimed to identify the relation between strategic flexibility and professionalism among nursing staff.

The findings of personal characteristics of nursing staff revealed that more than one third of the head nurses had age equal and more than thirty five years old and less than half of the staff nurses had age less than twenty five years old. As regarding to gender and marital status, the highest percentage of head nurses and staff nurses were females and married. As regarding to educational qualifications, more than half of the head nurses had bachelor's degree and more than half of staff nurses had diploma degree. According to years of experience more than

one third of the head nurses had ten to less than fifteen years and less than half of the staff nurses had equal and more than fifteen years.

The present study showed that three quarters of head nurses and more than half of staff nurses had a high level of strategic flexibility. This finding may be due to the nursing staff understands that strategic flexibility is essential to their ability to examine their resources, modify their operational procedures, and adjust appropriately to a rapidly changing environment. It also enables them to make better decisions more quickly and to be innovative and competitive in the workplace.

These findings were similar to **Brinckmann et al., (2019)**, who reported that most of the study sample shows a high level of strategic flexibility. In addition to **Clauss et al., (2020)** elaborated that more than half of the study sample showed a high strategic flexibility that explained because it has a bigger impact on how well strategies are implemented. Also, **Nwachukwu & Vu, (2020)** found that a significant proportion of the study sample exhibited a high degree of job satisfaction, assuming duties of effective leadership and involvement in decision-making process that was reinforced by strategic flexibility.

In the same line, **Alabbadi & Al-Masaeed, (2020)** showed that the availability of the participants' level of strategic flexibility was comparatively high. The result of the present study was supported by **Yousuf et al., (2021)** who found that study participants knew about how to deal with difficult times and problems effectively and most of them had a bureaucratic style concerned with laws and regulations application. Similarly, **Tamjid & Rakhshani, (2023)** concluded that there was a highly significance for strategic flexibility in rationalizing strategic decisions.

On the other hand, this result in disagreement with **Marcinowicz et al., (2020)** who found that there was lack in strategic flexibility and it should be ways to improve strategic flexibility Also, this result was contraindicated by the results of **Jiao et al., (2021)** who revealed that low strategic flexibility was exhibited by a large portion of study sample.

The previous findings of the present study revealed that the head nurses had higher mean scores regarding strategic flexibility dimensions than the staff nurses and the highest mean percentages of head nurses and staff nurses were related to flexibility of coordination and flexibility of information. In comparison, the lowest mean percentages were related to flexibility of capacities, this may be due to head nurses deal with crisis situations more directly than staff nurses do, head nurses share information more and coordinate efforts between many parties. Additionally, choices made by head nurses are backed by management and cannot be overruled by authorities.

This result agreed with **Faraj & Ahmed, (2020)** revealed in their study that there was a high statistically significant difference among strategic flexibility dimensions. Also, **Wang et al., (2021)**, who found that a high mean score for strategic flexibility was associated with information flexibility, meaning that there was enough up-to-date information to deal with an uncertain work environment.

In contrast, these findings were in disagreement with **Aba Bakr, (2019)** who revealed that the fourth ranking of mean percentages was related to flexibility of coordination. Additionally, these findings were in disagreement with **Miroshnychenko et al., (2021)** who revealed in their study that the total mean score of strategic flexibility was low. Also, **Hoefl, (2021)** revealed that the highest mean scores of strategic flexibility

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dimensions were related to the flexibility of capacities.

The present study showed that the highest percentage of head nurses and more than half of staff nurses had a high level of professionalism. This finding may be due to the nursing staff know that their duty to consistently acquire and apply nursing competencies, exhibit professionalism in clinical practice by accepting responsibility for their actions, comprehend and handle situations involving floating work environments, and stay up to date with the evolving needs and advancements in nursing care delivery in order to improve patient outcomes and satisfaction.

These findings were similar to **Chen et al., (2019)** who reported that most participants display a high degree of professionalism. In addition to **Kelly, (2020)** showed that the results showed that the nurses attitude to professionalism is at the high level. Also, **Kim & Park, (2023)** who found that the nurses who valued professionalism demonstrated commitment to best practices and job embeddedness, as evidenced by their higher overall professionalism score.

In the same line, **Azemian et al., (2021)** who discovered that nurses had a higher, moderate level of professionalism in his study and claimed that all aspects of professionalism are valued, and it was discovered that nurses who prioritize professionalism in their work can improve the workplace by providing their patients with appropriate care, fostering greater collaboration among medical professionals.

On the other hand, this result was contraindicated with **Brinckmann, (2019)** and **Marcinowicz et al., (2020)** who exposed a lack of professionalism among nurses, which had detrimental effects on productivity, attrition, and turnover rates. On the other hand, this result in disagreement with **Abate,**

et al., (2021) who stated that there were inadequacies in professionalization have led to persistent critiques of nurses' competencies and capacities to deliver nursing care. This weakness can sometimes be so great that nurses struggle greatly or are unable to provide clinical care.

The preceding findings of the present study revealed that the head nurses had higher mean scores regarding professionalism dimensions than staff nurses. The highest mean percentages of head nurses and staff nurses were related to nursing practice and Valuing Human Being. In comparison, the lowest mean percentages were related to professional responsibility, accountability and professional advancement/development. This result may be due to the nursing staff workloads, nursing staff members may find it difficult to accept accountability and may not have enough opportunities for professional development. Despite this, they make every effort to ensure safe practices of care for themselves and their patients, participate in determining and implementing quality care, and value themselves and the patients in the practice.

In the same line, **Kelly, (2020)** showed in his study that a significant relationship was found between professionalism dimensions; valuing self, management and nursing practice. Also, **Žiaková et al., (2022)** who found that the highest mean score for professionalism was related to valuing Human Being.

The current study shows there was a highly statistically significant positive correlation between total scores of nursing staff strategic flexibility and total scores of professionalism and sub-dimensions. This finding means that when strategic flexibility is improved, this enhances nursing staff professionalism. This finding could be due to strategic flexibility and professionalism is

crucial nursing concepts that are interconnected and related. Thus, it is necessary to provide nurses the authority to decide what to do in their practice. Strategic flexibility provides nurses the autonomy and responsibility for their practice while enabling them to participate in decision-making for handling work in various settings. Thus, providing flexible work arrangements for nursing staff enhances workplace culture and is essential to raising organizational outcomes and increasing job involvement, competency, and professionalism among nursing staff.

Conclusion:

The present study concluded that nursing staff had a high level of strategic flexibility and professionalism. There was a highly statistically significant positive correlation between total scores of nursing staff strategic flexibility and total scores of professionalism and sub-dimensions.

Recommendations:

In the light of the findings obtained from the present study following recommendations are proposed:

For hospital administrators:

- Establishing the proper organizational framework for the development of strategic flexibility by minimizing the degree of centralization in decision-making, assigning some authority, and focus on staff engagement to foster cooperation.
- Update information systems, archives, and networks that allow data and information to be shared between departments.
- Fostering a more cohesive link between hospital administrations and academic institutions by offering training sessions and courses on strategic flexibility enhancement for nursing staff.
- Developing new tactics that could lead to the development of future scenarios, making it

possible for the hospital to handle any changes and decide how to respond to them

- Creating a program or setting that supports nursing professionalism and then implement it with nursing staff.

For Further Researches:

- Investigate the factors that can guarantee the growth of the organization and ultimately enhance strategic flexibility over the short term and the long term.
- More study should be done to determine the obstacles and enablers, as well as administrative setups that make strategic flexibility clear.
- Explore the determinants that persuade professionalism among nurses.
- Examine how the external work environment affects the professionalism of nurses.
- Conduct comparative analysis of nursing professionalism in public and private healthcare environments.

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المرونة الإستراتيجية والاحترافية المهنية بين طاقم التمريض

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المرونة الاستراتيجية هي أداة تساعد في تعزيز التفكير الاستراتيجي، وتوفير الخيارات الاستراتيجية، ولها تأثير إيجابي على قدرات والكفاءة المهنية لطاقم التمريض. لذا كان الهدف من هذه الدراسة هو تقييم العلاقة بين المرونة الاستراتيجية والاحترافية المهنية بين طاقم التمريض. و تم استخدام التصميم الوصفي الارتباطي في هذه الدراسة. وقد أجريت هذه الدراسة في جميع أقسام الباطنة والجراحة وغرف العمليات ووحدات الرعاية الحرجة بمستشفى بنها الجامعي على عينة من طاقم التمريض (ن=355) يتكون من مجموعتين هما؛ مجموعة الممرضات الرئيسية (ن = 60) ومجموعة الممرضات (ن = 295) والمتاحة في وقت الدراسة. وظهرت نتائج الدراسة بأن (75.0%) من رئيسات التمريض و (56.3%) من الممرضات العاملات كان لديهن مستوى عال من المرونة الاستراتيجية و (81.7%) من رئيسات التمريض و (53.9%) من الممرضات العاملات كان لديهن مستوى عال من الاحترافية المهنية. كما كان هناك علاقة إيجابية ذات دلالة إحصائية عالية بين الدرجات الكلية للمرونة الإستراتيجية لطاقم التمريض والدرجات الكلية للاحترافية المهنية. واوصت الدراسة بأنه يجب على مديري المستشفى إنشاء الإطار التنظيمي المناسب لتطوير المرونة الإستراتيجية من خلال تقليل درجة المركزية في صنع القرار، وتعيين بعض السلطات، والتركيز على مشاركة طاقم التمريض لتعزيز التعاون وإنشاء برنامج أو إعداد يدعم الاحترافية المهنية للتمريض. ومن ثم تنفيذها مع طاقم التمريض.