

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

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### Abstract

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

**Keywords:** Organizational support, Staff nurse, Work performance

### Introduction

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

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

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

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

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

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

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

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

Furthermore, the use of organizational support within organizations is the assessment of nurses' work contributions and psychological well-being after receiving aid from the organization to meet their social-emotional needs. **To and Huang (2022)** emphasized that perceived organizational support could relieve nurses' stress and encourage efficient work. **Chen and Eyoun (2021)** found that perceived organizational support could play a positive role in reducing nurses' emotional exhaustion and providing

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

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

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

#### **Significance of study:**

There is no study in Benha Faculty of nursing educational program about organizational support so this study will be conducted to, Improving the work performance

of nurses to ensure that health interventions are efficiently delivered continues to be a major challenge for health care organization. In the nursing context, nurses require organizational support to keep them intrinsically motivated since the delivery of patient care is complex (**Fairchild, 2010**). With organizational support, nurses are able to succeed in continuing their professional development (**Bradley et al., 2005**). In fact, there is rising indication that when registered nurses perceive more support, they are likely to be happier with their job and plan to stay with their present hospital. In addition, sufficient organizational support allows nurses to pay out extra time with their patients (**Hinno et al., 2009**).

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

#### **Aim of study:**

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

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

### **Research hypothesis:**

Nurse's perception regarding organizational support improved after the implementation of organizational support educational program, Work performance among nurses will be enhanced after the implementation of organizational support educational program.

### **Subjects and Methods:**

#### **Research design:**

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

#### **Study Settings:**

This study conducted at Nasser Institute Hospital affiliated to Specialized Medical Centers. Provides inpatient and outpatient services to all categories of our community. This hospital consists of 432 beds divided to four separate buildings because of re-innovation process. The **first** building is Oncology center, The **second** building is Gama Knife center, The **third** building is Hyperbaric unit and the last **building is** The main building has Inpatient services consists of eight floors with 25 departments and 40 outpatient clinics. The study was conducted at 16

departments from above mentioned setting at internal departments in Nasser Institute Hospital are: Open heart surgery department, Multiple Sclerosis department, Cardiology unit, general surgical department, Medical department, Urology department, Liver transplant department, Neurological department, Neurosurgery department, Pediatric oncology department, surgical oncology department, Orthopedic and vertebral surgery department, Hematology department, Hemodialysis department, Oncology department.

### **Subjects:**

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

### **Tools of Data collection:**

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

### **1<sup>ST</sup> tool : Organizational Support scale:**

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

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

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

- Organizational support dimension consists of 14 Items
- Supervision support dimension consists of 19 Items

- Justice dimension: consists of 14 Items.

**Scoring system:**

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

- **The 1<sup>st</sup>** is a low level, which computed if the total score is less than **60%**.
- **The 2<sup>nd</sup>** is moderate level, which computed if total score is equal or more than **60 %** to less than **75%**.
- **The 3<sup>rd</sup>** is high level, which computed if total score is equal or more than **75 %**.

**2<sup>nd</sup> Tool: Work Performance Questionnaire:**

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

The part of yes or no and Likert scale, Currently work situations 6 items, Kinds of work 7 items, Category of your job 2 items, Number of people you supervise 2 items, Number of hours expected 1 items, Number of actual hours 3 items, Work experience 5 items, Time management 7 items, Experience of work you have 7 items, Performance appraisal 3 items, Salary 1 item.

**Scoring system:**

It used a 5-point Likert scale that rating nurse' responses as (1) none of the time, (2) little of the time, (3) some time, (4) most of the time and (5) all the time. Negative items were

reverses. Additionally, 1-2 on the 5-point Likert scale (< 60%) are classified as low, 3 on the 5-point Likert scale ( $\geq 60\%$  to < 75%) as moderate, and 4 & 5 on the 5-point Likert scale ( $\geq 75\%$ ) as high (statistics.)

**3<sup>rd</sup> Tool: Knowledge regarding organizational support questionnaire:**

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

**Scoring system:**

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

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

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

**Administrative design:**

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

### **Validity of tools:**

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

### **Reliability:**

Alpha Cronbach test used to estimate the consistency of measurement tool (1) for **Organizational support scale** 0.999 , for tool (2)**Work performance** questionnaire 0.998 , for tool (3)**Knowledge regarding** organizational support questionnaire total 0.980.

### **Ethical consideration:**

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

The study have approval from ethical committee in faculty of Nursing Banha University

### **Informed consent:**

The respondents right was protected by ensuring voluntary participation, so oral informed consents were obtained from the participants. Study subject were assured that anonymity and confidentiality were guaranteed

and they informed that they allowed choosing to participate or not in the study and that they have the right to withdraw from the study at any time.

### **Scientific honesty:**

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

### **Pilot study:**

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

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

### **Field work:**

#### **Assessment phase:**

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

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

At the beginning the researchers welcomed the study subjects (staff nurses) gave them a brief idea about the aim of the activity of the program for all study subjects.

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

#### **Planning phase:**

- Based on baseline data obtained from pre-test assessment and relevant review of literature, the program was developed by the researchers this was one month (MAY 2022).
- An educational program was developed based on determined needs and relevant review of literature.

- Program reconstruction in a form of printed Arabic form and included different topics to enhance organizational support knowledge and performance, also the researchers prepared power point presentation of the topics.
- Different instructional strategies, method of teaching, media method of evaluation were selected to suite the subjects needs and achieve the objective and content of the program.
- The teaching sessions were achieved by using available resources , relevant content and instructional strategies for each session .Different methods of teaching were used as lecture, group discussion, dash board, and brain storming , activities, hand out paper are prepared by the researchers and distributed to study subjects in first day of the educational program about organizational support .

#### **Implementation phase:**

This phase was initiated from beginning of JUNE 2022 to end of July. The researchers visited mentioned setting all days then the researchers divided the the subjects to (5) groups covers about 25 nurses .The teaching time for every sessions 10 hours distributed to (5 ) sessions . These sessions were repeated with the same to each group of nurses.

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

#### **Evaluation phase:**

During the evaluation phase the educational program was conducted at the Nasser Institute

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

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

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

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

#### **Statistical analysis:**

Data entry and analysis were performed using SPSS statistical package version 25. Categorical variables were expressed as number and percentage while continuous variables were expressed as (mean  $\pm$ SD). Chi-Square ( $\chi^2$ ) was used to test the association between row and column variable of qualitative data.

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

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

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

### Results:

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

**Table (2):** Illustrates mean score of total organizational support during pre, post & three months follow up among the studied staff nurses. It denotes that during the phase of post-test, the studied staff nurses gained higher mean score of total organizational support (268.8 + 69.7) followed by follow-up test (259.0 + 75.0) as compared to phase of pre-test (173.5 + 43.0). In addition to presence of highly statistically significant difference at  $F=83.4, P=0.000$ .

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

it  $\geq 0.14$  the effect is large. Therefore, this provides enough evidence to support research hypothesis.

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

**Table (5):** Clarifies Effect size and  $\eta^2$  of educational program regarding organizational support on **work performance** during pre, post & three months follow up among the studied staff nurses. It calcifies that educational program regarding organizational support have a positive large effect size on total **work performance** during pre, post & three months follow up at  $\eta^2= 0.306$ . As when Eta-square value = 0.01 to < 0.06, the effect is considered weak, when it = 0.06 to < 0.14, the effect is considered medium and when it  $\geq 0.14$  the effect is large. Therefore, this provides enough evidence to support research hypothesis no statistically significant relation between decision-making and staff nurses' socio-demographic characteristics.

**Table (6):** Clarifies effect size of  $\eta^2$  of educational program on knowledge regarding organizational support during pre, post & three months follow up among the studied staff nurses. It calcifies that educational program regarding organizational support have a positive large effect size on total **knowledge** regarding organizational support during pre, post & three months follow up at  $\eta^2= 0.470$ . As when Eta-square value = 0.01 to < 0.06, the effect is considered weak, when it = 0.06 to < 0.14, the effect is considered medium and when it  $\geq 0.14$  the effect is large Therefore, this



provides enough evidence to support research hypothesis.

**Table (7):** Clarifies that there was a highly statistically significant positive correlation between work ,knowledge and organizational

support during pre, post & three months follow up among the studied staff nurses at (r ranged from 0.446 to 0.960 and P= 0.000) respectively.

**Table (1): Personal characteristics among the studied staff nurses (n=125)**

Items		N	%
Age (year)	▪ ≤30	68	<b>54.4</b>
	▪ >30≤40	45	36.0
	▪ >40≤50	10	8.0
	▪ > 50	2	1.6
	▪ <b>Mean± SD</b>	<b>31.20 ± 6.13</b>	
Gender	▪ Male	53	42.4
	▪ Female	72	<b>57.6</b>
	▪ <b>Male to female ratio</b>	<b>0.7:1</b>	
Qualification	▪ Secondary school	30	24.0
	▪ Technical	53	<b>42.4</b>
	▪ Bachelor	42	33.6
Marital status	▪ Married	76	<b>60.8</b>
	▪ Single	46	36.8
	▪ Widow	3	2.4
Occupation	▪ Nurses	125	100
Years of experience	▪ < 5	31	24.8
	▪ ≥5<10	50	<b>40.0</b>
	▪ ≥10<15	20	16.0
	▪ ≥15	24	19.2
	▪ <b>Mean ± SD</b>	<b>10.11 ± 5.88</b>	
Training courses	▪ Yes	50	40.0
	▪ No	75	60.0

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

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

\*Significant  $p \leq 0.05$     \*\*Highly significant  $p \leq 0.01$

F: ANOVA Test

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

Interval	Mean	SD	F Test	P value	H	$\eta^2$	Effect size
Pre-test	173.5	43.07	83.4	0.000***	0.556	0.310	Large effect
Post-test	268.8	69.77					
Follow up	259.0	75.04					
Total	233.8	77.03					

\*Significant  $p \leq 0.05$

\*\*Highly significant  $p \leq 0.01$

Medium effect size = 0.06 to < 0.14

Large effect size  $\geq 0.14$

F: ANOVA Test

Small effect size = 0.01 to < 0.06

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

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

\*Significant  $p \leq 0.05$

\*\*Highly significant  $p \leq 0.01$

F: ANOVA Test

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

Interval	Mean	SD	F Test	P value	$\eta$	$\eta^2$	Effect size
Pre-test	69.61	10.17	82.0	0.000***	0.552	0.306	Large effect
Post-test	102.6	26.32					
Follow up	98.13	25.91					
Total	90.14	26.48					

\*Significant  $p \leq 0.05$

\*\*Highly significant  $p \leq 0.01$

F: ANOVA Test

Small effect size = 0.01 to < 0.06

Medium effect size = 0.06 to < 0.14

Large effect size  $\geq 0.14$

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

Interval	Mean	SD	F Test	P value	$\eta$	$\eta^2$	Effect size
Pre-test	41.86	12.0	165	0.000***	0.686	0.470	Large effect
Post-test	59.02	4.2					
Follow up	57.96	6.7					
Total	52.94	11.4					

\*Significant  $p \leq 0.05$

\*\*Highly significant  $p \leq 0.01$

F: ANOVA Test

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

Items			Work performance			Organizational support			Knowledge		
			Pre	Post	Follow up	Pre	Post	Follow up	Pre	Post	Follow up
Work performance	Pre-test	r				0.822			0.652		
		p				0.000**			0.000**		
	Post test	r					0.960			0.446	
		p					0.000**			0.000**	
	Follow up test	r						0.950			0.539
		p						0.000**			0.000**
Organizational support	Pre-test	r	0.822						0.773		
		p	0.000**						0.000**		
	Post test	r		0.960						0.545	
		p		0.000**						0.000**	
	Follow up test	r			0.950						0.666
		p			0.000**						0.000**
Knowledge	Pre-test	r	0.652			0.773					
		p	0.000**			0.000**					
	Post test	r		0.446			0.545				
		p		0.000**			0.000**				
	Follow up test	r			0.539			0.666			
		p			0.000**			0.000**			

Small effect size = 0.01 to < 0.06

Medium effect size = 0.06 to < 0.14

Large effect size  $\geq 0.14$

**Discussion:**

Strong organizational support can promote a sense of well-being and positive work behaviors in nurses. Nurses' behavioral outcomes of perceived organizational support would include decreases in withdrawal behaviors such as turnover intentions and absenteeism and increases in extra-role performance. When nurses perceive organizational support, they have more ownership of their organizations and more satisfaction with their jobs. Nurses need support and acknowledgment at all levels in the organization to enhance their autonomy, which increases the productivity of the organization (Wang, et al., 2023).

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

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

Regarding personal characteristics of the studied staff nurses, Concerning age. The present study showed that; slightly more than

half of the age of the studied staff nurses was  $\leq 30$  years old, with a mean age. From the researchers' point of view, this result may be due to the majority of young, aged nurses are providing direct care for patients and otherwise are in the managerial level. Also, these results may be due to the administrators selected young age nurses to be able to perform mainly tasks in units effectively. This finding was in the same line with Hashish (2020) who carried out a study in Alexandria University, about "Nurses' perception of organizational justice and its relationship to their workplace deviance", and reported that, more than two thirds of staff nurses was  $\leq 30$  years old at Main University Hospital.

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

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

This finding was agreed with Mahmoud et al. (2019) who reported in a study in Ain shams University, about

“Organizational support and leader member exchange as perceived by staff nurses” that; slightly more than half of the studied staff nurses were holding a technical diploma certificate.

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

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

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

Regarding organizational support during pre, post & three months follow up among the studied staff nurses. The present study denoted, there are highly statistically significant difference at  $P=0.000$ , which, more than two-thirds of the studied staff nurses perceived high organizational support at post-test and follow-up phase respectively. From the researchers' point of view, this finding might be related to effect of educational program. This result also could be attributed to the atmosphere and environment of the Egyptian hospitals has proven to be more exposed to organizational injustice because of the shortage of nurses, work overload, and nurse managers' personal attitude and behavior's, perceiving organization support program is vital approach in governmental hospitals.

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

This finding was parallel with **Wang et al. (2023)** who reported in a study a bout “Nurses' sense of organizational support, Self-esteem and perceived professional benefits” that education program about Perceived organizational support was considered as the predictive variable. Also, these finding was in the same line with **Ali et al (2020)** who found

that the authentic leadership training program had a positive effect on staff nurses' empowerment Related effect size and  $\eta^2$  of educational program.

On the other hand, these finding was disagreement with **Rubaca and Khan (2020)** who conducted a study in India about "The impact of perceived organizational support and job resourcefulness on supervisor-rated contextual performance of firefighters: mediating role of job satisfaction" and revealed that values of  $f^2$  effect size demonstrated weak effects of perceived organizational support and job resourcefulness on contextual performance whereas strong effects on job satisfaction. However, job satisfaction was found to have medium effect size on contextual performance.

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

This finding was harmony with **Cho & Kim (2019)** who conducted in a study in Korea about "The effects of work performance, perceived organizational support and personal coping resources on job satisfaction among infusion nurses" that there is statistically significant difference after perceived organizational support on job performance. additionally, **Morsy & Ebraheem (2020)** who reported that nearly three-fifths of staff nurses had a moderate level of the work performance. Also, almost two-thirds of staff nurses had a moderate level of perception of organizational support. Also, the outcomes of this study demonstrated that about half of nurses had a

low level of performance, and a minority of them had a high level of performance before perceived organizational support. This finding may be due to workplace stressors that could impact on aspect or dimensions of nurses' jobs.

As regard effect size and  $\eta^2$  of educational program on work performance during pre, post & three months follow up among the studied staff nurses. The current study calculated that educational program regarding organizational support have a positive large effect size on total work performance during pre, post & three months follow up. As when Eta-square value, Therefore, this provides enough evidence to support research hypothesis.

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

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

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provides enough evidence to support research hypothesis.

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

This Finding was strongly agreed with **Kim & Cho (2022)** who revealed in a study in Republic of Korea about “The effect of nurse support programs on job satisfaction and organizational behaviors among hospital nurses: A meta-analysis” that, after the program, some organizational behaviors and knowledge significantly increased with a large effect size, as shown by Hedge's g values, such as 0.94.

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

### **Conclusion:**

Regarding total **work performance** during pre, post & three months follow up among the studied staff nurses. The current study denoted that, more than three -fifths and about two-thirds of the studied staff nurses perceived high work performance at post-test and follow-up phase respectively. While the minority of them perceived high work

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

### **Recommendations:**

#### ▪ **For Administrations**

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

#### **For nurses:**

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

#### ▪ **In the future :**

Further researches are recommended.

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## تأثير برنامج تعليمي عن الدعم المؤسسي على أداء الممرضين لعملهم رضا عبدالرؤف صابر - جيهان محمد أحمد مصطفى - إحسان سعد سليمان

يعتبر الدعم المؤسسي مصدراً قادراً على التأثير إيجاباً في الأداء من خلال الحد من الضغوطات وتشجيع الالتزام بالعمل، تناقش الباحثون كثيراً على أن الممرضين يشكّلوا معتقدات عالمية حول مدى تقدير المؤسسة لإسهاماتهم ورعاية صحتهم. تساعد هذه التصورات الممرضين على تحديد إذا ما كانت منظماتهم تعترف بزيادة جهد العمل، ومكافأة الأداء المحسن وتعزيز السلوك المبتكر. هدفت الدراسة إلى تحسين المعرفة عن الدعم المؤسسي ورفع مستوى الأداء بالعمل. تم استخدام تصميم بحث شبه تجريبي لتحقيق هدف هذه الدراسة. أجريت الدراسة في الأقسام الداخلية والخارجية بمستشفى معهد ناصر. تضمنت عينة الدراسة مجموعة من ممرضين الأقسام (عينة عشوائية من عدد 16 قسم). وتم تحديد حجم العينة أثناء وقت الدراسة حسب المعادلة وعددهم (125) تم اختيارهم من الوحدات المذكورة أعلاه. وظهرت النتائج ان أظهرت الدراسة الحالية أنه ما يزيد قليلاً عن النصف (54.4%) من عمر الممرضين أقل من 30 عامًا، بمتوسط عمر  $31.20 \pm$  6.13 كما أظهرت الدراسة أن هناك علاقة إيجابية ذات دلالة إحصائية عالية بين المستوى المعرفي للبرنامج التعليمي الممرضين ودرجة أدائهم في مراحل برنامج ما بعد والمتابعة. وفسر الباحثون ذلك بأهمية برنامج استمرارية التحسين لأداء الممرضين وتقديم برامج تعليمية أكثر تم الاتفاق على هذه النتائج مع محمد (2018) الذي أشار في دراسته في مستشفى جامعة المنصورة وكشف عن وجود علاقة إيجابية ذات دلالة إحصائية عالية بين مستوى معارف الممرضين وأدائهم. (مقارنه بمرحله ما قبل البرنامج). (63.5%) وخلصت الدراسة بأن تطبيق البرنامج التعليمي عن الدعم المؤسسي له فاعليه كبيره على مستوى الاداء بالعمل حيث وجد أن هناك ارتباط إيجابي ذو دلالة إحصائية عالية بين إجمالي المعلومات عن الدعم المؤسسي والأداء بالعمل في مرحلتي ما بعد البرنامج والمتابعة بعد ثلاثة شهور مقارنه بمرحله ما قبل البرنامج. وأوصت الدراسة بعقد برامج تدريبية وورش عمل بشكل دوري للممرضين حول الدعم المؤسسي لتحسين ممارستهم في أماكن الرعاية الصحية و تطبيق استراتيجيات الدعم المؤسسي التي تركز على الممرضين وتعزز مستوى الأداء بالعمل.