Relation between Head Nurses Empowerment and Staff Nurses Productivity in Different Sectors

Samar Hosni Gadery
Assistant Professor of Nursing Administration, Faculty of Nursing, Tanta University.

DOI: https://doi.org/10.15520/ijnd.v9i11.2737

Abstract: Background: Psychological empowerment is definitely important and human resource managements a crucial resource in the organization survival and improved. Therefore, it is essential for nurse manager to recognize staff nurses work and implement several ways and techniques to empower them to improve quality of care and productivity. Aim: Assess the relation between head nurses’ empowerment and staff productivity at different sectors. Setting: The study was conducted at EL-Mahala General Hospital and Kafr El-Sheikh General Hospital. Methods: A descriptive correlation design used for caring out this study. The current study was conducted in both EL-Mahala General Hospital and Kafr El-Sheikh General Hospital which are affiliated to Ministry of Health. The study subjects consist of 35% of head nurses (n=41) and staff nurses (n=310) from different departments in both hospitals previous mentioned. Tools: Includes two tools, tool included two parts; socio demographic sheet, part 2: psychological empowerment questionnaire and tool II: productivity scale was used. Results: The present study was revealed that the majority (87, 80%) of total empowerment of head nurses were good level and the 54.84% of staff nurses productivity were a good level. There is a statistical significant difference between total empowerment and head nurses demographic related to years of experience. Also, there is a statistical significant difference between total staff nurses productivity and their demographic related to marital status, age, years of experience and academic qualification respectively. In addition, there is a strong positive correlation between head nurses’ empowerment and staff nurse’ productivity. Conclusion and recommendation: The present study concluded that the head nurses had high level of empowerment and staff nurses resemble a good level of productivity. There is a positive significant correlation between head nurses' empowerment and staff nurses' productivity at both EL-Mahala General Hospital and Kafr El-Sheikh General Hospital. The study recommended that nurse manager create positive work environment, established open channels of communication and conducting training program to increase awareness of all staff nurses members about importance of empowerment and productivity. They contribute and allow individual creativity, empower staff nurse to increase productivity.

Keywords: Head nurses, Empowerment, Staff nurses and productivity.

INTRODUCTION

In today, rapid –faire modern health care system, technology world, health care institutions aim to set a path towards an excellent professional practice(1). Nursing staff productivity has taken a center stage, and one of the best ways to improve productivity of the nursing staff is to empower them (2).

Empowerment is an interactive process that develops, builds, and increase power through cooperation, sharing and working together (3). The concept of empowerment has been applied since 1979s to promote training and education programs and organizational development. It is associated with attempts to increase power and influence of oppressed group. Recently the concept has been more broadly applied to varying groups and individual. The basic element of empowerment is taking action to generate positive result at both individual and organizational level (4).

Staff empowerment is the process of making an individual confident, capable and making them feels in control of their work and sole owner of the outcome (5). Empowerments occurs when head nurses communicate their vision, the staff nurses are given empowerment the opportunity to make the most of their talent, learning, creativity and exploration are encouraged. It requires professional traits, a supportive work environment, and effective leadership (6). Empowerment involves assisting individual to make independent decisions to control of their lives, and enabling staff nurses to make autonomous and informed health related choices (7).

The staff nurses want to work hard, perform well, learn new skills, and be involved in decisions about their work they want to have input into placement and promotion. Head nurses who support the professional autonomy of nurses, support empowerment of this group. They also establish unit policies and coordinate the staff nurses’ duties (8). Professional nurses thus gain control of their lives through feeling and using their own strength and power. Model of organizational empowerment structural factors such as access to information, support, resources and opportunity in the work setting are posited to have a major influence on staff’s ability to get work done. Head nurses are ideally positioned to create these structural conditions for work effectiveness (9). As the effectiveness of head nurses influences the organizations productivity and staff satisfaction (10).

Head nurse should create condition for work effectiveness by ensuring that staff nurses have access they need to information, support and resources in order to do their job and that they have opportunity for staff nurses’ development. This results in staff being more productive and effective in meeting the organizations goal (11). To reach organizational goal, all head nurses must plan, organize,
influence, and control to produce some types of good services(12).

Productivity is the relationship between the total amounts of services being produced (output) and the organizational resources needed (input) to produce them. Productivity is an important consideration in designing, evaluating, and improving modern production system (19). Productivity in nursing is related to both efficiency of use of clinical nursing in delivering nursing care to avoid waste and the effectiveness of the care relative to its quality and appropriateness. It is commonly defined as output divided by input (14). It measures how an organization is using its resources (input) to produce services (output) (15).

The input in nursing is represented as tasks, materials, and equipment was converted into services delivered within the health care system (16). But then nursing output is represented as the amount of nursing care time the patients should have received, this is usually based on patient acuity census times, budgeted nursing hours per patient day, or it's how much nursing time those patients needed (17).

Empowering nursing staff to make decisions on their own can increase their productivity. Nurses solve their own problems, and move on to the next task. Being able to make decisions and devise innovative solutions increases staff satisfaction as well. Empowered staff fall as if their contributions matter, when the organization trusts them to make decisions, morale increase, and as a result, so does productivity (18).

Empowerment is the key to motivation and productivity. Nurse feels valued and can contribute is ready to help and grow in their job (19). They can do the following things in order to lay the foundation of staff empowerment in their organizations as share organization mission and vision, share individual goals and expectations provide frequent feedback, delegate authority and opportunities which makes them more effective and productive towards work. Head nurse empowerment ultimately benefits the organization by increased the staff productivity and work effectiveness (19).

1.1 Aim of the study:
The aim of the study is to:
Assess the relationship between head nurses’ empowerment and staff nurse productivity.

1.2 Research Question:
- What is the level of head nurses’ empowerment?
- What is the level of staff nurses productivity?
- What is the relation between head nurses’ empowerment and staff nurse productivity?

MATERIALS & METHOD

2.1 Design:
Descriptive comparative research design was used.

2.2 Setting:
The study was conducted in both EL-Mahala General Hospital and KafreEl-Sheikh General Hospital which are affiliated to Ministry of Health.

2.3 Subjects:
The study was conducted in both EL-Mahala General Hospital and KafreEl-Sheikh General Hospital who accepted to participate in this study, they divided into two groups:
- Head nurses working at EL-Mahala General Hospital (n=17).
- Head nurses working at KafreEl-Sheikh General Hospital (n=24).
- Staff nurses working at EL-Mahala General Hospital (n=120).
- Staff nurses working at KafreEl-Sheikh General Hospital (n=190).

2.4 Tools of Data Collection:
Two tools were used to collect the study data

2.4.1. Structure Psychological Empowerment Questionnaire:
It was modified by researcher based on EL-Deep (2006)20 and recent literatures. The tool consists of two parts:
Part 1: Characteristics of the sample such as years of experience, number of nurses in the department, section and the qualification of the head nurse.
Part 2: Psychological Empowerment Questionnaire in the Work Place.
It used to asess head nurses’ level of empowerment. It consists of four main items as follow:
1- Meaning work as the work is very impartment for nurses, etc.
2- Ability to work efficiently as the work fit well with nurses’ abilities, etc.
3- Independence in the performance of work as the priorities of nurses’ performance easy to set, etc.
4- The ability to influence at work as the supplies which supporting nursing care is enough, etc.

2.4.1.1. Scoring system:
Responses were measured on a three points Likert Scale ranging from (3) always to (1) rarely. The total score was calculated by numerating scores of the categories, where a score of 75 was indicate high level of empowerment and 60% was illustrate low level of empowerment.

2.4.2. Structure Productivity Scale:
It will be modified by the researcher based on Nassar(2011) (21) and recent literatures, the tool consisted of two parts.
Part 1: Characteristics of the sample
Such as: years of experience, age section, and the qualification of the staff nurse.
Part 2: Productivity Scale
It used to asess nursing staff productivity, which consist of 17 subscales classified as follow:
1- Goal attainment includes (5 items)
2- Work conditions includes (7 items)
3- Work engagement includes (6 items)
4- Work motivation includes (5 items)
5- Work organization includes (4 items)
6- Equipment and supplies includes (5 items)
7- Quality of nursing services includes (4 items)
8- Staff development includes (4 items)
9- Decision making and problems solving includes (3 items)
10- Social relation includes (3 items)
11- Sick leave includes (3 items)
12- The effectiveness of the work includes(3 items)
13- Development and promotion includes (3 items)
14- The physical work environment includes(3 items)
15- Waste disposal includes(5 items)
16- Human skills includes (3 items)
17- Work habit includes (3 items).

2.4.2.1. Scoring system:
Responses were measured on a three points Likert Scale ranging from (3) always to (1) rarely. The total score was calculated by numerating scores of the categories, where a score of 75% was indicate high level of productivity and 60% was illustrate low level of productivity.

2.5. Methods:
2.5.1. Operational Design:
The operational design of the current study included; content validity and reliability, pilot study and field work.

2.5.1.1. Tools Validity?:
Study tools contents were developed and tested for its validity by jury of academic staff in nursing administration at different faculties of nursing. The validity of the tools aimed to judge its clarity, comprehensiveness, relevance and accuracy. All of their comments were taken into consideration; some items were re-phrased.

2.5.1.2. Tools Reliability:
The Cronbach's Alpha test was done for study tools. The calculated reliability was (r=0.862)(r=0.935) for Psychological Empowerment Questionnaire and Structure Productivity Scale respectively and that within the accepted limit.

2.5.1.3. Approval:
An official permission was obtained from the hospital authorities in the identified setting to collect the necessary data.

2.5.1.4. Pilot Study:
A pilot study was carried out on 10% of head nurses(4) and 10% of staff nurses (31) who restarted from the sample and correction was done as necessaryto ascertain the clarity and applicability of the study tools. It also needed to estimate the time necessary to fill in these tools.

2.5.1.5. Ethical considerations:
Nurses written consent for participation was obtained after explaining the purpose of the study they were informed about the privacy of information obtained from them .The subjects were assured that their data will be kept confidential, and their right to withdraw was assured.

2.5.6. Data Collocation phase:
The data was collected from the identified subjects by the researcher. The researcher met the head nurses and staff nurses in small groups during their work shifts to distribute the questionnaire. The appropriate time for data collection varied according to the type of work and work load for each hospital, sometimes it was done in the middle of the shifts in other times before the end of the shift. The time needed to complete the questionnaire items from head nurses were between 20-25 minutes and for staff nurses were 20-30 minutes. The data was collected from the subject through four months from at the beginning of March to end of June2019.

2.5.6.1.7 Statistical analysis:
The collected data was organized, tabulated, and statistically analyzed using Microsoft Excel and Statistical Package for the Social Sciences (SPSS) version 20. For quantitative data the range, mean, and standard division were used. For qualitative data the number and percent distribution was calculated .Qualitative categorical variables were compared using chi-square test. The relationships between head nurses empowerment and staff nurses’ productivity scores were assessed using Pearson’s product-moment correlation coefficients. A P-value < .05 was considered statistically significant. And a highly significant level value was considered when p≤ 0.01.

RESULTS

Table (1) Characteristics of staff nurses according to demographic data at Mahalla Al Kubra General Hospital and KafrEl-Sheikh General Hospital (n=310)

| Variables                        | No | %  |
|----------------------------------|----|----|
| Hospital name                    |    |    |
| Mahalla Al Kubra General Hospital| 120| 38.71 |
| KafrEl-Sheikh General Hospital   | 190| 61.29 |
| Academic Qualification           |    |    |
| Nurse Diploma                    | 117| 37.74 |
| Technical institute of nursing   | 83 | 26.77 |
| Bachelor of Nursing              | 91 | 29.35 |
| Master Degree                    | 5  | 1.61 |
| Diploma in Nursing Science       | 14 | 4.52 |
| Marital status                   |    |    |
| Single                           | 52 | 16.77 |
| Married                          | 240| 77.42 |
| Widow                            | 11 | 3.55 |
| Divorced                         | 7  | 2.26 |
| Age groups                       |    |    |
| <25                              | 69 | 22.26 |
| 25-30                            | 90 | 29.03 |
| 30-35                            | 66 | 21.29 |
Table (1) Shows the characteristics of staff nurses according to demographic data at Mahalla Al Kubra General Hospital and KafrEl-Sheikh General Hospital. The data revealed that the staff nurses in Kafr El-Sheikh General hospital were high (61%) than staff nurses at Mahalla AL-Kubra General Hospital (38.71%). According to academic qualification, 37.74% of staff nurses had diploma degree and 29.35% had Bachelor degree and 27.35% were had technical institute of nursing. Most of staff nurses were married 77.4%. As regard to age groups the table shows that most staff nurses within 25-30 years were (29.03%) and 27.42% of them within ≥ 35 years. Most of staff nurses 27.10% had ≤5 years of experience and followed 25.81% of them within ≥15 years of experience.

Table (2) Characteristics of head nurses according to demographic data at Mahalla Al Kubra General Hospital and Kafr El-Sheikh General Hospital (n=41)

| Variables                        | No | %   |
|----------------------------------|----|-----|
| Hospital name                    |    |     |
| Mahalla Al Kubra General Hospital| 17 | 41.46|
| Kafr El-Sheikh General Hospital  | 24 | 58.54|
| Academic Qualification           |    |     |
| Nurse Diploma                    | 8  | 19.51|
| Technical institute of nursing   | 7  | 17.07|
| Bachelor of Nursing              | 21 | 51.22|
| Diploma in Nursing Science       | 5  | 12.20|
| Marital status                   |    |     |
| Single                           | 3  | 7.32 |
| Married                          | 29 | 70.73|
| Widow                            | 8  | 19.51|
| Divorced                         | 1  | 2.44 |
| Age groups                       |    |     |
| <30                              | 10 | 24.39|
| 30-35                            | 17 | 41.46|
| 35-40                            | 5  | 12.20|
| >40                              | 9  | 21.95|
| Age Range                        | 23,000 | 53,000|
| Mean ±SD                         | 34.463 | 8.022 |
| Years of Experience              |    |     |
| <10                              | 10 | 24.39|
| 10-15                            | 16 | 39.02|
| >15                              | 15 | 36.59|
| Age Range                        | 1,000 | 35,000|
| Mean ±SD                         | 14.244 | 7.867 |

Table (2) Shows the characteristics of head nurses according to demographic data at Mahalla Al-Kubra General Hospital and Kafr El-Sheikh General Hospital. The table revealed that most of head nurses (58.54%) were at Kafr El-Sheikh General Hospital than 41.46% of head nurses at Mahalla AL-Kubra General Hospital. According to academic qualification, we notice that most of head nurses 51.22% were had Bachelor degree. Most of head nurses were married (70.73%). According to age groups the data revealed that most head nurses (41.46%) within 30-35 years and followed its 24.39% of them within ≤ 30 years and 21.95% of head nurses within ≥40 years. The majority of head nurses 39.02% had were years of experience within 10-15 years of experience and 36.59% of them within ≥15 years of experience.
Table (3) Level of total head nurses' empowerment at Mahalla Al Kubra General Hospital and Kafr El Sheikh General Hospital

| Items                              | Poor     | Average | Good     |
|------------------------------------|----------|---------|----------|
|                                   | No  | %     | No  | %     | No  | %     |
| Meaning work                       | 0   | 0.00  | 3   | 7.32  | 38  | 92.68 |
| Ability to work efficiently        | 1   | 2.44  | 4   | 9.76  | 36  | 87.80 |
| independence in the performance of work | 41 | 100.00 | 0   | 0.00  | 0   | 0.00  |
| The ability to influence at work of the nursing team | 1   | 2.44  | 5   | 12.20 | 35  | 85.37 |
| Total Empowerment                  | 0   | 0.00  | 5   | 12.20 | 36  | 87.80 |

Table (3) shows level of total head nurses' empowerment at Mahalla Al Kubra General Hospital and Kafr El Sheikh General Hospital. It revealed that the majority of head nurses' empowerment (87.80%) was good level. While 12.20% was average level of total empowerment of head nurses. According to items of total levels of empowerment of head nurses, it is noticed that the high percent (92.68%) of good level of empowerment of head nurses for meaning of work and followed the ability to work efficiently and the ability to influence at work of the nursing team 87.80%, 85.37% respectively. On the other hand, 100.00% of poor level of empowerment of head nurses related to independence in the performance of work.

Figure (1) Level of total Empowerment of Head nurses at Mahalla Al-Kubra General Hospital and Kafr El Sheikh General Hospital

Figure (1) shows that the majority of total levels of empowerment of head nurses (87.80%) were good level. While 12.20% was average level of total empowerment of head nurses. According to items of total levels of empowerment of head nurses, it is noticed that the high percent of good level of empowerment of head nurses for meaning of work 92.68% and followed the ability to work efficiently and the ability to influence at work of the nursing team 87.80%, 85.37% respectively. On the other hand, 100.00% of poor level of empowerment of head nurses related to independence in the performance of work.

Table (4) Level of staff nurses according to their total productivity (n=310)

| Items                             | Poor     | Average | Good     | Chi-Square | P-value |
|-----------------------------------|----------|---------|----------|------------|---------|
|                                   | No  | %     | No  | %     | No  | %     | X²   | P-value     |
| Goal                              | 35  | 11.29 | 155 | 50.00 | 120 | 38.71 | 73.71 | <0.001*     |
| Working conditions                | 27  | 8.71  | 150 | 48.39 | 133 | 42.90 | 85.981 | <0.001*     |
| Participation in the work         | 1   | 0.32  | 133 | 42.90 | 176 | 56.77 | 160.961 | <0.001*     |
| Motives                           | 41  | 13.23 | 195 | 62.90 | 74  | 23.87 | 127.245 | <0.001*     |
| Organization of work              | 3   | 0.97  | 102 | 32.90 | 205 | 66.13 | 197.465 | <0.001*     |
| Equipment and machinery           | 63  | 20.32 | 114 | 36.77 | 133 | 42.90 | 25.361 | <0.001*     |
| The quality of nursing services   | 12  | 3.87  | 47  | 15.16 | 251 | 80.97 | 322.458 | <0.001*     |
| Staff development                 | 34  | 10.97 | 100 | 32.26 | 176 | 56.77 | 97.729 | <0.001*     |
| Decisions making and solving problems | 57 | 18.39 | 98  | 31.61 | 155 | 50.00 | 46.884 | <0.001*     |
| Social relations                  | 10  | 3.23  | 44  | 14.19 | 256 | 82.58 | 343.923 | <0.001*     |
| Sick Leave                        | 24  | 7.74  | 103 | 33.23 | 183 | 59.03 | 122.329 | <0.001*     |
| The effectiveness of the work     | 7   | 2.26  | 40  | 12.90 | 263 | 84.84 | 375.335 | <0.001*     |
| Development and promotion         | 69  | 22.26 | 152 | 49.03 | 89  | 28.71 | 36.316 | <0.001*     |
| The physical work environment     | 36  | 11.61 | 79  | 25.48 | 195 | 62.90 | 130.923 | <0.001*     |
| Waste disposal                    | 4   | 1.29  | 50  | 16.13 | 256 | 82.58 | 348.568 | <0.001*     |
| Human skills                      | 143 | 46.13 | 167 | 53.87 | 0   | 0.00  | 1.858 | 0.173       |
Table (4) Shows level of staff nurses according to their total productivity. The table revealed that the majority (54.84%) of total staff nurses’ productivity were good level and 44.84% of them in were average level of total productivity. The table revealed that there is a high significance difference of total levels of staff nurses’ productivity at P-value 0.001*. Also, there is a significance difference in all items of levels of staff nurses’ productivity except the items related of human skills. It was noticed that the highest good levels of staff nurses productivity relate to the effectiveness of the work, waste disposal, social relation and the quality of nursing services (84.84%, 82.58%, 82.58% and 80.97%) respectively. On the other hand, the highest percent of poor level of staff nurses productivity for work habit and human skills were 62.90%, 46.13% respectively.

Table (5) Relation between total staff nurses productivity and their demographic data at Mahalla AL Kubra General Hospital and Kafr El-Sheikh General Hospital

| Variables | Mahalla Al Kubra General Hospital | Kafr El-Sheikh General Hospital | T-Test/ANOVA |
|-----------|----------------------------------|---------------------------------|-------------|
| Hospital name | 120 | 156.658 ± 24.258 | -0.144 | 0.886 |
| Marital status | 240 | 157.000 ± 17.504 | 3.974 | 0.008* |
| Age groups | 7 | 154.888 ± 20.387 | 8.278 | <0.001* |
| Years of Experience | 84 | 149.536 ± 21.029 | 6.282 | <0.001* |
| Academic Qualification | | | 3.073 | 0.017* |

Table (5) shows relation between total staff nurses productivity and their demographic data at Mahalla AL-Kubra General Hospital and Kafr El-Sheikh General Hospital. There is a significance difference between staff nurses’ productivity and their demographic data related to marital status, age, years of experiences and academic qualification respectively. The highest mean scores (196.571 ± 20.991) for married nurses. Also, the highest mean scores for nurses (162.333 ± 21.695) within 30-35 years. According to the years of experience the highest mean scores of nurses (163.071 ± 19.320) within 10-15 years. As regards to their qualification, most of nurses had Diploma in nursing science degree were highest mean scores (172.786 ± 16.433).

Table (6) Relation between total head nurses empowerment and their demographic data at Mahalla AL Kubra General Hospital and KafrEl-Sheikh General Hospital

| Items | Total Empowerment | T-Test/ANOVA |
|-------|-------------------|-------------|
| Hospital name | Mahalla Al Kubra General Hospital | 17 | 77.294 ± 3.255 | 2.006 | 0.052 |
| | Kafr El-Sheikh General Hospital | 24 | 72.750 ± 8.902 | 0.806 | 0.499 |

| Items | Total Empowerment | T-Test/ANOVA |
|-------|-------------------|-------------|
| Marital status | Single | 3 | 77.000 ± 3.606 | 0.965 | 0.420 |
| | Married | 29 | 73.483 ± 8.352 | 0.806 | 0.499 |
| | Widow | 8 | 77.750 ± 3.454 | 0.965 | 0.420 |
| | Divorced | 1 | 76.000 ± 0.000 | 0.806 | 0.499 |

| Items | Total Empowerment | T-Test/ANOVA |
|-------|-------------------|-------------|
| Age groups | <30 | 10 | 73.100 ± 8.225 | 13.992 | <0.001* |
| | 30-35 | 17 | 73.294 ± 8.936 | 0.965 | 0.420 |
| | 35-40 | 5 | 77.800 ± 2.387 | 0.965 | 0.420 |
| | >40 | 9 | 77.111 ± 4.014 | 0.965 | 0.420 |
| Years of Experience | <10 | 10 | 66.300 ± 8.945 | 0.965 | 0.420 |
| | 10-15 | 16 | 76.688 ± 4.600 | 0.965 | 0.420 |
| | >15 | 15 | 78.000 ± 4.036 | 0.965 | 0.420 |
Table (6) shows the relation between total head nurses ’empowerment and their demographic data at Mahalla AL Kubra General Hospital and Kafr_El-Sheikh General Hospital. The table revealed that there is high a statistical significance difference between total head nurses ’empowerment and their demographic data related to years of experience. There is no a statistical difference between total empowerment of head nurses at Mahalla AL Kubra General Hospital and Kafr El-Sheikh General Hospital.

Table (7) Correlations between total head nurses ’empowerment and total staff nurses’ productivity at Mahalla AL-Kubra General Hospital and KafrEl-Sheikh General Hospital

| R      | P-value       |
|--------|---------------|
| 0.917  | <0.001*       |

Table (7) Correlations between total empowerment and Total productivity

Table (7) shows the correlation between total head nurses ’empowerment and total staff nurses ’productivity at Mahalla AL- Kubra General Hospital and KafrEl-Sheikh General Hospital. The table revealed that there is a strong correlation between total headnurses ’empowerment and total staff nurses ’ productivityat Mahalla AL.Kubra General Hospital and KafrEl-Sheikh General Hospital.

DISCUSSION

Nurses are the largest human resources group in the health care system. They should be managed in a way that leads to job satisfaction, high quality of care and increase productivity (22). The head nurses are the first-line managers in the nursing profession and are responsible for executive tasks of nursing staffs (23). Staff empowerment is one of those phrases that often cause people to groan (24). It’s an important concept to both reducing staff effort and increasing staff engagement. When staff feel empowered, they are in charge of reducing their own effort, and responsible for engaging with the work and increase productivity (25).

The current study was established in two hospitals. Psychological empowerment was good level among head nurses as most of them were ranged from 10-15 years (within 10-15) of experience. Moreover, the results showed that the highest percent of all components of psychological empowerment for meaning of work, ability to work efficiently, ability to influence at work of the nursing team and independence in the performance of the work. This result attributed that the head nurses in both hospitals would experience of internal motivation. Therefore, tend to psychologically identified with staff nurses job and actively attached with their job. Also, they are motivated to do the job with staff nurses abilities and create a spirit of fair competitions and cooperation among nursing staff. In addition, the head nurses are support good communication with their staff. The head nurses set the priorities of their performance according to their importance and provide supplies and resources to implemented work activities.

Avolioet al (2009) encourage openness in sharing information between head nurses and their staff nurses needed to make decision while accepting input from those follow. Wong and Laschinger (2013) confirmed the mediating role played by nurse empowerment through leader behavior that encourage staff and help to job satisfaction. Longeson (2004) mentioned that the head nurses’ managerial skills highly influence the satisfaction of the staff nurses and perhaps achieving the goal of organization in caring the patients. Also, in the line of this result Peteretal (2015) who mentioned that the leadership is imperative to maintain an empowering practice environment which can ensure the best care and good engaged staff through clear organizational objectives and good support for nursing staff.

Howidaet al (2019) support this result, who revealed in their study that the head nurses had higher mean scores than staff nurses regarding dimensions of job empowerment. AbouHashishandFargally (2018) who revealed in their study that the high mean scores of the study sample were related to influence over resources. Also, Saad (2015) in his study showed that nurses at Benha University Hospital that reported that highest mean scores were related to the availability of supplies that necessary for the job.

On the other hand, these findings were in disagreement with Kamel and Mohamed (2015) who revealed in their study that the total mean score of job empowerment was moderate in Benha and Monoufia University Hospitals. Also, EL-Sayed and Abdel-Aleem (2014) who revealed in their study onstaff nurses and head nurses at port-said Hospitals that there was a high statistically significant difference among empowerment dimensions. In addition, EL-Shazly et al. (2006) who revealed that the level of empowerment of head nurses was mostly weak.

In this study staff nurses reported good level of their productivity. Also, there is a high significance difference of total levels of staff nurses’ productivity. This result might be attributed that the staff nurses were in joint decision making process that improved their engagement, responsibility, autonomy, solving problems and communication. head nurses gives opportunity and resources that were important for creating support for evidence-based practice.

Engstrom et al. (2015) support this finding who mentioned that the head nurses gives opportunity and resources that were important for creating support for evidence-based practice.

The present study revealed that the staff nurses productivity resemble a good level of productivity regards to social relation. This might be attributed that the head nurses consider the importance of social support and played as a coach and supervision of change initiatives. This result was consistent with results of Trybouetal. (2014) who suggested that nursing administrators should not only monitor and balance nurses’ workload and efforts but also recognize the importance of social support.

Moreover, staff nurses resemble a good level of productivity related to quality of nursing services. This result attributed that the head nurses gives chance for staff nurses to participated in setting plan of care which facilitate them to be involvement and engagement to provide high quality of
care. In the line with previous result Khamis et al. (2013) support this result who mentioned that in order to achieve excellent quality of care and patient safety, it is essential to align short-term and long-term goals among all health care staff.

Also, the majority of staff nurses resemble a good level of productivity related to the effectiveness of the works. This result may be attributed that staff nurses are familiar with their tasks and goals and expectation, their working errors come down and the quality of work and productivity increase. However, it considered one of the most important factors affecting human resources productivity. Yaghoubi et al. (2009) study corresponding with this result.

On the other hand, Smeeet (2001) in his study showed that human resources productivity is changed as a result of the pattern and organization of human resources within hospital. Also, Easlaugh (2002) showed that above thirty percent of the participants considered over workload and inappropriate organization of human resources at the time of shortage as obstacles to productivity.

The result showed that there was statistically significant difference between mean score of staff nurses productivity and their years of experience within 10-15 years of experience related to items of equipment and machinery, quality of nursing services staff development and decision making. This result attributed that they had more knowledge and experience which increase understanding and compatibility with organizational tasks and responsibilities. However, they able to use resources in an economical manner and able to use different strategies of nursing care written and accessible, they attending external conference that training and develop their skills. Also, they participate in decision making in their hospital.

Howida et al. (2019) support this result who mentioned that the half of head nurses and staff nurses reported high level of shared governance and job involvement and empowerment. Also, Kamal & Mohamed (2015) who reported a high level of shared governance and nurses’ empowerment. In addition, Shwaibet & Nasafi (2015) difference among study subjects, and reported that the majority of the head nurses and their staff had a good level of decision making process, also Abu Aleinein (2016) support this study. On the other hand, Abou Hashish & Fargally (2018) inconsistent with this result who reported that the majority of the head nurses did not attend any training course. Also, Tahmasebi (2009) & Pourhoseint and Aboimalak (2007) in their studies unsupported the present study, they found that the job experience and age did not have any statistically significant relationship with staff nurses productivity.

There is a statistically significant difference between total staff nurses’ productivity and their marital status. There is a higher productivity means in married staff nurses can be that they are usually faced with more familial, social and economic problems and therefore they require more job and economic security. The result of Pourhoseint & Aboimalak studies (2007) are in the line with the results of the current study. However, Talmasebi (2009), Rahimi (2009) and Monajemzadeh & Baradaran (2009) did not find any significant relationship between staff nurses productivity and marital status in their studies. The explanation for significant difference between total staff nurses productivity and academic qualification level, there is higher productivity mean in staff nurses who had Bachelor's degree in nursing and they can be that usually the higher the education level, the more jobs and duties each with its own role expectations and hope to develop in their career.

The result revealed that there is no significant difference between total head nurses empowerment and their demographic data at Mahalla Al-Kubra and Kafr El Sheikh General Hospital. On the other hand, there is a high statistical significant difference between total head nurses empowerment and their years of experience. This result attributed that the head nurses experience and long career give them more accessing to the source of power and information. It was source for decision making power, information, learning skills and continuous development and good communication with their staff. However, head nurses felt more satisfied with their job. This result is consistent with findings that higher levels of job satisfaction among hospitals nurses in Norway and China were associated with longer working experiences in a specific work place Hayes et al. (2010).

As regards to the correlation between total head nurses empowerment and total staff nurses productivity. The findings revealed that there is was a strong relationship between head nurses psychological empowerment and staff nurses productivity at Kafr El Sheikh and Mahalla Al-Kubra General Hospitals. Salehia (2012) supported this result who concluded that there was strong relationship between psychological empowerment and productivity of staff. Also, the research of Safari and Colleagues (2011), Eskandari (2013) Sharifzad et al. (2009) and similar researches Onchoong (2011), Fook et al. (2011) showed that psychological empowerment has direct impact on many organizational variables such as organizational commitment, productivity and employee performance. The result of current study may be attributed that when staff nurses are empowered, they feel their efficacy and ability to perform the job successfully. Capable staff nurses not only feel competency but also feel confident that they can work with efficiency. Thus their productivity would increase EL-Sayed et al. (2018) support this result. In addition, Malih et al. (2015) in the line with current result who mentioned that there was a significant relationship between psychological empowerment and productivity of staff.

The head nurses management skills plays a crucial role, the head nurses should enhance knowledge &skills of their staff nurses. Create opportunities for the blossoming talents and competences of staff nurses. When nurses are empowered, they walk around with a sense of ownership, thinking and acting being accountable for their roles in the execution of the customer experiences and in the success of the organization. Annettef (2015). So, the nursing staff boosting their satisfaction, increasing staff loyalty, encouraging
collaboration and team work, increasing productivity and improving the work quality Baird (2010).

CONCLUSION
The present study concluded that the head nurses empowerment at both hospitals reported a good level of empowerment. Also, staff nurses productivity resembled a good level of productivity. In addition to there was a statistically significant positive correlation between head nurses psychological empowerment and staff nurses productivity at Mahalla El-Kubra and Kafrel-Sheikh General Hospitals. This means that when head nurses empowerment is increased this enhances nurses empowered and it will improve job productivity. However, this indicates that psychological empowerment has a significant impact on staff performance and productivity at both hospitals.

RECOMMENDATION
1- Head nurses must be established a positive work environment of contribution and allow individual creativity, empower staff nurse to increase productivity.
2- Head nurses must be conduct periodic training program that aimed to increase awareness of all staff nurses member about importance of empowerment and productivity.
3- Nurse manager must be established good relationship and open communication with their staff to enhance productivity.
4- Head nurses must be considering the importance of the psychological empowerment as one of the basic strategies to enhance job satisfaction, performance and productivity.
5- Head nurses provide nurses with a motivate work climate of job participation, sharing decision making and empowerment.
6- Finally, nurse manager must be creating an atmosphere of honesty and sincerity, which will trust each other in the organization.

REFERENCES
[1]. AbuHashish, A., & Fargally, M. (2018). Shared governance as perceived by nurses manager and its relation to work engagement, Journal of Nursing and Health Science, 7 (2), 61-70.
[2]. Connell, M. (2011). Nursing Productivity or Nursing Utilization. Available At: http://www.clairvia.com/07/nursing productivity or nursing-utilization
[3]. Whatley, L. (2012) Just Imagine, You Can Experience a Whole New Life Now(Link), Living Now Magazine, April 2012.
[4]. Blais, K; Hayes J and Koziere, G.(2010) Professional Nursing Practice.5th ed.Julie Selman D and Snelling P. Becoming a Nurse a Textbook for Professional Practice. 4th ed. Pearson Education limited, England.
[5]. Ulutas, N. (2018). The effect of empowerment on employees job satisfaction, Journal of Social Studies, 7(1), 1-7. Cilt. A research on Konya industrial zone Yrd Doc.
[6]. Weston, M. (2010). Strategies for enhancing autonomy and control over nursing practice. On line J Issues Nurs. 15:13-9.
[7]. Azarinis, M.A. (2008). Employee empowerment of key to increase productivity, capital Newspaper. 2 (81).
[8]. Oladipo, S., (2009): Psychological empowerment and Vol.2.No,1 May 2009.121 at http://www.ajoi.info/index.php/e.j/article/viewFile/52661/141265
[9]. Hassani, G.Fradin. (2012). Evaluation of empowerment of human resources and effectiveness, Journal of basic and Applied Scientific Research: 2(10):9998-10006.
[10]. Blais , K; Hayes J and Kozie ,RG (2006) . Professional Nursing Practice. 5th ed. Julie Levin Alexander. Upper Saddle River. New Jersey.
[11]. Mohammad, B.Fatemeh,A. Zohre, V. & Abdolghani,A. (2016). Effect of head nurse empowerment program on staff nurses job satisfaction at two educational hospitals in Rasht, Iran. Iranian Journal of nursing and Midwifery Research. April 14, 2016, ip:12.183.57-213.
[12]. Dahinten, V., Maecphee, m., Hejazi, s., laschingher, h., Kazanjian, a., Mccutcheon,a., & Obrien-pallas,l(2013) :Testing the effects of empowerment-based leadership development program: part 2-staff outcomes. Journal of NursingManagement. Doi:10-1111/jonm.12059
[13]. Hanari M. (2006). The relationship between motivation and productivity of human resources in Iran physical education organization. Harakat, 27:45-54.
[14]. Nazari, MR. (2008). Factors affecting human resources productivity in Islamic Azad University. Aliabad: Islamic Azad University of Aliabad. Available from: http://www.Jobportal.ir (Last accessed on 2008).
[15]. Davies,A., Wong, C.A. and Laschingher, H. (2011). Nurses participation in personal knowledge transfer; the role of leader-member exchange (LMX) and structural empowerment. JNurs. Magne.19,632-643.doi:10.1111/j.1365-2834.201101269.x
[16]. Selah, A. (2011). Productivity in services. Available from: hospitalmanagement.ir (last accessed on 2011).
[17]. Faraji, H. (2006). Manpower productivity in organizations. Proceedings of the National Conference of Iran productivity. Tehran.
[18]. Farhadi, P. Ravangard, R. Jafari, A. and et al. (2013). Study of factors affecting the productivity of nurses based on the ACHIEVE model and prioritizing them using analytic hierarchy process technique. 2012.
[19]. Nagwann, A. (2012). Employee Empowerment and Productivity. Sapience Bloggers Blog. Available: http://www.sn and productivity.com
[20]. El-Deeb, GLH(2006). The relation between organizational climate and empowerment of nurses. Unpublished Master Thesis. Faculty of Nursing. Monoufia University.1-2.
[21]. Nassar , R. (2011). The effect of organizing patient care on productivity. Unpublished Master Thesis. Faculty of Nursing. Monoufia University.3-6.
[22]. Ahmed , A.Farzeen M, Anwar N, (2015). Relationship among job satisfaction, attitude towards work and organizational commitment. J Manage Info. 5:84-96.
[23]. Greenberg, J. (2013). Organizational behavior: the state of the science. New York:Rouledge Taylor and Franas Group; p. 84.

[24]. Rouhi, G.H.(2011).The relationship between job satisfaction and organizational commitment of nurses working in hospitals of Glesten University. J GorganUni Med Sci.10-28, 285-92.

[25]. Avolio, B. J., Walumbwa, F, and Weber, J. (2009).Leadership: current theories, research and future directions. Annu. Rev. psycho.60.921-449. doi:1146/annurev.psych.60.110706.163621.

[26]. Wong, C., and Lashinger, H. (2013). Authentic leadership, performance and Job satisfaction: the mediating role of empowerment J Adv, Nurs. 69,947-959. doi:10.1111/j.1365-2648.2012.06089.x.

[27]. Longeson, C. (2004). Quality focuses of the first line managers and relationships to unit outcome. J Nurs care Quality. 19:334-342.

[28]. Ademini, O., Johnson, O., Samson, A. (2015). Psychological factors as predictors of job involvement among secondary school teachers in the life Nigeria. African Journal for the Psychological Studies of Social issues.18(3),88-95

[29]. Howida, H., Shaimaa, M and Abeer, Y.(2019). The relation shared governance, Empowerment and Job Involvement as perceived by medical-surgical nursing staff. Evidence Based Nursing Research vol.1 No.3

[30]. Abu Hashish, A., & Fargally, M. (2018). Assessment of professional nursing governance and hospital magnet components at Alexandria Medical Research Institute, Journal of Nursing Education and Practice, 8(3), 1-5 http://jnep.sciencedirect.com

[31]. Saad, S. (2015). Effect of an Education Program about Intra-departmental Communication among Nurses on Nurses Empowerment, Unpublished Decorative Thesis, Faculty of Nursing, Benha University. 42-113.

[32]. Kamel, F., & Mohammed, M. (2015). Perception of Shared Governance and Its Relation to Nurses Empowerment in Benha and Menoufia University Hospitals, Journal of Nursing Science, 1-17. Published Online MM DD 2015 (http://www.aascit.org/Journal/jns). ISSN:2381-1056(print);ISSN:2381-1064.

[33]. El-Sayed, R., & Abdel-Aleem, M. (2014). Relationship between Head Nurses Locus of Control and Staff Nurses Job Empowerment,82(1),331-339.

[34]. El-Shazly E, Gallab, S, Gaber, E, Yousef, H.(2006). Leadership Styles, Psychological Empowerment and Job Satisfaction of Nurses in ASSIUT University Hospital. AAMJ, Vol.4,N.2, April.

[35]. Engstrom,M., Westerberg, J., and Martensson,G.(2015). Staff Assessment of Structural Empowerment and ability to Work According to Evidence-Based Practice in Mental Health Care. J Nurs. Manag.23,765-774. doi:10.1111/jonm.12206

[36]. Trybou,J., Germonpre,S., Janssens,H., Casini,A., et al.(2014). Job related stress and Sickness absence among Belgian nurses: prospective study.J.Nurs.Sch.46,292-301. doi:1111/jnu.12057

[37]. Khamisa,N., Peltzer,K., and Oldenburg,(2013). Burnout in relation to specific contributing factors and health outcomes among nurses: a systematic review. Int.J.Environ.Res.Public Health 10,2240. doi:10.3390/ijerh0602214.

[38]. Yaghoubi M, Karmi S, Hasanzadenh , A,Jvadidi,M, and et al. (2010). A Survey of Effective Factors in improvement Of Staff performance based on ACHIEVE Model in the view of managers (senior administrative and nursing) in teaching hospitals in Isfahan. Hospital 2010; 8:7-14.

[39]. McNeese-Smith,D (2001).Staff nurse views of their productivity and non-productivity. Health Care Manage Rev: 26:7-19.

[40]. Eastaugh SR.(2002). Hospital nurse productivity. J Health care Finance; 29:14-22.

[41]. Shwaihet,N., &Nasaif, H.(2015). The relationship of participation in shared governance to work satisfaction among cardiovascular nurses working in a tertiary hospital in Saudi Arabia, Clinical Nursing Studies, 3 (4), 79-87.

[42]. Abu Aleinein, A. (2016). The Impact of Job involvement on Job performance at UNRWA Gaza Field Office, Master Thesis of Business Administration Faculty of Commerce, The Islamic University, Gaza, Pp:10-15 and 79.

[43]. Tahmasebi, M. (2009), Study of factors affecting human resources productivity in nine areas of shiraz municipality. Shiraz: PayameNoor University.

[44]. Pourhoseini, R and Abdomaleki, J (2007), Study between Organizational Commitment and Human Resources Productivity of Education staff in Ghorwe in 2006-2007 in order to provide Practical Solutions. Proceedings of the 15th National Conference on Human Resources Productivity in Education-The Productivity of Human Sources on Education: Barriers and Solutions; Tabriz: 2007.

[45]. Rahimi, G. (2012), The relationship between individual characteristics and productivity of employees in the department of physical education Yazd. Available from: http://www.Sport-manage.blogafa.com/post-34.aspx

[46]. Monajemzadeh, Z and Baradaram, M. (2009), Relation between quality of work life (QWL) and Agricultural and Natural Resources University personnel 'performance. Iranian J Agric econ DevRes; 2:39-47.

[47]. Hess, R. (2015). The measurement of professional governance: Scoring guide-lines and benchmarks (instrument manual). Voorhees, NJ: Forum for Shared Governance.

[48]. Salehnia, M. (2012). The effect of psychological empowerment on their productivity. Journal of Industrial Organizational Psychology. 3(12):65-76.

[49]. Safari K, Salim, H., Rastegar A, Jamshidi,A. (2011). The Relationship between psychological empowerment and organizational learning. Social and Behavioral Sciences. 15:2907-2911.

[50]. Eskandari F, Pazargad M, Zaghey M and Shoghli A.(2013). The relationship between psychological
empowerment of nurses with the emotional commitment Zanjan hospital. Journal of Preventive Care in Nursing and Midwifery ;2(3):47-60.

[51]. Sharif-zadeh F, and Mohammad M. (2009). Employee empowerment associated with labor productivity Police command Staff Provide. Security Management Studies ;4 (1):6-18.

[52]. Onnchoong Y, Luenwong, K and Chai lau, T.(2011).Psychological Empowerment and Organizational commitment in the Malaysian private higher education institutions: a preview and research agenda.Academic Research International;1:236-245.

[53]. FookCh, Y,Brinten, L,Sidhu G k et al. (2011).Relationship between Empowerment with Work Motivation and With drawl Intention among secondary school Principals in Malaysia. Social and Behavioral Sciences; 15:2907-1637.

[54]. EL-Sayed, S., Shazly, M., & AbdEL-Rahman, S(2018).Relationship between Empowerment and Organizational Commitment among Staff Nurses, Journals of Nursing and Health Science,7(1),17-24 www.iosrjournals.org

[55]. Maliheh, Z,Fatemehr, Z,and Hassan A, (2015).Relationship Between Psychological Empowerment and Productivity of Medical Librarians. Acts inform Med,Jun;23(3):142-146.

[56]. Annette,F(2015). Employee Empowerment increase productivity. Corporate Cultures, workforce infrastructures. May 21st.

[57]. Baird, Wang, H. (2010). Employee Empowerments: extent factors. Personnel Review, 30(5), 574-599.doi:10-1108/0048383481011064154.