ABSTRACT

Motivation is very important for nurses to display positive attitude that will assist and attain the goals and objectives of every organization. The clinical nurse managers motivate their subordinates to promote a healthy working environment. This paper explores the stories of nurses on how they were motivated by their clinical nurse managers utilizing qualitative case study using narrative inquiry method. This qualitative case study explores multiple cases through detailed, in-depth data collection involving multiple sources of information using interviews. In selection of participants, purposive sampling was used. Data gathering uses in-depth semi-structured interviews in exploring staff nurses’ experiences of the motivational practices with their clinical nurse supervisors. In the study, ten staff nurse’s narratives offered insight into their perceptions of the motivational practices showed to them by their clinical nurse managers in their entire work relationships. The stories of these nurses revealed seven desirable motivational characteristics of the clinical nurse managers.

Keywords: Motivation, Qualitative Case Study, Purposive Sampling, Semi-Structured Interviews

INTRODUCTION

Background and Rationale of the Study

Every health worker needs to be motivated in order to achieve a goal. According to (Papathanasiou, Fradelos, Kleisiaris, Tsaras, Kalota, and Kourkouta 2014) “motivation is the process of mobilizing a person’s actions in order to fulfill a need or success of a desired target.” Health workers, especially nurses need motivation in order to attain quality health care as well as promote meaningful healthy relationships (Jooste & Hamani, 2016). Motivation is very important for every worker to exhibit a behavior that will assist attain the goals and objectives of every organization thus improve the performance over time.

There are many sources of motivation, namely, intrinsic, and extrinsic motivation. Extrinsic motivation engages those in work in order to obtain goals that are apart from the work itself. This may also include money, power, security, status. However, intrinsic motivation attributes include enjoyment, interest, satisfaction of curiosity, self-expression, personal challenge, and respect. For nurses, the intrinsic and extrinsic motivation are essential elements for them to take part in their life. However, (Janssen, De Jonge and Bakker 1999) in their study find autonomy given to nurses, the working conditions provided by them, the quality supervision by their superiors and the relationships between them. Moreover, (Edgar, 1999) sees four elements which are important for motivation of nurses and they are the “the excellent levels of time that they have for the provided care, autonomy that was given to make decisions, open communication and the ability to manage the complexity of their work.”

According to (Fradelos, P., Tsaras, K., Kalota, & Kourkouta 2014), “confidence has proven to be the most essential ingredient in the culture of an institution or of a health organization in a way that the nursing personnel will feel satisfied with their work, commitment, the clarity of roles and empowerment.”

To motivate further the nurses, empowerment is very essential. Empowering the nurses can improve and develop their capacities as professional nurses. According to (Abbah, 2014), “empowered employees focus their job and work-life with additional importance, and this leads to constant progress in
coordination and work procedures. Employees execute their final novelties and thought with the sense of belonging, enthusiasm, and delight, in empowering organizations. Adding up, they work with a sense of responsibility and prefer benefits of the organization to theirs.”

Problem Statement

The study explored the stories of nurses on how they were motivated by their clinical nurse managers in the public and private tertiary hospitals in the Province of Bohol.

METHODOLOGY

Research Design

This study utilized qualitative case study using narrative inquiry method. This qualitative case study explored multiple cases through detailed, in-depth data collection involving multiple sources of information using interviews. This ensures that the issue is not explored through one lens, but rather a variety of lenses which allows for multiple facets of the phenomenon to be revealed and understood (Baxter & Jack, 2008). One of the advantages of this approach is the close collaboration between the researcher and the key informants, while enabling participants to tell their stories. Through these stories the key informants can describe their views of reality and this enables the researcher to better understand the participants’ actions.

The interview questions and data analysis method in this study can be described as narrative. (Flinkman, Boret, & Salantera, 2013) It is assumed that narrative inquiry is the idea that individuals make sense of their world by telling stories. According to (Riesmann, 2008), the happenings reflected in a narrative are selected, organized, connected, and evaluated by the researcher. Interpretation is inevitable because stories are representations, and the researcher do not have direct access to another’s experiences.

Research Sample & Sampling Technique

The study utilized purposive sampling. The selection of participants is purposive as it seek to find the “key informants” who are qualified about the phenomenon of interest (Palys, 2008). This study invited nurses who had worked with clinical nurse supervisors for three (3) years and willing to articulate, and reflect upon, their stories in their practice in the hospital they are employed. The managers in the study is referred to as clinical nurse supervisors. Once qualified, a letter of invitation was showed directly to the key informants by the researcher.

Research Instruments

The main research instrument in the study entailed an in-depth semi-structured interview exploring the staff nurses’ experiences of the motivational practices with their clinical nurse supervisors. (See appendix D). In the conduct of the interview, the researcher acted as the main interviewer. The researcher utilize the interview guide provided by Muylaert, CJ, Júnior, VS, Gallo, PR, Neto, MLR (see table 1 – phases of the interview).

Narrative Method of the Interview

The narrative interviews are techniques to generate stories and therefore it can be analyse in different ways after the capture and transcription of the data (Muylaert et al., 2014). Table 1 presents a structured way the process of obtaining narrative interviews. According to (Muylaert et al., 2014), “the ex-manent questions refer to research questions or the researcher’s interest that arise from her/his approach to the topic of study, when developing a literature review and deepening the topic being researched (field exploration).” These questions must be transformed into immanent, being a crucial task in the research process, which should at the same time anchored ex-manent questions in the narration, always using the language of the informant. The immanent questions are themes and topics brought by the informant, they may or may not coincide with the ex-manent question.

The interviewer disclosures the main theme, which able to lead narration, thus, (Muylaert, et al., 2014) suggested to follow the guidelines for the development criteria of this theme: 1. Need to be an experiential part of the interviewee. This ensures his or her interest and lead to a richly detailed narrative, 2. It should
### Table 1: Main phases of the narrative interview

| Phases of the Narrative interview | Rules for the interview                                                                 |
|----------------------------------|--------------------------------------------------------------------------------------------|
| Preparation                     | Preparation exploring the field Formulating ex-menant questions.                           |
| Initialization                   | Formulation of the initial topic for narration. Use of pictures or story lines.           |
| Main narration                   | No interruptions. Only non-verbal or paralinguistic encouragement to continue telling the  |
|                                  | story Wait for signals the end of the ("coda").                                           |
| Questioning phase                | only question: What happened then? no opinion or attitude questions no arguing on         |
|                                  | contradictions do not ask: Why? Go from exmanent into immanent questions                  |
| Small talk                       | Small talk Stop recording. Only question allowed is why? Make note immediately after the  |
|                                  | interview.                                                                                 |

Source: Maylaert CJ, Júnior VS, Gallo PR, Neto MLR (2014)

be personal, social or communal significance, 3. The interest and investment in the topic of the informant should not be mentioned, in order to avoid taking positions or taking on roles from the beginning, 4. The topic should be wide enough to allow the informant to develop a long history, from initial situations, going through past events, leading to the current situation, 5. Avoid indexical formulations, i.e. by not referring explicitly to dates, names or places, which should be brought only by the informant, as part of his/her relevant structure.

### Data Gathering Procedure

After the approval from the Dean of the College of Nursing, the researcher started to search potential key informants. The key informants were searched through meetings in a local nurse’s organization and the others were former colleague of the researcher in the hospitals identified in the study. The key informants were presented with participant information sheet and after reading they consented to take part of the study. However, as reflected in the consent where in cases the key informants refused to proceed in the middle of the interview, the researcher gave due respect and did not continue the data gathering but this did not happen.

### Data Analysis

The data analysis followed the holistic-content method where the life story of a person is taken as a whole (Flinkman, Boret, & Salantera, 2013). After readings of the data, the researcher formed story narratives based on the interviews. In these narratives, the researcher selected and organized the separate events from the nurses’ experiences into complete narratives with a chronological order. These stories were reviewed and discussed with the adviser. A thematic approach to narratives was used when trying to find common thematic elements across key informants and the stories they told. “The identification of themes is foundational to qualitative research of all kinds.” (Baxter & Jack, 2008) The researcher focused on the identified themes throughout the stories and compared, contrasted, and interpreted these themes in the context of the employment in the hospitals. The emerging themes and interpretations were argued, reread, and polished with the adviser. By presenting the cases and the themes simultaneously it will reach a more holistic and multidimensional perspective to these stories.

### Demonstrating Trustworthiness and Rigor of the Study

The rigor of the study was observed with the use of constant observation, utilization of comprehensive field journals, and permitting opportunities for short pauses towards the informants in times of prolonged engagement. During the interview in which the informant has given consent, an audiotape and field notes containing the non-verbal cues and summaries of each answer in order to improve the vividness and explicitness of the study. Explicitness is defined as the skill of following the researcher’s choices and explanatory efforts by means of preserving records cautiously and presenting outcomes comprehensively. Meanwhile, a presentation of rich, clear, authentic, and crafty depiction that highlight the striking themes in the data define vividness (Polit & Beck, 2008).

To make the narrative stories more valid, the researcher considered the trustworthiness of the stories narrated by the key informants. As (Loh, 2013) argues, trustworthiness compare to the whole truth should be considered in narrative studies. The researcher will establish the trustworthiness for this study in three ways. First, our data analysis is described in detail, and direct citations from the narratives are provided in relation to each story to reveal the basis from which the analysis was conducted. Second, the narrative stories
and themes were reviewed by a group of panelists in the College of Nursing to ensure that the identified themes resounded with the stories narrated. Thirdly, the accuracy was reviewed by the key informants, to allow them to verify the authenticity of the data and ensure that they agreed with the interpretations. To guarantee the accuracy of the English language used, the researcher has the paper proof-read by an English linguist known for his/her expertise.

Data Storage and Management
After the data gathering, the consent forms and transcripts of the interviews were stored and secured. All printed manuscripts were placed inside the locked cabinet wherein only the researchers will have access to and the computer files and memory card containing the audio-recorded interview will be password-protected and. The researcher is solely responsible in transcribing and encoding the narratives.

Ethical Considerations
The researcher submitted the study for approval by the University’s Ethics Review Board. After it has been approved, the key informants gave their written consent that they participate the study. Those key informants who responded to the researcher’s invitation letter and expresses a willingness to participate in the study were contacted before the interview. The researcher informed the potential informant the details of the study, including its duration, its activities, location, and how much time will be required. After this information is conveyed, the inform consent form were given to the informant for signature.

RESULTS AND DISCUSSION
Ten staff nurses’ narratives offer insight into their perceptions of the motivational practices offered to them by their clinical nurse managers in their entire work relationships. Each of the 10 key informants provided a description of the most and least motivational practices of the clinical nurse managers as their way of supporting and encouragement to them. The story was shaped from face-to-face interviews with the staff nurses who had encounters with the clinical nurse managers for more than one year and their responses to reflective questions were written and check the accuracy by making a follow-up interview.

The Individual Case Narratives

The Story John
John (pseudonym), male, single and resides in Tagbilaran City, Bohol. He is an employee in a DOH retained tertiary hospital in Tagbilaran City and continuously extending his service for three years (3) and a half now. Based on the span of time he has served, he obviously can work under pressure, despite the increasing number of patients to tend to. However, he coped with it by being flexible. In his nursing career, he has been rotated to a few supervisors, and he noted that some supervisors were good, while others were a little harsh to him. There was also an instance that he experienced some unfair and unfavorable situation like the demanding supervisors who wanted him to finish his rounds and charting early. This led him to multi-task and carry out tasks that were not even part of his job description.

The Story of Carla
It has been three years (3) and three (3) months now that Carla, a single and female Nurse 1 employee in one of the hospitals in Bohol, has been devotedly working under the care of roughly fifteen (15) clinical nursing managers. She narrated that conflicts in any workplace was inevitable like what she had encountered. The respondent encountered some demanding patients who thought they could just insist on what they want the staff to do because it was a public hospital and that they were the ones paying the nurses’ salary. There was also a manager who she described as judgmental in terms of how they dealt with the nurses. She confronted that manager, and finally felt relieved for having outburst her disappointment. She did so because for her, a manager must be someone who should serve as a role model and a guide to the staff, without being judgmental since not anyone could please everybody.

The Story of Cara
The single and female nurse 1 named Cara, is currently working in one of the hospitals in Bohol for about three years (3) and two months (2) now. She has been reporting to work 15 minutes before the time, has been a good team player, has been considerate to her colleagues, has been working well with the work delegated to her, and has been continuously respecting
the rights of the patients and the significant others. However, she admitted that patients in the public hospitals were very demanding to take care because they were very demanding even to simple and manageable issues. Patients would approach the station for help almost all the time, and if they did not get immediate help, they would resort to telling the supervisors complaining that the nurses were just sitting on their stations without knowing what the real reasons were. She added that there were patients who were admitted without somebody watching over them, and they would make noise that made other patients mad especially at night. Most of the patients were demanding. All these made the participant mad and annoyed because she was also busy performing her job. Many were the challenges that she encountered, yet she had not thought of resigning because the situation was still bearable for her. Furthermore, her manager was there to pacify the situation and make her and her colleagues feel better. The manager met them monthly in the nurse’s stations and gave them the chance to express their sentiments and advised them to treat the patients nicely. Moreover, the manager would make some necessary follow up every time she committed mistakes, making sure the incidents would not happen again, and that things were done right. After receiving the support, she felt good, confident, and knowledgeable on how to deal with the demands of the doctors, the patients, and the significant others.

The Story of Chery

Chery, a female married informant, has been working with 10 clinical managers in one of the hospitals in Bohol as a Nurse 1 employee. She described herself as honest, God fearing, easy to be with, always afraid of committing mistakes, understanding, and hardworking for she worked even beyond her duty time. As a nurse, there were situations in her workplace that sometimes tested her patience and caused her stress such as her patients, supervisors, demanding doctors, and the significant others of the people admitted. These stressors had made her think of quitting from her job and led her to choose to work abroad which remained a plan. However, she still felt better because of her manager’s way of guiding her. The manager would meet them monthly, train them, and give them lectures about handling babies and the significant others. Moreover, her manager would make some necessary follow up

The Story of Charlie

With his desire to serve humanity, Nurse 1 named Charlie, male and single, an employee of a tertiary hospital in Bohol, has reached his third year in service under the care of one of the fifteen (15) clinical nursing managers. As a nurse, he had nurtured in him the quality of being patient, helpful, approachable, and dedicated to his clients. Inevitable as it was, his qualities were put into test by unfavourable situations in the workplace. These include patients who were mostly demanding who could not understand the procedures and protocols that they needed to follow. As per the respondent, patients kept coming to the nurses’ stations to ask for help, without even considering that there were only few nurses on duty, and they were fully loaded with responsibilities given to them by the doctors. Sometimes, worst scenarios happened, some patients would nag and refuse to listen to the explanations given to them. All these negative encounters made the respondent felt that the situation has been unjust and totally unfair, since watchers only considered their side of the story and missed to get the story of the opposing party.

On the other hand, as human composed of emotions and feelings, he once thought of resigning because of the pressure. He had thought of staying at home and establishing a business of his own where no boss could take hold of his time, but matters involving money hindered him.

The Story of Charmie

Charmie, female, married and a Nurse 2 employee, who has been serving in a private hospital for nine years (9) in a company with around ten (10) supervisors. She has served that long even up to the present because of her being friendly, punctual, dedicated, trustworthy, patient, and her ability to work under pressure. Despite her qualities, she found the job challenging due to the stressors that seemed to crush her spirit, and she noted that a private hospital has more stressful situations than
that of the publicly owned one. The situations she referred to were the competitions she noticed in the workplace among the employees in their desire to get promoted, and the gossips that her colleagues enjoyed sharing especially when they did not get an approval on the work schedules they were requesting. Another event she considered to have contributed to her stress, were the phone calls that doctors made when requesting and ordering for medications. As per the respondent, sometimes, the calls from the doctors were difficult to understand and the nurse never had the guts to ask what it really was to avoid being reprimanded. Added to the agony, were the demanding patients who called her even for simple issues such as putting of the thermometer and emptying the urine catheter even if their watchers were already instructed how. All these made her thought of giving up the job to the point of almost shedding tears to release her distress. For her, it was awfully unfair to be working and not getting the reasonable salary with all the distress experienced.

The Story of Carrie

Being friendly, compassionate, responsible, and dedicated were the armors that Carrie, male and single, a Nurse 1 employee, has been using until today - his sixth year of service in a private hospital in Bohol. With all honesty, she commented that private hospital was far different from public hospital because it has lower salary, less benefits, and more stressors. She added that her workplace has demanding colleagues and supervisors, as well as the family of the patients. With the burdens experienced, he had come to the point of resigning because of the many things he disliked, including the procedures that were allowed even though they were improperly and incorrectly carried out by other nurses. Another undesirable incident was the nagging of the supervisors even if the leaves of the employees were approved and official, the absenteeism among his colleagues, and the inability of the supervisors to solve the problem in the stations. Moreover, the supervisors did not seem to care even they knew what the problems were. They ignored the menace in the workplace and did not serve as a role model in managing the nurses.

The Story of Clark

In a busy medical ward, Clark, male and single, a Nurse in one of the hospitals in Bohol, who tagged himself as lively, energetic, compassionate towards the patients, and organized has been working efficiently for three years (3) and four months (4) now. In his years of working, he has concluded that there was no such thing as a stress-free workplace. He shared his stressful moment where he would work for longer hours to address the shortage on the number of nurses on duty. The salary he has been receiving was also lower compared to those employed in the public hospitals. His employment benefits were less, and he did not have hazard pay. He also had patients who were very demanding. He was also affected when some of his supervisors neglected the importance of making some follow up on the performance of the staff. Understandably, the reasons above led him to consider resigning because of the lack of inspiration. He was not satisfied because the environment was never conducive for work, and the staff lacked the support from the immediate heads.

The Story of Claire

It has been three years (3) and four months (4) now, that Claire, female and single, a Nurse 2 staff in a hospital, has been working diligently observing utmost dedication, friendliness, sense of responsibility, and compassion. Like any other organizations, her workplace has challenging scenarios. As per the respondent, the challenges were the following: less number of staff serving a large number of patients, demanding patients and families, difficult to deal doctors, happy-go-lucky nurses, lack of hospital supplies, malfunctional equipment, and lack of employee benefits. However, the challenges did not affect her. She remained focused with her priorities to get the job done. It was all because she needed the job and that stress was already part of life. In addition, she did not even consider resigning because adjusting to situations was never a problem to her. Moreover, her supervisor had motivated her reminding that stressful tasks and non-conducive environments were unavoidable. Her superior held a meeting, consulted them individually, asked them of the issue that included the patients, families, and issues in the workplace. Whenever there were big issues in the ward, the superior served as the channel so that concerns would be brought to the chief nurse. The superior also assured her that there would be trainings, encouraged her to pursue graduate studies, and involved her and the team in the
decision making in the ward. Because of these, the respondent was extremely happy.

As impact of the experience, she formulated her own perception as to how a superior should be. For her, the superior should closely pay attention to the working relationship among the staff, listen to the complaints and suggestions, observe, and correct malpractices, and respond to the stressful situations to avoid possible conflicts.

The Story of Caloy
With other 15 supervisors, Caloy, a Nurse 1 employee in one of the private hospitals in Bohol, has been continuously serving the community for four years (4) already. He showcased his ability to work under pressure, his being friendly, being diligent, being able to adhere to rules and policies and being easy to be with. Despite her positive attributes, she met challenges that put her desirable characteristics to the test caused by demanding patients, supervisors who did not show much concern to the staff, and her co-nurses who did not seriously carry out their tasks. With all that were happening, the respondent felt so disgusted and disappointed. However, she has not resorted to resigning because she knew how difficult it was to get a regular position in the government hospital.

Themes Emerge
This chapter presents the results of the study after exploring the stories of nurses on how they were motivated by their clinical nurse managers in the public and private tertiary hospitals in the Province of Bohol. By their answers to the question “What are the motivational practices of the clinical nurse supervisors as narrated by their nurses?, the following themes emerge consequently extracted from their stories specifically; (1) a cheering leader, (2) a role model, (3) a sensible guardian, (4) a chaperons of the lost and stressed, (5) a defender of the subordinates, (6) an abler of the novice and (7) a compassionate leader. Each theme is discussed in order to clarify and comprehend its meaning as narrated by the key informants.

A Cheering Leader
Every motivation a leader must possess is a cheering leader. Every human being desired to be supported whatever they do for them to be inspired from work.

A clinical nurse manager is expected to show enthusiasm or support to their subordinates in order make their staff nurses feel happy and hopeful. On the time the staff nurses felt hopeless, they felt the need to be hopeful as clinical nurse managers were able to cheer them up.

A Role Model
A professional nurse must project a role model to their subordinates in order to gain respect. With respect on hand, good working relationships are well established. Staff nurses sees a role model projection very important to their clinical nurse managers in order to guide them properly. Being a role model has its characteristics to affect change. The clinical nurse manager is one having skills in facilitating and maintaining conducive to work, have clinical competence and have the capacity to support and community effectively with their staff nurses (Daly, Jackson, Mannix, Davidson & Hutchinson, 2014).

A Sensible Guardian
In times nurses are bombarded with situations that sometimes they are out of control in management, it takes always positive to sit together with the clinical nurse managers to discuss issues and resolve it. During these meetings, they were able to talk to their supervisors and fortunately the clinical nurse managers were very sensitive in listening and responding to their needs. Staff nurses find it very helpful in them dealing with so many problems they encountered in work. (Parand, Dopson, Renz & Vincent 2014) found out that nurse clinical managers’ who spent time with the staff nurses in work can influence quality and safety clinical outcomes in hospitals.

A Chaperons of the Lost and Stressed
The staff nurses were able to work efficiently and effectively in the performance of their duties and responsibilities as staff nurses assigned in their respective areas. By providing them adequate information on nursing care and with encouragement given to them by their clinical nurse managers, the staff nurses can deliver their work well with confidence. (Kodama & Fokahori 2017) in their study revealed that giving feedback to staff nurses had taken to bring about change in their quality care. This action may lead to the development of nursing practice and improve
relationship between nurse managers and staff nurses.

A Defender of the Subordinate

Staff nurses are always put in a situation where they make mistakes and they were accused of being incompetent. The clinical nurse managers role emphasizes the need to support and help their colleagues from embarrassment to the patients they work for. The staff nurses felt good when their supervisors do follow them up regularly and help their nurses talk to the affected patients. Parand, Dopson, (Renz & Vincent, 2014) supported the findings that clinical nurse managers support and engagement with the staff nurses was identified as one of the primary factors associated with good hospital-wide quality outcomes.

An Abler of the Novice

For the young staff nurses to be more committed to their duties and responsibilities, it requires a high level of knowledge, skills, and attitude. With these important learning domains, the nurses gained out from the support of the clinical nurse managers through training and sharing of experiences. This is well supported by Frankel (2008) that a good and successful clinical nurse manager always seek to develop their staff through training and mentor them to gain learning opportunities promote and enhance the competence of their staff nurses.

A Compassionate Leader

The staff nurses need to be understood in a way they express their dissatisfaction. Their clinical nurse managers listening skills help the staff nurses feel calm and comfortable when they are working. Kodama and Fokahori (2017) in their study revealed that listening and understanding were identified as an indispensable factor promoting change in their wards. Listening to their staff nurses is an important factor that would promote a healthy relationship between the nurse managers and their staff, thus it would enhance quality care and long work engagement with staff nurses.

DISCUSSION

In this inquiry, the researcher utilized a qualitative case study research design. The cases explored the experiences of the motivational practices of clinical nurse managers told by their staff nurses. These experiences are caught in the living and telling of narratives by the staff nurses who had direct encounters with the clinical nurse managers. After listening, observing, reading, and interpreting the story text, it yielded seven (7) detailed motivational experiences by the clinical nurse managers in the hospitals of the Province of Bohol.

The results of this inquiry reinforced the studies of other researchers, for example, (Stapleton et al. 2007) that the “ability to inspire morale in staff is a fundamental indicator of sound leadership and managerial characteristics.” Leaders and managers really play a big role in motivating their subordinates. For staff nurses to be ultimately satisfied with their job, it requires a sustained leadership change to influence the level of their morals. However, inflicting change may cause fear and havoc among employees but sustaining the change the leader envisioned may lead to satisfaction and effective in their job.

The clinical nurse managers in motivating their staff nurses enable them to become more empowered and competent to their job. By providing them education and training either in the ward or in their regular meeting schedules, it promoted development, collaboration, innovation, and motivation (Fuimano, 2004 & Ayyash, Aljeesh, 2011). By providing them such trainings, it develops the staff nurse’s courage and allow them to find strategies especially in planning long term goals to attain them.

The attitudes and competencies of the clinical nurse managers are very important in establishing a positive relationship with their staff nurses. The staff nurses felt that the attitudes and competencies of their clinical nurse managers bring positive relationships much more being welcomed and valued in the workplace improved their level of self-confidence, respect, and motivation (Dale, Leland & Dale, 2013). By providing them mutual respect and understanding and most especially in listening to them time to time makes their staff nurse feel cheered and respected.

Feedback is very important in the workplace especially nurses who aims to become good nurses. It is very important for the staff nurses because it helps improve their work competence, increase their confidence, promote self-esteem and moreover motivation. The staff nurses and their clinical nurse managers
continually hold meetings and reflections about their work, thus may help them both learn and establish positive relationships (Clynes & Raftery, 2008; Skovgaard, 2004). Therefore, a healthy relationship by staff nurses and their clinical nurse managers is built upon an open inviting atmosphere with friendly, supportive, welcoming, enthusiastic, and confident personality (Courtney-Pratt, Fitzgerald, Ford, Marsden, & Marlow, 2012).

Performance appraisal is very important for the clinical nurse managers because it is not only to inform the staff nurses on their work deficiencies but rather it helps acknowledge the track a staff wishes to continue. This is so because it helps see the interest of the staff nurses. Performance appraisal is way of knowing the internal interest that determines the motivation of every individual (Stapleton et al. 2007).

Involvement of the staff nurses by the clinical nurse managers in making decisions to health care is very significant in helping staff nurses find value and meaning in their work. One way of the staff nurses involvement is organizing their clinical work so that when they are rotated in all areas of the hospital, it can give a valuable results about their role to the positive patient’s outcome. This action of the clinical nurse managers help the staff nurses find their work meaningful and valuable (Stapleton et al., 2007).

The clinical nurse mangers constant rounds and visits with their staff nurses provide an opportunity for a healthy communication. It assists the staff nurses feel that they are really part of the health care team and also establish the norms of operation. In this aspect of meeting and communicating with the clinical nurse managers and the staff nurses help evaluate the progress of their plans because they are encouraged to discuss the strengths and weakness of their work. Moreover, it provides them more opportunities where the staff nurses can talk about their personal problems which is instrumental to their personal development (Stapleton et al. 2007).

The clinical nurse managers project an essential component of leadership which is role modelling. Being a role model represent a positive role figure for the staff nurses in the hospital. Clinical nurse managers as role models had the most influence on the motivation and may represent a positive role figure for the staff nurses in the clinical area (Wilkes, 2006).

The staff nurses expressed their desire for a clinical nurse manager to be a teacher, guidance counsellor and a supervisor. According to (Frankel, 2008) clinical nurses’ managers who has high levels of upkeep to the staff nurses may protect from the negative effects happening in the workplace, reduced emotional exhaustion, and increase self-esteem.

The staff nurses’ experiences tensions in the ward environment especially between nurses and patients. (Frankel, 2008) found out that “Resolving these and building effective relationships between multidisciplinary team members is a test of senior nurses’ leadership abilities. With nurses becoming more autonomous decision-makers, this must inevitably lead to revising the relationship between professional roles.”

Furthermore, (Frankel, 2008) stresses that importance of successful leadership to the clinical nurse managers by emphasizing the supportive roles they perform. The clinical nurse managers must perceive every person as a unique individual with their unique set of needs. These clinical nurse managers must see the staff nurses as being useful in the promotion of the quality of care provided by the hospitals.

Conclusion and Recommendation

This chapter presents the conclusion and recommendations of the study. The results of the study revealed seven significant themes emerge namely: a cheering leader, a role model, a sensible guardian, a chaperons of the lost and stressed, a defender of the marginalized, an abler of the novice, and a compassionate to the strained hopes.

CONCLUSION

This qualitative case study method examined the staff nurse’s experiences on the motivational practices of their clinical nurse supervisors. The study revealed appropriate knowledge of the motivational characteristics of the clinical nurse managers in the tertiary hospitals in the Province of Bohol. In lieu of this study, the researcher see the results very significant to those who aspire to become leaders because it will address in managing
staffing situations and may help in overcoming decisions to resign early.

**RECOMMENDATION**

Based on the findings of the study, the following are recommended:

1. The clinical nurse managers continuously support and encourage the staff nurses to perform their duties and responsibilities.
2. Uphold all the time the role model projected by the clinical nurse managers to their subordinates.
3. Maintain regular visits to the subordinates in order to generate significant needs the subordinates encountered in times of their work.
4. Continually providing reviews and updates on nursing care management to the respective work assignments by the clinical nurse managers guides the nurses to become more able in performing their duties and responsibilities.
5. The clinical nurse managers value the helping relationship through being there and protect the nurses in times when they encounters difficulty in the assigned areas.
6. Every clinical nurse managers must value clinical competence and promote of centres of excellence in their practice in order to become effective role models.
7. And finally, clinical nurse’s managers must possess a compassionate attitude to the subordinates in order to comfort and calm them.

**REFERENCES**

Abbah, M. (2014). Employee Motivation: The Key to Effective Organizational Management in Nigeria. *IOSR Journal of Business and Management* 16(4) pp: 1-8

Ayyash, H. & Aljeesh, Y. (2011) Nurses' Motivation and their Performance at European Gaza Hospital in Gaza Strip. *Journal of Al Azhar University-Gaza (Natural Sciences)*. 13 pp:55-68

Baxter, P. & Jack, S. (2008). Qualitative Case Study Methodology: Study Design and Implementation for Novice Researchers, Retrieved From: http://nsuworks.nova.edu/cgi/viewcontent.cgi?article=1573&context=tqr

Clynes, M. P. & Raftery, S.E.C. (2008). Feedback: an essential element of student learning in clinical practice, *Nordic Nurse Education in Practice*, vol. 8(6), pp:405–411.

Courtney-Pratt, H., FitzGerald, M., Ford, K., Marsden, K. & Marlow, A. (2012) Quality clinical placements for undergraduate nursing students: a cross-sectional survey of undergraduates and supervising nurses. *Journal of Advanced Nursing*, 68(6) pp:1380-1390

Dale, D., Leland, A. and Dale, J.D. (2013). What Factors Facilitate Good Learning Experiences in Clinical Studies in Nursing: Bachelor Students’ Perceptions. *ISRN Nursing*, 2013 (628679), pp: 7

Daly, J., Jackson, D., Mannix, J., Davidson, P.M. & Hutchinson, M. (2014) The importance of clinical leadership in the hospital setting. *Journal of Healthcare Leadership*, 2014(6), pp: 75-83

Edgar, L. (1999). Nurses’ motivation and its relationship to the characteristics of nursing care delivery systems: a test of the Job Characteristic Model. *Canadian Journal of Nursing Leadership*. 12(1) pp:14–22.

Flinkman, M., Bouret, U. & Salantera, S. (2013). Young Registered Nurses’ Intention to Leave the Profession and Professional Turnover in Early Career: A Qualitative Case Study. International Scholarly Research Notices, *ISRN Nursing*. 2013(916061) pp:1-12 pages.

Frankel, A. (2008) What leadership styles should senior nurses develop? *Nursing Times*; 104(35) pp:23-24.

Fuimano J. (2004) Raise your emotional intelligence. *Nursing Management* 35(7), pp: 10-12.

Hunt, L.T. & Hayden, B.Y. (2017) A distributed, hierarchical and recurrent framework for reward-based choice. *Nature Reviews Neuroscience*. 18(3) pp 172-182

Janssen, P.P.M., De Jonge, J. & Bakker, A.B. (1999). Specific determinants of intrinsic work motivation, burnout, and turnover intentions: a study among nurses. *Journal of Advanced Nursing*. 296(6) pp1360–1369.
Jooste, K. & Hamani, M. (2016). The motivational needs of primary health care nurses to acquire power as leaders in a mine clinic setting. *Health SA Gesondheid*, 22, pp: 43-51.

Kodama, Y. & Fukahori, H. (2017) Nurse managers’ attributes to promote change in their wards: a qualitative study. *Nursing Open*, 4(4), pp: 209-217

Loh, J. (2013). Inquiry into issues of trustworthiness and quality in narrative studies: A perspective. *The Qualitative Report*, 18(65), pp: 1-15.

Muylaert, C.J., Júnior, V.S., Gallo, P.R. & Neto, M.L.R., (2014). Narrative interviews: an important resource in qualitative research. *Revista da Escola de Enfermagem da USP*. 48(2) pp:184-189

Palys, T. (2008). Purposive sampling. In L. M. Given (Ed.) The Sage Encyclopedia of Qualitative Research Methods. Sage: Los Angeles, (2), pp:697-698.

Papathanasiou, I.V., Fradelos, E.C., Kleisiaris, C.F., Tsaras, K., Kalota, M.A. & Kourkouta, L. (2014). Motivation, Leadership, Empowerment and Confidence: Their Relation with Nurses’ Burnout. *Journal of the Academy of Medical Sciences of Bosnia and Herzegovina*. 26(6) pp:405–410

Parand, A., Dopson, S., Renz, A. & Vincent, C. The role of hospital managers in quality and patient safety: a systematic review. *BMJ Open Journal*. 4(9) pp: 1-15.

Polat, D. F. & Beck, C. T. (2008). Is there gender bias in nursing research? *Research in Nursing & Health*, 31(5), pp-417–427.

Reismann, M., Bretschneider, J.C., Plessen, G.V. & Simon U. (2008) Reversible photothermal melting of DNA in DNA-gold-nanoparticle networks. *Small*. 4(5) pp: 607-610

Stapleton, P., Henderson, A., Creedy, D., Cooke, M., Patterson, E., Alexander, H., Haywood, A. & Dalton, M. (2007). Boosting morale and improving performance in the nursing setting, *Journal of Nursing Management*, 15, (8), pp 811–816.

Wilkes, Z. (2006). The student-mentor relationship: a review of the literature. *Nursing Standard*, 20 (37), pp. 42–47.