

Relationship between organizational climate and empowerment of nurses in Menoufiya hospitals, Egypt

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العلاقة بين جوّ العمل، وبين تمكين الممرضات في مستشفيات محافظة المنوفية، في مصر
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الخلاصة: قد تكون خبرة الممرضات بجو العمل، من العوامل التي تؤثر على نتيجة الرعاية. وقد قامت الباحثات بمقارنة جوّ العمل وتمكين الممرضات في الوحدات المتخصصة في مستشفيات في مصر. وجمعت المعطيات من 164 من الممرضات العاملات والحاصلات على شهادة الدبلوم، بالاعتماد على أداتين: استبيان عام للوضع من أجل تقييم جوّ العمل، والتمكين السيكولوجي من واقع الاستبيان الخاص بأماكن العمل. ولم تجد الباحثات فرقاً يُعتدّ به إحصائياً في مستوى جوّ العمل بين المستشفيات، حيث صنّف من قبل غالبية الممرضات على أنه مستوى متوسط، في حين ذكرت غالبية الممرضات أن مستوى التمكين متوسط في كِلا المستشفيات، وإن هناك ترابط إيجابي يُعتدّ به إحصائياً بين جوّ العمل، وبين تمكين الممرضات. وتم إعداد التوصيات في ضوء هذه النتائج.

ABSTRACT One factor influencing the outcome of care may be the nursing staff's experience of organizational work climate. We compared organizational climate and nurse's empowerment in specialty units at 2 hospitals in Egypt. Data were collected from 164 diploma school staff nurses using 2 tools: the situational outlook questionnaire to assess organizational climate and the psychological empowerment in the workplace questionnaire. There was no statistically significant difference in the level of organizational climate between the 2 hospitals, which the majority of nurses classified as moderate. Most nurses reported a moderate level of empowerment in both hospitals and there was a statistically significant positive correlation between organizational climate and nurse's empowerment.

Rapport entre l'ambiance de travail et la responsabilisation du personnel infirmier des hôpitaux de Menoufeiya (Égypte)

RÉSUMÉ L'expérience du personnel infirmier quant à l'ambiance de travail peut être l'un des facteurs influençant le résultat des soins. Nous avons comparé l'ambiance de travail et la responsabilisation du personnel infirmier dans des unités spécialisées de deux hôpitaux égyptiens. Les données ont été recueillies auprès de 164 infirmières et infirmiers diplômés à l'aide de deux outils : le *Situational Outlook Questionnaire*, qui permet d'évaluer l'ambiance du travail, et le questionnaire sur la responsabilisation psychologique au travail. Il n'y avait pas de différence statistiquement significative dans l'ambiance de travail entre les deux hôpitaux, que la majorité du personnel infirmier a qualifiée de moyenne. La plupart du personnel a également déclaré que le niveau de responsabilisation dans les deux hôpitaux était moyen, et il existait une corrélation positive statistiquement significative entre l'ambiance de travail et la responsabilisation du personnel infirmier.

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Introduction

In order to manage change effectively, nursing leaders must understand the social process that affect employees' work-related attitudes, particularly by providing a climate that is conducive to staff empowerment [1]. One factor influencing the outcome of care may be the nursing staff's experience of organizational work climate [2].

The concept of organizational climate was first described in the late 1950s. It arises from routine practices in an organization and influences staff members' attitudes and behaviours in both a positive way, such as in productivity, satisfaction and motivation, and in negative ways, such as in absenteeism, staff turnover and work accidents [3,4]. Mok and Au-Yeung added that organizational climate is the shared perception about the social and psychological impact of the organization on individuals [1]. Thus climate may be the moderator variable between job satisfaction and productivity. Isaksen et al. defined climate as the recurring patterns and intrapersonal perception of behaviours, attitudes and feelings that characterize life in the organization [5]. At the individual level of analysis, the concept is called psychological climate. When aggregated, the concept is called organizational climate, i.e. the objectively shared perceptions that characterize life in the organization.

In the cases of nurses, organizational climate and management style in some organizations has been reported to cause nurses to feel disempowered: demotivated, unable to accomplish the desired activities and frustrated with the work environment [6,7]. McVey claimed that staff nurses can be empowered at all levels of the organization, if management allows them the support, the encouragement and the organizational climate that encourages and rewards them [8]. Ellis and Hartley reported that empower-

ment is the process by which a leader shares power with others or enables them to act [9]. Empowerment results in employees having a strong sense of self that encourages them to be motivated to excel. Empowerment requires a change in the organization structure and locus of decision-making.

A study by Safaan conducted at University of Menoufiya hospitals in Egypt, the same setting of the present study, concluded that nurse managers were more empowered than staff nurses and that formal power had a major effect compared to informal power [10]. Another study in the same hospital as the present study concluded that the autocratic leadership style was the style most frequently used by nurse managers, followed by the participative and the democratic leadership styles, while the *laissez-faire* style was least used [11]. The study also revealed that almost three-quarters of nurses were dissatisfied with their job, mainly in relation to supervision, promotion and benefits. The study also revealed that the majority of nurses had a low commitment to the organization.

A review of the literature from Egypt revealed very few other studies dealing with organizational climate. The present study focused on nurses working in specialty units—where workload and patients' needs are maximal and where high quality of care is mandatory—in order to investigate what factors empowered nurses in performing their tasks and what was the effect of organizational climate on nurses' empowerment. It is hoped that the results will form a basis for recommended improvements of organizational climate and empowerment so that nurses will be motivated to excel.

The aims of the study were: to compare organizational climate in specialty units at University of Menoufiya hospitals and Shebin El-Kom teaching hospital; to compare the empowerment of nurses in these

units at both hospitals; and to study the relationship between organizational climate and empowerment of nurses in these units at both hospitals.

Methods

A descriptive, comparative research design was used.

Setting

This study was conducted in 2 selected hospitals in Menoufiya governorate, Egypt. The University of Menoufiya hospital was chosen as representative of university hospitals. It includes 4 hospitals: the general hospital, cancer hospital, emergency hospital and Suzanne Mubarak hospital. The bed capacity of the hospital is 700 beds. The nursing staff consists of 790 nurses, with qualifications ranging from bachelor degree to diploma in nursing.

The second setting was Shebin El-Kom teaching hospital, which is affiliated to the Ministry of Health and Population. The bed capacity is 677. The nursing staff comprises 702 nurses, with qualifications also ranging from bachelor degree to diploma in nursing.

All the units selected for inclusion in this study were specialty units: neonatal intensive care unit, kidney dialysis unit, paediatric intensive care unit, burns unit and intensive care unit in addition to the operating theatre in each of the 2 hospitals.

Administrative approval for the study was obtained from both hospitals.

Subjects

All staff nurses from the aforementioned units who agreed to participate were included in the present study. In total 164 staff nurses agreed to participate. The inclusion criteria were diploma school nurses who had at least 1 year experience of nursing practice in the study setting. The distribu-

tion of nurses across the selected specialty units of the 2 hospitals was as follows. There were 93 nurses at the University of Menoufiya hospital: 9 in the burns unit, 42 in the operating theatre, 9 in the kidney dialysis unit, 16 in the intensive care unit, 8 in the paediatric intensive care unit and 9 in the neonatal intensive care unit. There were 71 nurses at Shebin El-Kom teaching hospital: 7 in the burns unit, 18 in the operating theatre, 16 in the kidney dialysis unit, 9 in the intensive care unit, 8 in the paediatric intensive care unit and 13 in the neonatal intensive care unit.

Study tools

The data were collected using 2 main scales: the situational outlook questionnaire (SOQ) and the psychological empowerment instrument.

Situational outlook questionnaire

The SOQ examines psychological aspects of the work environment, commonly referred to as organizational climate, with 55 scale items [5]. In Isaksen's original questionnaire there are 10 dimensions: challenge/involvement (5 items), freedom (6 items), trust/openness (6 items), idea time (5 items), playfulness/humour (5 items), conflict (5 items), idea support (7 items), debate (5 items), risk-taking (5 items) and dynamism/liveliness (6 items). The reliability and construct validity of the original SOQ were tested by Isaksen using a sample of 1111 subjects [5].

The questionnaire was translated into Arabic and some statements were rephrased to match the nurses' level of education. The modified SOQ used in this study was assessed for the clarity and content validity by 6 experts with experience in both clinical and academic practice after a doctorate degree and 7 clinical instructors with experience in a clinical setting after a masters

degree, 5 nurses from University of Menoufiya hospital and 5 nurses from Shebin El-Kom teaching hospital. A pilot study was also conducted to ensure the reliability and validity of the questionnaire.

Respondents answered items on a 4-point scale from 0 to 3 in which 0 = not applicable, 1 = applicable to some extent, 2 = fairly applicable, 3 = applicable to a high extent. There were 9 dimensions with positive scoring but the conflict dimension had reverse scoring because it is a negative dimension. The overall scores of each dimension were calculated by taking the mean (total score for the nurses \times 100) \div (number of items \times maximum score).

This procedure allows for ease of comparison across dimensions. According to the SOQ, organizations can be categorized as “innovative”, “moderate” or “stagnated”. An innovative organizational climate is one in which organizations invest in new ideas and new services that increase the likelihood of long-term survival. A stagnated climate is one in which organizations are unsuccessful in creating new ideas, provision of new services and are commercially in trouble. A moderate organizational climate falls between the 2 extremes. Organizations with scores < 55 were considered as stagnated, scores 55–110 as moderate and scores 111–165 as innovative.

Psychological empowerment instrument

The second scale was the psychological empowerment instrument taken from Seada [12]. It was developed by Spreitzer in 1995 to assess nurse's level of empowerment [13]. The scale consists of 17 statements which measure 4 separate but inter-related dimensions: meaning (3 statements); competence (8 statements); self-determination (3 statements); and impact (3 statements).

Respondents answered items on a 5-point scale ranging from 1 to 5. The responses of strongly disagree, disagree,

neither agree nor disagree, agree, strongly agree were scored respectively as 1, 2, 3, 4, and 5. The overall scores of each dimension were calculated by taking the mean (total score divided by number of items) of the respondent's score for each dimension and multiplying this by 100 to convert it into percentage score. A score of $\leq 34\%$ was considered as poor empowerment; score 35%–68% as moderate empowerment and score $> 68\%$ as good empowerment.

Pilot study

Before data collection, a pilot study was carried out in University of Menoufiya hospital and Shebin El-Kom teaching hospital to test the reliability, clarity, applicability and comprehensiveness of the questionnaire. It was conducted on 10 staff nurses who were excluded from the main study during the final data collection. The pilot study also aimed to determine the time needed for filling the questionnaire (about 20 minutes).

Data management and statistical analysis

Data were coded for entry and analysis using *SPSS*, version 11. Data were presented using descriptive statistics as frequencies and percentages. Quantitative variables were presented as means and standard deviations (SD), and tested by the Student *t*-test. Independent *t*-test was used to compare 2 groups. Whenever the expected values in 1 or more of the cells in a 2×2 tables were less than 5, the Fisher exact test was used instead. In larger than 2×2 cross tables, no valid test results could be obtained whenever the expected value in 10% or more of the cells was < 5 . ANOVA was used to compare more than 2 groups. Person's *r* was used to test correlations between organizational climate and empowerment of nurses. Statistical significance was considered as $P < 0.05$.

Results

Background characteristics

Table 1 shows that the largest proportion of nurses at both hospitals was < 25 years: 40.9% at Shebin El-Kom teaching hospital and 59.2% at University of Menoufiya hospital. There were no nurses in the age groups 35–45 and > 45 years at University of Menoufiya hospital. The mean ages were 27.76 (SD 8.27) years at Shebin El-Kom teaching hospital and 23.82 (SD 3.66) years at University of Menoufiya hospital.

The majority of nurses had < 10 years of experience: 69.1% at Shebin El-Kom and 80.7% at University of Menoufiya (Table 1). The mean years of experience was 9.40 (SD 7.89) years at Shebin El-Kom teaching hospital and 5.76 (SD 3.57) years at University of Menoufiya hospital.

Level of organizational climate

Table 2 shows that there was no statistical significant difference between the 2 hospitals in the level of organizational climate.

Table 1 Percentage distribution of study subjects according to nurses' age and years of experience

Variable	Shebin El-Kom teaching hospital		University of Menoufiya hospital	
	No.	%	No.	%
<i>Age (years)</i>				
< 25	29	40.9	55	59.2
25–35	27	37.9	38	40.8
35–45	10	14.1	0	0.0
> 45	5	7.1	0	0.0
Mean (SD)	27.76 (8.27)		23.82 (3.66)	
<i>Years of experience</i>				
< 10	49	69.1	75	80.7
10–20	11	15.4	18	19.3
20–30	9	12.7	0	0.0
> 30	2	2.8	0	0.0
Mean (SD)	9.40 (7.89)		5.76 (3.57)	

SD = standard deviation.

The highest percentage of nurses at both hospitals reported a moderate level of organizational climate (84.5% at Shebin El-Kom and 92.2% at University of Menoufiya) and the proportion reporting a stagnated organizational climate level was 14.1% and 7.7% respectively. Few nurses at either hospital reported an innovative organizational climate (1 nurse each). The mean scores for organizational climate were 77.69 (SD 16.53) and 74.76 (SD 12.82) respectively.

Nurses' levels of empowerment

Table 3 shows a statistical significant difference between the 2 hospitals regarding nurse's levels of empowerment ($P = 0.007$). While the majority of nurses reported a moderate empowerment in both hospitals (64.6% and 86.0% respectively), 35.4% of nurses at Shebin El-Kom compared with 14.0% at University of Menoufiya reported good empowerment. Shebin El-Kom teaching hospital had a higher mean score for level of empowerment: 64.96 (SD 8.69) versus 61.04 (SD 8.26).

Nurses' levels of organizational climate

Table 4 shows the level of organizational climate in different units. The only statistically significant difference in the nurses' mean level of organizational climate was reported for the operating theatre ($P = 0.004$), with a mean score of 87.16 (SD 14.86) at Shebin El-Kom and 75.50 (SD 13.37) at University of Menoufiya. The burns unit at Shebin El-Kom teaching hospital had the highest mean score within that hospital [88.28 (SD 7.20)], while at University of Menoufiya hospital, the intensive care units had the highest mean score at that hospital [81.56 (SD 6.48)].

Statistically significant differences in nurses' levels of empowerment were

Table 2 Comparison between Shebin El-Kom teaching hospital and University of Menoufiya hospital regarding organizational climate as perceived by the nurses

Organizational climate	Shebin El-Kom teaching hospital		University of Menoufiya hospital		t-test	P-value
	No.	%	No.	%		
Stagnated	10	14.1	7	7.7		
Moderate	60	84.5	85	92.2	1.277	0.203
Innovative	1	1.4	1	1.1		
Mean (SD)	77.69 (16.53)		74.76 (12.82)			

SD = standard deviation.

reported at 3 units in both hospitals: the operating theatre ($P < 0.0001$), intensive care ($P = 0.006$) and paediatric intensive care unit ($P = 0.025$) (Table 5). Shebin El-Kom teaching hospital had a higher mean score of nurses' empowerment than the University of Menoufiya hospital at all 3 units [68.61 (SD 6.55), 67.22 (SD 5.40) and 67.87 (SD 10.52) respectively] compared with the University of Menoufiya hospital [(SD) 59.30 (SD 8.22), 59.37 (SD 6.57) and 57.27 (SD 5.59) respectively].

Correlations

The correlation between organizational climate and empowerment was significantly strongly positive at the intensive care unit

only at Shebin El-Kom teaching hospital ($P < 0.0001$) (Table 6). Also a strong significantly positive correlation between organizational climate and empowerment were detected at 2 units at University of Menoufiya hospital: the burns unit ($P = 0.034$) and the operating theatre ($P < 0.0001$). Total correlations between organizational climate and empowerment in all 6 units at both hospitals were positive.

Table 7 indicates that there was a statistically significant positive correlation between organizational climate and nurses' empowerment for the following dimensions: meaning ($P = 0.015$), competence ($P < 0.0001$), self-determination ($P < 0.0001$) and impact ($P < 0.0001$).

Table 3 Comparison between Shebin El-Kom teaching hospital and University of Menoufiya hospital regarding empowerment as perceived by the nurses

Level of empowerment	Shebin El-Kom teaching hospital		University of Menoufiya hospital		t-test	P-value
	No.	%	No.	%		
Poor	0	0.0	0	0.0	2.736	0.007
Moderate	46	64.6	80	86.0		
Good	25	35.4	13	14.0		
Mean (SD)	64.96 (8.69)		61.04 (8.26)			

SD = standard deviation.

Table 4 Comparison between Shebin El-Kom teaching hospital and University of Menoufiya hospital regarding organizational climate in different units as perceived by the nurses

Unit/ Organizational climate	Shebin El-Kom teaching hospital		University of Menoufiya hospital		t-test	P-value
	No.	%	No.	%		
<i>Burns unit</i>					1.557	0.142
Stagnated	0	0.0	1	11.1		
Moderate	7	100.0	8	88.9		
Innovative	0	0.0	0	0.0		
Mean (SD)	88.28	(7.20)	77.00	(17.97)		
<i>Operating theatre</i>					2.995	0.004
Stagnated	0	0.0	4	9.5		
Moderate	17	94.4	37	88.1		
Innovative	1	5.6	1	2.4		
Mean (SD)	87.16	(14.86)	75.50	(13.37)		
<i>Kidney dialysis</i>					-0.294	0.771
Stagnated	4	25.0	2	22.2		
Moderate	12	75.0	7	77.8		
Innovative	0	0.0	0	0.0		
Mean (SD)	68.56	(14.42)	70.22	(11.74)		
<i>Intensive care units</i>					0.353	0.727
Stagnated	0	0.0	0	0.0		
Moderate	9	100.0	16	100.0		
Innovative	0	0.0	0	0.0		
Mean (SD)	82.55	(7.23)	81.56	(6.48)		
<i>Paediatric intensive care</i>					1.374	0.191
Stagnated	2	25.0	0	0.0		
Moderate	6	75.0	8	100.0		
Innovative	0	0.0	0	0.0		
Mean (SD)	77.62	(18.57)	66.50	(13.38)		
<i>Neonatal intensive care</i>					-0.347	0.732
Stagnated	4	30.7	0	0.0		
Moderate	9	69.3	9	100.0		
Innovative	0	0.0	0	0.0		
Mean (SD)	66.76	(17.34)	68.88	(6.77)		

SD = standard deviation.

Discussion

The findings of the present study demonstrate that there was no statistically significant difference in perceptions of organizational climate among diploma school

staff nurses in specialty units at Shebin El-Kom teaching hospital and University of Menoufiya hospitals. This result contradicts that of Mok and Au-Yeung [1] who found statistically significant differences among 3

Table 5 Comparison between Shebin El-Kom teaching hospital and University of Menoufiya regarding empowerment in different units as perceived by the nurses

Unit/ Level of empowerment	Shebin El-Kom teaching hospital		University of Menoufiya hospital		t-test	P-value
	No.	%	No.	%		
<i>Burns unit</i>					-0.143	0.888
Poor	0	0.0	0	0.0		
Moderate	3	42.9	3	33.3		
Good	4	57.1	6	66.7		
Mean (SD)	70.57	(6.29)	71.22	(10.63)		
<i>Operating theatre</i>					4.247	< 0.0001
Poor	0	0.0	0	0.0		
Moderate	10	55.6	40	95.2		
Good	8	44.4	2	4.8		
Mean (SD)	68.61	(6.55)	59.30	(8.22)		
<i>Kidney dialysis</i>					-1.022	0.318
Poor	0	0.0	0	0.0		
Moderate	14	87.5	8	88.9		
Good	2	12.5	1	11.1		
Mean (SD)	59.50	(9.02)	62.77	(4.20)		
<i>Intensive care units</i>					3.042	0.006
Poor	0	0.0	0	0.0		
Moderate	4	44.4	14	87.5		
Good	5	55.6	2	12.5		
Mean (SD)	67.22	(5.40)	59.37	(6.57)		
<i>Paediatric intensive care</i>					2.516	0.025
Poor	0	0.0	0	0.0		
Moderate	3	37.5	7	87.5		
Good	5	62.5	1	12.5		
Mean (SD)	67.87	(10.52)	57.27	(5.59)		
<i>Neonatal intensive care</i>					-1.697	0.105
Poor	0	0.0	0	0.0		
Moderate	12	92.4	8	88.9		
Good	1	7.6	1	11.1		
Mean (SD)	58.76	(6.77)	63.55	(6.08)		

SD = standard deviation.

groups of staff nurses in their perception of organizational climate.

The majority of the participating nurses at Shebin El-Kom teaching hospital and University of Menoufiya hospitals per-

ceived a moderate level of organizational climate, a relatively small percentage of nurses perceived the organizational climate as stagnated and a very small percentage of nurses perceived an innovative organiza-

Table 6 Correlation between organizational climate and empowerment in all 6 units at Shebin El-Kom teaching hospital and University of Menoufiya hospital

Unit	Shebin El-Kom teaching hospital		Empowerment University of Menoufiya hospital		Total	
	<i>r</i>	<i>P</i> -value	<i>r</i>	<i>P</i> -value	<i>r</i>	<i>P</i> -value
Burns unit	0.709	0.075	0.704	0.034	0.630	0.009
Operating theatre	-0.285	0.252	0.580	< 0.0001	0.458	< 0.0001
Kidney dialysis	0.100	0.712	-0.087	0.823	0.078	0.710
Intensive care units	0.944	< 0.0001	0.311	0.241	0.472	0.017
Paediatric intensive care units	0.194	0.513	0.143	0.736	0.509	0.044
Neonatal intensive care unit	-0.051	0.869	0.308	0.420	0.043	0.851

SD = standard deviation.

tional climate. Aiken, Sochalski and Lake claimed that nurses who work in more specialized areas are more likely to experience positive working conditions based on their more homogeneous knowledge and experience [14]. Our result is congruent with Mok and Au-Yeung who reported that the top nurse managers were more positive towards organizational climate, with higher ratings on leadership, recognition and teamwork [1]. Our results may be attributed to the centralized organizational structure prevailing in both hospitals. In addition to a lack of participation in goal-setting, decision-making processes and scheduling, there are inadequate facilities and financial

resources, pressure on time, lack of rewards, lack of teamwork, in addition to job-related stress and the stress due to the nature of the patients in these critical care units, who may have physiological and psychological problems that add to the stress on the caregivers.

Nurses at Shebin El-Kom teaching hospital had a higher mean score regarding the level of organizational climate than at University of Menoufiya hospitals. One explanation of this could be the familiarity with the work area at Shebin El-Kom teaching hospital which allows greater control over the work environment. Also Shebin El-Kom teaching hospital provides private

Table 7 Correlation between organizational climate and dimensions of nurse's empowerment

Organizational climate	Dimension of empowerment			Total
	Meaning	Competence	Self-determination	
Pearson correlation coefficient	0.191	0.333	0.730	0.397
<i>P</i> -value	0.015	< 0.0001	< 0.0001	< 0.0001

transportation to nurses and a kindergarten for their children, factors that decrease staff stress, increase their commitment to hospital policy and decrease conflict between staff and management.

Regarding the scores of organizational climate in different units, there was a statistically significant difference between the 2 hospitals in the nurses' perceptions of organizational climate only in the operating theatre, with the highest mean score at Shebin El-Kom teaching hospital. This finding may be attributed to the fact that all subunits of the operating theatre at Shebin El-Kom teaching hospital are under the supervision of 1 nurse manager whereas the subunits at University of Menoufiya hospitals are distributed across 2 hospitals—the main hospital and the emergency hospital—and each is supervised by a head nurse and all are managed by the nurse manager. Moreover the workload at the operating theatre at University of Menoufiya hospitals is greater than that at Shebin El-Kom teaching hospital. In addition, the presence of 1 category of staff nurse (diploma only) in the operating theatre at Shebin El-Kom teaching hospital promotes teamwork.

The majority of staff nurses in different specialty units in both hospitals perceived the organizational climate as moderate, but this result is inconsistent with that of Abd El-Megeed and Ahmed who found in their study of the organizational climate at critical and intensive care units at El-Manial University hospitals that staff nurses perceived the climate as an open one, pointing to the presence of good spirits, good relationships and humane treatment among staff [15]. It is worth mentioning that Abd El-Megeed and Ahmed categorized organizational climate as open, controlled or closed [15]. They identified the following characteristics of an open climate: high morale, the superior acts as a role model, the superior is friendly and

considerate to staff, no close supervision of staff, no need to push production and minimal bickering among staff.

The results of our study reveal that the majority of specialty unit staff nurses at both hospitals perceived a moderate level of empowerment. This result is supported by the findings of Sabiston and Laschinger [16], Laschinger [17] and Laschinger, Almost and Tuer-Hodes [18], who found that nurses believed that their job settings were moderately empowering. Abd El-Aal found that nurses perceived that they had a moderate access to job-related empowerment factors [19]. However, this result is contradicted by Yakob who reported that staff nurses' total empowerment scores were relatively low [20], and by Safaan who stated that staff nurses had lower scores of work empowerment than nurse managers [9]. Also Laschinger et al. found in their research that the comments of nurses reflected a sense of powerlessness [6,7]. Powerlessness results when individuals do not receive recognition for their efforts, lack discretion in how they do their jobs and do not have access to the support, resources and information required to perform their work effectively. In addition, they do not have opportunities to advance within the organization or to learn and grow through challenging work experiences or learning opportunities.

Shebin El-Kom teaching hospital had significantly higher mean scores regarding nurses' perceptions of empowerment than University of Menoufiya hospitals. This was not expected because the nurses at Shebin El-Kom teaching hospital have lower salaries and incentives than those at University of Menoufiya hospitals. However this result may be attributed to the fact that nurses at Shebin El-Kom teaching hospital had higher mean scores regarding years of experience, which increases their skills and abilities at work, gives them

self-confidence and the ability to participate in decision-making regarding their work performance. Also diploma school staff nurses at University of Menoufiya hospitals feel threatened that they will be replaced with bachelor degree staff nurses. They also have differences in relationships with other health care teams and patterns of communication and collaboration with physicians. In this respect Laschinger et al. mentioned that lack of empowerment is strongly associated with job strain and burnout in staff nurses [6,7]. Along the same lines, Almost and Laschinger reported that primary care nursing practitioners have significantly higher levels of workplace empowerment than acute care nursing practitioners [19]. It is worth mentioning that the results of our study indicate that there were no staff nurses who perceived a poor empowerment level in either hospital. This may be because nurses working in critical care units have a sense of challenge, self-confidence, ability to plan and prioritize their work effectively and awareness that they perform high-value work.

There was a statistically significant positive correlation between organizational climate and nurses' empowerment. This result is supported by Mok and Au-Yeung, who stated that there was a positive correlation

between organizational climate and psychological empowerment [1]. This result is also congruent with that of Laschinger et al. who found that nurses perceived that lack of access to empowerment structures was strongly related to the work environment of nurses [6,7]. For instance, job satisfaction, involvement in unit decisions, supportive management and trust in management have been positively linked to staff nurse empowerment.

In the light of our findings and to improve organizational climate and nurses' empowerment, the following recommendations can be made.

- Hospital management should provide job security and an environment that enables free expression of ideas and exchange of opinions among staff.
- Encouragement of teamwork is an important tool for good climate and empowerment of nurses.
- Staff development programmes are needed for nurse managers to integrate staff nurses in decision-making and to deal effectively with new ideas to promote organizational climate and empowerment of nurses.
- Strategic plans need to include decentralization of decision-making.

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