



Effects of a Staff Development Program on Head Nurses' Communication Skills and Job Satisfaction

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ABSTRACT

Background: Communication skills of operational managers such as head nurses greatly influence the performance of nursing personnel and by extension, the quality of the care provided by them.

Objectives: This study was conducted to identify the role of a development program on communication skills and job satisfaction in head nurses.

Materials and Methods: This research was a non-randomized two-group trial. A random allocation of two hospitals affiliated to Tehran University of Medical Sciences created an intervention and control group. In the intervention group, all head nurses were entered in a two-day communication skills development workshop using adult learning theory. The head nurses of the other hospital were allocated to the control group. Job satisfaction and communication skills of head nurses were investigated prior and 6 weeks following intervention in two groups. The data were analyzed by Chi-square, Fisher exact test, T-test, paired t test and analysis of covariance.

Results: Following intervention, the communication skills scores achieved by intervention group were 127.5 ± 7.10 at pretest and increased to 134.11 ± 7.32 after the intervention ($P < 0.01$). The mean score of the communication skills did not alter significantly in the control group. Moreover, no significant change was observed in the mean scores of job satisfaction of head nurses in the intervention group compared to those of the control group ($P = 0.102$).

Conclusions: The development programs of communication skills resulted in an increased level of communication skills in the head nurses. However, more effective steps have to be taken in professional and organization conditions to enhance head nurses' job satisfaction level.

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► Implication for health policy/practice/research/medical education:

The senior management of hospitals should develop some strategies to enhance their nurses' and head nurses' job satisfaction.

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1. Background

The most important resource in every organization is its employed human assets (1). Nowadays, each organization is seeking for some solution to improve the services offered to its customers. Prospective and developed organizations reconsider behavior and communication with their personnel as the first step in keeping them satisfied since studies indicate that job satisfaction of personnel leads to customer satisfaction (2). Moreover, various studies have revealed that the quality of the care provided to the customers is positively correlated with nurses' job satisfaction (3-5). Nurses' job satisfaction has been a persistent universal challenge in healthcare system (6, 7). In many cases, lack of job satisfaction is the main reason for nurses' turnover (8, 9), absence, and the low quality of care provided to patients (10). Job satisfaction is among main factors in increasing productivity, a sense of belonging to the organization and an attachment to the work environment, increased efficiency and effectiveness of the job, the development of suitable communications in the work environment, morale improvement, having interest in the job, and decreased job burnout (11-13) and is considered among the important factors in professional success. Communication is necessary in the context of an organizational perspective. In the organization, managers spend a large amount of their time communicating with their personnel, subordinates, and superiors. Researchers have found that effective communication with employees and understanding their communication motivations can play a key role for managers' success in achieving organizational objectives (14). Communication skills are so significant that without them, employees might feel lonely, and suffer from social anxiety, depression, low self-esteem (15). Many individual and social problems of the organizations can be traced to lack of or insufficient effective communications (14). Nursing is a job in which playing the role is performed through communications and head nurses with more effective communication skills can enhance the overall health level of the group (16). One of the effective factors of nurses' job satisfaction is the organizational atmosphere and interpersonal communication, particularly between managers and workers (17). It is believed that good communication skills are necessary to create an efficient relationship. Lack of such skills can negatively affect nurses and their team's performance (18). The importance of these skills for head nurses as managers is even more critical and not only assists them to guide their team in reaching organizational objectives and making intellectual decisions, but also enhances employees' motivation (19). Despite the emphasis on communication skills over the past two decades, structural factors have led to the undermining of communications within the nursing system (20). The majority of studies conducted in this field in Iran are descriptive and there are few intervention studies in this area.

2. Objectives

Given the importance of good communication skills among nurses, this study was performed in 2010 to assess the effects of a development program on head nurses' communication skills and job satisfaction.

3. Materials and Methods

This is a non-randomized two-group trial. In this study, two hospitals were randomly selected and allocated as intervention and control groups. The head nurse selected in this research had at least six-months experience with unit management. Considering a confidence level of 95% and power of 80% and considering a previous study (19), and assuming that the intervention may lead to as much of a 40% increase in the head nurse satisfaction, a minimum of 17 cases were estimated to be needed for each group and 40 head nurses (18 from one hospital and 22 from another) were entered into this study. We used a questionnaire for gathering data. The first part of the questionnaire included 23 questions about demographic characteristics. The second part contained 34 items on communication skills (21) with answers in a Likert scale ranging from always to almost never that were scored from 5 to 1, respectively. The third part of the questionnaire was the Herzberg job satisfaction questionnaire that included 51 questions with Likert scale varied from very much too very little that were scored from 5 to 1, respectively. The Herzberg job satisfaction questionnaire has eight dimensions including job status (11 questions), job security (five questions), salary and benefits (six questions), condition of work environment (six questions), managerial policy-making (eight questions), supervision (seven questions), communication with personnel (five questions), and personal life (three questions). The maximum score achieved in each aspect equals the number of question multiplied by five, while the minimum score was the number of questions multiplied by one. Content validity of the instrument was approved by faculty members in Tehran University of Medical Sciences. Although the reliability of Herzberg's job satisfaction questionnaire had been evaluated in several studies, in this work we calculated the Cronbach's alpha that was 0.94 for the Herzberg job satisfaction questionnaire and 0.88 for communication skills inventory. After permission of the ethic committee, all attendees were asked to sign an informed consent form. Then, a pre-test was simultaneously carried out for both groups. Next, using a questionnaire with a few open-ended questions, attendees in the intervention group were asked about their educational needs and their problems with communication skills. Considering educational needs of head nurses, the educational content was developed for a two-day workshop based on adults' learning theory and interactive methods. Subsequently the content was approved by the experts. The counseling hall of the intervention hospital was assigned

as the location to hold the workshop. Based on the principles of adult learning, strategies such as dividing participants into small groups, discussion and negotiation, mutual interaction, brainstorming, role-playing, and head nurses explaining their problems and experiences and offering a solution for them were applied. During the workshop sessions, efforts were made to create a friendly and relaxed atmosphere. The control group head nurses did not offer any intervention. Pre-tests and post-tests were administered as a self-reporting method, where one of researchers visited head nurses at the appropriate time in their work shift and distributed questionnaires to them and then collected them after they had been filled out. Two weeks following the workshop, feedback from the intervention group was collected and the group tried to solve their problems by offering some solutions. Six weeks after the workshop, head nurses in both groups completed the post-test job satisfaction and communication skills questionnaire. Data was analyzed using SPSS software version 16 through which descriptive and inferential statistics including chi-square and Fisher exact test (for nominal variables), T-test and paired t test (to com-

pare mean score of job satisfaction and communication skills before and after the workshops in both group), and analysis of covariance (to remove impact of confounding factors) were performed.

4. Results

All samples in both groups were female, with a Bachelor of Science in nursing, had formal employment, and worked the morning shift. The average age of intervention and control groups were 43.33 ± 4.23 and 44.8 ± 4.88 , respectively, and had no significant difference ($P = 0.36$). Also 66.7% and 81.8% were married in the intervention and control groups respectively. However, no significant differences were observed between the two groups in terms of demographic characteristics such as marital status, education, job, living with husbands, number of children, work experience, length of service as a head nurse, wards, number of personnel under their control, the number of active beds in their wards, membership in nursing associations, and sport, cultural, and art clubs, the amount of overtime, salary, and distance from home to work ($P > 0.1$). Findings about nurses' communication

Table 1. Mean Scores of Job Satisfaction of Head Nurses in Intervention and Control Group Before and After the Intervention

Variable	Time	Group		P value (t test)
		Intervention, Mean \pm SD	Control, Mean \pm SD	
Job satisfaction	Pre test	134.7 \pm 29.8	124.1 \pm 23.6	0.213
	Post test	140.8 \pm 22.6	128.5 \pm 23.5	0.102
	P value (pair t test)	0.181	0.266	

Table 2. Comparison of Job Satisfaction Aspects of Head Nurses in Intervention and Control Group after Intervention Considering Their Scores at the Beginning of the Study

Group Job Satisfaction Aspects	Time	Intervention, Mean \pm SD	Control, Mean \pm SD	Results of Covariance
Job Status	pretest	34.56 \pm 7.24	32.86 \pm 5.64	0.338
	posttest	35.06 \pm 5.0	34.0 \pm 6.31	
Job Security	pretest	11.0 \pm 3.27	10.14 \pm 3.18	0.623
	posttest	11.78 \pm 3.44	10.91 \pm 2.83	
Salary and Benefits	pretest	9.72 \pm 3.53	8.64 \pm 3.5	0.119
	posttest	11.39 \pm 3.73	9.41 \pm 2.86	
Condition of Work Environment	pretest	13.89 \pm 4.75	14.36 \pm 3.55	0.154
	posttest	14.34 \pm 3.12	13.14 \pm 3.83	
Managerial Policy-Making	pretest	20.72 \pm 6.87	17.05 \pm 4.8	0.596
	posttest	21.61 \pm 4.7	18.86 \pm 5.5	
Supervision	pretest	19.5 \pm 5.49	17.45 \pm 4.99	0.163
	posttest	19.83 \pm 3.7	17.32 \pm 4.49	
Communication With Personnel	pretest	17.11 \pm 2.76	16.64 \pm 3.9	0.57
	posttest	18.11 \pm 2.87	17.41 \pm 3.19	
Personal Life	pretest	8.28 \pm 2.52	6.95 \pm 1.99	0.15
	posttest	8.72 \pm 1.27	7.45 \pm 1.99	

skills indicated that there was a significant difference in the intervention group considering the scores at the beginning of the study ($P < 0.05$) (Table 1). In total, 44.4% and 36.4% of the intervention group expressed low job satisfaction at the beginning of the study. Additionally, job satisfaction score for 63.6% head nurses in the control group and half of the intervention group was average and only one participant from the intervention group was completely satisfied. However, no significant differences were observed between overall job satisfaction mean scores of both groups before and after the intervention (Table 1). To eliminate confounding factors in both main variables of the study (communication, and job satisfaction) their effect was assessed through covariance analysis. Considering job satisfaction dimension scores in the beginning of the study, the findings indicated that none of dimensions of job satisfaction in head nurses in the intervention and control groups were significantly different after the intervention (Table 2).

5. Discussion

Our findings indicated that the majority of head nurses that participated in this study had low to average job satisfaction. These findings are consistent with results of some of the former studies conducted in Iran (22, 23, 24). Monjamed et al. reported that 98.8% of the nurses had low to medium job satisfaction and only 1.2% was completely satisfied (22). Mirzabeygi et al. also reported that only one third of nurses are satisfied with their job (23). Moreover, another study conducted on 140 nurses occupied in public hospitals of Birjand indicated that about half of nurses are dissatisfied with their job (24) while Prince have reported that half of nurses were satisfied with their job (24). Other studies conducted in China, Scotland, England, and Canada showed that nurses have higher job satisfaction compared to those who participated in this research (6, 25). These differences can be attributed to the differences in the status of a nursing career in Iran versus other parts of the world; however, the tools used for measuring job satisfaction might also affect the results. Nevertheless, in this study job satisfaction of the head nurses was a little higher than that of other works conducted on Iranian nurses, where the difference between working environments and research samples as well as higher authority of the head nurses might cause this difference. In this study, head nurses from intervention and control groups had the lowest job satisfaction in terms of salaries and benefits. This finding is consistent with those of other studies (22, 23, 26). Another study also indicated that financial payments and increase of salary is one of most important job satisfaction factors (27). In addition, head nurses of the control and intervention groups in this research had highest levels of satisfaction in terms of communication with personnel which might be another reason for the lower effect of the intervention in this aspect. The findings of this work showed that communica-

tion skills of head nurses in the intervention group compared to the control group have significantly improved after intervention. This was in agreement with findings of Rezaeir et al., Carson et al., and Wilkinson et al. (21, 28, 29). The results of these studies indicated that communication skills education result in promotion of these skills in nurses. The findings also indicated that none of the job satisfaction dimensions of the head nurses in the intervention group was changed compared to the control group. Since the researcher had no intervention in none of job satisfaction aspects, except 'communication skills', this finding was to be expected. However, considering the increased score of communication skills in the intervention group, it is expected that the aspect of job satisfaction score in 'communication with group' has an increase though no change was reported for this aspect. This might be due to this fact that only offering education to the nurses is not enough; changes in overall atmosphere of the organization need to be made as well. Some researchers believe that delivering communication skills education cannot be transferred to the practice without adequate supervision and support (30). Finally, the findings of this work demonstrate that no aspect of job satisfaction shows any significant difference before and after intervention. The experts believe that job satisfaction is a very complicated phenomenon and is affected by various factors (6); hence, only communication skills, without any change in other factors, cannot have a considerable effect on job satisfaction. In this study, the effect of development programs on communication skills and job satisfaction of the head nurses was studied, where it was found that although their job satisfaction was not significantly different, studies which consider multiple variables especially organizational and professional factors in job satisfaction are highly recommended in order to shed the light on the subject.

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Authors' Contribution

All authors had equal roles in the conception of the study, literature review and preparing the manuscript.

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