

## Nursing Staff Perspectives Regarding Career Plateau Management Strategies and its Relation to Job Satisfaction

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### Abstract

**Background:** Career plateau is a significant decisive factor that led to negative work outcomes as decrease in job satisfaction and increase nursing staff turnover intentions when continuing to work in the same job over a long period. **Aim:** to assess nursing staff perspective regarding career plateau management strategies and their relation to job satisfaction. **Subjects and Method: Setting:** This study was conducted at Tanta University Main, Emergency, and International Teaching Hospitals. **Subjects:** consisted of a representative sample (n= 263) of Baccalaureate nursing staff who have more than three years of experience. **Tools:** two tools were used. Nurses' career plateau management structured questionnaire and nursing staff satisfaction structured questionnaire. **Results:** 63% of nursing staff had moderate and high levels of career plateau. 65.0% of nursing staff had moderate double plateau. 46.4% and 43.0% of them had moderate content and structural plateau respectively and 41.1% of them had low professional plateau. 55.5% of nursing staff had high defense, 53.2% of them had moderate reevaluation management strategy and 53.2% of them had low transition management strategy. 81.7% of nursing staff were unsatisfied with their job. **Conclusions:** There were no statistically significant difference among Main, Emergency, and international Teaching Hospitals according to levels of career plateau. There was a statistically significant negative correlation between total nursing staff career plateau and their total job satisfaction. **Recommendations:** Be on the lookout for early signs of plateauing and take preventive measures such as upgrading skills, diversifying interests, and making long-term career plans. Develop a clear job description and road map for career advancement of nursing staff to reduce career plateauing.

**Keywords:** Career plateau, Job satisfaction. Management strategies, Nursing staff.

### Introduction

Nursing staff is considered the backbone of any healthcare organization that gives spirit and helps to accomplish its goals. Nurses are responsible for a wide range of duties and functions depending on their qualifications and hospital requirements.

<sup>(1)</sup> With the evolution of volatile organizational structures, unstable economic condition, and downsizing policy; more nursing staff become

working in the same position for extended period of time that make them liable for career plateau. <sup>(2)</sup>

Nursing career plateau (CP) can be defined as the feeling of frustration and psychological impairment that nursing staff tends to experience a temporary or permanent end in the advancement of their careers. Where the possibility of vertical upgrade within the formal hierarchy becomes very low or completely

absent.<sup>(3,4)</sup> Moreover, it is a point in a career in which vertical and horizontal movement is restricted. Nursing staff feel they are being blocked from prolonged period they are experiencing in the same position which causes irritation and psychological anxiety.<sup>(5)</sup>

Bardwick<sup>(5)</sup> has classified career plateauing into two types, structural (hierarchical) plateau and content (job content) plateau which can occur at one time causing double plateau, while Lee<sup>(6)</sup> suggested another type called a professional plateau. Structural or hierarchical plateau it is the point where nursing staff perceive a little opportunity for more vertical movement due to the flattened pyramid shape within the hospital.<sup>(7)</sup> This occurs when hospital administration feels their nursing staff have insufficient managerial skills and don't have a suitable commitment for hospital development that will block nurses' movement to next position and delay their career advancement.<sup>(7,8)</sup>

Job content plateau it is related to the absence of new, challenging, and varied tasks without possibilities of improvement.<sup>(5)</sup> Nursing staff become unable to expand their expertise in the job or job responsibilities as they become saturated with all available job-related information. Lack of job challenges means performing a routine and certain task for many years and knowing exactly what is expected from them every day and there's nothing new to learn.<sup>(9,10)</sup>

Professional plateau results from the consequence of content plateau, reflecting the point where nursing staff find their jobs unchallenged and receive few opportunities for future professional

upward within hospital.<sup>(11)</sup> Professional plateau isn't concerned only with the content of the job, but also the extent of the job opportunities to allow the nursing staff to handle and master new skills to be professionally qualified and decrease their level of professional recession.<sup>(12)</sup>

Double plateau occurs when structural and job content plateau are closely connected generating more negative attitudes and job stress than either structural or job content plateau alone.<sup>(11)</sup> When the structural plateauing was noticed to be high due to the low level of hierarchical promotion opportunities, it is normal for nursing staff to decrease their effort and consciously avoid holding more responsibilities. This decrease challenges and competition in the work field leading to the job content plateau.<sup>(13)</sup>

Nursing staff can use three types of strategies to manage career plateau including defense, reevaluation, and transition strategies.<sup>(14)</sup> Defense is the first strategy where nursing staff attempt to use their internal responses and rationalization to eliminate the level of stress by concentrating on blaming their supervisor and management for their plateauing.<sup>(15)</sup> Reporting intentions to leave which associated with negative behavioral responses such as lowering quality or quantity of work. Learning new things like attending educational courses or getting scientific degrees will help nursing staff to reframe their situation and keep them up and grow in their career.<sup>(14)</sup>

The second strategy is reevaluation, it focuses on ignoring the presence of a plateau and give more interest to personal life to adapt to the current situation or reduce the frustration.<sup>(16)</sup> Nursing staff

need to rethink, priorities and adopt flexible policies to be able to balance between their personal life and moving forward on their job. Engaging in professional development activities, performing smart and valuable work could encourage the nursing staff to maximize their efficiency in achieving a desirable goal, enhance career advancement and overcome the feeling of stress and burnout.<sup>(17)</sup>

Transition it is the third strategy which acts as a facing behavioral aiming to change job roles to eliminate or overcome the plateauing. Including move to new role or leaving the hospital to hold new profession or job.<sup>(18)</sup> Job routine, long time of waiting for promotion opportunity, and lack of motivation are producing dissatisfaction. Where the behavior, activities, and products of nursing staff become not in the line with the goals of the hospital's progression. The plateaued nursing staff attempt to assess the cost of quitting and likelihood of finding better alternatives hoping to achieve their goal in a particular situation.<sup>(15)</sup> When the hospital administration fails to find an alternative solution to manage its plateauing, nursing staff become more frustrated and depressed attempting to decrease their levels of production, creativity, and experiencing high levels of job dissatisfaction.<sup>(19)</sup>

Job satisfaction is the pleasurable emotional state resulting from the extent of nursing staff achievement of their job goals. The extent to which nursing staff like (satisfied) or dislike(dissatisfied)their jobs.<sup>(20,9)</sup> It is influenced by personal factors like age, sex, marital status, and educational level. Nurses' satisfaction can

be influenced by three types of factors nature of work, amount of responsibility, and management factors.<sup>(12)</sup>

Job satisfaction is considered a strong predictor of overall nursing staff well-being. It is regarded to be a function of the balance between work role inputs like education, time and effort and the work role outputs as pay and benefits, working conditions, task significance and intrinsic aspects of the jobs. Job satisfaction can be achieved when the hospital administration reported a decline in complaints and grievances, absenteeism, turnover, and termination.<sup>(21,22)</sup> This can be achieved by equal distribution of the work, praising good performance, providing opportunities for career advancement, and maintaining good communication help to motivate nursing staff and increase their satisfaction and loyalty.<sup>(16)</sup>

### **Significance of the study**

Nursing staff often begin their careers with hope and expectation for reaching the highest level in their position. Most of them care about the progress, achieving power and highest responsibility as well as rewards.<sup>(23,3)</sup> As a result of the global market conditions, limited availability of higher positions on the path of job progress, and the chance of nursing staff to get the possibility of climbing the ladder of success are reduced. Plateauing and frustration considered as a contributing factor of developing negative effects on nursing staff commitment, absenteeism, motivation, and job satisfaction.<sup>(24)</sup>

### **Aim of the study**

Assess nursing staff perspective regarding career plateau management strategies and its relation to job satisfaction.

**Research Questions:**

- 1-What are the levels of nursing staff career plateau?
- 2-What are the nursing staff plateau management strategies?
- 3-What are the levels of nursing staff job satisfaction?

**Subjects and Method****Research design:**

A descriptive correlational study design was used in the study. This design was used to identify and describe the behavior of subjects where correlational research determines whether a relationship or association exists naturally between two or more variables. <sup>(21)</sup>

**Setting:**

The study was conducted at Tanta University Hospitals including Main University Hospital 697 beds capacity, Emergency Hospital 300 beds capacity, and International Teaching Hospitals 350 beds capacity.

**Subjects:**

The study subject consisted of representative sample 263 of nursing staff who had bachelor's degree in nursing and experience more than three years and available at the time of data collection. From Main Hospital 139, International Teaching Hospital 110, and from Emergency Hospital 14.

**Tools of data collection:**

To full fill, the purpose of the study two tools was used to collect the data.

**Tool (I): Nurses' Career Plateau Management Structured Questionnaire.**

It was developed by the researcher guided by Shabeer, et al (2019) <sup>(3)</sup> and Baoguo & Wenxia (2015) <sup>(47)</sup>. It was designed to assess career plateau from the nursing staff perspective. It consisted of three parts:

**Part (1):** Nursing staff characteristic data included hospitals name, age, sex, marital status, level of education, years of experience, job title, years in current position, duration since last promotion, change job, and responsibility in past three years, expectation to stay in the same position, and working unit.

**Part (2): Career Plateau Assessment.** It was used to assess types of career plateau and consisted of (25 items) it included 4 subscales, structural plateauing (7 items), content plateauing (13), double plateauing (20 items), and professional plateauing (5 items).

**Scoring System:** Nursing staff responses were measured on a three-points Likert Scale ranging from 1= disagree, 2= little agree, 3= agree. Items 4, 5, 12, 20, 21, 22, 23, 24, 25 were reversible items. The total responses were classified to levels as the following according to cut off points, high level of plateauing > 75% equal 75-56.25, moderate level of plateauing 60%- 75% that equal 56.25- 45, and low level of plateauing < 60% equal 45- 25.

**Part (3): Carrer Plateau Management Strategies Structure Questionnaire.**

It was developed by the researcher guided by Nwabueze (2016) <sup>(14)</sup> and Shakila & Basariya (2019) <sup>(10)</sup>. It used to assess career plateau management strategies and consisted of (21 items) included 3 subscales, defense strategy (7 items), reevaluation strategy (7 items), and transition strategy (7 items).

**Scoring System:** nursing staff responses were measured on three points Likert Scale ranging from 1= disagree, 2= little agree, 3= agree but items 35,37,40, 45 were reversible items. The scores were presented in levels as follow according to

cut off points: High-level management strategies  $>75\%$  equal 63- 47.24, moderate level management strategies 60 -75% equal 47.25- 37.8, and low-level management strategies  $<60\%$  equal 37.8- 21.

### Structure Questionnaire.

It was developed by the researcher guided by Pasha *et al.*, (2017) <sup>(54)</sup> and Al-dalahmeh *et al.*, (2018) <sup>(55)</sup>. It was used to assess nursing staff satisfaction regarding their current hospital and role. This tool consisted of 30 items of 9 subscales as follow: pay (3items), promotion (3items), supervision (5items), benefits (3items), rewards (4items), conditions of work (3items), co-workers (3items), nature of work (3items), and communication (3items).

**Scoring System:** nursing staff responses about the satisfaction of their hospital and role were measured on a three points Likert Scale ranging from 1=disagree, 2=little agree, 3=agree. The total scores were presented into levels as follow according to cut off points, satisfied  $\geq 75\%$  equal 90- 67.5, and unsatisfied less than 75% equal 67.5- 30.

### Method

#### Ethical and legal consideration:

- Official permission to carry out the study was obtained from the Dean of Faculty of Nursing and sent to Tanta University Hospitals managers.
- Approval of ethical committee at faculty of nursing was obtained from the faculty of nursing.
  - Staff nurses' consents to participate in the study were obtained after an explanation of the nature and purpose of the study.

- Participation in the study was voluntary; they had the right to withdraw at any stage.

- The participants' rights were protected by informed oral consent obtained by explaining the purpose and nature of the study, potential benefits of the study, how data was collected, expected outcome, and respondents' rights to withdraw from the study at any time.

- The respondents were assured that the data was treated as strictly confidential. Furthermore, the respondents 'autonomy was maintained as they were not allowed to mention their names. Tools of data collection were translated into the Arabic and were tested by a jury of five experts in nursing administration specialty to check the content validity of the study.

- The experts' responses were reported in a four-points Likert scale ranging from (4- 1) 4= strongly relevant to 1= not relevant and necessary modifications were done including clarification, omission of certain items, adding others, and simplifying work-related words.

- A pilot study was carried out on 27 nursing staff (10%) of the sample, and they were excluded from the sample to test the tools for their clarity and applicability, feasibility, and necessary modifications were done based on the results.

- Cronbach's Alpha was used to test the reliability of tool (I) 0.742. and for tool (II) was 0.878. Face validity of tool (I) was 92.78%, and for tool (II) was 100%.

- Data collection phase: The researcher met the nursing staff in small groups during their work shifts morning and afternoon in the waiting area of their department to explain the aim of the study and distribute the questionnaire sheets for

them. Nursing staff recorded their responses in the presence of the researcher to ascertain their questions were answered. The estimated time needed to complete the questionnaire items was approximately 30 minutes and the data were collected over six months from January 2021 to Jun 2021.

#### **Statistical analysis of the data:**

Data were fed to the computer and analyzed using IBM SPSS software package version 20.0. (Armonk, NY: IBM Corp) Qualitative data were described using numbers and percentages. The Kolmogorov-Smirnov test was used to verify the normality of distribution. Quantitative data were described using range (minimum and maximum), mean, standard deviation, median. The significance of the obtained results was judged at the 5% level. The used tests were Chi-square test, Fisher's Exact or Monte Carlo correction, Pearson coefficient, and Kruskal Wallis test.

#### **Results**

**Table (1)** shows nursing staff characteristics data. Table illustrates more than half 56.35 and 52.9% of nursing staff were fall in the age group 30-< 35 with mean age  $30.30 \pm 2.68$  and working in the main hospital. Majority (87.5%) of nursing staff were female and majority (85.2% of them were married. Around two thirds (66.2%) of them had from 5-<10 years of experience in their current position with mean years  $0.56 \pm 1.09$  duration since last promotion. More than three quarters (76.4%) of them had bachelor's degrees in nursing and the majority (79.8%) didn't change their job responsibilities in the past three years.

**Figure (1)** shows total levels of nursing staff's career plateau. Around two thirds (48%&15%) of nursing staff had moderate and high levels of career plateau. More than one third (37%) of them had low level of career plateau.

**Table (2)** show nursing staff distribution according to career plateau types. Around two thirds (65.0%) of nursing staff had moderate double plateau. More than two fifths (46.4% and 43.0%) of them had moderate content and structural plateau respectively. While more than two fifths (41.1%) of them had low professional plateau.

**Table (3)** shows nursing staff levels regarding management strategies of career plateau. More than half (55.5% and 53.2%) of them had high defense and moderate reevaluation management strategy respectively. While more than half (53.2%) of them had low transition management strategy.

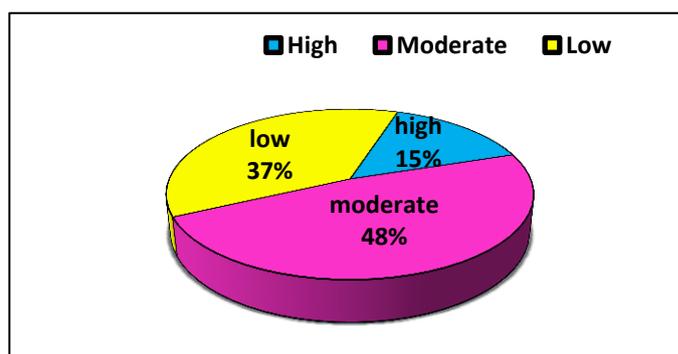
**Figure (2)** showed nursing staff distribution regarding levels of job satisfaction. The majority (82%) of nursing staff were unsatisfied about their job and only (18%) were satisfied about their job.

**Table (4)** indicates there was a statistical significant negative correlation between total nursing staff perception of career plateau and their total job satisfaction at p. value  $\leq 0.05$ .

**Table (5)** shows there was statistically significant positive correlation between total nursing staff job satisfaction and total strategies of career plateau management at p. value  $\leq 0.05$ .

**Table (1): Nursing staff characteristic data (n=263)**

<b>Nursing staff characteristic data</b>	<b>No.</b>	<b>%</b>
<b>Hospitals at Tanta university</b>		
Main Hospital	<b>139</b>	52.9
International Teaching	<b>110</b>	41.9
Emergency	<b>14</b>	5.2
<b>Age in years</b>		
25 - <30	91	34.6
30 - <35	148	56.3
35 – 40	24	9.1
Mean ± SD.	30.30 ± 2.68	
<b>Sex</b>		
Male	33	12.5
Female	230	87.5
<b>Marital Status</b>		
Married	224	85.2
Unmarried	39	14.8
<b>Level of education</b>		
Bachelor's degree	201	76.4
Post graduate Studies	62	23.6
<b>Years of experience in hospital</b>		
<5	23	8.7
5 - <10	172	65.4
10 - <15	66	25.1
15+	2	0.8
Mean ± SD.	7.88 ± 2.57	
<b>Job title</b>		
Staff nurses	210	79.8
Head nurse	53	20.2
<b>Years in current position</b>		
<5	89	33.8
5 - <10	174	66.2
Mean ± SD.	5.53 ± 2.52	
<b>Duration since last promotion (Years)</b>		
Mean ± SD.	0.56 ± 1.09	
<b>Change job and responsibility position in past 3 years</b>		
Yes	53	20.2
No	210	79.8



**Figure (1): Nursing Staff distribution regarding Levels of job Satisfaction (n=263)**

**Table (2): Nursing staff distribution according to career plateau types (n=263)**

Nursing Staff Career Plateau types	Nursing staff					
	Low		Moderate		High	
	No.	%	No.	%	No.	%
Plateau Double	68	25.9	171	65.0	24	9.1
Structural Plateau	81	30.8	113	43.0	69	26.2
Content Plateau	93	35.4	122	46.4	48	18.3
Professional Plateau	108	41.1	82	31.2	73	27.8

**Table (3): Nursing staff levels regarding management strategies of career plateau (n=263)**

Nursing Staff Career Plateau Management Strategies	Nursing staff					
	Low		Moderate		High	
	No.	%	No.	%	No.	%
Defense Strategy	32	12.2	85	32.3	146	55.5
Reevaluation Strategy	54	20.5	140	53.2	69	26.2
Transition Strategy	140	53.2	51	19.4	72	27.4
<b>Total</b>	56	21.3	101	38.4	106	40.3

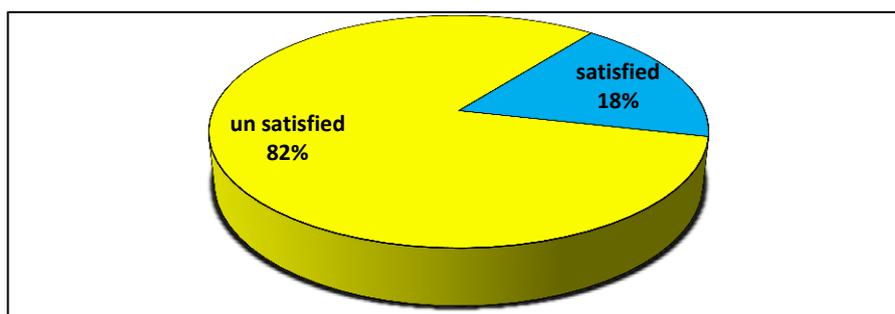


Figure (2) Nursing staff distribution according to career plateau types.

Table (4): Correlation between nursing staff perception regarding career plateau types and their job satisfaction domains (n=263)

Nursing staff job satisfaction domains		Career plateau				
		Structural plateau	Content plateau	Double plateau	Professional plateau	Total plateau
Pay	R	-0.329	-0.232	-0.339	-0.089	-0.302
	P	<0.001*	<0.001*	<0.001*	0.148	<0.001*
Promotion	R	-0.210	-0.236	-0.293	-0.027	-0.236
	P	0.001*	<0.001*	<0.001*	0.663	<0.001*
Supervisors	R	-0.257	-0.263	-0.336	-0.111	-0.310
	P	<0.001*	<0.001*	<0.001*	0.073	<0.001*
Benefits	R	-0.116	-0.077	-0.116	-0.063	-0.119
	P	0.060	0.212	0.061	0.311	0.054
Rewards	R	-0.203	-0.286	-0.333	-0.038	-0.272
	P	0.001*	<0.001*	<0.001*	0.542	<0.001*
Conditions	R	-0.221	-0.210	-0.275	0.018	-0.199
	P	<0.001*	0.001*	<0.001*	0.769	0.001*
Co-workers	R	-0.061	0.068	0.034	0.088	0.070
	P	0.328	0.272	0.586	0.153	0.257
Nature of work	R	-0.116	-0.018	-0.064	0.012	-0.042
	P	0.059	0.774	0.301	0.846	0.493
Communication	R	-0.008	-0.224	-0.198	0.006	-0.147
	P	0.895	<0.001*	0.001*	0.925	0.017*
Total nursing staff job satisfaction	R	-0.269	-0.289	-0.363	-0.050	-0.300
	P	<0.001*	<0.001*	<0.001*	0.417	<0.001*

r: Pearson coefficient

\*: statistically significant at  $p \leq 0.05$

**Table (5): Correlation between nursing staff career plateau management strategies and job satisfaction (n=263**

Nursing staff Job Satisfaction domains		Career plateau management strategy			
		Defense strategy	Reevaluation strategy	Transition strategy	Total management
Pay	R	-0.024	0.066	-0.179	0.032
	P	0.704	0.286	0.004*	0.601
Promotion	R	0.382	0.596	-0.201	0.465
	P	<0.001*	<0.001*	0.001*	<0.001*
Supervisors	R	0.221	0.281	-0.115	0.282
	P	<0.001*	<0.001*	0.062	<0.001*
Benefits	R	0.060	0.179	-0.114	0.124
	P	0.333	0.004*	0.064	0.045*
Rewards	R	0.168	0.358	-0.142	0.296
	P	0.006*	<0.001*	0.021*	<0.001*
Conditions	R	0.282	0.456	-0.139	0.394
	P	<0.001*	<0.001*	0.024*	<0.001*
Co-workers	R	0.197	0.351	-0.018	0.337
	P	0.001*	<0.001*	0.769	<0.001*
Nature of work	R	0.195	0.189	-0.008	0.226
	P	0.001*	0.002*	.895	<0.001*
Communication	R	0.442	0.229	-0.071	0.403
	P	<0.001*	<0.001*	0.248	<0.001*
Total Nursing staff Job Satisfaction	R	0.331	0.459	-0.174	0.457
	P	<0.001*	<0.001*	0.005*	<0.001*

r: Pearson coefficient

\*: statistically significant at  $p \leq 0.05$

## Discussion

Nursing staff is considered the backbone of healthcare system as they perform different roles including caring, planning, managing, and organizing within the hospitals or other healthcare institutions.<sup>(25)</sup> Today, qualified nursing staff with high work experience are facing a temporary suspension of their career development and they are likely to remain longer in the same position that narrowing down their career development path and delaying the possibility of future promotional opportunities. This may cause them to become frustrated and lose the hope of career mobility which will led to career plateau that affects their job satisfaction.<sup>(26)</sup>

### **Correlation between nursing staff perception regarding career plateau types and their job satisfaction domains.**

The results of present study indicated that there was a statistically significant negative correlation between total nursing staff perception of career plateau and their total job satisfaction. Also, there were a statistical significant negative correlation between all domains of nursing staff job satisfaction and total career plateau except for benefits, coworkers, and nature of work. While there were statistically significant negative correlation between all types of career plateau and total nursing staff job satisfaction except for professional plateau. This may be due to more than three quarters of staff nurses only had bachelor's degree and didn't have opportunity to grow and continue their post graduate education. In addition, majority of them had between five to more

than fifteen years of experience in this hospital without any changes in their positions or responsibilities and only one fifth of them become head nurses.

This results in the same line with **Hossain (2018)<sup>(5)</sup>**, and **Su et al. (2017)<sup>(27)</sup>** they found that job satisfaction was negatively correlated with career plateau perception due to high percent of head nurses weren't satisfied with their career advancement to meet their work goals Moreover, **Ramlal (2017)<sup>(28)</sup>**, **Hurst (2017)<sup>(9)</sup>**, **Badiane, (2016)<sup>(29)</sup>**, **Lukosi (2015)<sup>(30)</sup>**, **Godshalk and Fender (2015)<sup>(31)</sup>**, and **Hee and Ok (2019)<sup>(32)</sup>** they revealed that career plateau has a direct negative impact on nursing staff job satisfaction, motivation, and performance due to low levels of recognition, co-workers relation, job security, and their job rotation. In addition, **Hassan et al. (2020)<sup>(19)</sup>** found no significant relation between professional plateau and staff satisfaction, while their results showed that staff with high levels of career plateau have low total career satisfaction.

### **Correlation between nursing staff career plateau management strategies and job satisfaction.**

Present study results showed there were positive statistical significant correlation between total nursing staff job satisfaction and total strategies of career plateau management at p. value  $\leq 0.05$ . There was positive statistical significant correlation between defense, reevaluation strategies and total nursing staff job satisfaction. While there was negative statistical correlation between transition strategy and total nursing staff job satisfaction. This

may be due more than two fifth of nursing staff had high level of career plateau management strategies as it can be difficult for them to leave their jobs even if they didn't view it is challenging or had no opportunity to grow on it, so they seek to change their department, working with another supervisors and training new nursing staff engaged in the unit.

These results go in the same line with **Hosseini and Ashrafi (2020)** <sup>(17)</sup>, **Ramlal and Siva (2017)** <sup>(28)</sup>, **Mariano and Carreira (2016)** <sup>(33)</sup>, and **Obianuju et al. (2021)** <sup>(34)</sup> they stated that there was a strong significant positive correlation between career plateau management strategies and job satisfaction as when the nursing staff adapted to policies of hospital management the negative effects of plateauing will be reduced. In addition, **Kadiret et al. (2017)** <sup>(16)</sup> mentioned that nursing staff who had low salary, benefits and didn't have opportunities for higher responsibilities were more likely to change their roles or leaving the job.

#### **Levels of nursing staff perception regarding total career plateau.**

The present study results indicated around two thirds of nursing staff had moderate and high levels of career plateau. This is due to majority of nursing staff spent from five to ten years on their current position without promotion. They find no more challenges in their job that decrease their enthusiasm in completing their work and update their profession These results were supported by **De Clercq et al. (2020)** <sup>(35)</sup>, **Hassan (2020)** <sup>(19)</sup>, **Ramlal and Siva (2017)** <sup>(28)</sup>, and **Xie et al. (2016)** <sup>(36)</sup> they declared that nursing staff had high level

of occurrence of plateauing due to their restricted role and decrease in their engagement at work.. Moreover, **Calinaudet et al. (2021)** <sup>(37)</sup>, **Abd-Elrhamanet et al. (2020)** <sup>(26)</sup>, **Hossain (2018)** <sup>(5)</sup>, **Carlson and Rotondo in Herbst-Bergin (2014)** <sup>(12)</sup> found that nursing staff become highly plateaued when they weren't promoted in period from three to five years as well as their contributions weren't recognized.

#### **Levels of nursing staff career plateau according to its types.**

**Concerning to structural plateau;** our results show that more than two fifths of nursing staff had moderate structural plateau. This may be due to majority of nursing staff suffer from block of chances for higher administrative position and their current job responsibilities become routine and didn't increase despite more than half of them assist in tasks not in their job description. These results were confirmed by **Sun et al. (2021)** <sup>(38)</sup>, **Hassan et al. (2020)** <sup>(19)</sup>, **Latifian (2019)** <sup>(8)</sup>, **Yang (2019)** <sup>(11)</sup>, and **Xie et al. (2016)** <sup>(36)</sup> They reported that nursing staff tend to take extra work that would raise their promotion chances due to little hierarchal movement and restructuring.

**Concerning to content plateau;** our study results showed more than two fifths of nursing staff had moderate content plateau. This can be due to majority of nursing staff carry out the same job roles and responsibilities with low diversity that decrease their enthusiasm to complete their job because of lack of challenges in their job. The agreement of these results made by **Conroy et al. (2022)** <sup>(39)</sup>,

**Ramgoolam (2020)** <sup>(20)</sup>, **Lin et al. (2018)** <sup>(5)</sup>, and **Vahedi et al. (2014)** <sup>(40)</sup> who found that there was lack of nursing staff job challenges that made them bored and frustrated from routine work in their present position, hoping the recruitment of new nursing staff that could decrease their work overload.

These results were contraindicated with **Ahmadi et al. (2019)** <sup>(41)</sup> reported that content plateau push the nursing staff to re-evaluate their efforts and their received benefits before resigning from their current position. Moreover, **Herbst-Bergin (2014)** <sup>(12)</sup> revealed that nursing staff were predicting their job responsibilities may increase in the future which would allow them learn and grow.

**Concerning to double plateau;** our results revealed that around two thirds of nursing staff had moderate double plateau due to more than two fifths of nursing staff had moderate content and structure plateau. These study results were in the same line with **Zhang et al. (2019)** <sup>(42)</sup>, **Le Flanchec et al. (2015)** <sup>(43)</sup>, **Xie et al. (2015)** <sup>(13)</sup> and **Herbst-Bergin (2014)** <sup>(12)</sup>, they stated that the combination of both structural and job content plateau together generate more negative feelings, frustration, stress, job dissatisfaction and burn out as the current job become no more exciting.

**Concerning to professional plateau;** our results showed that more than two fifths of nursing staff had low professional plateau, this was due to more than half of nursing staff didn't agree on the opportunities that provided to them to update their profession in current job and around half

of them reported their current job didn't provide them with opportunities to participate in decision making. More than two fifths of them little agreed about the provided opportunities for learning new things and utilizing technology causing them to loss their enthusiasm to enhance their profession.

These results were supported by **Lin et al. (2020)** <sup>(44)</sup>, **Jiang (2016)** <sup>(45)</sup>, and **Lee and Herbst-Bergin (2014)** <sup>(12)</sup> they revealed that high rate of nursing staff were experience professional plateau due to low opportunities of promotional and professional growth. In contrary **Su et al. (2017)** <sup>(27)</sup>, and **Brown-Wilson and Parry (2013)** <sup>(46)</sup> they reported that although nursing staff were plateaued, their jobs provide them with valuable learning opportunities to be confident with their skills and competence.

#### **Levels of nursing staff management strategies of career plateau.**

The present study results revealed that more than half of nursing staff had high defense and moderate reevaluation management strategies, this is maybe due to the hospital administration keen to motivate their staff and provide them with opportunities to engage in committees such as infection control, continuing education, and quality improvement. These results go in the same line with **Hossain, (2018)** <sup>(5)</sup> and **Herbst-Bergin (2014)** <sup>(12)</sup> indicated that more than half of nursing staff had high score to be able to cope better with a career plateau depending on the type of plateau they are experiencing.

**Concerning defense management strategy;** the present study results revealed that more than half of nursing staff had high defense management strategy of career plateau. This may be due to around quarter of nursing staff had postgraduate studies and high percent of them agreed that they seek to increase their knowledge, invest in relationship, and build a network, and adhere to workplace policy of performance. These results were supported by **Kao et al. (2022)** <sup>(10)</sup>, **Shabeer et al. (2019)** <sup>(3)</sup>, and **Mariano et al. (2016)** <sup>(33)</sup> they revealed that setting scientific conferences and educational programs allow nursing staff to refresh and increase their knowledge that would put them in the priority of advancement opportunity and reduce feeling of stress.

**Concerning reevaluation strategy;** the present results revealed that more than half of nursing staff had moderate reevaluation management strategy of career plateau. This can be due to more than two thirds of nursing staff agreed they revise their goals within three to five years ago and helping their supervisor to perform their duties. In addition, more than two fifths of them agreed they build relationship with other coworkers realizing that their personal life doesn't allow for more responsibilities. These results were agreed by **Zhu et al. (2021)** <sup>(47)</sup>, **Hoseini and Ashrafi (2020)** <sup>(17)</sup>, **Kelly et al. (2020)** <sup>(48)</sup>, **Yang et al. (2019)** <sup>(11)</sup>, and **Foster et al. (2020)** <sup>(43)</sup> they illustrated that reassessment and reevaluation of nursing staff performance, engaging on professional development activities, and work-life balance helping nursing staff to enhance their career

advancement and overcome their feeling of stress.

**Concerning transition strategy;** our results showed more than half of nursing staff had low transition management strategy of career plateau. This can be due to majority of nursing staff were female and married and had stable personal life that made it difficult for those staff nurses to leave their job and high percent of them attempt to seek to change their department, work with another supervisor and training new nursing staff engaged in the unit. These results were supported by **Hoseini and Ashrafi (2020)** <sup>(17)</sup>, **Shakila (2019)** <sup>(15)</sup>, **Karami et al. (2020)** <sup>(49)</sup>, and **Foster et al. (2014)** <sup>(18)</sup>. They revealed that a high percent of nursing attempt to reduce their working hours and delayed their intention to leave to next step of coping strategies. Moreover, **Mehraban et al. (2021)** <sup>(50)</sup> and **Ardestani et al. (2016)** <sup>(51)</sup> they discussed that nursing staff tends to leave the hospital or their departments thinking their job was meaningless and lose the hope of achieving their goal in a particular situation and wants to withdraw from the source of their failure.

### **Levels of nursing staff' job satisfaction**

The present results show majority of nursing staff were unsatisfied about their job. This may be due to around all of nursing staff were unsatisfied regarding their pay, benefits and promotion. These results were supported by **Hassan et al. (2020)** <sup>(19)</sup> **Yasin et al. (2020)** <sup>(22)</sup>, **Gopinath et al. (2020)** <sup>(52)</sup>, **Dilig-Ruiz et al. (2018)** <sup>(53)</sup>, and **Herbst-Bergin, (2014)** <sup>(12)</sup> they clarified that nursing staff had low

mean score of total job satisfaction and high percent of them were dissatisfied about their job as they didn't have chance to work alone and advanced on their job.

### Conclusion

Based on the findings of the present study it was concluded that there was a significant negative correlation between total career plateau and total nursing staff job satisfaction at Tanta Main, Emergency, and International Teaching hospitals. Around two thirds of nursing staff had moderate and high levels of career plateau. More than half of them had high defense and moderate reevaluation management strategy. While more than half of them had low transition management strategy. Majority of nursing staff were unsatisfied about their job. Almost all of nursing staff were unsatisfied about benefit and their pay. While more than eighty percent were satisfied about their co-workers.

### Recommendation

Based on the findings of the present study the following recommendations were suggested for:

#### Hospital administrators:

- Provide nurses with realistic preview about job description and road map for career advancement of nursing staff at the time of orientation and socialization to reduce career plateauing.
- Create a mentoring program in which older and more experienced nursing staff be a model for young and novice nurses to encourage and inspire them to stay in the profession.
- Be alert about the early signs of plateauing and follow preventive

action as upgrading skills, diversifying interests, and set long-term career planning.

- Conduct induction courses for new nurses and introduce them to the nature and potential of temporary jobs to align their behavior, rights, and values with the hospital's values, goals, and objectives.
- Provide continuous job restructuring, job rotation, and job enrichment initiatives to improve nurses' retention.

#### Nursing staff:

- Identify job description, role, and responsibilities of their work.
- Participate in internal and external training programs and workshops to update their knowledge and skills.
- Participation in decision-making in their unit levels.

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