

Work Related Stress and Job Performance among Staff Nurses

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1.ABSTRACT

Background: Work related stress has a significant implications for organizations and individuals, which in turn impacts the job performance of staff nurses. **Aim:** To assess the relationship between work related stress and job performance among staff nurses. **Methods:** A descriptive, correlational design was utilized with a sample of (128) staff nurses at Dikirnis General Hospital. Tools of data collection were Work Related Stress Questionnaire and Observation Checklist of Nurses Performance (OCNP) **Results:** The majority of studied staff nurses (71.1%) had moderate level of perception toward work related stress and more than half (56.8%) of studied staff nurses had fair level of job performance **Conclusion:** There was no statistically significant correlation between work related stress and job performance of the studied staff nurses. **Recommendations:** Establish a committee represented from staff nurses that discuss nursing staff problems, Continuing education programs for nurses should include topics about work related stress and its preventive measures to decrease its negative outcomes and Enhance job performance of nurses by creating and organizing training program on job performance as a managerial skill for head nurses to maintain improving patient care.

Keywords: *Work Rrelated Stress Job Performance, Staff nurses*

2.Introduction:

Nursing is an extremely delicate and demanding profession, and nurses are frequently exposed to circumstances that might negatively impact their physical and mental health. Due to their dangerous line of work, nurses are frequently exposed to infections and injuries that can be fatal. Nurses are responsible for caring for the sick, dealing with emergencies, dealing with a complex system of power, dealing with people who are dying, and dealing with complicated equipment (Al- Nuaimi,et al ,2021).

Nursing is a profession that is high stress by its very nature. Few people encounter extreme misery, loss, and dying on a daily basis like nurses face. Many nursing tasks are uninteresting and boring. By conventional standards, many are nasty, others downright repulsive, while others are frequently demeaning, and some are just plain scary (Qattan ,2017) .

Stress is as an environmental stressors that has a great impact on person and causes psychological and physical consequences. When coping mechanisms are ineffective, people experience stress reactions. The welfare of employees is thought to be profoundly impacted by the environment of work. The work environment has an impact on and puts a significant amount of stress on healthcare employees, especially those in the nursing profession (Yuwanich, Sandmark, & Akhavan 2016).

Work related stress is the un favorable physical and psychological reaction brought on by an imbalance between perceived resources and perceived demands and capacities of workers to meet such demands. When a

worker's requirements, resources, or capabilities are not met by the demands of their job, or when those demands are exceeded, or when a worker's or group's knowledge or coping mechanisms do not align with the organizational culture of the enterprise, these situations result in work-related stress which is influenced by work organization, labor relations and work design (Eldin , Sabry, Abdelgwad & Ramadan ,2021) .

Work related stress has a significant influence on both individuals and organizations. Despite the fact that it impacts all hired professional, the burden on healthcare practitioners is too great. Work related stress lead high blood pressure, cardiovascular problems, musculoskeletal problems and substance abuse. Furthermore, it contributes significantly to injuries and psychological disorders . Additionally, it decrease organizational commitment, job satisfaction, healthcare quality, Organizational effectiveness, work related delay .absenteeism and staff turnover (Girma , Nigussie, Molla & Mareg ,2021).

Staff nurses stand out among those who are susceptible to experiencing work related stress. Staff nurses are directly in charge of patient care, hospital department management, and a variety of bureaucratic and administrative tasks. Nursing is one of the professions most at risk for stress and sickness inside the hospital setting because nurses must deal with unhealthy working conditions including job overload and repetitive duties. Work related stress influences daily activities of staff nurses because it causes bodily, mental, cultural and social harm, and can have many effects on employees, their families, their workplaces, and the communities in

which they live and work and their performance (Santana, Ferreira & Santana 2020).

Performance is important for people, businesses and educational institutions and also nurses experience motivation, contentment, and self-efficacy when duties are completed effectively. Work related stress is one of the main significant causes that have an adverse effect on performance and lowers job satisfaction and output quality as a result of the nurse's direct stress exposure (Danish, et al 2019)

Job Performance of nurses is a significant issue for all health care organizations. The level of nursing performance and healthcare system reflects the quality of delivered care, patient outcomes and the achievement of organizational goals. Job performance is the ability of a person to effectively carry out their responsibilities and roles associated to providing direct and indirect patient care which classified into patient related and no-patient related nursing activities (Al-Makhaita, Sabra, & Hafez, 2014). In general, it is a phenomena with multiple dimensions affecting by patients' high expectations, job stress, advanced technology, quality control and heavy duties and responsibilities (Samiei, Abdul Manaf R, Ismail, & Kandasamy, 2016).

In every health care organizations, nurses are the largest work force in the health care delivery system who performing nursing activities from the aspects of nursing professional development, teaching/collaboration, interpersonal relations/communications, leadership, critical care, and planning/evaluation (Islam, Khatun & Nesa, 2019). These can be categories as patient related and non-patient related nursing job performances. Patient related job performances are performing technical procedure (oral suctioning, tracheotomy and catheter care, dressing change), give emotional support to dying patient and family, managing emergency and critically ill patients, teaching patients and family members. On the other hand, the non-patient related job performances are praise to subordinate, delegate responsibility based on priority, guide others for nursing care plan, maintain high standards of performance (Islam, Khatun & Nesa, 2019).

The impact of high levels job performance leads to increase productivity as well as quality of service and patients care. Inadequate job performance is thought to pose a risk to the wellbeing of patients and increased mortality and morbidity (Al-Makhaita, Sabra, & Hafez, 2014). Hospitals like every other organizations, cannot be successful without effective performance. Therefore performance appraisal is crucial to notify higher authorities about the nurses' performance while performing their duties and to ensure that the quality of care is met (Islam, Khatun, & Nesa 2019).

Performance management is a set of procedures that guarantees the accomplishment of organizational objectives in an efficient way and continual performance enhancement for the best results. Performance management is a process that involves taking decisive action to increase employee productivity through teamwork and personal capabilities, as well as the productivity of the company as a whole. Performance

management procedures include employee training and development, performance appraisal and evaluation mechanisms to offer a suitable evaluation and feedback mechanism that can improve the abilities and skills of employees of companies to enhance performance and continue to produce at a high rate. The strategic goal of the human resources department is to promote the balanced development of behaviors which foster excellent job performance and to assure the creation of a positive environment that fosters high productivity and organizational sustainability (Dixita & Sharma, 2021).

Therefore, the hospitals need to maintain safe environment and respect the rights, responsibilities and needs of all health professionals. Specifically, they need to consider the importance of staff nurses' health for good job performance like the availability of behaviors that promote health and the provision of relevant training and information on health concerns (Mokhtar & Mohamed, 2017).

2.1 Significance of the study:

Intensive care units, operation room, emergency department and high risk units deals with very critical and dangerous cases that require high level nursing care by staff nurse in such condition staff nurse more liable to work related stress.

Work-related stress can result in a variety of challenges that divert nurses' attention from their work to other situations and times, which will have a detrimental influence on the nurses' level of performance and the efficiency with which the staff nurses can accomplish their job-related roles and responsibilities (Zahran et al., 2017). So that the aim of this study is to assess the relationship between work related stress and job performance among staff nurse.

2.2 Aim of the study:

This study aims to assess the relationship between work related stress and job performance among staff nurse.

2.3 Research Questions:

RQ1: What is the level of work related stress?

RQ2: What is the level of staff nurses' performance ?

RQ3: Is there a relationship between work related stress and job performance among staff nurse?

3. Methods:

3.1 Research design:

This study's methodology was a descriptive correlational.

3.2 The study setting:

The study was carried out in all ICU, OR, emergency department, high risk (incubation unit) at Dikirnis General Hospital that provide health services to seven centers in the Dakahlia governorate, which is in Egypt's Delta region's north-eastern area. It provides inpatient care to approximately 912 patient and Outpatient care to approximately 3000 patient monthly. Dikirnis General Hospital occupied with 227 beds.

3.3 Participants of the study:

Participant of the current study included all available staff nurses working at all ICU, OR, emergency department, high risk (incubation unit) and willing to participate in the study during the time of data collection and their total numbers were (128) staff nurses at Dikirmis General Hospital.

3.4 Tools of data collection: -

Two tools were had to get the data:

Tool (I) : Work Related Stress Questionnaire:

It was developed by **Giorgi, Arcangeli & Cupelli (2013)** and modified by the researcher by changing the negative items into positive items. It was used to measure work related stress. It consists of two parts:

Part 1: this part include personal characteristics of staff nurses as age, marital status, educational qualification, year of experience, and unit.

Part 2: this part include 25 items that include five stress-related factors or dimensions which are: role ambiguity (5 items), colleagues' support (5 items), supervisors' support (4 items), job demands (6 items), job control (5 items) used a five-point Likert scale from absolutely agree to absolutely disagree. (1) Absolutely Agree, (2) Agree, (3) Neutral, (4) Disagree, (5) Absolutely Disagree.

After recording the response to positively worded items, the questionnaires gives a total score, whereby a higher score indicates a greater degree of work related stress.

Scoring system:

The total score was classified as low (<50%), Moderate (50%-75%), High (>75%).

Tool (II); Observation Checklist of Nurses Performance (OCNP):

It was developed by **(Fekry, 2015)** to assess performance of staff nurses. It included (71) items categories under 9 main dimensions which are: leadership (7 items), Psychosocial individual (14 items), communication (11 items), general patient care (13 items), vital signs (3 items), medication (7 items), patient status (5 items), planning and evaluation (4 items) and dressing (7 items). Observation checklist scored on the basis of yes, no and not applicable for each activity. "Yes" scored (one point), "no" scored (zero), and "not applicable" omitted from the calculation.

Scoring system:

The total score was classified as poor (<50%), fair (50%-75%), good (>75%).

3.5 Validity and reliability:

Data collection tools translated into Arabic by the researcher and tested for its content relevance and validity through a panel of five expertise from the Faculty of Nursing Mansoura University's nursing administration department who assessed the tools for, applicability, transparency, comprehensiveness, understanding, and ease for application and based on

their responses simple modifications were made. These modifications were related to grammatical language and rephrasing of some sentences. Reliability test of the study tools, Work Related Stress Questionnaire and Observation Checklist of Nurses Performance (OCNP) were assessed by Cronbach's Alpha. Reliability was calculated and showed (0.89), (0.70), respectively

3.6 Pilot study:

A pilot study was conducted on 10% (14) staff nurses of the study sample to evaluate the transparency, feasibility of the statement and to determine the required time to fill-in questions. Staff nurse who participated in the pilot research were excepted from the total study sample. And necessary modification includes clarification, and rephrasing were made based on their responses.

3.7 Ethical Consideration:

The researcher obtained ethical approval from the Research Ethics Committee of the Faculty of Nursing, Mansoura University. Formal approval was obtained from administrator of Dikirmis General Hospital to carry out the research. Explanation of the purpose and the nature of the study were performed by the researcher to all staff nurses involved in the study. Participation in research was voluntary, each staff nurse was made aware of their ability to reject or participate or leave at any moment without giving reasons. The study had no negative effect on the subjects. The collected data's confidentiality was guaranteed, findings were incorporated into the essential studies as well as for publications and educational purposes in the future.

3.8 Field work:

Data collection process spanned three months from the start of August to the end of October 2021. The aim of the study and how to fill tool was explained by the researcher. The researcher collected data about work related stress through distributing questionnaire to staff nurses during work hours in morning and afternoon shifts. Give 5-10 minutes to fill the questionnaire sheets and observation checklist which utilized to assess nurses performance done by the researcher through observing staff nurse individually. This needed the researcher to attend in the unite for long time at different days in morning and afternoon shift. The number of questionnaire sheets collected from staff nurses per day ranged from 3-4 sheets. The researcher went to Dikirmis General Hospital three days per week.

3.9 Statistical analysis:

The gathered data was arranged, tabulated, and statistically examined by using SPSS software (Statistical Package for the Social Sciences, version 26, SPSS Inc. Chicago, IL, USA). The normality assumption was accepted. As a result, percentage and frequency were utilized to describe categorical data. For the representation of continuous variables, the mean and standard deviation were utilized. To examine any changes between the two means of continuous variables, an independent t-test was utilized. ANOVA-test was utilized to test the changes between more than two means of continuous variables. The association between two

categorical variables was tested using the chi-square test. The relationship between two continuous variables was tested using the Pearson correlation coefficient test. Statistically significant was judged as (p-value <0.01 & 0.05).

4. Results:

Table (1) : Shows personal characteristics of the studied staff nurses .This table showed that the total studied sample were (128) nurse. The majority of them (89.1%) were in the age group (20-30) ,most of them were female (88.3%) .The majority(69.5%) were married. More than half (53.9%) indicated a technical degree. Also experience years(60.2%) ranged between (1-5),and (25.0%) of studied staff nurses worked at Neonatal intensive care unit.

Figure (1) : Shows mean percentages and rank of work related stress as perceived by the studied staff nurses . The figure showed that mean percentages of supervisors' support was the highest mean percentage(69.05 %) followed by Job autonomy or control with mean percentage(63.80 %) ,while role ambiguity had the lowest mean percentage (41.36 %) followed by colleagues' support with mean percentage(46.92 %) .

Figure (2): Shows levels of work related stress as perceived by the studied staff nurses .The figure showed that (71.1%) of studied staff nurses **perceived** moderate level of work related stress and (28.1%) of them had low level, while (0.8%) of them had high level of perception

Figure (3): Shows mean percentages and rank of job performance among the studied staff nurses . This figure demonstrated that mean percentage of medication was the highest mean percentage (85.00 %) followed by vital signs with mean percentage(81.00 %) ,while the lowest mean percentage was for planning and evaluation (22.00 %) followed by dressing with mean percentage (34.00 %) .

Figure (4): Shows levels of job performance among the studied staff nurses . This figure illustrates that more than half (56.8%) of studied staff nurses perceived fair level of job performance and (39.8%) of them had poor level , while (3.9%) of them had good level of **perception** .

Figure(5) : Shows correlation between work related stress and job performance of the studied staff nurses .The figure showed that there was no statistically significant correlation between work related stress and job performance of the studied staff nurses

5. Discussion:

By its very nature, nursing is a profession that is exposed to a significant amount of stress. Work related stress is a reality in all occupations, but nurses seem to endure higher levels of it than other healthcare professionals. Stress is a natural aspect of life and is essential for overcoming obstacles encountered on a daily

basis. When the stress reaction is out of proportion to the difficulty of the struggle, issues start to

arise. Excessive stress levels lead to high degree of employee sickness, unhappiness, absenteeism, significant staff turnover , reduced productivity, inadequate performance and as consequence, trouble in supplying patients with quality care when it is not controlled and the organization's failure to provide protection and assistance to nurses (**Ransford, 2018**). Hence, the target of the current study was assessing the relationship between work-related stress and job performance among staff nurses.

Regarding to the first variable investigated in the current study was work related stress. The current study showed that the studied staff nurses had moderate level toward their perception of work related stress. This could be linked to lack of management support, a lack of job control and a heavy workload, all of which could contribute to conflict between staff nurses and others at workplace . In addition to , nursing is a challenging profession, and nurses are more likely than other healthcare workers to encounter stress-inducing situations.

This finding was corresponding with a study conducted by **Abu Shusha (2018)** who stated that a moderate level of work-related stress was experienced by more over half of the nurses in his study about work-related stressors and its effect on quality of nursing care at Benha University Hospital. Besides, this finding in agree with research carried out at Benha University Hospital by **Morsi, & Ebraheem, (2020)** who assessed work-related stressors and coping strategies and its relation to job performance and perceived organizational support among critical care nurses and revealed that most of nurses perceived moderate level of work-related stress.

This findings was supported by the study conducted at Benha University by **Ahmed ,Mourad ,Zaki, & Mohamed (2022)** who examined relationship between occupational stress, burnout and job performance among nurses working in ICU and stated that all surveyed nurses were exposed to various degree of stress. The greatest percentage of surveyed nurses reported high perception level of occupational stress and the lowest percent reported mild occupational stress level . In addition, less than one quarter of the study participants perceived moderate level of occupational stress.

On the contrary, this finding was disagreed with **Umann , Guido, & Silva, 2014)** who examined Stress, coping and presenteeism in nurses assisting critical and potentially critical patients and discovered that more than half of nurses experienced low work related stress level . In addition, it was mismatched with a study conducted by **Johansen & Cadmus (2016)** that assessed conflict management style, supportive work environments, and the experience of work stress in emergency nurses and found that most nurses experienced low level of work-related stress, with the fewest percentage experiencing moderate to high level of stress.

Furthermore, the current study findings conversed with the research conducted by **Fanani , Tualeka & Sarwiyata (2020)** who concluded that the

nurses at the Malang Islamic Hospital reported low to moderate levels of job stress in his study " Job Stress Level Among Islamic Hospital Nurses".

Regarding the dimension of work related stress , supervisor support dimension was the highest mean percentage which indicated that it was one of the fundamental sources of work related stress related to lack of supervisor support and may due to lack of supervisor's knowledge and experience about motivation of staff, and leadership capabilities and problem solving skills. This findings agreed with a study conducted in Ghana by Donkor (2013) who examined effects of stress on the performance of nurses and concluded that problems with supervisors, lack of support and disagreements with colleagues were the most common sources of nursing stress.

Additionally, a study by Higazee, Rayan, & Khalil (2016) who examined the relationship between job stressors and organizational support among Jordanian nurses conformed that there was inverse correlation between the nurses' reported stress and organizational support . Also, this result was in accordance with (Nappo 2020) who found that in his research "Job stress and interpersonal relationships cross country evidence from the EU15: a correlation analysis"s" , support and help given by one's manager reduces the likelihood of experiencing job stress .

Following supervisor support as the highest mean percentage in the current study was **job control or autonomy** came next. This may be due to decrease nurses' freedom and ability to select the methods to conduct to achieve the tasks, decrease a certain amount of options to decide how to continue with work and they can't plan or schedule the work. This finding was matched with a study carried out in Italy by Giorgi, Arcangeli , Ariza-Montes, Rapisarda & Mucci (2019) who found that nurses respondents had higher average values for the lack of job control and the lack of support from colleagues in his study "Work-related stress and its association with recovery experience".

Role ambiguity was the lowest mean percentages which indicated that staff nurses have a little a clear idea about the objectives and goals of department and they nearly know their

responsibilities and duties clearly .This result was agreed with Gharib, Jamil , Ahmad, & Ghouse, (2016) who revealed that role ambiguity dimension came in the final after workload and role conflict in his study " The impact of job stress on job performance: A case study on academic staff at Dhofar University".

This result is inconsistent with Islam, Alam, Keramat, Murshid, Haque, Kabir & Khan (2021) who found that hospital nurses who experienced significant levels of job and task ambiguity were found to be more stressed in his study about working conditions and occupational stress among nurses in Bangladesh.

Also disagreed with a research conducted in Malaysia by Yousefi & Abdullah (2019) who examined "The impact of organizational stressors on job performance" and revealed that role ambiguity is the

important factor in predicting organizational stressors that have a negative impact on performance. Moreover this finding not matched with a study of Akkoç , Okun, & Türe (2021) who demonstrated that the most significant factors contributing to nurses' increased work-related stress are role ambiguity followed by role conflict and workload.

Following role ambiguity as the lowest mean percentage in the current study was **colleagues support** came next in this study. This may due to colleagues are interested in hearing about problems at work and respect each other which lead to work cooperation and less stress . This finding disagreed with a research done at Benha University Hospital by Morsi, & Ebraheem, (2020) who found that staff nurses with high level of work related stress suffered from lack of colleagues' support at work .

And result with (Nappo 2020) concluded that the probability of experiencing work related stress is likely to increase if you receive assistance and support from colleagues. However, continuing to cooperate and getting along with coworkers decreases the probability of experiencing stress.

Regarding to the second variable investigated in the present study was job performance . The current study indicated that the studied staff nurses had moderate level of job performance. This can be as a result of the availability of training programs that promote the ongoing acquisition of new skills and knowledge and the presence of good communication skills between staff nurses and other healthcare personnel. This finding was identical with the study conducted at Benha University Hospital by Ahmed et al., (2022) who revealed that two thirds of nurses performed nursing activities at good level , while one third of them performed poorly.

This finding was consistent with Al- Homayan, Shamsudin, Subramaniam & Islam (2013) who conducted a study on Saudi Arabia's public hospitals' nurses about impacts of job performance level on nurses and found that the performance of nurses was moderate . In the same respect agreed with Mohamed & Ghalab (2022) who conducted a study at Tanta Emergency Hospital and results revealed that nearly half of the staff nurses performed their job at moderate level overall.

In addition to , this result agreed with Mahmoud , Elsaid & Kamel (2020) who reported that nurses performed their jobs at a high level in his study" Effect of workplace bullying on nurses' job performance" at Benha University . Respectively Safarpour, Sabzevari & Delpisheh (2018) who revealed that nurses performed their jobs well at high levels in his study about occupational stress, job satisfaction and job performance among hospital nurses in Ilam, Iran.

In the same line this result was corresponding with Ahmed, Sleem & Kassem(2015) who assessed the effect of working condition and fatigue on performance of staff nurses at Mansoura University Hospital and illustrated that staff nurses at Mansoura University Hospital had good level of performance. In addition, another study conducted by Zahran , Berma , & Abu El-

enin (2017) at Belkas Central Hospital found that the majority of staff nurses had satisfactory performance level .

On the contrary, outcomes of the current study was interfered with a research conducted by **Sleem& El-Sayed (2011)** who examined the effect of job conscientiousness on job performance and indicated that the staff nurses' performance at Mansoura University Hospital's surgical units was inadequate. This may be due to the fact that a lack of coworkers and a shortage of staff nurses causes a rise in workload and a decline in productivity.

In this respect, these results interfered with the study conducted by **Ibrahim, El Sayed, Attala & Elmezin (2016)** who examined the relationship between head nurses' leadership styles and staff nurses' job performance and showed that the performance scores among the staff nurses who working at Mansoura Emergency Hospital, affiliated to Mansoura University Hospital, were comparatively low, and all nurses' performance was inadequate and requires improvement. Moreover, the study conducted by **Morsi, & Ebraheem, (2020)** at Benha University Hospital found that about half of critical care nurses performed their nursing activities at low level.

Regarding to dimensions of performance: the finding of this study indicated that medication as a dimension of performance had the highest mean percentage . It could be because nurses have a major responsibility to administer medications, which is a crucial component of regular nursing practice. This result was matched with **Ahmed, Sleem & Kassem (2015)** who concluded that good performance of medication administration among nurses working at Main Mansoura University Hospital's general medical and surgical units. This finding also, agreed with **Shehata , Sleem , El-sayed & Ramada (2011)** who illustrated that medication administration was the most significant dimension among the nurses working at Mansoura University Hospital.

On the contrast, **Yousef (2001)** reported that nurses working in the pediatric and adults cardio-surgical units at Ain Shams University Hospital had poor performance related to medication administration. Also, this finding disagreed with **Hajibabae,, Salehi Kamboo, Faghanipour, Ashrafizadeh & Haghghi Zadeh, 2019)** who reported that poor performance of medication administration among nurses working in pediatric wards in hospitals affiliated with Ahwaz University of Medical Sciences, Iran related to the incidence of nurses' medication errors was somewhat higher.

Following medication as the highest mean percentage in the current study was vital signs came next in this study . This might be as a result of vital signs being routine tasks that were measured on a regular basis to evaluate the patient's health status and physicians being concerned about it throughout the medical round. This finding matched with the study performed by **Sleem& El-Sayed (2011)** who found that vital signs were the greatest among staff nurses.

In the same view this finding agreed with **Ahmed, Sleem & Kassem (2015)** who indicated that the nurses working at Main Mansoura University Hospital's general medical and surgical units had good performance of vital signs . Also, a research conducted by **Al- Homayan et al., (2013)** who found that vital signs were done at good level by nurses that working in public sector hospitals in Saudi Arabia .

Opposite to these findings a study conducted by **Mahmoud (2000)** who stated that vital sign performance among Ain Shams University nursing interns was poor in his study " The performance of nursing interns related to basic nursing procedures".

The current study showed that planning and evaluation was the lowest mean percentage as a dimension of performance which indicated poor performance of this dimension . This may be due to lack of knowledge and skills about planning and evaluation ,neglect evaluation of patients outcomes and some of nurses didn't accept criticism . This result was agreed with **(Islam, Khatun, & Nesa,2019)** who found in his study " Job Performance of Clinical Nurses at Tertiary Level Hospital in Bangladesh" that planning and evaluation dimension came in the final after interpersonal relationship and communication, critical care and teaching/collaboration that is patient related job performance of clinical nurses.

This finding disagreed with **Yuxiu , Kunaviktikul &Thungiaroenkul (2011)** who conducted a study at two university hospitals in Yunnan Province, China, and showed that the level of planning and evaluation performance was moderate.

Moreover, this result disagreed with study carried out by **Al-Makhaita, Sabra,& Hafez(2014)** who concluded that Planning and evaluation were performed at a moderate level. Again , this result interfered with the study conducted by **Ahmed, Sleem & Kassem (2015)** who stated that there was good performance of planning and evaluation of nurses working at Main Mansoura University Hospital's general medical and surgical units.

In addition , this result disagreed with **Mohamed & Ghalab (2022)** who concluded that material planning and coordination ,staff relations, communication, communication with patients and nursing care plan are the main source of moderate performance among nurses working at Tanta Emergency Hospital.

Following planning and evaluation as the lowest mean percentage in the current study was dressing came next in this study. This may be due to staff nurses had insufficient knowledge about preparing the suitable instruments for dressing, following aseptic techniques, following infection control precautions in cleaning and handling infected instrument were neglected and they don't follow appropriate hand washing technique.

Moreover this findings was supported by **Najm & Hussein(2018)** in Erbil city and detected that nurses' overall wound dressing technique was poor, with the lowest technique being with aspects connected to wound dressing infection control procedures and matters relating to disposing wound dressing supplies and it was

suggested that nurses must follow standard infection control and improve their skills and knowledge during the opening special training session about wound dressing and standard infection control in emergency wards.

This finding was inconsistent with **Helaly , El-Atroush , Abol-Enein, & El-Sayed (2013)** who concluded that most of staff nurses in his study about emotional intelligence and its relation to nursing performance among nurses at Mansoura University Hospital and Urology and Nephrology Center had adequate performance in dressing dimension. Additionally, **Atiyah , Khudhur & Hassan (2012)** who performed a research on nurses employed by the Al-shahid Ghazi Hariri for surgical specialties and the Baghdad Teaching Hospital indicated that nurses had adequate performance in relation to wound dressing .

Also, disagreed **Ahmed, Sleem & Kassem (2015)** who concluded that at Mansoura University Hospital, the staff nurses' performance in terms of dressing dimension was good. In addition this result was contraindicated with research done by **Ella, Agharandu, Osuchukwu & Samson-Akpan, (2021)** about occupational stress and job performance among nurses in a teaching hospital, in South-South, Nigeria who reported that wound dressing was the second dimension of high extent of performance after bed bathing of patient.

Regarding the correlation between work related stress and job performance among staff nurses , there was no statistically significant correlation between work related stress and job performance of the studied staff nurses. This may be the result of the nurses' awareness that they work in high-risk departments and that any failure or defect in their job performance will negatively impact the lives of patients and expose them to accountability and punishment ; as a result, they don't permit external factors like stress to interfere with or affect their work.

This results was in line with the research of **Mokhtar et al., (2016)** who found that there was no significant association between occupational stress amongst nurses working in the pediatric and neonatal care units in Khartoum state hospitals and job performance and also **Zahran , Berma , & Abu El-enin (2017)** discovered that there was no statistically important relationship between staff nurses' overall performance and their overall stressors at Belkas Central Hospital in his study about occupational stress and level of performance among staff nurses at Belkas Central Hospital .

In addition, it was matched with a study conducted in Saudi Arabia by **Qattan, (2017)** who examined the effect of work related stress and burnout on nursing performance and job satisfaction and reported that the correlation between work related stress and job performance among nurses was very weak .

Conversely, these results was inconsistent with the study conducted at Benha University Hospital by **Ahmed et al., (2022)** who stated that there was negative

relationship between work related stressors and job performance. Again this finding disagreed by **Kouhnavard, Hosseinpour, Honarbakhsh, Ahmadiyazad & Pashangpour (2020)** who conducted a study to investigate job stress and working pressures and their effect on the job performance of personnel in educational hospitals of Larestan University of Medical Sciences and illustrated that these two variables had a strong inverse association, meaning that job performance declined as job stress increased.

In addition , this finding was in disagreement with **Deng, Guo, Tengyang, Yang & Xu Tian (2019)** who revealed that challenge stress was considerably positively correlated with Chinese healthcare workers' motivation for public service and job performance in his study about how job stress influences job performance among Chinese healthcare workers.

6. Conclusion:

Based on the study findings, the nurses' perception of work related stress was at moderate level. While, more than half of studied staff nurses had moderate level of job performance. In addition, there was no statically significant correlation between work related stress and nurses' job performance

7. Recommendation:

Based on the results of this study, it was suggested that:

- Establish a committee represented from staff nurses that discuss nursing staff problems.
- Designing and implementing policies to reduce work related stress in the hospital environment.
- Plan nurse-specific lectures ,workshops and seminars that focus on reducing common sources of stress, such as conflict and stress management.
- Enhance job performance of nurses by creating and organizing training program on job performance as a managerial skill for head nurses to maintain improving patient care.
- Creating a positive work environment characterized by effective leadership, providing praise and recognition, guidance, and support for nurses. This could decrease nurses' perception of work related stress.

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Table (1): Personal characteristics of the studied staff nurses (n=128)

Variables	n	%
Age:	114	89.1
▪ 20-30		
▪ 31-40	14	10.9
Mean±SD	27.01±3.01	
Gender		
▪ Male	15	11.7
▪ Female	113	88.3
Marital status		
▪ Single	35	27.3
▪ Married	89	69.5
▪ Divorced	4	3.1
Level of education		
▪ Diploma degree	10	7.8
▪ Technical degree	69	53.9
▪ Bachelor degree	49	38.3
Experience years:		
▪ 1-5	77	60.2
▪ 6-10	38	29.7
▪ > 10	13	10.2
Mean±SD	5.14±4.07	
Unit		
▪ Emergency unit	30	23.4
▪ Cardiac intensive care unit	19	14.8
▪ General intensive care unit	27	21.1
▪ Operating unit	20	15.6
▪ Neonatal intensive care unit	32	25.0

Work Related Stress and Job Performance among Staff Nurses

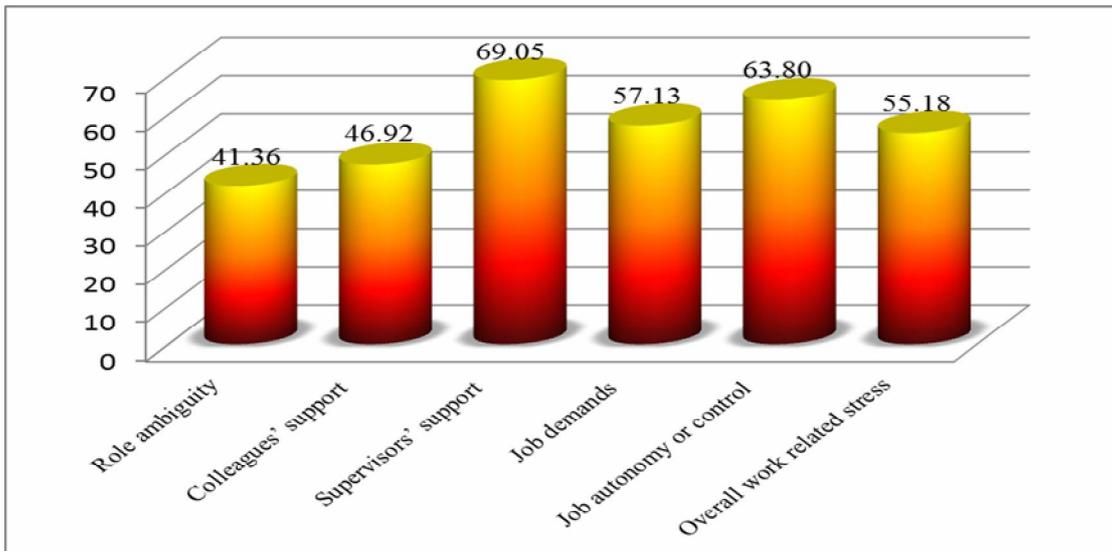


Figure (1): Mean percentages and rank of work related stress as perceived by the studied staff nurses (n=128)

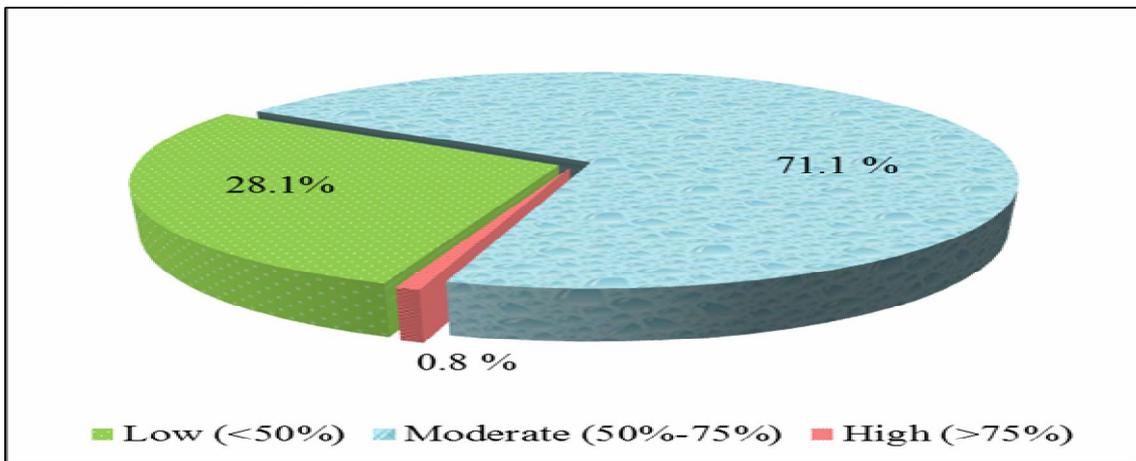


Figure (2): Levels of work related stress as perceived by the studied nurses (n=128)

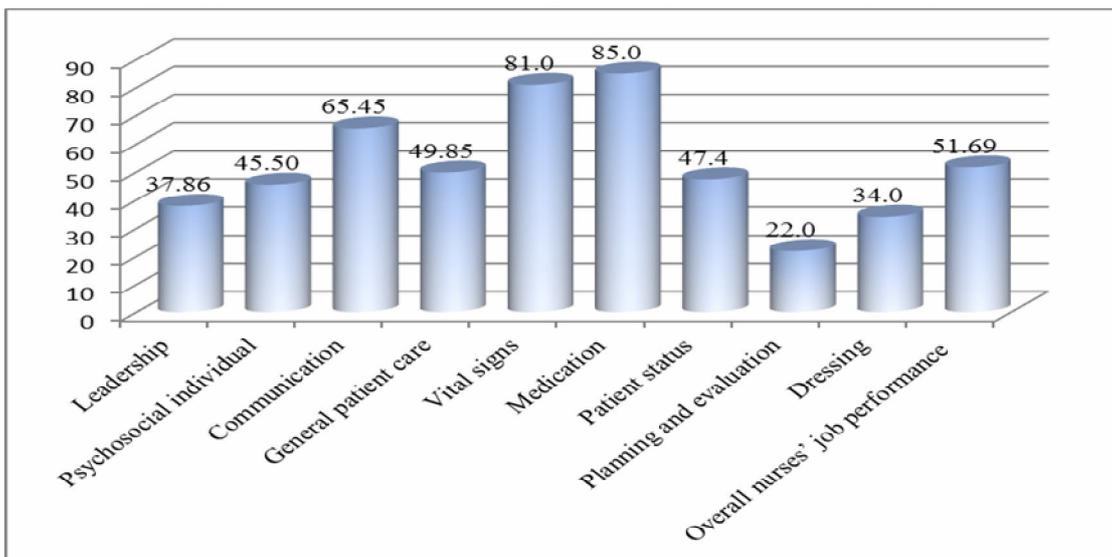


Figure (3) Mean percentages and rank of job performance among the studied staff nurses (n=128).

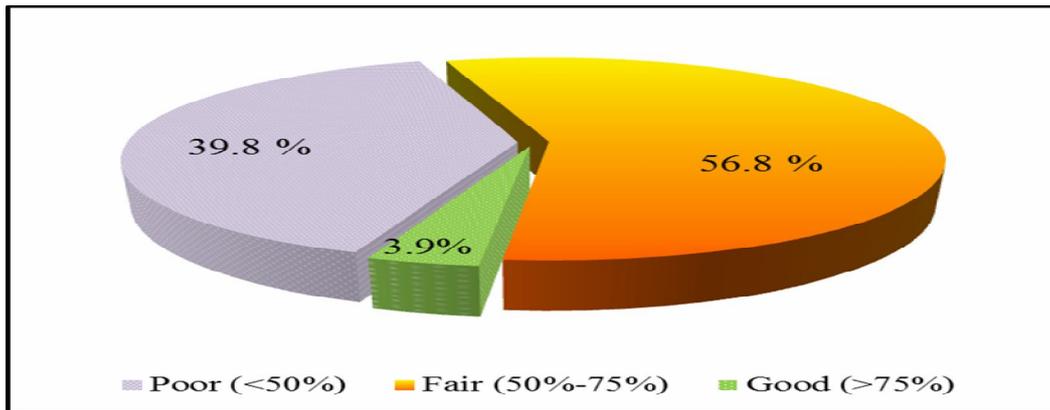


Figure (4): Levels of job performance among the studied staff nurses (n=128)

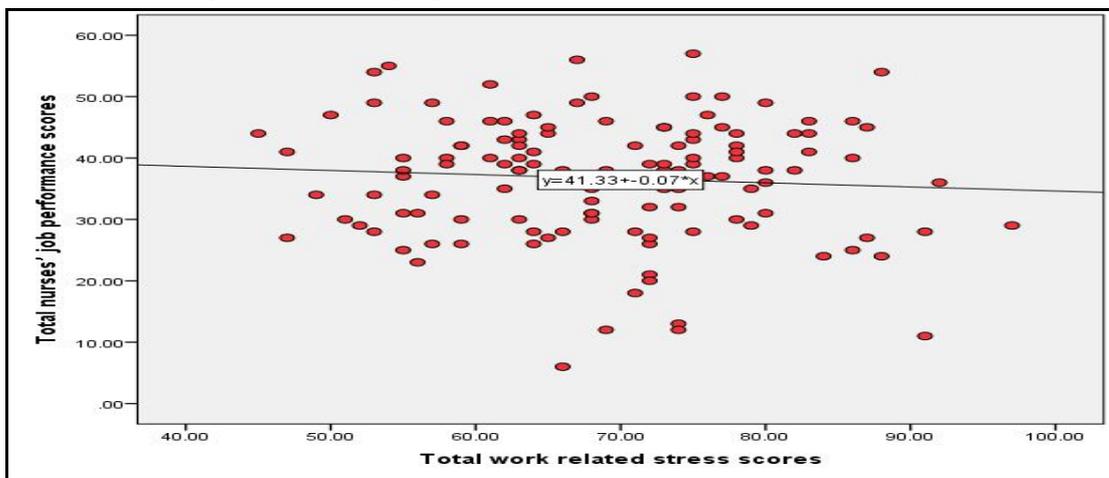


Figure (5) Correlation between work related stress and job performance of the studied staff nurses (n=128)