

## **Quality of Work Life Influence on Nurses’ Competencies in Self-Assessment.**

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**Abstract:** Quality of life at work could affect quality of nursing care and safe practice. **Purpose:** To assess the quality of work life influence on nurses’ competencies in self-assessment. **Research Design:** A descriptive correlational study design is used. **Setting:** Inpatient units in Kafrelsheikh General Hospital. **Instruments:** Two instruments were used: (Quality of Work-Life Balance Likert Scale and Nursing Competency in Self Assessment Likert Scale). **Results:** More than half of nurses (63.2%) believed that they lacked certain competencies, and less than half (43%) had moderate quality of life. **Conclusion:** There was a highly statistically positive relationship between quality of work life and competencies in self assessment. **Recommendations:** In order to achieve a high level of competencies for their employees, hospital management must develop healthy environment work. Additional research is required to determine the predictive elements influencing nurses' competencies.

**Keywords:** *competencies, nurses, quality of work life, self-assessment.*

### **Introduction:**

The fact that the human element is the most important factor in determining whether an organization succeeds or fails in today's management systems cannot be disputed. Yet, practitioners and researchers are interested in quality of work life in connection with fostering employee competencies. (Wood et al. 2020). Because of the satisfaction it provides, work environment helps people with vital responsibilities like making the most of their channeling their energy towards positive goals, and maintaining their mental health. (Jaharuddin, Zainol 2019). Such strategies are rarely successful in accomplishing organizational goals today because the workforce attitudes, beliefs,

aspirations, and ambitions have changed significantly (Lunenburg, 2011; Hosie et al., 2013; Ruiz-Palomo et al., 2020).

The design of jobs and tasks has paid a lot of attention to factors like job promotion, job content, task identity, skill variety, job control and autonomy, praise and recognition, social interactions, and feedback because many employees now prefer to work in jobs that are more meaningful and enjoyable for them. To put it another way, employees are becoming more and more concerned about the nature of their jobs and the setting in which they do work-related tasks (Ghasemi et al., 2021). Numerous benefits will come from raising QWL. It can

increase job effectiveness and efficiency, employee satisfaction, organizational productivity, and workplace accident prevention. (Nayak & Sahoo, 2015; Nazari & Dashti, 2019).

In addition to being crucial factors in establishing a high quality of work life, career performance, career fulfilment, and career balance are also among the most exciting approaches to employee motivation and workplace enrichment. QWL stands for, fair salary, opportunities for growth, and continual promotion do indeed encourage employee success, which raises QWL. (Daniel, 2019)

Increasing work quality there will be a tone of happy outcomes in life. It can increase job effectiveness and efficiency, employee satisfaction, organizational productivity, and reduce the number of accidents at work (Nayak & Sahoo, 2015; Nazari & Dashti, 2019). According to several studies, having a high level of work life quality lowers employee complaints and absenteeism connected to work (Uysal et al., 2018). On the other side, a poor quality of work life might raise turnover and burnout symptoms while also putting employees at risk for mental diseases (Biglari et al., 2014., Jafari et al., 2017 and Ashrafi et al., 2018).

To carry out nursing tasks, one important skill is nursing competency (Allvin et al. 2020). Additionally, a surge in sophisticated and technical therapy has brought attention to the need to give more sympathetic and fundamental care based on a person-centered approach (van Belle, 2019). This fact triggered a discussion among nurses concerning their competency in relation to nursing practice and whether they are appropriately qualified to work in the healthcare system (Sawaengdee, et al. 2016). To support continual competence growth

in various work situations, knowledge of nurses' competence and quality of work life is essential. The current study's objective was to assess the relationship between nurses' quality of work life and competencies level based self-assessment

### **Significance of the Study:**

Improving QWL will lead to a slew of positive results. It can improve job efficiency and effectiveness, employee happiness, organizational productivity, and reduce the number of workplace accidents (Permarupan, Al-Mamun & Saufi, 2020). According to the findings of certain studies, having a high level of QWL reduces employee complaints and work-related absences (Ganguly,2020) Unfavorable QWL, on the other hand, can put employees at risk for mental illnesses as well as an increase in turnover and burnout symptoms (Diana et al., 2021).

### **Purpose:**

To assess the quality of work life influence on nurses' competencies in self-assessment.

### **Research questions:**

- 1) What is the quality of nurses'work life?
- 2) What is the level of nurses'comptencies in self assessment?
- 3) Is there a relationship between nurses' quality of work life and their level of competencies in self assessment?

### **Methods:**

#### **Design:**

A descriptive correlational study design was used.

#### **Setting:**

Data were gathered from Kafrelsheikh General Hospital which follows the

Ministry of Health. Inpatient care, a male and female psychiatric unit, and administrative hospital offices are all located in the ground floor. The intensive care unit (ICU medical & surgical), the surgical male inpatient unit, the emergency surgical unit, the orthopedic unit, and the urology unit are all located in the first floor. Operating rooms (ORs) for burns, obstetrics unit, surgical female unit, and neonatal intensive care unit are located on the second floor (NICU). The pediatric unit, medical unit, neurosurgery ICU and pediatric intensive care unit (PICU) are all located in the third level).

**Sampling:**

All available nurses (350), with at least one year of experience in the inpatient wards in Kafrelsheikh hospital

**Instruments:**

**Instrument one Quality of Work-Life Balance Likert Scale**

It was adopted from Swamy et al. (2015), to evaluate the staff members' quality of work life. It contained two parts. -

- **Part one:** It contained information about nurses' personal characteristics, such as age, gender, marital status, level of education, and years of experience.
- **Part two:** It contained 50 items, they were distributed as follows: work environment (6 items), organizational culture and climate (7 items), relationship and cooperation (6 items), training and development (4 items), compensation and rewards (5 items), facilities (5 items), job satisfaction and job security (8 items), autonomy of work (6 items), and adequacy of resources (3 items)

**Scoring system:**

Scoring system of each item ranged from 1 to 5 scores. Total scoring system was 250 .Quality of work life was considered low if the quality of life was below 60%, moderate if it ranged between 60-75% and high if it was > 75%.

**Instrument two Self-assessment of nursing competency Likert Scale**

It was developed by Cowan et al. (2008) It was developed to assess nurse's perceived level of competency. It contains 108 items that are divided into eight listed domains: evaluation (9 items), care delivery (40 items), communication (10 items), health promotion and illness prevention (10 items), personal and professional development (8 items), professional and ethical practice (16 items), research and development (6 items), and teamwork (9 items).

**Scoring system:**

Scoring system of each statement N = Never, O = Rarely, S = Occasionally, A = Always, and AD = Always Done. Total scores 540. Nurses assess their self competent if it was > 75%. And incompetent if it was < 75%

**Validity:**

For validity assurance, the instruments were submitted to a jury of five experts involving five professors in nursing services administration from the universities of, Kafr El Sheikh, Minia, and Bani Sweif to evaluate face validity and modify any mandatory y items of the instruments. All required modifications were done.

**Reliability**

Cronbach's Alpha test was used to assess the reliability of instruments. Reliability of quality of work life instrument is (a=0.967) Reliability of

competency self-assessment instrument is ( $\alpha=0.989$ ), ( $\alpha=0.991$ ).

### **Pilot study**

Prior to data collection, a pilot research was conducted on 10% ( $n=35$  nurses) of the sample to assess the applicability, feasibility of the instruments and to make any necessary adjustments before conducting the main study. The study sample did not include any nurses who participated in the pilot study. It shows trustworthy tools.

### **Ethical Consideration:-**

- Written approval was taken from the ethical research committee of the Faculty of Nursing, Kafrelsheikh University.
- Verbal and written consent was taken from participating nurses.
- The initial interview was conducted with nurses to inform them about the purpose, procedure, and benefits of the study. All participants were told that their participation in the study is voluntary and they can leave at any time without penalty.

### **Procedure:-**

Before data collection, a written permission to perform the study was obtained from the directors of the inpatient departments of the intensive care medical surgical units in Kafrelsheikh Hospital after submitting an official letter from the Dean of the Faculty of Nursing at Kafrelsheikh University explaining the purpose of the study and methods of data collection. Data collection for this study was performed throughout 4 months (March till July 2022). The researcher introduced herself to participating nurses, described the purpose of the study and methods of data collection. Data was collected once every three days during the morning and afternoon shifts.

Before distributing data collection instruments among nurses, they received preparatory instructions related to how to answer the included items. During fulfilling the data collection instruments, nurses were observed and guided by the researcher. It took nurses 40-45 minutes to fulfill each instrument.

### **Statistical Analysis:-**

IBM SPSS software version 22 (Armonk, NY: IBM Corp) was used to statistically evaluate the data that were fed into the computer (2) Number and percentage were used to describe qualitative data. The normality of the distribution was examined using the Kolmogorov-Smirnov test. Mean and standard deviation were utilized to represent quantitative data, and an independent t test was performed for linear regression. The Pearson coefficient test was used to determine the correlation between two quantitative variables that were normally distributed. The collected data were considered significant if  $P < 5\%$  level, highly statistically significant if  $P < 1\%$ .

### **Results:**

**Table 1:-** shows frequency distribution of studied nurses according to their personal data. More than two thirds (72.6%) of participants ranged from 31 to 40 years, nurses who had secondary school diploma were 38%. More than half of nurses (51.4%) had ten years of experience in nursing practice and more than two thirds of them were married (75.4%).

**Table 2:-** presents mean and standard deviation of quality of work life. It indicates that quality of work life items can be ranked as follows: Work environment, autonomy of work, and adequacy and resources were the highest in scores 63.9%, 66.6%, and 72.9%. In other words, 61.2% of the

studied participants high quality of work life.

**Table 3:-** clarifies mean and standard deviation of competency based self-assessment. More than half of nurses (64.9%) were competent in communication, health promotion (64.5%) and self assessment (57.7%). have competence of self-assessment.

**Figure 1:-** shows distribution of studied nurses according to their level of competency

It shows that slightly more than half of the studied nurses 63.2% were incompetent.

**Table 4:-** represents the relation between personal information of nurses and their quality of work life Highest level was among nurses who were more experienced. According to Table 4, there was a statistically significant positive correlation between participant experiences and qualifications and overall quality of work life.

**Table 5:-** shows correlation between studied participant personal data and their competency level. It demonstrates that there is a statistically negative and positive correlations between nurses personal information and their level of competency.

**Table 6 :-** shows correlation between competency and whole quality of life at work

there was a highly statistically significant positive correlation between self-evaluation competency and overall quality of life at work.

**Figure 2:-** illustrates percentage distribution of nurses according to their overall quality of work life. It was clear that less than half (43%) of participants in the study had a moderate level quality of work life, and only 33% of them have a high level quality of work life, according to Figure 2.

**Table (1): Frequency Distribution of Studied Nurses according to Personal Data (n=350).**

Items	No.	%
<b>Age</b>		
25:30	78	22.3
31:40	254	72.6
41:45	18	5.1
<b>Mean ±SD</b>	35.48±3.14	
<b>Qualification</b>		
diploma	133	38.0
bachelor	122	34.9
Master	95	27.1
<b>Experience</b>		
1:<10	180	51.4
10:<20	135	38.6
20+	35	10.0
<b>Mean ±SD</b>	9.52±6.61	
<b>Marital</b>		
single	60	17.1
married	264	75.4
divorced	18	5.1
widowed	8	2.3

*Quality of Work Life Influence on Nurses' Competencies in Self-Assessment.*

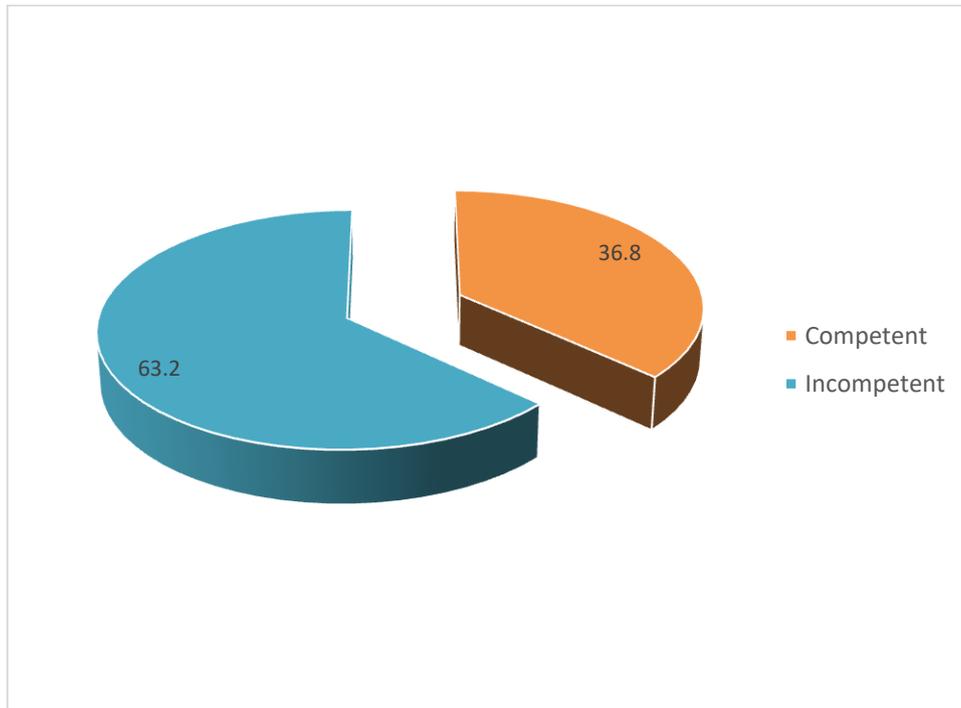
**Table (2); Mean and Standard Deviation of Quality of Work Life.**

Quality of Work Life Items	Min.	Max.	Mean	Std.	%Score	Ranking
Work environment	6	30	19.16	7.92	63.9	3
Organizational culture and climate	7	35	20.56	6.73	58.7	6
Relation and co-operation	6	30	17.29	5.85	57.6	8
Training and development	4	20	11.64	3.60	58.2	7
Compensation and rewards	5	25	14.83	5.70	59.3	5
Facilities	5	25	14.34	4.54	57.4	9
Job satisfaction and job security	8	40	24.16	8.37	60.4	4
Autonomy of work	6	30	19.98	7.60	66.6	2
Adequacy and resources	3	15	10.93	3.62	72.9	1
<b>Total</b>	<b>53</b>	<b>250</b>	<b>153.04</b>	<b>39.02</b>	<b>61.2</b>	

**Table (3); Mean and Standard Deviation of Competencies in Self-Assessment**

Domains	Min.	Max.	Mean	Std.	%Score	Ranking
Assessment	9	45	24.75	5.51	55.0	5
care delivery	40	195	111.76	34.17	57.3	4
Communication	14	50	32.43	8.01	64.9	1
Health promotion	10	50	32.27	11.55	64.5	2
Personal and professional development	10	40	23.88	9.38	59.7	3
Professional and ethical practice	16	80	43.52	18.40	54.4	6
Research and development	6	30	16.12	7.31	53.7	7
Teamwork	9	45	23.69	10.98	52.6	8

**Figure 1: Distribution of studied nurses according to their level of competency**



*Quality of Work Life Influence on Nurses' Competencies in Self-Assessment.*

**Table (4): Relation between personal information of nurses and their quality of work life.**

	<b>R</b>	<b>p-value</b>
<b>Age</b>	-.051	.340
<b>Qualification</b>	-.271	.000**
<b>Experience</b>	.168	.002**
<b>Marital</b>	.003	.962

\*\*Extremely significance p<0.001

**Table (5): correlation between studied participant personal data and their competency level**

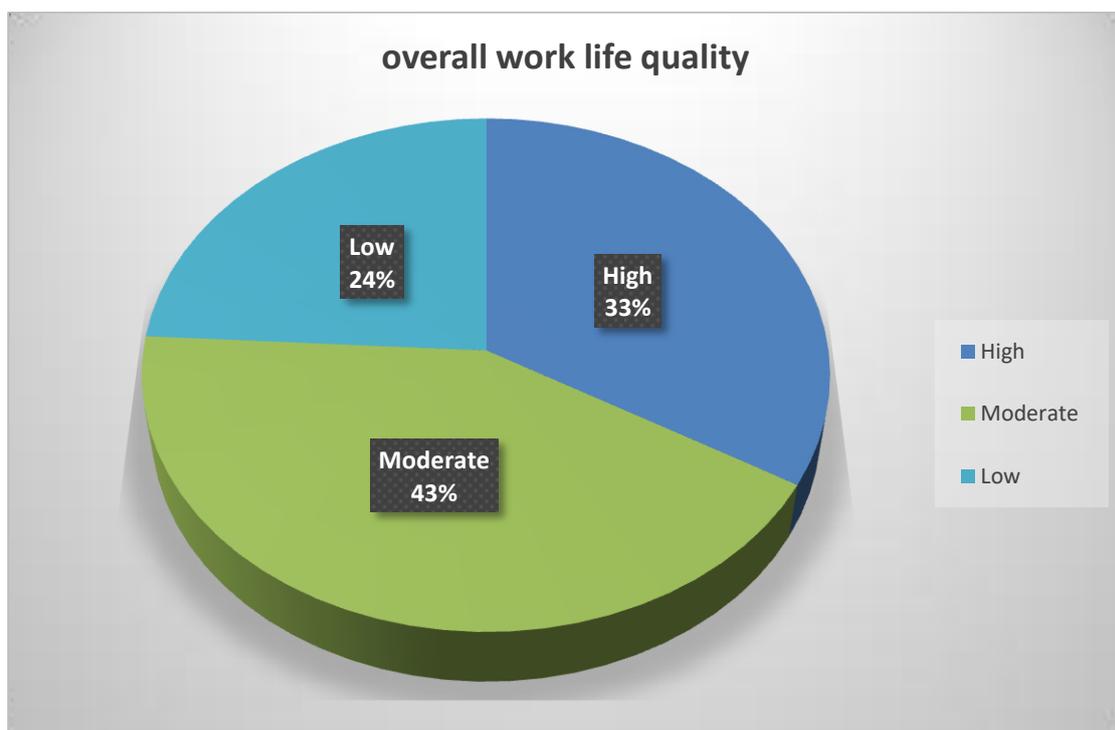
	<b>r</b>	<b>p-value</b>
<b>Age</b>	-.137	.010*
<b>Qualification</b>	-.444	.000**
<b>Experience</b>	.275	.000**
<b>Marital</b>	.187	.000**

\*\*Exceedingly implication p<0.001      \* implication p<0.05

**Table (6): correlation between competency and whole quality of work life**

	<b>Total self-assessment competency</b>	
	<b>r</b>	<b>p-value</b>
<b>whole quality of work life</b>	.791	.000**

**Figure 2: percentage distribution of nurses according to their overall quality of work life**



## **Discussion:**

The goal of the current study was to determine the influence of work-life quality on nurses' self-assessments of their competence in the inpatient wards of the Kafrelsheikh general hospital. The results of the current study show that the highest quality of work life scores were work environment, autonomy of work, and adequacy and resources. The total score reveals that approximately more than half of the had high quality of work life, as these items were crucial and had an impact on the effectiveness of the work environment as well as giving the staff confidence. These findings were in line with those published by El Badawy et al. (2018), Kaleel et al. (2018)a, and Eren & Hisar (2016), who found that stronger staff commitment and confidence in their work was a result of a favorable work environment.

The current study indicates that the highest competency self-assessment domains were communication, and health promotion as they had the highest scores. This may be attributed to competence of self-assessment depends on the communication skills and the delivery of excellence care to clients. These finding did not agree with Cowan Et al.( 2008) who found that health promotion and care delivery reveled that was the highest score.

The results of the current study indicate that slightly more than half of the participants are incompetent that may be due to not have any training and updating their knowledge and skills during the work. These results supported by Taylor et al (2019) which found that the study participant has a gap knowledge and insufficient to competence self-assess. While Jeon et al (2020) in contrasted with these findings and stated that the competences of self-assessed of overall participants had an almost acceptable level of competences.

The study's findings indicate a statistically weighty relationship between participant experiences and qualifications and overall work life quality. This might be connected to older nurses' capacity to adapt to the workplace, as well as the likelihood that nurses with higher education levels have higher aspirations for their working lives and, as a result, experience to meet those goals. This conclusion is consistent with Raeissi et al(2019) .'s finding that older nurses and nurses with greater qualifications had higher work-life quality.

This finding illustrations that there is a statistically significant founded among total competency of self- assessment and studied participant personal data this might explain that the nurses become more competent when they are accepting more experiences and increase their orientation of self-assessment when increase their age. This finding, similarly, with Meretoja (2014) which mentioned that there is a higher response between self-assessment competences and personal characteristics.

The results of the current study showed a highly statistically significant relationship between total self-assessment competency and total quality of work life. This relationship may be due to the fact that nurses are now independent of patient satisfaction and care delivery, giving them the freedom to assess their own competence. This was in line with the findings of Loft & Jensen (2020), who discovered that staff performance and job satisfaction were both positively impacted by the quality of work life. Similar results were obtained by Allvin et al. (2020), who indicated that the participants' group had self-assessment competencies that were statistically significant.

The results of the current study show that the nurses who participated in it had a modest level of quality of work life. This might be because the staff members' jobs reward balance, which boosts their job satisfaction and quality of work life and strikes a balance between work and family life. This result corroborated that of Angin, et al. (2020), who discovered that the majority of nurses had high levels of job satisfaction. Bhende, et al. (2020) also said that the study participant had a high level of work life quality. However, Mohammadi & Karupiah's (2020) study discovered that staff nurses displayed a high level of work-life quality.

#### **Conclusion:**

In this study, it was found that slightly more than half of nurses thought they were self-incompetent and that fewer than half of nurses thought their quality of work life was moderate. The association between total self-assessment competency and overall quality of work life was also very statistically significant. All study questions were resolved by these findings.

#### **Recommendation:**

Based on the results of the current investigation, the researchers recommended the following:

- In order to achieve a high level of competencies for their employees, hospital management must adapt to market demands to develop health nursing services and improve employee quality of life.
- Additional research is required to determine the predictive elements influencing nurses' competences.
- More study is required to determine the predictors that affect nurses' competence.

- Establish a system for managing the various competencies at an advanced level by working together.
- Redesign the work process to enhance the environment at work.

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