

## Emotional Exhaustion and Its Relation with Job Performance among Staff Nurses



1 Nesma Mahmoud Mohamed, 2 Wafaa Fathy Sleem, 3 Sahar Hassan Helaly

1 Demonstrator of Nursing Administration, Faculty of Nursing - Mansoura University,

2 Professor of Nursing Administration, Faculty of Nursing - Mansoura University,

3 Assistant Professor of Nursing Administration, Faculty of Nursing - Mansoura University 1Samah Abdulla.

### 1. ABSTRACT

**Background:** One of the most important variables in determining how well staff nurses function and provide patients with care is emotional exhaustion. **Aim:** to assess the relationship between emotional exhaustion and job performance among staff nurses. **Methods:** A descriptive, correlational design was utilized with a sample of (165) staff nurses at Main Mansoura University hospital. The Job Performance Observation Checklist and the Emotional Exhaustion Questionnaire were the data gathering tools. **Results:** Of the staff nurses surveyed, 40.0% reported a low level of emotional exhaustion and 42.4% reported a moderate level of job performance. The results showed that there was a statistically significant negative correlation between emotional exhaustion and job performance. **Conclusion:** At Main Mansoura University Hospital, a statistically significant negative association was discovered between emotional exhaustion and job performance. **Recommendations:** Encourage a positive work environment that makes staff nurses feel secure and emotionally stable. Fostering a supportive work environment can increase staff nurses' sense of empowerment, confidence, and job performance. Provide regular training program to staff nurses for reinforcing their acquisition of communication skills, techniques and procedures of effective communication. Provide more flexible pay and incentive structures to boost the morale of nurses, enhance their work output, and ultimately raise the standard of healthcare.

**Keywords:** *Emotional Exhaustion, Job Performance, Staff Nurses*

### 2. Introduction

There are many demands on nurses in their daily work. The growing population with increasingly complex care requirements, rising cost pressure in the healthcare sector, and the ongoing staff shortage have increased nurse's job demands. Nurse's health and workability are affected by the high rates of emotional exhaustion. One of the main symptoms of burnout, emotional exhaustion which represents a specific health problem for nurses (Petersen, Wendsche, & Melzer, 2023).

Emotional exhaustion, which is characterized as feelings of being emotionally overextended

and exhausted by one's work, is a crucial component of the burnout syndrome along with depersonalization and low personal accomplishment (Kesavan & Vinita Mary, 2022). One phenomenon unique to the workplace is emotional exhaustion (Edú-Valsania, Laguía, & Moriano, 2022). As a result, the 11th version of the International Classification of Diseases by the World Health Organization recently classified emotional exhaustion as a "occupational phenomenon." It is often recognized that compared to other professional groups, nurses are more likely

to experience emotional exhaustion (Lubbadeh & Ásványi, 2021).

Burnout, a persistent state of physical and emotional depletion brought on by excessive job or personal commitments or ongoing stress, is symptomatic of emotional exhaustion. Physical exhaustion as well as a sensation of psychological and emotional exhaustion are its symptoms (Tripathi & Priyadarshi, 2023). When a nurse feels they have nothing left emotionally to offer others mentally, they are said to be emotionally exhausted. It has also been defined as a persistent condition of diminished emotional reserves brought on by stressful occupations (Pomasqui & Juna, 2024).

Emotional exhaustion can be caused by a variety of factors. The conservation of resources model of stress, for example, suggests that emotional exhaustion is most likely to arise when real resources—such as time and effort—are lost or when the expected rewards—that is, rewards from investing one's own resources—are not realized. When organizational expectations and a person's capacity to satisfy them are out of sync, workplace stress and eventually emotional exhaustion result. According to the conservation of resources theory, people who believe they lack the emotional

reserves necessary to handle interpersonal challenges will become emotionally spent. Overall, the conservation of resources model of emotional exhaustion emphasizes the need of an imbalance between effort and rewards (Bakker, Xanthopoulou, & Demerouti, 2023).

A multitude of detrimental physiological, psychological, and work-related effects have been connected to emotional exhaustion. Emotional exhaustion can result in poorer employee self-care, staff turnover, absenteeism, low morale, physical exhaustion, restless nights, increased drug or alcohol use, and marriage and family issues (Channawar, 2023). Furthermore, a number of adverse outcomes related to employment, such as role conflict at work, contemplating quitting one's current job, and actually leaving one's job, are substantially correlated with emotional exhaustion. Reduced job performance, voluntary turnover, and decreased job satisfaction are the most expensive effects of emotional exhaustion (Gillard et al., 2022).

Across the world, nurses are essential to the delivery of healthcare. Professional nurses' and other healthcare workers' performance is directly correlated with the volume and caliber of care that health care organizations offer. A key indicator of both worker productivity and patient safety is nursing performance. In addition to managing patients' care and accurately delivering drugs, nurses are also in charge of analyzing and monitoring patients' changing conditions and maintaining open lines of communication with them and their families. Thus, health care organizations ought to create plans that will support the performance and well-being of their nurses (Yohana & Meilani, 2022).

The provision of nursing care to the patient based on the professionalism of the nurses and all other relevant activities and processes is referred to as job performance. Since job performance is one of the primary determinants of production and profitability, it is essential in every hospital. Organizations typically prioritize job performance in order to accomplish their objectives. It describes actions taken by a nurse with the intention of achieving hospital goals. Work performance refers to all of the actions and tasks nurses take on a daily basis in order to accomplish their jobs. Aspects including general work behavior, devotion to core activities, conduct related to core tasks, and job-specific task mastery are becoming significant determinants in determining job performance (Cho & Kim, 2022).

Work performance is a complex phenomenon that depends on many different elements, such as an individual's traits, workload, level of satisfaction, personal work competencies, accomplishment recognition, social support, constructive criticism and communication, leadership style, and organizational culture (Nimako, & Basatan, 2022).

By utilizing their skills and expertise, nurses may better perform their jobs as nurses and adapt to changes in the medical environment and patients' demands. The work habits, staff relations and communication, patient communication, nursing care plan activities, material planning and coordination, safety measures and patient safety, innovation, documentation, and keeping up-to-date technically are the nine dimensions that make up a nurse's job performance (Speer, 2021).

### 2.1 Importance of the Research

A widespread occupational health issue affecting healthcare professionals, emotional exhaustion has a detrimental impact on nurses' physical and mental well-being, job performance, and productivity. Since emotional exhaustion affects both the quality of one's work life and the best possible functioning of an organization, it is a topic of great interest. Fatigued nurses' poor performance may be the source of proactive mistakes that lower productivity and raise organizational expenses (Asaloei, Jim, & Werang, 2024). Therefore, this study aims to assess the relationship between emotional exhaustion and job performance among staff nurses at Main Mansoura University Hospital.

### 2.2 Aim of the study

This study aimed to assess the relationship between emotional exhaustion and job performance among staff nurses at Main Mansoura University Hospital.

### 2.3 Research Questions

**RQ1:** What is the level of emotional exhaustion among staff nurses?

**RQ2:** What is the level of nurses' job performance?

**RQ3:** Is there a relation between emotional exhaustion and job performance among staff nurses?

## 3. Methods

### 3.1 Research Design

For this study, a descriptive correlational research design was adopted.

### 3.2 The study Setting

The Main Mansoura University Hospital, which offers a comprehensive spectrum of medical services in the Delta Region, served as the study's site and was used for all inpatient units.

### 3.3 Study Participants

A convenience sample of all staff nurses on duty in the time of data collection comprised the study's participants. Total number was 165 staff nurses.

### 3.4 Tools of Data Collection

Two instruments were employed to gather data:

#### **Tool I: Emotional Exhaustion Questionnaire**

This tool was created by **Maslach, Jackson, Leiter, Schaufeli, & Schwab, (1986)** to evaluate staff nurses' emotional exhaustion.

#### **It consists of two parts**

**Part I.** Personal characteristics of staff nurses such as (age, gender, educational qualifications, marital status, number of working hours per week and years of experience).

**Part II.** It consists of 9 items. Responses measured with five- points Likert scale ranging from (5 = strongly agree) to (1= strongly disagree). The scoring system of the tool ranged from (9-45). It was categorized into three levels as the following:

- Low level of emotional exhaustion <60%.
- Moderate level of emotional exhaustion 60%-75%.
- High level of emotional exhaustion >75%.

**The Nurses' Job Performance Observation Checklist is Tool (II).** This instrument was developed by **Mahmoud, Elsaid and Kamel (2020)** to assess staff nurses' job performance. It has 54 items total, broken down into the following 9 dimensions: Seven work habits, eight staff relations and communication items, seven patient communications, seven activities in the nursing care plan, two material planning and coordination items, seven safety measures and patient safety items, two innovative items, nine documentation items, and five keeping up-to-date technically. Likert scales with three points, from (0) for not applicable to (2) for done, were used to measure the responses. The scoring system of the tool ranged from (54-108). It was categorized into three levels as the following:

- low level of job performance <60%.
- Moderate level of job performance 60%-75%.
- high level of job performance >75%.

### 3.5 Validity of the study Tools

The researcher translated the tools into Arabic, and a panel of five experts from the Mansoura University faculty of nursing evaluated the tools' face and content validity and relevance. The experts revised the tools for clarity, applicability, comprehensiveness, understanding, relevancy, and ease of implementation.

### 3.6 Reliability

Cronbach's Alpha was used to assess the reliability of the job performance observation checklist and the emotional exhaustion questionnaire. Reliability was assessed and determined to be (0.835) and (0.874), respectively.

### 3.7 Pilot Study

To test the questions' clarity and viability, identify potential roadblocks and issues during data collection, and estimate the time required to complete the forms, a pilot study with 16 staff nurses (10%) of the study sample was conducted. In order to assess the tools' clarity, viability, and application, staff nurses who took part in the pilot study were removed from the overall sample, and any necessary adjustments were made in response to their feedback.

### 3.8 Ethical Considerations

Ethical approval was granted by the Mansoura University Faculty of Nursing Research Ethical Committee. The hospital's accountable administrator gave formal approval for the study to be conducted. Staff nurses who agreed to participate in the study after being told about its purpose and nature gave their informed consent. Every participant was made aware of their ability to withdraw from the study at any moment and that it is entirely voluntary. Every participant in the study received guarantees about the privacy of the study sample and the confidentiality of the data collected.

### 3.9 Data Collection

The process of gathering data took three months, starting in January 2023 and ending in March 2023. Each study participant received a questionnaire from the researcher during their morning and afternoon shifts at work, which allowed for the collection of data. The researcher gave an explanation of the study's purpose and the filling instrument. The questionnaire sheet has to be filled out in 20 to 30 minutes. Every day, between seven and eight staff nurse questionnaires were gathered. Three days a week, the researcher visited the hospital. In order to make sure all questions were addressed; staff nurses completed the questionnaire forms while the investigator was

present. Three separate days, throughout the morning and evening shifts, the investigator saw each staff nurse in action. For 45 to 60 minutes, each nurse was under observation. There were two to three staff nurses per shift on a daily basis.

### 3.10 Data Analysis

With the aid of SPSS (Statistical Package for Social Science) version 26 (IBM Corporation, Armonk, NY, USA), the gathered data were coded, entered, tabulated, and examined. The range, mean, and standard deviation were computed for quantitative data. The Chi-square test (2) was used for qualitative data, which characterize a categorical set of data by frequency, percentage, or proportion of each category, comparison between two groups, and more. The Z value of the Mann-Whitney test was used to compare the means of two groups of non-parametric data from independent samples. To compare more than two non-parametric data means, the Kruskal-Wallis ( $\alpha 2$ ) value was computed. Pearson's correlation coefficient (r) was used to assess the correlation between the variables.

## 4. Results

**Table (1)** shows the personal characteristics of the staff nurses under study. According to this table, the majority of the staff nurses (72.1%) were female, and half (50.3%) of them were between the ages of 25 and 35. In terms of education level and marital status, almost two thirds of the sample under study were married and held a technical institute of nursing diploma (67.9% and 65.5%, respectively). In terms of years of experience, almost half (46.7%) of the study's staff nurses had less than five years. In the end, over half (52.1%) of them put in 40–54 hours per week at work.

**Table 2** illustrates response of the studied staff nurses about emotional exhaustion among staff nurses. In light of this outcome, over half (53.9%) of the studied sample was disagree about; they feel emotionally drained by their work, while only (5.5%) of them were disagree about; they feel like they are at the end of their rope. Finally, regarding total agreement about emotional exhaustion (28.5%) of studied staff nurses were agree about emotional exhaustion, while (27.9 %) of them were disagree about emotional exhaustion.

**Figure 1** reveals the staff nurses under study's level of total emotional exhaustion. This

finding showed that almost half (40.0%) of the staff nurses in the research had low level of emotional exhaustion, while nearly one quarter (23.6%) of them had high level of emotional exhaustion.

**Figure 2** shows observed job performance dimensions percentages among the staff nurses under study. This graph displayed the proportion of keeping up-to-date technically dimension was the highest percentage (85.5%) followed by documentation with percentage (78.8%), while the lowest percentage was for communication with patients (44.8%) followed by staff relations and communication with percentage (50.3%).

**Figure 3** represents the staff nurses overall job performance level. This data shows that over half (42.4%) of the investigated sample performed at a moderate level on the job, while nearly one-quarter (21.8%) performed at a high level.

**Figure 4** demonstrates a relationship between the staff nurses' overall job performance scores and their total emotional tiredness levels. This finding indicates that there was a statistically significant negative association between the staff nurses under study's overall job performance scores and their total emotional exhaustion scores.

**Table 3** demonstrates the overall emotional exhaustion level in connection to the individual traits of the staff nurses under investigation. The table shows that there was no statistically significant relationship between the staff nurses' personal characteristics and overall emotional exhaustion level, although there was a statistically significant relationship ( $P=0.005$ ) between the study sample's gender and emotional exhaustion. Additionally, a statistically significant relationship ( $P=0.046$ ) was found between the staff nurses' years of experience and emotional exhaustion.

**Table 4** illustrates total job performance level of the staff nurses under study in relation to their personal attributes. The table shows that there was no statistically significant relationship between the staff nurses' personal characteristics and their overall job performance level, with the exception of a statistically significant relationship ( $P=0.0001$ ) between the staff nurses' job performance level and age. Additionally, a statistically significant relationship ( $p=0.028$ ) was found between the staff nurses' marital status and job performance

**Table 1. Personal Characteristics of the Studied Staff Nurses**

Personal characteristics	Staff nurses were examined (n=165)
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## Emotional Exhaustion and Its Relation with Job....

	n	%
♦ Years of age		
17-<25	46	27.9
25-<35	83	50.3
35-<45	27	16.4
45-42	9	5.5
Range	17-52	
Mean±SD	29.45±7.08	
♦Gender		
Female	119	72.1
Male	46	27.9
♦Status of marriage		
Single	52	31.5
Wed	112	67.9
Separated	1	0.6
♦Educational level		
Secondary School Nursing Diploma	9	5.5
Technical Institute of Nursing Diploma	108	65.5
Bachelor's degree	29	17.6
Others	19	11.5
♦Experience years		
<5	77	46.7
5-<15	56	33.9
15-<25	26	15.8
25-38	6	3.6
Range	1.00-38.00	
Mean±SD	7.84±7.56	
♦No. of working hours/ week		
24-<40	79	47.9
40-54	86	52.1
Range	24-54	
Mean±SD	40.92±5.63	

**Table 2. Response of the Studied Staff Nurses Regarding Emotional Exhaustion (n=165)**

Emotional exhaustion items	Response of he studied staff nurses (n=165)									
	Strongly disagree		Disagree		Neutral		Agree		Strongly agree	
	n	%	n	%	n	%	n	%	n	%
1. My employment is emotionally taxing me.	0	0	89	53.9	8	4.8	58	35.2	10	6.1
2. At the end of the day, I feel exhausted.	8	4.8	29	17.6	30	18.2	52	31.5	46	27.9
3. I become tired when I have to wake up early to go to work the next day.	7	4.2	15	9.1	23	13.9	61	37.0	59	35.8
4-I find it quite taxing to work with people all day long.	10	6.1	51	30.9	37	22.4	31	18.8	36	21.8
5. I feel that my employment has "burned me out."	11	6.7	24	14.5	20	12.1	65	39.4	45	27.3
6. My job is frustrating me.	10	6.1	53	32.1	41	24.8	34	20.6	27	16.4
7. I think my work at the job is too demanding.	20	12.1	69	41.8	34	20.6	22	13.3	20	12.1
8. Dealing directly with people stresses me out too	18	10.9	42	25.5	31	18.8	44	26.7	30	18.2

much.										
9-I feel as like I'm running out of options.	6	3.6	9	5.5	29	17.6	59	35.8	62	37.6
Total agreement about emotional exhaustion	10	6.1	46	27.9	28	17.0	47	28.5	34	20.6

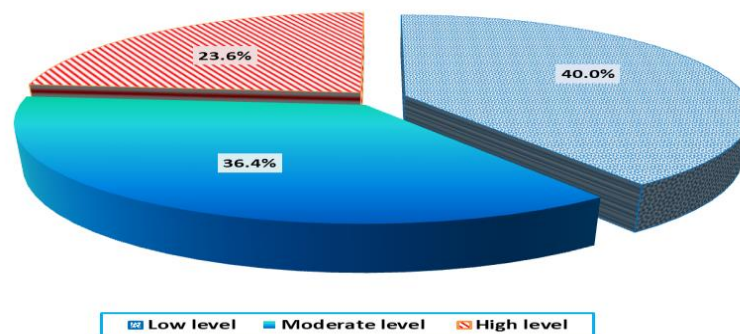


Figure 1. Level of Total Emotional Exhaustion Among the Staff Nurses that were Analyzed (n=165)

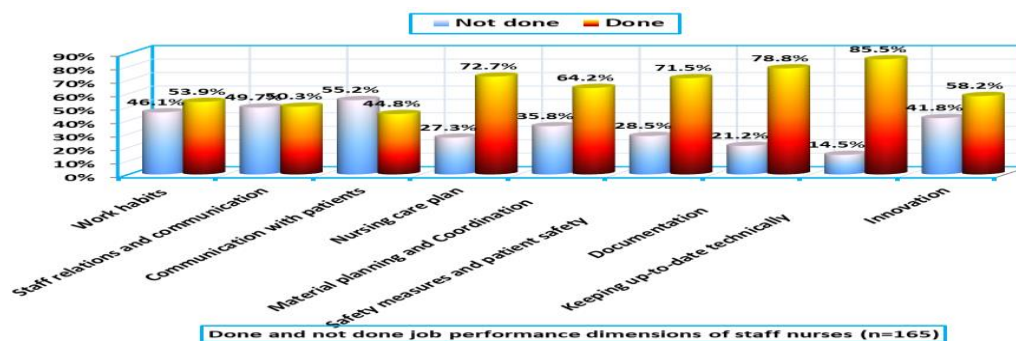


Figure 2. Observed Job Performance Dimensions Percentages of the Studied Staff Nurses (n=165)

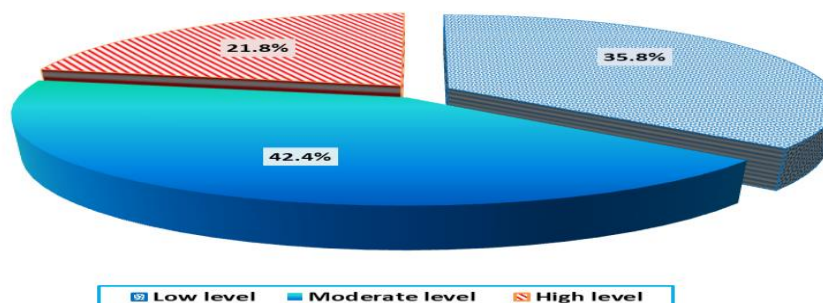
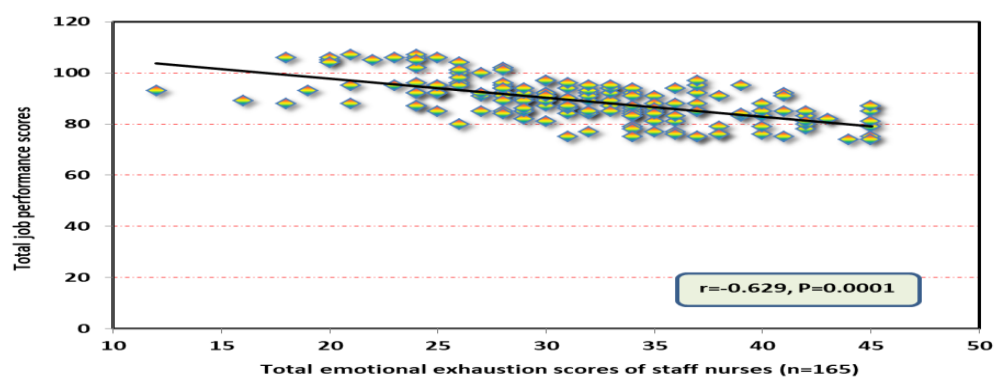


Figure 3. Total Job Performance Level of the Staff Nurses that were Examined (n=165)



## Emotional Exhaustion and Its Relation with Job....

**Figure 4. Relationship Between the Staff Nurses' Overall Job Performance Scores (n = 165) and Their Overall Emotional Exhaustion Scores**

**Table 3. Total Emotional Exhaustion Level in Relation to Personal Characteristics of the Staff Nurses Under Study (n=165)**

Individual characteristics		n		Total Emotional Exhaustion Level of the Studied Staff Nurses (n=165)						$\chi^2$ test P value	
				Low level (n=66)		Moderate level (n=60)		High level (n=39)			
				n		%		n		%	
♦Age years											
17-<25		46	18	39.1	15	32.6	13	28.3	5.591		
25-<35		83	35	42.2	27	32.5	21	25.3	0.471		
35-<45		27	11	40.7	13	48.1	3	11.1			
45-42		9	2	22.2	5	55.6	2	22.2			
♦Gender											
Female		119	39	32.8	51	42.9	29	24.4	10.620		
Male		46	27	58.7	9	19.6	10	21.7	0.005*		
♦Marital status											
Single		52	22	42.3	13	25.0	17	32.7	6.923		
Married		112	44	39.3	46	41.1	22	19.6	0.140		
Divorced		1	0	0	1	100	0	0			
♦Educational level											
Diploma of secondary school of nursing		9	3	33.3	5	55.6	1	11.1	12.410		
Diploma of technical institute of nursing		108	36	33.3	46	42.6	26	24.1	0.053		
Bachelor degree		29	18	62.1	4	13.8	7	24.1			
Others		19	9	47.4	5	26.3	5	26.3			
♦Experience years											
<5		77	34	44.2	18	23.4	25	32.5	12.848		
5-<15		56	22	39.3	25	44.6	9	16.1	0.046*		
15-<25		26	8	30.8	14	53.8	4	15.4			
25-38		6	2	33.3	3	50.0	1	16.7			
♦No. of working hours/ week											
24-<40		79	32	40.5	28	35.4	19	24.1	0.056		
40-54		86	34	39.5	32	37.2	20	23.3	0.972		

**Table 4. Total Job Performance Level in Relation to Personal Characteristics of the Studied Staff Nurses (n=165)**

individual traits	n	Total job performance level of the studied staff nurses (n=165)						$\chi^2$ test P value
		Lower level (n=66)		Level of moderation (n=60)		High level (n=39)		
		n	%	n	%	n	%	
♦Age years								
17-<25	46	13	28.3	12	26.1	21	45.7	25.667
25-<35	83	30	36.1	43	51.8	10	12.0	0.0001*
35-<45	27	10	37.0	12	44.4	5	18.5	
45-42	9	6	66.7	3	33.3	0	0	
♦Gender								
Female	119	45	37.8	51	42.9	23	19.3	1.738

Male	46	14	30.4	19	41.3	13	28.3	0.419
♦Marital status								
Single	52	19	36.5	15	28.8	18	34.6	10.870
Married	112	39	34.8	55	49.1	18	16.1	0.028*
Divorced	1	1	100	0	0	0	0	
♦Educational level								
Diploma of secondary school of nursing	9	5	55.6	3	33.3	1	11.1	7.028
Diploma of technical institute of nursing	108	43	39.8	42	38.9	23	21.3	0.318
Bachelor degree	29	8	27.6	15	51.7	6	20.7	
Others	19	3	15.8	10	52.6	6	31.6	
♦Experience years								
<5	77	23	29.9	30	39.0	24	31.2	9.831
5-<15	56	21	37.5	27	48.2	8	14.3	0.132
15-<25	26	11	42.3	11	42.3	4	15.4	
25-38	6	4	66.7	2	33.3	0	0	
♦No. of working hours/ week								
24-<40	79	30	38.0	31	39.2	18	22.8	0.635
40-54	86	29	33.7	39	45.3	19	20.9	0.728

## 5. Discussion

Emotional exhaustion is a psychological issue that could affect staff nurses. Emotional exhaustion can affect a person's mental, physical, and social wellbeing as well as the health of their family. According to **Garmendia, Fernández-Salinero, Holgueras González, & Topa, (2023)**, Emotional exhaustion can have a negative impact on people's health and wellbeing, their job satisfaction and dedication, as well as their work-related good health. In cases of emotional exhaustion, the level of the work produced may be compromised and resulting in harm to the hospitals where the nurses work, the society, and the health of the nurses themselves (**Costin, Roman, & Balica, 2023**). Therefore, research into it was necessary because, with a greater understanding of it, strategies, and measures to lessen its incidence can be developed.

Regarding to the variables investigated in the present study, the result showed that nearly half of studied staff nurses had a low level of emotional exhaustion at Main Mansoura University Hospital. This may be due to the studied staff nurses felt emotionally stable at work, felt satisfied by their job, more engaged in their job, had enough energy to work, low workload, high social support, good career advancement opportunities and adequate financial compensation.

On the same hand, with study results of **Möckli et al. (2020)** who investigated the levels of burnout and work engagement among health care workers in Switzerland and found that the majority of nurses had a low level of emotional exhaustion, as they were able

to work more independently and autonomously and have more flexible work schedules.

This finding was agreed with **Engelbrecht, Rau, Nel, & Wilke, (2020)** who carried out research on the emotional health and job engagement of nurses in private healthcare facilities in a South African metropolitan area and found that the majority of nurses had a low level of emotional exhaustion. Additionally, the outcome aligned with **Accea-López, et al., (2021)** research on burnout and job satisfaction among nurses in three regions of Spain, which revealed that over half of nurses had a low level of emotional exhaustion, as they experienced high job satisfaction and hopefulness.

As well, this result was in line with research by **Zavala, Zamora-Macorra, & Alcántara, (2022)** who examined the relationship between stress, working conditions, and burnout syndrome dimensions in a public tertiary care hospital in Mexico City. They discovered that nurses had low levels of emotional exhaustion and that these factors were linked to adequate training, teamwork, a high value placed on work, and good support. **Al-Harrasi, Al Sabei, Al Omari, and Al Abrawi, (2024)** evaluated the correlation between job burnout and resilience in nurses employed in neonatal intensive care units in Oman. Their findings indicated that the nurses under investigation exhibited minimal emotional exhaustion, which was linked to satisfactory managerial support and positive collegial relationships.

Conversely, **Poku, Donkor, and Naab, (2020)** who conducted a study about determinants of emotional exhaustion among nursing workforce in the Ghanaian health care setting and concluded that most



nurses had a high level of emotional exhaustion, which was attributed to unsupportive work environment, work conflicts and lack of social support. In the same context, **Behilak, and Abdelraof, (2020)** discovered that a high degree of emotional exhaustion was experienced by most nurses employed at Tanta University Hospital and Tanta Mental Health Hospital. This was demonstrated by a subpar work environment with little social support from coworkers and superiors.

Furthermore, the study results of **Efil, Turen, Ayvaz, Bulbul, and Yem (2022)** who evaluated the caring behaviors and burnout levels of intensive care nurses in Turkey, revealed that most of the nurses had high levels of emotional exhaustion, as they experienced low monthly income and communication problems with doctors, nurses, and other health personnel. Also, this finding was incongruent with results of **Zhang et al. (2023)** who assessed Chinese nurses' levels of role ambiguity, emotional exhaustion, and work alienation. The study found that Chinese nurses had a high level of emotional exhaustion, which was linked to their demanding jobs, long shift work, low staffing, and lack of support from coworkers.

Moreover, study results of **McCleery (2024)** who looked at the connection between job control, workplace support, and burnout in nurses employed in US hospitals, revealed that over half of the participants experienced high levels of emotional exhaustion due to feeling emotionally depleted and lacking in emotional resources.

**Regarding nurses' job performance;** The current study found that about half of the staff nurses under investigation performed at a moderate level. This could be because the staff nurses under study kept their technical skills up to date, completed paperwork, carried out nursing care plans more effectively, adhered to patient safety protocols, planned and coordinated the use of materials, and developed and created new solutions. However, over half of them neglected to maintain staff relations and patient communication.

On the same line with the study results of **Al-Homayan, Shamsudin, Subramaniam and Islam (2013)** who investigated the effects of work performance level on nurses in Saudi Arabia's public hospitals and discovered that nurses' performance was moderate. Also, **Wang et al. (2022)** who studied the relationship between job satisfaction, organizational commitment, burnout and job performance of healthcare professionals in China and found that more than two thirds of participants had a moderate level of job performance.

Additionally, **Adetola, Ayinde, Asaolu, and Olabumuyi (2022)** found that over half of the

respondents had a moderate level of job performance, meaning they perform averagely and moderately well. Their study examined the impact of work motivation on job performance among healthcare providers at University College Hospitals in Ibadan.

Also, this result was matched with the result of **Mohamed, and Ghalab (2022)** who investigated how health behaviors and physical activity affected staff nurses' job performance in Tanta; they found that over half of staff nurses performed their jobs at a moderate level overall. Additionally, **Ibrahim, Zakaria, and Abdel-Ghani (2023)** found that staff nurses at Mansoura University Hospital demonstrated a moderate level of job performance when evaluating the relationship between work-related stress and job performance. This was attributed to the availability of training programs that support the continuous acquisition of new knowledge and skills, as well as the presence of effective communication skills between staff nurses and other healthcare personnel.

Conversely, **Sleem and El-Sayed's (2011)** study, which looked at the impact of job conscientiousness on job performance, contradicted the findings of the current study by showing that the staff nurses' performance at Mansoura University Hospital's was inadequate.

In this respect, these results interfered with the study conducted by **Ibrahim, El Sayed, Attala and 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, were comparatively low, and all nurses' performance was inadequate and requires improvement.

As opposed to the findings of a study conducted in 2022 by **Alsufyani, Aboshaiqah, Alshehri, and Alsufyani**, which examined the possible connection between emotional intelligence of nurses and their job performance, Saudi Arabian nurses demonstrated a high degree of work performance. Also, this finding was inconsistent with **Kosec et al. (2022)** who investigated the relationship between workers' well-being, job satisfaction, and life satisfaction in Slovenia and discovered that most participants had high levels of work performance, which was explained by their ability to work to their full potential, maintain a high standard of work, be consistent in their work, take initiative, stay up to date on technical knowledge, show creativity and innovation, communicate politely, and maintain relationships with coworkers.

**Regarding to dimensions of job performance;** the finding of this study indicated that keeping up-to-date technically as a dimension of job performance had the highest percentage. It could be because all staff nurses in Mansoura University Hospital demonstrated skills in specific procedures for the work areas in the first and second observations, used extensive technical skills in primary, secondary, and tertiary nursing care. They carefully attain the technical nursing skills through accurate nursing classes, supervised clinical training, and ongoing professional development.

In a similar vein, **Elmohmady et al. (2020)** who conducted a study about contribution of non-technical skills on nurses' performance efficiency of nursing care process in Intensive Care Units at El Mahala El-kobra General Hospital and found that over two-thirds of nurses performed satisfactorily in terms of their overall technical skill set. Furthermore, **Ahmed, El Sayed, Mohamed, and Elsaeed (2023)** who conducted a study about sickness presenteeism and job performance among nurses at Tanta University Emergency Hospital and found that nurses' keeping up-to-date technically was the highest mean percentage of job performance dimensions.

Conversely, the current findings were at odds with a study by **Mohamed, and Ghalab (2022)** which found that over half of nurses performed poorly on their jobs related to keeping up-to-date technically.

Following keeping up-to-date technically dimension as the highest percentage in the current study, documentation was coming next in this study. The present study demonstrated that documentation of nurses' job performance ranked as the second highest dimension. This could be because most staff nurses completed their documents in the first and second observations in a timely, contemporaneous, and sequential manner which may be related to the high level of educational qualifications of the studied staff nurses, as more than half of them had the basic skills of effective documentation.

This result was consistent with a study by **Mahmoud, Elsaid, and Kamel (2020)**, which examined the impact of bullying at work on nurses' job performance in the intensive care unit at Benha University Hospital. The researchers found that the vast majority of nurses had a satisfactory level of nursing documentation, as they documented their work with ink and recorded all procedures performed. Additionally, it was demonstrated by **Abd El Rahman, Ibrahim, and Diab (2021)** that the majority of the study samples had nursing documentation of an acceptable level in their study which evaluated the relationship between the quality of the nursing

documentation system and the continuity of patient care at Tanta University Hospitals.

In contrast to the findings of **Hojat and Taheri (2014)** investigation, which revealed that the medical staff at Jahrom University of Medical Sciences in Iran performed inappropriately in data records and documents. Also, this result was in conflict with that of **Abdallah, Ebraheim, & Elbakry (2020)**, who investigated how well nurses performed in an intensive care unit connected to Mansoura Emergency Hospital, and discovered that over three-fifths of participants had unfavorable attitudes regarding quality documentation for patients.

According to the results of the current study, the lowest percentage of job performance was in the area of patient communication, indicating poor performance in this area. This could be because over half of the staff nurses in the study failed to maintain patient confidentiality, failed to fully listen to patients or their families, failed to explain the plan of care to patients, and failed to provide timely updates about the patients' care.

**Fite, Assefa, Demissie, and Belachew (2019)** observed in their study, "Predictors of therapeutic communication between nurses and hospitalized patients in Jimma hospital," that nurse had a low level of therapeutic communication. This conclusion was consistent with their findings. Moreover, **Wubneh, Emishaw, and Animaw (2020)** who evaluated the degree of communication between nurses and patients as well as the perceived barriers in the government hospital in Bahir Dar City, Ethiopia, and discovered that the lowest part of a nurse's job performance was her contact with patients. In addition, this outcome was in line with the findings of **Nawajah and Jabbarien (2021)**, who investigated nurse-patient interactions in emergency rooms in the Hebron Governorate in Palestine and discovered that these interactions are insufficient.

However, this finding was refuted by **Yazew, Gebrie, and Aynalem (2020)**, who found that more over half of the participants in their study on nurses' communication skills and related characteristics in Amhara Region Referral Hospitals, Ethiopia, had effective communication skills. Also, **Mahmoud, Elsaid, and Kamel (2020)** discovered that the majority of staff nurses had a satisfactory degree of communication with patients, with the highest percentage of staff nurses maintaining patient confidentiality and remaining composed and gentle while providing patient care.

Following communication with patients as the lowest percentage in the current study, staff relations and communication were coming next in this study.

This might be because the staff nurses neglected to involve themselves in work unit problem-solving and failed to present all staff members with accurate, timely, and comprehensive information.

In keeping with the findings of a study conducted in 2014 by **Ekici and Beder**, which revealed that over half of nurses reported poor communication and decreased teamwork with supervisors and coworkers. Additionally, **Ibrahim, El Sayed, Attala, and Elmezin (2016)** found that the nurses' levels of mutual respect, communication, cooperation, and teamwork were intolerably low. Furthermore, **Mahsan, Moustafa, Abed, and DN (2020)** asserted that the majority of the studied nurses had unsatisfactory communication skills while only more than one-quarter had a satisfactory level.

Conversely, though this finding was disagreed with **Safarpour, Sabzevari, and Delpisheh (2018)** who discovered that interpersonal relationships and communication were associated with the highest level of job success.

**In terms of the link between the study's variables**, the results showed that emotional exhaustion and job performance had a statistically significant negative correlation. This could be because presence of mutual support, mutual respect, effective communication, motivation, safe working environment, time constraints, good job opportunities and financial compensation, lead to elevating emotions of the studied staff nurses, increasing satisfaction and improving job performance.

This result was supported by the study results of **Janssen, Lam, & Huang, (2010)** who assessed the relationship between emotional exhaustion and job performance and found that the emotional exhaustion was significantly and negatively related to all of the job performance.

A study by **Gorji (2011)** regarding the impact of the job burnout dimension on employees' performance in the Iranian province of Golestan also showed a statistically significant negative correlation between emotional exhaustion and job performance, as evidenced by the high rate of job burnout among employees. Similarly, depersonalization and emotional exhaustion had the opposite effect on employees' performance.

Moreover, research by **Akeke, Folake, Adeniyi and Oluwafunmilayo (2020)** in Ekiti State, Nigeria, revealed that work pressure and emotional exhaustion had a negative impact on employee performance and that there was a significant negative correlation between the two. The study also found that emotional exhaustion had a significant impact on employee performance through physical illness.

Additionally, **Kumar and Shazania (2021)** found a substantial correlation between emotional exhaustion and job performance after studying the association between employees' emotional exhaustion and work performance in Purwokerto, Indonesia. Additionally, it was determined that emotional exhaustion had a negative impact on job performance.

**Regarding the relationship between total emotional exhaustion level and personal characteristics of the studied staff nurses**, the finding of the study showed that there was a statistically significant relation between total emotional exhaustion level and gender as well as experience years of the studied staff nurses. This may be attributed to that emotional exhaustion is highly influenced by these factors. As, the emotional exhaustion increase with more progress in experience years, since the more years of experience, the greater the responsibilities they have and gender, as female nurses were responsible for more tasks not only the job, but also their families and their children which makes them emotionally stressed.

This study is consistent with **Clari et al. (2022)** findings, who found a substantial relationship between gender and emotional exhaustion, with female nurses experiencing emotional exhaustion at a significantly higher rate than male nurses. Furthermore, research by **Jamebozorgi, Karamoozian, Bardsiri, and Sheikhbardsiri (2022)** demonstrated a statistically significant relationship between gender and emotional exhaustion. This result also agrees with that of **Ding and Wu (2023)**, who discovered a statistically significant relationship between gender and emotional exhaustion in addition to years of experience. However, this finding contradicts that of **Altintas et al. (2022)**, who reported that age, gender, and years of experience did not significantly differ from one another. Furthermore, **Sikaras et al. (2022)** observed no statistically significant difference between emotional exhaustion and age, gender, or years of job experience, which contradicted these results.

**In reference to the correlation between the overall job performance level and the personal characteristics of the staff nurses under investigation**, the findings of the study indicated a statistically significant association between the staff nurses' age and married status and the whole job performance level. This could be explained by the fact that these elements have a significant impact on job performance. Given that married nurses are more stable in their lives and concentrate on reaching their goals and objectives, job performance increases with age and marital status.

This study is consistent with **Son et al. (2013)** findings, who reported that age and marital status were

significantly associated with nurses' job performance. Additionally, **Pourteimour, Yaghmaei, and Babamohamadi (2021)** showed that nurses' job performance had significant correlation with marital status and age. Also, this result is matched with **Meliala, Yustina, Zulfendri, Setiawan, and Nasution (2022)** who stated that nurses' age and marital status had a significant relationship with nurses' performance.

This outcome, however, disagreed with **Mosaferchi (2017)**, who discovered no connection between nurses' job performance and age, gender, or marital status. Also, these results disagreed with **Abd El-Hamid, Soliman, and Melika (2018)** who reported an insignificant correlation between nurses' age and marital status and their work performance.

### Conclusion

Based on the study's findings, it was determined that about half of the staff nurses at Main Mansoura University Hospital demonstrated a moderate level of job performance and a low degree of emotional tiredness, respectively. Additionally, there was statistically significant negative correlation found between emotional exhaustion and job performance at Main Mansoura University Hospital.

### Recommendations

Considering the results, it is recommended that:

- Encourage a positive work environment that makes staff nurses feel secure and emotionally stable.
- Fostering a supportive work environment can increase staff nurses' sense of empowerment, confidence, and job performance.
- Provide regular training program to staff nurses for reinforcing their acquisition of communication skills, techniques and procedures of effective communication
- Provide more flexible pay and incentive structures to boost the morale of nurses, enhance their work output, and ultimately raise the standard of healthcare.

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