RESEARCH ARTICLE

Evaluation of Leadership Competencies among Nurse Managers

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ABSTRACT

Objectives: The study aims at assessing the level of leadership competencies and finding the significant differences in these competencies with regard to nurse managers' age, gender, qualification, and years of experience.

Materials and methods: A descriptive analytical study design that is initiated for the period of October 1st 2021 to June 1st, 2022. The sample of the study includes 260 nurse managers was selected by convenient sampling method (non-probability sample). The setting of the study includes the teaching hospitals in Baghdad city. The Leadership Competencies Scale was used in this study, which comprised of 26 items distributed on four dimensions: 5 items for Leading Change; 7 items for leading nurses; 6 items for Results Driven; 5 items for Communications. The data have been collected through the utilization of the self-administrative report as a mean of data collection. Statistical analyses were conducted by using statistical package for social science (IBM SPSS Statistics) version 26.0.

Results: The study found that nurse managers show good competencies regarding leadership of change style ($M\pm SD= 21.23\pm2.664$), show good competencies regarding subordinate leadership style ($M\pm SD= 29.61\pm3.863$), show good competencies regarding focus on result style ($M\pm SD= 25.31\pm3.075$), and show good competencies regarding leadership of communication style ($M\pm SD= 21.60\pm2.491$). No significant differences have been reported in leadership competencies with regard to nurse managers' age, gender, qualification, and years of experience.

Conclusions: Based on the study finding, the study concludes that nurse mangers are showing good leadership competencies regarding leadership style of change, subordinate style, results-focused, and communication based style.

Recommendations: The study is recommended for conducting a study to explore the influence of leadership management on subordinates job satisfaction and patients' satisfaction in health care setting.

Keywords: Leadership styles Competencies, Nurse Managers

INTRODUCTION

Nursing leadership is one of the single most important factors in motivating and inspiring nurses (who make up the clear majority of the healthcare workforce) to practice at the top of their licensure. The ANA Leadership Institute describes a nurse leader as "a nurse who is interested in excelling in a career path, a leader within a healthcare organization who represents the interests of the nursing profession, a seasoned nurse or healthcare administrator interested in refining skills to differentiate them from the competition or to advance to the next level of leadership (Scully, 2015).

Nursing leadership and management is most successful when the entire team is also successful. While the definition of leadership in nursing often includes qualities such as encouraging, inspirational, and supportive—truly successful nursing leadership must be equipped to evolve as the nursing industry itself experiences ongoing change and shifts. This style of nursing leadership has been linked to improved patient outcomes, reduced medical errors, and improved staff retention, benefiting the healthcare workplace as whole (Clark, 2008).

Overall, leadership competencies could be used as the basis for strengthening an enterprise's leadership team and determining the types of educational and leadership development opportunities that are needed for future leaders. There is, however, no empirical research has been conducted on the reality of leadership competencies of middle managers and its impact on subordinates' job performance (Zaqout, 2016).

Nurse leadership has been identified as a contributing factor to nurse job satisfaction and perceptions of the practice environment, that strong nursing leadership at the unit level is critical for the development of healthy practice environments. The literature reveals that a leader's attributes are key factors that influence nursing job satisfaction and the practice environment; In addition, empirical evidence suggests a relationship between nursing leadership and nursing care, the practice environment and quality patient care outcomes (Munro, 2011).

Nurses manage care for individual clients, families, and communities in hospitals, outpatient settings, clinics, health departments, home health agencies, long-term care facilities, and rehabilitation centers as well as in other specialized health care organizations, the strategies they use to organize care are drawn from leadership and management theories (Sfantou, 2017).

The style of leadership affects the health care delivery system. A style allows nurses to interact more productively and more harmoniously to achieve personal and organizational goals (Summers, 2021). Therefore, current study is focusing on evaluation of leadership styles competencies among nurse managers considering as a key in successful leadership and management that serves the policy of healthcare institutions.

Objectives of the Study

The study aims at assessing the level of leadership competencies and finding the significant differences in these competencies with regard to nurse managers' age, gender, qualification, and years of experience.

METHOD

A descriptive analytical design that is conducted for the period of October 1st 2021 to June 1st, 2022; an assessment approach is applied in order to achieve the earlier stated objectives.

The ethical consideration of research is achieved by obtaining the agreement from the Committee of Research Ethics at College of Nursing, University of Baghdad. In addition, the agreements of the participants were asked for participation in research by filling the participation consent in covering letter of the questionnaire.

After getting approved by the College of Nursing Council/the University of Baghdad, the researcher provided a detailed description of the objectives and project of the study to Ministry of Planning, Central Statistical Organization approved the study instrument; Additional permission was got from the Ministry of Health and Environment /Baghdad Health Directorate /Training and Human Development Center/ for having access to teaching and non-teaching hospital at Baghdad city.

The setting of the study was conducted at teaching and non-teaching hospital in Baghdad city.

Convenience sample "non-probability" of (260) Male and female nurse managers who worked in teaching and non-teaching hospital, sample of nurses had been selected from teaching and non-teaching hospital distribution in Baghdad.

The questionnaire of the study is adopted to fit the current study which consists of two parts; the first part is contained the covering letter and the socio-demographic variables that are: age, gender, nursing qualification, job title, and years of experience; the second part is concerned with leadership styles competencies.

The Leadership Styles Scale was comprised of 23 items were distributed on four dimension as: 5 items for Leading Change; 7 items for Leading nurses; 6 items for Results Driven; 5 items for Communications, all items were rated into 5-Likert scale and scored as follows: strongly disagree= 1, disagree=2, neutral=3, agree=4, and strongly agree=5. The total score of leadership competencies was calculated by estimation the range score for total score and rated into three levels as follows: Poor= 23 – 53.66, Fair= 53.67 – 84.32, Good= 84.33 – 115; while each domain was scored as: leadership of change (Poor= 5 – 11.66, Fair= 11.67 – 18.32, Good= 18.33 – 25), subordinates leadership (Poor= 7 – 16.33, Fair= 16.34 – 25.66, Good= 25.67 – 35), result-focused leadership (Poor= 6 – 14, Fair= 14.1 – 22, Good= 22.1 – 30), and communication leadership (Poor= 5 – 11.66, Fair= 11.67 – 18.32, Good= 18.33 – 25). The level of each item in sub-domain is calculated bay estimation the cut off point for mean score and rated into three level as follows:

Low= 1 – 2.33, Moderate = 2.34 – 3.67, High = 3.68 – 5.

Relevancy and adequacy of questionnaire was achieved through panel of experts who reviewed the content validity.

The reliability of the questionnaire is achieved through Cronbach's Alpha (Alpha Correlation Coefficient which was statistically adequate (r=732).

The data have been collected through the utilization of the self-administrative report as a mean of data collection. The questionnaire was distributed after being willing to answer the questionnaire and participate in the study.

Statistical analyses were conducted by using statistical package for social science (IBM SPSS Statistics) version 26.0. Data analysis was employed through the application of descriptive and inferential statistical approaches to achieve the objectives of the study.

RESULTS

Table 1: Distribution of Nurse Managers according to their Socio-demographic Characteristics

Characteristics		No	%
Age **M±SD= 39.05±8.298**	20 – less than 30 year	40	15.4
	30 – less than 40 year	99	38.1
	40 – less than 50 year	89	34.2
	50 ≤ year	32	12.3
	Total	*260*	*100*
Gender	Male	100	38.5
	Female	160	61.5
	Total	*260*	*100*
Nursing qualifications	Secondary school	51	19.6
	Diploma	78	30
	Bachelor	111	42.7
	Postgraduate	20	7.7
	Total	*260*	*100*
Years of experience	Less than 5 years	40	15.4
	5 – less than 10 years	96	36.9
	10 years ≤	124	47.7
	Total	*260*	*100*

No: Number, %: Percentage, M: Mean, SD: Standard deviation

The descriptive analysis of nurse managers in this table shows that their average age is 39.05±8.298 years in which the highest percentage refers to 38.1% with age group 30 – less than 40 years. The gender refers that 61.5% of nurse managers are females and 38.5% of them are males. Regarding nursing qualifications, 42.7% of nurse managers are graduated with bachelor degree in nursing, 30% are graduated with diploma and only 7.7% of them are with postgraduate degrees. Concerning years of experience, 47.7% of nurse managers having 10+ years of experience and 36.9% are with 5- less than 10 years of experience.

Table 2: Evaluation of Leadership of Change Competencies among Nurse Managers

Leadership of change	No	%	M	SD
Poor	0	0		
Fair	34	13.1		
Good	226	86.9	21.23	2.664
Total	*260*	*100*		

No: Number, %: Percentage
M: Mean for total score, SD: Standard Deviation for total score
Poor= 5 – 11.66, Fair= 11.67 – 18.32, Good= 18.33 – 25

This table indicates that nurse managers show good competencies regarding leadership of change style (M±SD= 21.23±2.664) in which 86.9% of them show good level.

Table 3: Evaluation of Leadership Subordinate Competencies among Nurse Managers

Subordinate leadership	No	%	M	SD
Poor	0	0		
Fair	32	12.3		
Good	228	87.7	29.61	3.863
Total	*260*	*100*		

No: Number, %: Percentage
M: Mean for total score, SD: Standard Deviation for total score
Poor= 7 – 16.33, Fair= 16.34 – 25.66, Good= 25.67 – 35

This table indicates that nurse managers show good competencies regarding subordinate leadership style (M±SD= 29.61±3.863) in which 87.7% of them show good level.

Table 4: Evaluation of Leadership of Results Driven Competencies among Nurse Managers

Focus on results	No	%	M	SD
Poor	1	.4		
Fair	36	13.8		
Good	223	85.8	25.31	3.075
Total	*260*	*100*		

No: Number, %: Percentage
M: Mean for total score, SD: Standard Deviation for total score
Poor= 6 – 14, Fair= 14.1 – 22, Good= 22.1 – 30

This table indicates that nurse managers show good competencies regarding focus on result style (M±SD= 25.31±3.075) in which 85.8% of them show good level.

Table 5: Evaluation of Communication Competencies among Nurse Managers

Communication	No	%	M	SD
Poor	1	.4		
Fair	23	8.8		
Good	236	90.8	21.60	2.491
Total	*260*	*100*		

No: Number, %: Percentage
M: Mean for total score, SD: Standard Deviation for total score
Poor= 5 – 11.66, Fair= 11.67 – 18.32, Good= 18.33 – 25

This table indicates that nurse managers show good competencies regarding leadership of communication style (M±SD= 21.60±2.491) in which 90.8% of them show good level.

Table 6: Significant Difference in Leadership Competencies with regard to Nurse Managers' Variables

Competencies	Age		Gender		Qualification		Years of experience	
	P-value	Sig.	P-value	Sig.	P-value	Sig.	P-value	Sig.
Leadership of change	.253	N.S	.959	N.S	.806	N.S	.060	N.S
Subordinate leadership	.123	N.S	.824	N.S	.794	N.S	.253	N.S
Focus on results	.339	N.S	.809	N.S	.726	N.S	.577	N.S
Communication	.525	N.S	.814	N.S	.623	N.S	.628	N.S

This table depicts that there is no significant differences in leadership competencies with regard to nurse managers' age, gender, qualification, and years of experience.

DISCUSSION

The descriptive analysis of nurse managers in table (1) showed that average age of nurse manager is referring to 39.05±8.298 years and the highest percentage was seen with age group of 30 – less than 40 years. The analysis of gender variable revealed that more than half of nurse managers are females and remaining are males. The finding related to age reveals that nurse managers are young adult and they have to be in a position with bearing responsibilities that indicate they are administratively mature enough to get a responsibility. The finding related to gender may reveal the male – female ratio for nurses working in this field that indicate female nurses are more than males. On the other had such findings confirms that female nurses as manager reflects their aptitudes and competencies to be a leader. A study found supportive evidence that found nurse managers are young adult with average age 44.73 years and females were more than males (Oppenheimer, 2021).

Regarding nursing qualifications, more than third of nurse managers are graduated with bachelor degree in nursing, and others are graduated with diploma and only some of them are with postgraduate degrees. Such findings indicate that more of those have hold administrative positions are with higher education and learned abilities about management; in addition to that, the high education is considered in appointment of managers according to organization policy. According to Oppenheimer, the nurse managers are to be appointed in the care institutions, they required at minimum a bachelor degree in nursing sciences; some other institutions require the level of master degree to appoint the nurse managers (Salem, 2018).

The years of experience demonstrated that nurse managers having 10+ years of experience. This finding is supported by study that found the majority of sample was nursing staff concerning the job title [8].

The results of this study implicate that nurse managers consider themselves to have quite good competencies in leadership and management. However, it should be noted that competence is always context related, which is why a self-assessment by nurse managers of their skills in their own particular situation is important. Self-assessment gives the respondents a possibility to gain ownership of developing their leadership and management competencies (Benner et al., 2010).

The table (2) indicated that nurse managers show good competencies regarding leadership of change style (M±SD= 21.23±2.664) in which most of them show good level. The finding explain the high competencies of nurse managers related to change style, these competencies are related to higher performance and outcomes. This finding is supported by the study that found nurse leader are associated with high competencies related to change style (MacMillan-Finlayson, 2010).

The analysis in table (3) indicated that nurse managers show good competencies regarding subordinate leadership style (M±SD= 29.61±3.863). These findings reflect the nurse managers' skills and competencies in management as they deal with subordinates in healthcare institution and have the abilities to motivate, inspire, and increase their competency that implies in providing good quality of care. A study found supportive evidence for this study that nurse managers show good leadership competencies that reflected to their

subordinates and influence on their job satisfaction (Albagawi, 2019).

The table (4) indicated that nurse managers show good competencies regarding focus on result style (M±SD= 25.31±3.075). These finding reveals the leadership competencies in nurse managers and show their power of management by focusing on results which is going prolonged with the policy of health care institution which achieve the vision and mission of those institutions. A study found supportive evidence that found by study of Kruse (2019).

The table (5) indicated that nurse managers show good competencies regarding leadership of communication style (M±SD= 21.60±2.491). Such findings could be explaining that nurse manager have good communication skills enable them to be good managers. Their ability to communicate effectively is beneficial for patients' outcomes as well as increase job satisfaction of subordinates. Skills such as public speaking, writing, presenting and listening are important for a successful leader and help win trust from patients, colleagues and staff (Kourkouta, 2014).

The table (6) depicted that there is no significant differences in leadership competencies with regard to nurse managers' age, gender, qualification, and years of experience. The age related finding could be explained that leadership does not imply on age of those managers as hypothesized by theories of leadership particularly the trait theory of leadership. The gender related findings imply that females and males have the same competencies in leadership and management, so beyond the principle of feminism, the females now can lead and do changes in organizational setting as well as in the community. A study provides supportive evidence for current study that found there is no effect of gender on leadership (Alghamadi et al., 2017). The finding related to qualifications could be explained based on descriptive results of nursing qualifications for nurse managers; the highest percentage was referred to bachelor degree, those who have graduated from college are with higher level of knowledge due to their curriculum that include studying management, in which they earned good knowledge during study and supported by their experience in real practical setting what make them are with high level of knowledge and skills about management, therefore, no significant relationship has been seen. The finding related to years of experience could be explained that the foremost theme that emerged from participants' responses centered on the nurse manager and staff relationship. Some of the participants indicated that they couldn't specify one experience that was most satisfying; however, their experiences were associated with their staff. Regarding what kept

them in the role for at least 5 years, the nurse managers again emphasized their staff. This finding is supported by the study that found there is no influence of years of experience on leadership style (Mushtaq et al., 2019).

CONCLUSIONS

Based on the study finding, the study concludes that nurse mangers are showing good leadership competencies regarding leadership style of change, subordinate style, results-focused, and communication based style. No significant differences in leadership competencies with regard to age, gender, qualification, and years of experience among nurse managers.

RECOMMENDATIONS

The study is recommended for conducting a study to explore the influence of leadership management on subordinates job satisfaction and patients' satisfaction in health care setting. Replicate the study for a large sample size with various variables in much different health care setting.

ETHICAL CONSIDERATIONS COMPLIANCE WITH ETHICAL GUIDELINES

This study was completed following obtaining consent from the University of Baghdad.

AUTHOR'S CONTRIBUTIONS

Study concept, Writing, Reviewing the final edition by all authors.

DISCLOSURE STATEMENT:

The authors report no conflict of interest.

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