

Relation between Workplace Civility climate and Job Performance of Nursing Staff in Dialysis unit

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Abstract

Background: A civility climate can affect nurses' practice and job performance through acceptance and correction of errors which leads to improved quality of care and job performance, **Aim of the study:** To assess the relation between workplace civility climate and job performance of nursing staff. **Research design:** A descriptive correlational research design. **Subjects:** All staff nurses working in the dialysis unit in Edfu General Hospital, their total numbers were 87 nurses. **Setting:** Edfu General Hospital, in Aswan city, Egypt. **Tools of data collection:** included two tools; the first tool to assess nursing workplace civility climate; and the second tool, to assess the level of the Job Performance scale. **Results:** One-third of the nursing staff had a high level of total perceived workplace civility climate dimension. The majority of the nursing staff had a satisfactory level of total job performance. There were statistically significant relations between nursing staff's perceived workplace civility climate with qualification and their current position respectively. **Conclusion:** planning & evaluation of the nursing staff and total perceived workplace civility climate were positively correlated. **Recommendations:** Educate nurses of all levels on how to foster a civil workplace climate, provide new hires with a copy of the hospital's staff nurse policy manual as part of their orientation, and conduct a further similar study for nurses in the different levels of hospitals or hospitals in the different areas.

Keywords: Job Performance, Nursing, Relation, Workplace Civility climate

Introduction

Health organizations dedicated to improving people's health have a major impact on a nation's economy and culture. When workers are healthy, they can do their jobs better, which has a positive effect on the economy as a whole. Because nurses play such a crucial role in the healthcare system, their work is never undermined. Proper patient care is impossible without their prompt involvement. Nurses, on the other hand, are vulnerable to workplace violence and hostility because of the negative stereotypes surrounding their profession (Faheem, 2017).

Workplaces with high levels of civility should have rules, regulations, and processes that limit rudeness and verbal abuse. A positive civility climate denotes a setting that encourages honest communication and safer behaviors that boost self-efficacy. Contrarily, a hostile civility environment is marked by mistrust and fear and leads to a refusal to accept responsibility for errors (Ramsey, 2018 & Beus, 2020). Good therapeutic relationships are maintained by nurses' civil behavior. Nurses who are shielded from uncivil behavior or problems are more likely to quit their jobs. Correct communication and a civil environment between head nurses and their nursing staff in a hospital setting not only increase self-efficacy, hope, optimism, and flexibility (Feldblum & Lipnic, 2016).

The prevalence of workplace incivility and deviance toward nurses is significant worldwide, with incivility focusing primarily on psychological abuse through verbal rather than physical harassment, indirect rather than direct mistreatment, and passive rather than active behavior toward the individual (Itzkovich & Heilbrunn, 2016).

Workplace incivility, which is considered a work stressor, is characterized as low-intensity aberrant behavior with ambiguous intent to injure the target and in violation of workplace norms for mutual respect (Demsky, Fritz, Hammer, & Black, 2019). According to estimates, 98% of

nurses encounter rude behavior at least once every week. It is estimated that workplace incivility toward nurses costs organizations \$14,000 per nurse each year. These statistics are concerning because they have a significant negative financial impact on the organizations that employ nurses and negatively impact many nurses. Additionally, the human costs suffered by nurses who are subjected to incivility at work are rather high. (Cho, Bonn, Han, & Lee, 2016)...

Job performance is the benefit an organization can anticipate from certain actions taken by nurses over time. The effectiveness of organizations depends on nurses demonstrating both task performance and contextual performance. When a nurse does a task, it immediately relates to the services and primary activity for which they were employed, however, when a nurse performs contextually, it does not directly relate to the task or main activity but rather demonstrates how they feel about the organization. It is seen as an additional performance. The most important aspect in accomplishing organizational objectives and enhancing organizational performance, in the end, is the nursing staff's job performance (Warr & Nielsen, 2018).

There are eight ways to encourage a culture of civility: self-reflection, self-evaluation, identifying personal strengths and areas for improvement, positive behavior modeling by a professional nurse, education about personality types and diversity in thought to foster a better understanding of oneself and others, establishing rules for nurses regarding mutual respect, and fostering an environment that is welcoming and free from judgment. Finally, promoting cultural humility training throughout the organization, delivers training in leadership, teamwork, and communication, and promotes incivility-related ethical and legal research, policy formulation, and enforcement (Stalter et al., 2020)

Significance of the study:

Enhancing the working environment and strengthening the bonds between nurses are crucial elements that can raise the organization's performance and productivity and preserve nurses' work (Ajayi et al., 2018). In Egypt, Hossny et al. (2015) assessed the effect of workplace civility structural and psychological empowerment on newly graduated nurses' organizational commitment at hospitals in Assiut city and reported that civility constitutes an important part of the organizational climate perceived by nurses.

Moreover, the study by Leiter et al. (2012) demonstrated that positive nurses and workplace outcomes have been linked to a more civil workplace climate, including increased job satisfaction, organizational commitment, management trust, performance on the job, and organizational citizenship behavior, and decreased turnover, absenteeism, anxiety, stress, and counterproductive behavior. A culture of civility is essential for building morale, strengthening relationships, and maximizing productivity in the workplace.

Aim of the Study

The aim of the current study is to assess the relation between workplace civility climate and job performance of nursing staff.

Research Question

Is there a relation between workplace civility climate and job performance of nursing staff in Edfu general hospital?

Subjects and Methods

Research Design

A descriptive correlational research design was used to achieve the aim of the current study.

Setting

The study was conducted in the dialysis unit at Edfu General Hospital in Aswan city, Egypt.

Subjects

The subjects of the study sample included all staff nurses working in the dialysis unit in Edfu General Hospital during the data collection period. Their total numbers were 87 nurses.

Data Collection Tools

Data was collected through the utilization of two tools as follows:

Tool (1): Perceived Workplace Civility Climate (PWCC): It included two parts:

Part I: Personal Data

It was used to collect data about nurses and encompass seven (7) items such as department, age, gender, marital status, educational level, position, and years of experience.

Part II: PWCC It was developed by **Ottinot (2010)** and translated into Arabic by the researcher. It was used to measure the workplace civility climate by the nurses themselves. It consists of 24 items grouped under two theoretical dimensions management (14 items) and employee (10 items). The items were measured by using a five-point Likert scale ranging as 5 = strongly agree, 4= agree, 3=

neutral, 2= disagree, and 1= strongly disagree, and there were five items scored as reverse no. 2, 4, 8, 12, and 23

Workplace civility climate was rated on a scale from 24 to 120, with low scores corresponding to a civility level between 24 and 66, moderate scores falling between 67 and 89, and high scores, in the range of 90 to 120, indicating high civil work climate.

Tool (2): Job Performance scale (Observational checklist)

This tool developed by **Samiei et al. (2016)**, adapted and translated by the researcher, was used to measure the job performance of nursing staff by the researcher herself; it consists of 52 items grouped under six theoretical dimensions as communication (12), leadership (5), critical care (7), teaching & collaboration (11), planning & evaluation (7), and professional development (10). The items were measured by using two-level, which concludes two parts of don or not done .as done =1 and not done = 0.

The scoring system for job performance ranged from 1 to 52, which was divided into satisfactory ≥ 31.2 ($\geq 60\%$) and unsatisfactory performance < 31.2 scores ($< 60.0\%$).

Validity of the tools:

A panel of five nursing administration specialists evaluated content validity of the tools, two reviewers from Assuit University faculty of nursing, two reviewers from Minia University faculty of nursing, and one reviewer from South University, and necessary modifications were done.

Reliability of the tools

The tools were tested for internal reliability by using Cronbach's alpha test as follows: perceived workplace civility climate at 0.833 and job performance at 0.855.

Pilot Study

A pilot study was conducted prior to the main data collection phase, which involved 10% (8 nurses) of the nursing staff at the Edfu General Hospital. The purpose of the pilot study was to test the comprehensiveness, clarity, applicability, and accessibility of the tools and assess whether or not the tools were easy to understand and use.

Data Collection Procedure

Participants were recruited from the dialysis unit at Edfu General Hospital. Each participant was interviewed individually after taking their oral consent to participate in the study and explained the nature of the study to the participants. The time required for observation was estimated after making the pilot study.

Before distributing the questionnaires, the researchers met with the participants at a time established by the head of each department, introduced herself, and discussed the research aim as well as the components of the tools with the participants in the study environment. Next, the researchers distributed the data gathering tools to each participant at their workplace. The questionnaire form took roughly 20 minutes to complete. The researchers observed one nurse/shift/day in the morning, evening, and night shifts every Sunday and Monday / week. Data collection time took five months from the beginning of February 2021 to July 2021; tool (II): Perceived Workplace Civility Climate (PWCC): was distributed to nursing staff in the dialysis unit to fill the questionnaire., while Tool (II): Job Performance scale

(observational checklist) was collecting the data by the researcher himself, who observed and record data.

Ethical Consideration

The Minia University Faculty of Nursing's Research Ethics Committee approved a formal letter. The dean of Minia University's faculty of nursing gave her approval for the study to be carried out. The nursing director and chief nurses in charge of each department gave their approval, as well as the hospital managers and the hospital's head nurse.

Before conducting the pilot study and the actual study, oral consent was obtained from nurses who were willing to participate in the study after explaining the nature and purpose of the study. The study subject can refuse to participate or withdraw from the study without any rationale. Study subject privacy was considered during the collection of data. Participants were assured that all their data were highly confidential; anonymity was also assured by assigning a number for each nurse instead of names to protect their privacy.

Data statistical analysis

After the data collection process was complete, the "Statistical Package for Social Science" (SPSS) was used to

score, tabulate, and analyze the data (IBM 28). Descriptive statistics were used to show the data as percentages, frequency means, and standard deviation. The Chi test, Fisher exact test, and Pearson correlation were employed to determine group differences and the relationships between the research variables in inferential statistical tests of significance. When the p-value is greater than 0.05, the result is non-significant; nevertheless, when the p-value is lower than 0.05 and higher than 0.01, the result is very significant. Based on their individual data, the Fisher exact test/chi test was utilized to determine the relationship between perceived workplace civility climate and job performance.

Correlation is used to test the nature and strength of the relation between personal data of the nursing staff, perceived workplace civility climate, and job performance. The sign of the coefficient indicates the nature of relation (positive/negative) while the value indicates the strength of relation as follows: no correlation for rho value less than 0.19, a weak correlation for rho of value between 0.20 - 0.29, a moderate correlation for rho of value between 0.30-0.39, a strong correlation for rho of value between 0.4-0.69, and very strong correlation for values between 0.7-0.99

Results

Table (1): Distribution of the studied nursing staff according to their personal data (n= 87).

Personal data	Nursing staff (n= 87)	
	No.	%
Age / years		
• 20 - < 25	45	51.7
• 25 - < 30	35	40.3
• 30 - 35	7	8.0
Mean ± SD	25.0 ± 3.2 year	
Gender		
• Male	7	8.0
• Female	80	92.0
Marital status		
• Single	30	34.5
• Married	57	65.5
Qualification		
• Diploma	4	4.6
• Nursing technician	75	86.2
• B.Sc	8	9.2
Current position		
• Nurse	79	90.8
• Head nurse	8	9.2
Years of experience in the current department		
• 1 - <6	70	80.5
• 6- <11	10	11.5
• 11- 16	7	8.0
Mean ± SD	4.0 ± 3.5 year	

Table (1): presents that more than half (51.7%) of the studied nursing staff were aged between 20 - < 25, with a mean age of 25.0 ± 3.2 years. Most of the studied nursing staff was female and working as a nurse (92.0% & 90.8%, respectively). Nearly two-thirds of the studied nursing staff were married (65.5%), and the majority (86.2% & 80.5% respectively) of them graduated a nursing technician, and their years of experience in the current department ranged from 1- < 6 years with mean experience 4.0 ± 3.5 years in the nursing field.

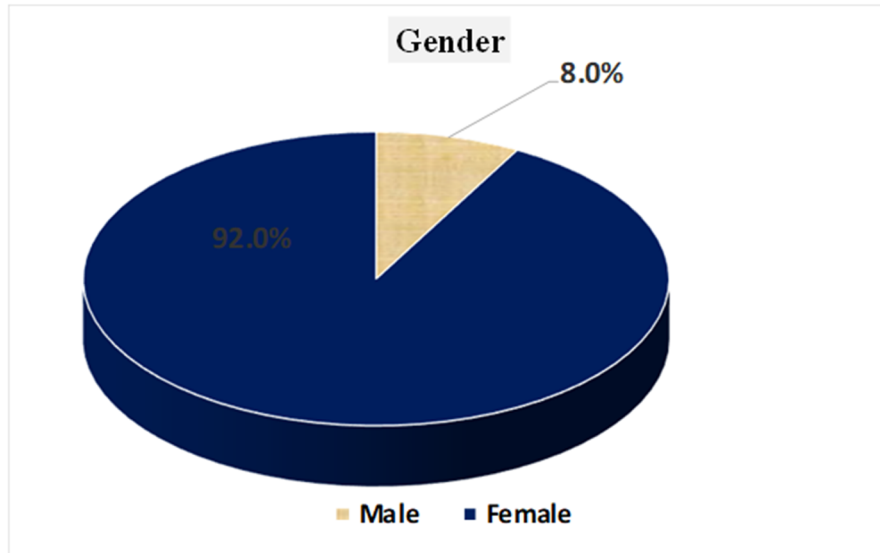


Figure (1): Distribution of the nursing staff according to their gender (n = 87)

Figure (1): illustrates that most (92.0%) of the nursing staff were female, and a minority (8.0 %) of them were male.

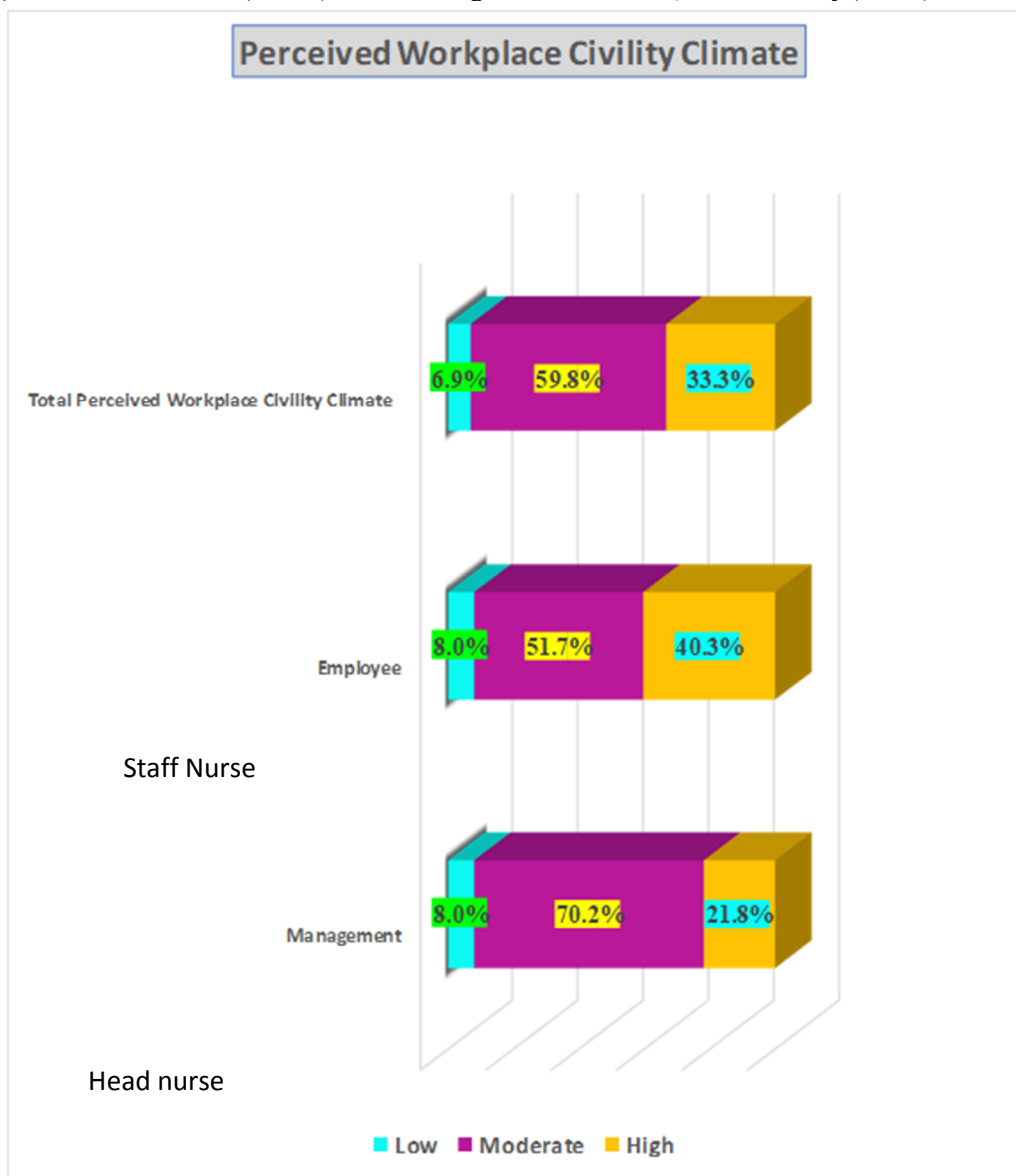


Figure (2) Distribution of Nursing Staff Level of Perceived Workplace Civility Climate and its domains (n= 87).

Figure (2): presents that one-third (33.3%) of the nursing staff had a high level of perceived workplace civility climate dimension; more than one-third of them (40.3%) had a high level of employee workplace civility dimension and near to one-quarter of them (21.8%) had a high level for head nurse perceived workplace civility climate domain.

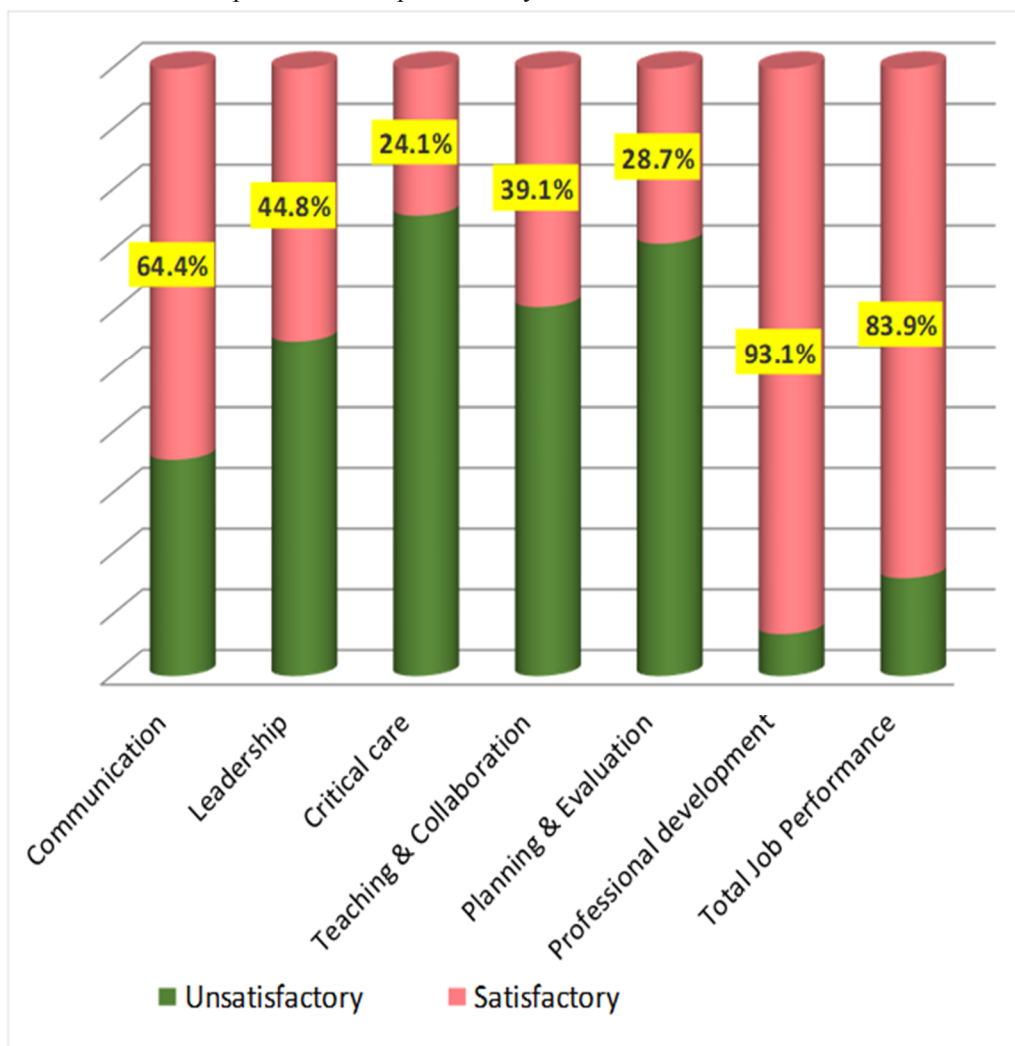


Figure (3): Distribution of Nursing Staff regarding dimensions levels of Job Performance (n= 87).

Figure (3): present that near to two-thirds (64.4%) of the nursing staff had a satisfactory level of communication, most (93.1%) of them had a satisfactory level of professional development, and the majority (83.9%) of them had a satisfactory job.

Table (2): Relation between personal data of nursing staff about their perceived workplace civility climate (n = 87).

Personal data	No.	Perceived workplace civility climate						P-value
		Low (n= 6)		Moderate (n=52)		High (n=29)		
		No.	%	No.	%	No.	%	
Gender								
• Male	7	0	0.0	5	71.4	2	28.6	0.687 NS
• Female	80	6	7.5	47	58.8	27	33.8	
Marital status								
• Single	30	3	10.0	19	63.3	8	26.7	0.510 NS
• Married	57	3	5.3	33	57.9	21	36.8	
Qualification								
• Diploma	4	0	0.0	3	75.0	1	25.0	0.017*
• Nursing technician	75	6	8.0	48	64.0	21	28.0	
• B.Sc	8	0	0.0	1	12.5	7	87.5	
Current position								
• Nurse	79	6	7.6	51	64.6	22	27.8	0.003**
• Head nurse	8	0	0.0	1	12.5	7	87.5	

Fisher exact test was used to calculate p value NS= Not statistically significance differences * = statistically significance differences at < 0.05 ** = statistically significance differences at < 0.01

Table (2) presents statistically significant relations between nursing staff's perceived workplace civility climate with qualification and their current position. The majority (87.5%) of the nurse's staff who had bachelor's degrees in nursing and worked as head nurses have had a high-level workplace civility climate with a (P-value <0.017& 0.003, respectively).

Table (3): Relation between personal data of nursing staff with their job performance (n = 87).

Personal data	No.	job performance levels				P-value
		Unsatisfactory (n=14)		Satisfactory (n=73)		
		No.	%	No.	%	
Gender						
• Male	7	0	0.0	7	100.0	0.227
• Female	80	14	17.5	66	82.5	
Marital status						
• Single	30	3	10.0	27	90.0	0.262
• Married	57	11	19.3	46	80.7	
Qualification						
• Diploma	4	0	0.0	4	100.0	0.539
• Nursing technician	75	12	16.0	63	84.0	
• B.Sc	8	2	25.0	6	75.0	
Current position						
• Nurse	79	12	15.2	67	84.8	0.472
• Head nurse	8	2	25.0	6	75.0	

Fisher's exact test was used to calculate P – value. NS= Not statistically significant differences

Table (3) shows no statistically significant relationship between the gender, marital status, qualification, and current position of nursing staff with their job performance.

Table (4): Correlations between perceived workplace civility climate of nursing staff and their job performance (n = 87).

Items		Management	Employee	Total perceived workplace civility climate
Communication	r	0.138	0.074	0.122
	P - value	0.202	0.497	0.259
Leadership	r	0.100	0.063	0.092
	P - value	0.357	0.563	0.395
Critical care	r	0.159-	0.176-	0.178-
	P - value	0.142	0.103	0.099
Teaching & collaboration	r	0.049-	0.012-	0.037-
	P - value	0.651	0.915	0.730
Planning & Evaluation	r	0.310	0.365	0.356
	P-value	0.003**	<0.001**	<.001**
Professional development	r	0.139-	0.228	0.186-
	P - value	0.199	0.033*	0.084
Total Job Performance	r	0.725	0.394	0.560
	P - value	0.038*	0.03*	0.03*

*Correlation is significant at the 0.05 level

**Correlation is significant at the 0.01 level

Table (4): there were a positive planning & evaluation of the nursing staff and their management, employee domains and perceived workplace civility climate (r= 0.310, P < 0.003; r= 0.365, P < 0.001 r= 0.356, P < 0.001 respectively). Also, there was a positive correlation between the professional development of the nursing staff and their employee domain (r= 0.228, P < 0.033

Discussion:

Health care work environments need to foster a culture of civility. This can be done in a variety of ways, including by using strategies like reflection, self-evaluation, and identification of one's strengths and areas for development, modeling positive behavior by a professional nurse, and educating about personality types and diversity in thought to help one better understand oneself and others, establishing rules for nurses regarding mutual respect, and creating a secure, accepting, and judgment-free environment. Asserting the need for institution-wide cultural humility training, delivering communication, teamwork, and leadership training, and leading legal and ethical studies on incivility policy formation, as well as enforcing it (Stalter et al., 2020).

Regarding nursing staff's level of perceived workplace civility, climate and its domains presented that one-third of the nursing staff had a high level of perceived workplace civility climate dimension; more than one-third of them had a high level of the staff nurses workplace civility dimension and near to one-quarter of head nurses had a high level of workplace civility climate domain. From the researchers' point of view, this may be due to staff nurses perceiving that there are clearly defined rules on how to treat

coworkers respectfully, members of head nurses speaking positively about staff nurses to other nurses, and head nurses encouraging staff nurses to treat each other with respect.

Furthermore, nurses are made aware of resources available to them in the event that they become involved in a conflict with a coworker and are unable to resolve it on their own, and in general, employees make an honest effort to keep working relationships amicable.

The current study's findings were matched with several studies conducted in Egypt as **Mohamed, Hussein, and Mohamed (2021)** assessed the relationship between workplace civility climate and workplace ostracism among staff nurses in Benha University Hospital and mentioned that majority of staff nurses perceived workplace climate as civility.

Also, Elsayed et al. (2021), who conducted a study about " Leadership Competencies, Workplace Civility Climate, and Mental Well-being in El- Azazi Hospital for Mental Health, Egypt," showed that three-quarters of nurses considered their workplace climate as civil and positive/satisfactory and supported by **Hossny & Sabra (2021)** reported that studied nurses perceived management with the highest contribution score for changing civility

climate. Also, **Sleem and Seada (2017)** found a higher perceived workplace civility climate among staff nurses working at main Mansoura University Hospital, Egypt.

The current study finding disagreed with **Atashzadeh-Shoorideh et al. (2021)**, who conducted a study about " incivility towards nurses: A systematic review and meta-analysis" stated that the results were borderline (49% to 51%)

Concerning nursing Staff regarding dimensions levels of Job Performance presented that nearly two-thirds of the nursing staff had a satisfactory level of communication, most of them had a satisfactory level of professional development, and the majority of them had a satisfactory job performance. This finding might be because nurses need proper communication to carry out activities and achieve set goals in the care unit. When the communication sources are sufficient, job-related information's availability and adequacy enable nurses to feel satisfied.

A recent Egyptian study done by **Mohamed & Ghalab (2022)** explored the effect of physical activity and health behavior on staff nurses' job performance at Tanta Emergency Hospital and reported that nearly half of staff nurses had a moderate level of total job performance. The majority of the 51 nurses who participated in the communication satisfaction study fell into high satisfaction (**Noviyanti, Ahsan & Sudartya, 2021**).

Also, **Mahmoud, Elsaid, & Kamel (2020)** assessed the effect of workplace bullying on nurses' job performance conducted in the Intensive Care Unit at Benha University Hospital, and **Safarpour et al. (2018)** assessed occupational stress, job satisfaction, and job performance and how they are influenced by personal and work characteristics among hospital nurses in Ilam reported that highest level of job performance was related to communication and interpersonal relations.

According to the American Nurses Association (ANA), clear and concise communication is a prerequisite for safe and successful nursing care delivery. The ability to freely share thoughts and opinions with colleagues is a major factor contributing to nurses' high levels of communication satisfaction. If nurses are encouraged to voice their thoughts and concerns in a supportive work environment, they will be more likely to take a proactive stance in ensuring the safety of their patients (**Doo and Choi 2020**).

But this finding contradicted **Morsi and Ebraheem (2020)**, who found that nearly half of nurses had a low level of performance.

Regarding the relation between personal data of nursing staff about their perceived workplace civility climate presents statistically significant relations between the perceived workplace civility climate of nursing staff with qualification and their current position. In this majority of the nurse's staff who had a bachelor's degree in nursing and worked as a head nurse have a high-level workplace civility climate.

Workplace civility reflects Organizational citizenship behavior and is associated with positive job attitudes, satisfaction, and means that a nurse is willing to go above and beyond job standards, and performance by talking positively about the organization, assisting others, and going above typical job expectations (**Tuna et al., 2016**).

Concerning the relation between selective nursing staff personal data with job performance and its domain shows that there was a moderate positive correlation between

the studied nursing staff age and their years of experience in the leadership domain but a negative correlation between the studied nursing staff age and their years of experience with critical care and teaching & coloration. Also, there was a moderate negative correlation between the studied nursing staff age with the professional development domain and total job performance.

This result is supported by **Enwereuzor, Ugwu, and Eze (2018)**, who reported that numerous factors, including education, experience, nurses' morale, work-related stress and burnout, support from coworkers, supportive supervision and feedback, training on clinical tools, work environment, recognition, job expectations, motivation, incentives, knowledge, promotion, skills, remuneration, and competency level, all play a role in nurses' performance.

Another study on the organizational factors affecting performance in Al Quds University Palestine by **Thulth & Sayej (2015)** found workload rated (79.2%) as perceived by nurses, manager support rated (72%), and resources availability(69.8%).

Regarding the correlation between selective nursing staff personal data with perceived workplace civility climate and its domain reveals a positive correlation between nursing age and their years of experience in the nursing field with their head nurses domain, staff nurses domain, and perceived workplace civility climate.

Concerning correlations between the perceived workplace civility climate of nursing staff and their job performance, there was a positive correlation between planning & evaluation of the nursing staff and their head nurses, staff nurses' domains, and perceived workplace civility climate. Also, there was a positive correlation between the professional development of the nursing staff and the staff nurses' domain.

Many research findings reported that nurses would be happy to work if they feel the hospital's values are aligned with their values as well as the hospital will try to recruit nurses whose values are consistent with hospital values appropriate to their abilities, and nurses will show civil practices with higher performance and positive job attitude. Thus, Human Resources managers must be aware of this fact; they should consider the ability of nurses when composing job descriptions of their nurses (**Margahana et al., 2018**)

Furthermore, **Dorta-Afonso et al. (2021)** suggested that the reward system for nurses should be based on the type of work performed, the level of skills and knowledge, and assumed responsibilities so that nurses feel valued and motivated to satisfy the "compensation" aspect of their work, and this will improve their performance. Similarly, **Margahana, Haryono & Muftasa (2018)** showed that job satisfaction positively affected performance. There is a positive influence of job satisfaction towards job performance and job attitude, and on the otherwise, job satisfaction was enforced perceived civility climate and citizenship behavior among nurses.

The current study agreed with the study done in Egypt by **Hossny et al. (2015)** about the effect of workplace civility structural and psychological empowerment on newly graduated nurses' organizational commitment at hospitals in Assiut city reported that civility constitutes an important part of the organizational climate perceived by nurses. Quality of working life and good perceived civility climate is very important managerial approaches that work toward alignment of nurses with their organization, uphold the culture of

excellence to improve performance, motivate the nurses to learn further, and help in human resource development (Chowdhury, 2019)

Along with the other's owned organizations, human resources play a crucial part. If nurses are civil with one another and with the organization, the business as a whole will run smoothly and efficiently, with everyone contributing to the organization's success (Benkarim, & Imbeau, 2021). Organizational citizenship behavior (OCB) is defined as the individual's actions that go above and beyond what is required of them in the context of an organization. However, not all nurses are eager to take on additional responsibilities outside the scope of their normal duties (Rewakowski, 2021).

Organizational citizenship behavior (OCB) can improve nurses' performance by creating a peaceful, civic work environment (Raji et al., 2021). Important for a nurse to have OCB in the atmosphere than last year to generate a pleasant working connection to improve staff performance to attain organizational goals (Torlak et al., 2021).

Conclusion

It can be concluded from the current study that one-third of the nursing staff in Edfu general hospital had a high level of perceived workplace civility climate, while more than half of them had a moderate level of perceived workplace civility climate. Concerning the level of job performance among nursing staff in Edfu general hospital, the majority of them had a satisfactory level of job performance.

Moreover, the findings of this study revealed that planning & evaluation of the nursing staff and total perceived workplace civility climate were positively correlated. Also, there was a positive correlation between the professional development of the nursing staff and their employee domain.

Recommendations

Based on the current study's findings, the following recommendations are made.

1. Educate all nurses at all levels about the civic work climate to disseminate civil behaviors, which can create a feeling of contentment and boost job performance.
2. Conduct an orientation session for freshly graduating nurses at the start of their job to enlighten them about hospital policies.
3. Comparable research for nurses in different hospital levels or places might be valuable

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