Correlation between Organizational Learning Culture, Goal Orientation, Managerial Effectiveness and Workplace Learning for Nurses

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Abstract

Background: Workplace learning is an essential component of health professions education and is referred to as learning situated in a setting originally and primarily designed for practice. **Aim of this study** to assess correlation between organizational learning culture, goal orientation, managerial effectiveness and work place learning for nurses. **Research design:** A descriptive correlational design was utilized in the current study. **Setting:** The study was conducted at Minia General Hospital, Minia governorate, Egypt. **Sample:** Convenience sample (no.=390) of nurses. **Tools:** Four tools used in this study namely, organizational learning culture scale, goal orientation scale, managerial effectiveness scale, and workplace learning questionnaire. **Results:** the findings of the current study evidences that (60.5%) of nurse have high level regarding total of organizational learning culture, in addition (73.30%) of them have high level regarding total of goal orientation, while (53.10%) of them have moderate level regarding total score of managerial effectiveness, Finally, (85.8%) of them have high level of total work place learning. **Conclusion:** The work place learning had highly statistically significant positive correlation with the organizational learning culture, goal orientation, and with managerial effectiveness. **Recommendations:** Effective and continuous training programs should be provided for managers to improve their managerial skills and work effectiveness.

Keywords: Goal Orientation, Managerial, Effectiveness, Nurses, Organizational Learning Culture, Workplace Learning

Introduction

Workplace learning is a key way in which people builds meaning in their personal and shared hospital lives. Workplace learning comprises deliberate and conscious learning activities to reflect on actual workplace experiences. It is about individual learning in the environment of work and workplaces. Additionally, workplace learning might be defined as educational and developmental initiatives made within the hospital to support the establishment of a hospital learning culture **(Zhan et al., 2018)**.

So workplace learning is a learning process that uses a variety of activities and ways to motivate nurses to share conscious reflection and development based on real-world experiences and knowledge for both personal and organizational goals in the workplace or in a work context. Because working and learning are closely intertwined within the same process, this is a crucial characteristic that distinguishes workplace learning from other types of education. Numerous research have investigated elements that affect workplace learning, including managerial effectiveness, goal orientation, organizational learning culture, and psychological empowerment on nurses **(VanRuysseveldt et al., 2019)**.

In addition healthcare organizations are highly knowledge-intensive foundations which need frequent learning for performance improvement. Creating a learning environment is an important matter for them. As the nurses considered the nucleus of the healthcare system, they represent powerful forces for bringing about the change to meet organizational goals. Nursing staff is a significant part in continues learning process to improve their competency level and provide high quality of patient care. Moreover, nursing managers can develop a creative and efficient workplace through learning by adapting effective management tactics that influence organizational effectiveness such as Organizational learning **(Tsui, 2019)**.

Organizational learning culture for nursing professionals is contributing to the development of professional nurses' performance. Continuous learning helps nurses adapt to the rapid changes in knowledge as well as nursing and health care considering the important role of organizational learning in these organizations, especially hospitals, implementing and executing organizational learning management in hospitals is of particular importance **(Aghdasi & Khakzar, 2019)**.

Goal orientation also affects learning in practical settings. Goal-orientation refers to nurses' ability to develop and develop their own abilities by learning new knowledge and mastering new skills. Proving goal-oriented refers to nurses proving their abilities and obtaining positive evaluations from others. Goal orientation refers to the nurse's attitude towards goal achievement, Goal orientation can be defined as nurse's preferences in achievement situation, may influence managerial effectiveness and psychological empowerment in the workplace Goal orientation can be divided into learning goal orientation and proof goal orientation **(Fisher& Ford, 2019)**.

So learning goal oriented promote nurse's learning and self-improvement, nurses are motivated to increase their competence and are open to taking on difficult tasks. They understand that a manager or leader is a significant resource for knowledge and expertise relating to the job that may aid nurses in developing their skills and improving themselves. As a result, nurses who are learning goal oriented are more likely to pay attention to their managers' behaviors and roles to get knowledge of more effective ways to handle recurrent issues while doing their tasks**(Osagie et al., 2018).**

Moreover, leaders in management education face diverse challenges in today's competitive and changing environment. In addition Managers' roles in organizations are linked to task behaviors, managers' effectiveness is correlated with those roles. To increase managerial effectiveness, managers must possess a wide range of skills and competencies. Effective management is required for workplace learning. Effective managers must support nurses' learning or learning-related activities in the workplace by providing informal learning opportunities, acting as mentors or coaches, openly supporting learning, fostering risk-taking, emphasizing the value of sharing knowledge and developing others, giving constructive criticism and praise, and serving as role models(Garengo & Betto, 2022).

Significance of the study:

In high performance work environments, organizations encourage nurses to maximize the improvement of the organization's performance. They also try to provide the conditions for higher levels of learning and skill formation, as well as for learning to become a continuous process through problem-solving in the workplace. In this way, workplace learning contributes to strengthening the connections between organizational results and individual competence, which results in improving high performance work environments and organizational competitiveness(Escribá et al., 2017)

Nowadays, because of changing environments, innovation and competitive advantage, learning in organizations is considered to be very important. So nurses have to develop continuously to be able to adapt to the rapidly changing circumstances. The nursing sector is an excellent example of a changing work environment making it an interesting profession for studying professional learning **(Kyndt et al., 2016)**. Workplace learning is fundamental to nurses' contributions to safe, caring and effective health care. Beyond the minimal requirements for continuing competence, registered nurses recognized for their excellence in practice have unique commitments to and capabilities for ongoing learning **(Jantzen, 2019)**.

From the working experience observed that in this hospital don't found the place for learning, as well as the lack of the following in the work place as workshops, conferences day and seminar, from all issues the researchers introduce this topic to identify correlation between organizational learning culture, goal orientation, managerial effectiveness and work place learning for nurses.

Aim of the Study:

The aim of the current study is to assess correlation between organizational learning culture, goal orientation, managerial effectiveness and work place learning for nurses

Research Questions:
1. Is there a correlation between organizational learning culture and nurses' workplace learning?
2. Is there a correlation between goal orientation and nurses' workplace learning?
3. Is there a correlation between managerial effectiveness and nurses' workplace learning?

Subject and Method
Research Design:

A descriptive design was utilized in the current study.

Setting

The study was conducted at Minia General Hospital, Minia governorate, Egypt.

Sample type:

The study subjects were selected by using convenience sample from nurses who working at Minia General Hospital during the time of collecting study data.

Subjects:

The study subjects were included all nurses who working at Minia General Hospital during the time of data collection (no.=390). Nurses who had maternity leave or a vacation was excluded from the current study.

Data Collection Tools:

Data were collected through the utilization of four tools as follows:
Tool (I): -Organizational Learning Culture

It was included two parts as follow:

Part 1: personal and occupational data: It was used to collect data about nurses and encompassed items such as age, sex, educational level, years of experience, courses attendance, and residence.

Part 2: Organizational Learning Culture. This scale adopted by **Park (2011)**. It was consisted of (7) items including continuous learning, dialogue and inquiry, team learning, empowerment, embedded system, system connection, and strategic leadership. The items were responded by using five-point Likert scale ranged as (5 = strongly agree, 4= agree, 3= Neutral 2= disagree, and 1= strongly disagree). The alpha reliabilities for this scale averaged 0 .81 to 0 .83.

Scoring system

The scoring system was ranged from 7 to 35, and it divided into three levels as follow:

Levels	Range
Low level of organizational learning culture	7- 16
Moderate level of organizational learning culture	17- 26
High level of organizational learning culture	27- 35

Tool (II): - Goal Orientation

This scale adopted by **Joo & Park (2010).** It was consisted of (16) items to measure learning goal orientations. The items were responded by using five-point likert scale ranged as (5 = strongly agree, 4= agree, 3= Neutral 2= disagree, and 1= strongly disagree) . The alpha reliabilities for this scale were 0.86.

Scoring system

The scoring system was ranged from 16 to 80, and it divided into three levels as follow:

Levels	Range
Low level of goal orientation	16- 37
Moderate level of goal orientation	38- 59
High level of goal orientation	60- 80

Tool (III): -Managerial Effectiveness

This scale adopted by **Denison et al., (1995).** It was consisted of (5) items to measure performance standards, comparison to peers, and performance as a role model, overall success, and effectiveness as a manager. The items were responded by using five-point Likert scale ranged as (5 = strongly agree, 4= agree, 3= neutral 2= disagree, and 1=

strongly disagree). The alpha reliabilities of managerial effectiveness were averaged from 0.83 and 0.93.

Scoring system

The scoring system was ranged from 5 to 25, and it divided into three levels as follow:

Levels	Range
Low level of managerial effectiveness	5- 11
Moderate level of managerial effectiveness	12- 18
High level of managerial effectiveness	19- 25

Tool (IV): -Workplace learning Questionnaire (WlQ).

This scale adopted by **Reio & Sutton (2006).** It was consisted of (19) items. These items were grouped under three subscales including job knowledge (8 items), acculturation to the organization (5 items), and establishing relationships (6 items). The items were responded by using five-point Likert scale ranged as (5 = strongly agree, 4= agree, 3= Neutral 2= disagree, and 1= strongly disagree). The alpha reliabilities of Workplace Adaptation Questionnaire were .82 and .96.

Scoring system

The scoring system was ranged from 19 to 95, and it divided into three levels as follow:

Subscales	Low	Moderate	High
Job knowledge	8-18	19- 29	30- 40
Acculturation to the organization	5-11	12- 18	19- 25
Establishing relationships	6-13	14- 21	22- 30
Total workplace learning	**19 -44**	**45- 70**	**71- 95**

Validity of the study scales:

Tools were tested for the content validity by a jury of three experts in the field of Nursing Administration and necessary modifications were done. The jury composed of one assistant professors, one professor from Faculty of Nursing, Minia University and one professor from Faculty of Nursing, Assuit University. Each of the expert panel was asked to examine the tools for content coverage, clarity, wording, length, format and overall appearance.

Reliability of the study scales

Reliability of the scales and questionnaire were performed to confirm consistency of tools. The internal consistency measured to identify the extent to which the items of tools measured the same concept and correlate with each other by Cronbach's alpha test that revealed good internal reliability for the tools in the current study; and distributed as follows:

Tools	α
• Organizational Learning Culture	0.830
• Goal Orientation	0.870
• Managerial Effectiveness	0.910
• Workplace learning	0.930

Pilot Study:

A pilot study was conducted on 10% of nurses as (39) nurse to ascertain the clarity, comprehensiveness and applicability of the tools as well as to estimate the appropriate time required to fill the tools (approximately 25 minute). Based on pilot study there was no modification done, and it was added to final results.

Data Collection Procedure:

- Official letters to obtain the approval was introduced to Faculty Dean; and Research Ethics Committee; these letters were included a brief explanation of the objectives of the study.
- Written approvals were obtained from Director of the Minia General Hospital, Nursing Director, and Head Nurses of Departments after explaining the purpose of the study.
- Scales and questionnaire were translated into Arabic; then collect the jury approval for the tools were obtained to collect data of the research.
- The tools were distributed to all the nurses after explaining the purpose and process of data collection. Tools were directly administered and supervised by the researcher.
- The researcher interviewed with nurses through morning shift.
- Nurses were given from 25 to 30 minutes to answer all the tools.
- The data collection was performed from the nurses during the period from the beginning of January 2021 to finished of April 2021

Ethical Considerations:

- The nurses were informed that their participation in this study was completely voluntary and there was no harm if they not participate in this study.
- Oral consent was obtained from head nurses and nurses after explaining the nature and purpose of this study.
- The nurses assured that the data of this study was not be reused without second permission. Anonymity and confidentiality were assured.

Statistical analysis

The collected data was tabulated, computerized, analyzed and summarized by using descriptive statistical tests to test research questions by using SPSS version (25). Qualitative data were expressed as frequency and percentage. Probability (P-value) is the degree of significance, less than 0.05 was considered significant. The smaller the P-value obtained, the more significant is the result (*) and less than 0.001 was considered highly significant (**). Correlation is a statistical method for determining the nature and strength of a relationship between two numerical variables. The sign of the co-efficient denotes the nature of the relationship (positive/negative), and the value denotes its strength, as follows: Rho values less than 0.25 have a weak correlation, 0.25-0.499 have a reasonable correlation, 0.50-0.74 have a moderate correlation, and values greater than 0.74 have a strong correlation

Results

Table (1): Percentage distribution of the nurses' personal and occupational data (no=390).

Characteristics	(no=390)	%
Age		
• 20-29yrs	138	35.4
• 30-39yrs	111	28.5
• 40-49yrs	86	22
• $\leq$50yrs	55	14.1
Mean+SD = 28.16+0.372		
Sex		
• Female	318	81.5
• Male	72	18.5
Educational level		
• Bachelor of nursing	40	10.3
• Technical institute of nursing	80	20.5
• Secondary school nursing diploma	270	69.2
Years of experience		
• 1-4yrs.	98	25.1
• 5-10yrs.	112	28.7
• $\leq$11yrs.	180	46.2
Mean+SD = 7.56+2.375		
Courses attendance		
• Yes	267	68.5
• No	123	31.5
Residences		
• Rural	223	57.2
• Urban	167	42.

Table (1) shows that, (35.4%) of the nurses are in age group (20-29 years) with mean score (28.16+0.372), also (81.5%) of nurse are females and (18.5%) of them are males. Regarding educational level, there are (69.2%) of nurse has secondary school nursing diploma degree. In addition, there are (46.2%) of them have ($\leq$ 11) years of experience. In addition (68.5%) of the nurse has been attended courses, while (31.5%) of them has not been attended courses. Moreover , (57.2%) of nurses' lives in rural area, in addition (42.8%) of them lives in urban area.
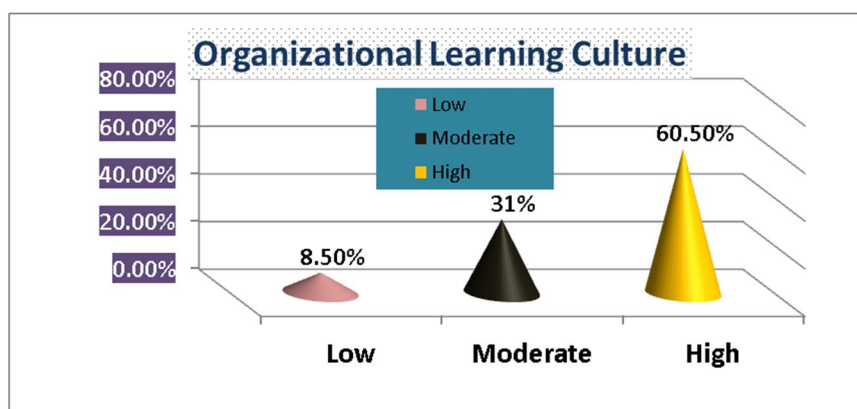

Figure (1): Percentage distribution of nurses regarding total of organizational learning culture (no.=390).

Figure (1) illustrates that, (60.5%) of nurse have high level regarding total of organizational learning culture, followed by (31%) of them have moderate level and finally, (8.50%) have low level of total organizational learning culture.
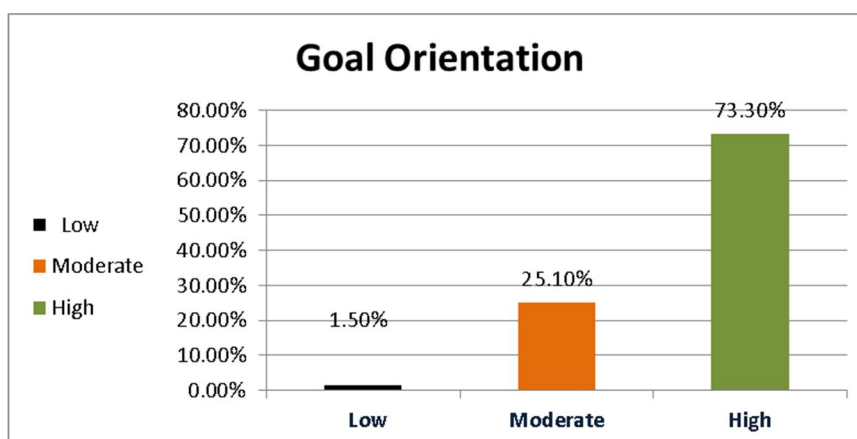

Figure (2): Percentage distribution of nurse regarding total of goal orientation (n=390)

Figure (2) illustrates that, (73.30%) of nurse have high level regarding total of goal orientation, followed by (25.10%) of them have moderate level and finally, (1.50%) have low level of total of goal orientation.
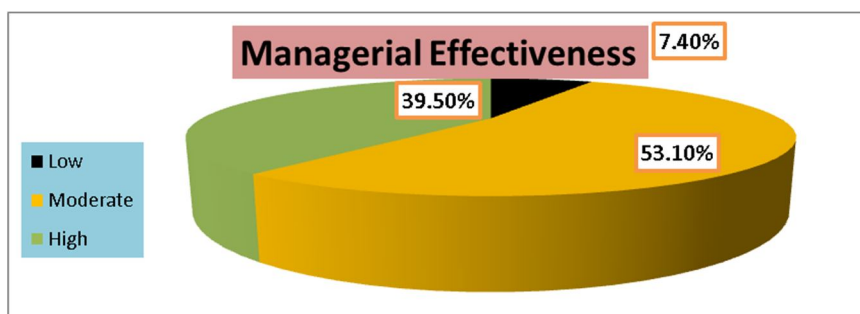

Figure (3): Percentage distribution of nurses regarding total of managerial effectiveness (no.=390).

Figure (3) illustrates that (53.10%) of nurse have moderate level regarding total score of managerial effectiveness, followed by (39.50%) of them have moderate level and finally, (7.40%) have low level of total managerial effectiveness.
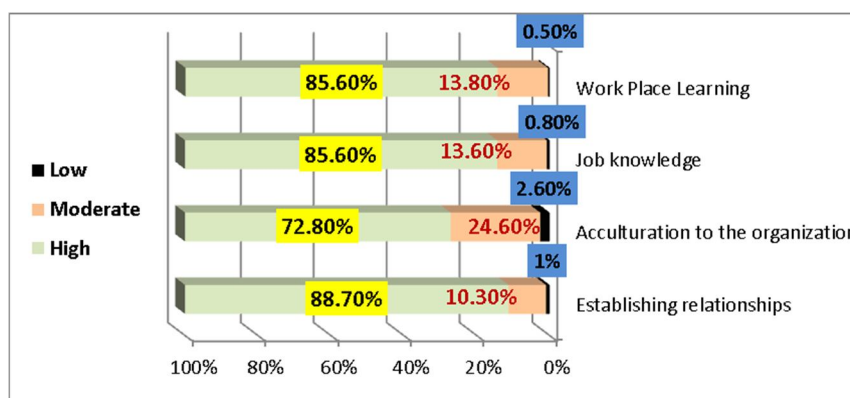

Figure (4) distribution of nurses regarding dimensions and total of workplace learning (n=390).

Figure (4) illustrates that the majority of nurses exhibited high level of responses regarding all dimensions in relation to work place learning by (85.6%) for job knowledge dimension, (72.8%) for acculturation to the organization dimension and (88.7%) for establishing relationships dimension. Finally, the majority of nurses (85.8%) have high level and (13.8%) of them have moderate level for total work place learning.

Table (2): Correlation between organizational learning culture, goal orientation, managerial effectiveness and workplace learning among nurses (no.=390)

Variable		Organizational learning culture	Goal orientation	Managerial effectiveness	Workplace learning
Organizational learning culture	r	1	.308**	.629**	.394**
	P		.000	.000	.000
Goal orientation	r	-	1	.277**	.601**
	P			.000	.000
Managerial effectiveness	r	-	-	1	.383**
	P				.000
workplace learning	r	-	-	-	1
	P				

**Correlation is significant at the 0.01 level (2-tailed). * p≤0.05 (significant)
 **p≤0.05 (highly significant) P – value based on Pearson correlation coefficient

Table (2) explains that, organizational learning culture had highly statistically significant correlations with goal orientation (r=.308 & p=0.000**), with managerial effectiveness (r=.629 & p=0.000**) and with work place learning (r=.394 & p=0.000**). Also, there were highly significant correlations between goal orientation with managerial effectiveness (r=.277& p=0.000**) and with work place learning (r=.601& p=0.000**). Moreover, the study showed that there was a highly statistically significant relation between managerial effectiveness and work place learning (r=.383 & p=0.000**).

Discussion:

The professionalization of nursing and landmark changes in nursing education, nursing practice and healthcare systems have impacted registered nurses' workplace learning and practice globally.Over recent decades, there has been an increasing realization that the workplace is an environment not only where learning new knowledge and skills can happen but where learning should be happening **(Rintala et al., 2018)**.

Workplace learning is a process of acquiring knowledge, skills, and other mental capacities that occurs while employees complete their work tasks and roles, leading to improved individual and organizational performance. The process is not passive and cannot be investigated as an activity isolated from its broader social, economic and organizational cultural context as well as the managers roles and effectiveness **(Kankaraš, 2021)**.

Workplace learning is fundamental to nurses' contributions to safe, caring and effective health care. Beyond the minimal requirements for continuing competence, registered nurses recognized for their excellence in practice have unique commitments to and capabilities for ongoing learning (**Jantzen, 2019**).

The study resulted showed that more than one third of nurses were in age group (20-29 years) followed by age group ranged between (30-39) years with mean score (28.16±0.372). As regards to gender the majority of nurses were females. Regarding educational level, there more than two thirds of nurses had secondary school nursing diploma degree; and near to half of them have (≤ 11) years of experience. In addition, more than two thirds of nurses had been attended training courses; more than half of nurses' live in rural area..

Furthermore, the study results revealed that highest percentage of nurses had high level regarding total score of organizational learning culture, and the minority of them had low level total score of organizational learning culture. This result may be due to the hospital administrators' abilities to make the culture strongly positive in which one of the healthy organization characteristics is to have good organizational learning culture which set by leaders in the hospital. Furthermore, this may be attributable to the hospitals' having defined policies and procedures that increase the dedication and devotion of the nurses which improve their learning culture.

This result is in an agreement with **Alhiddi et al., (2019)** who conducted study about organizational culture and success criteria among nurses at Newcastle and showed as perceived by organizational staff that the participants had positive high score for the score of organizational learning culture.

Also, the result is similar to **Globocnik et al., (2020)** who analyzed the dimensions of organizational culture using the competing values framework and reported that the highest percentage of participants had highest mean score for the organizational culture.

This result is in line with **El Desoky et al., (2021)** who revealed in their study that the nursing staff perception for the organizational culture was high in total score and in all dimensions for most of the study participants.

The study results displayed that near to three quarters of nurses had high level regarding total of goal orientation, followed by one quarter of them had moderate level and finally low percentage of them had low level of total of goal orientation. This result may be due to the relations of nurses with their managers that help them to be more focus on their goals at work, they happiest at work when they perform tasks because they know well their responsibilities and duties. Also, nurses feel happy, smart, and enjoy when they do something without making any mistakes and their managers encourage them, so they are know well their goal and work on it. Nurses gave importance to demonstrate higher competence and self-improvement than competing with their colleagues.

This results is consistent with **Adriaenssens et al., (2015)** who have a study on nurses working in emergency unit to know the relations between goal orientation with work engagement and burnout; and mentioned that nurses had high level of goal orientation and its dimensions.

This finding is in agreement with **Koksoy and Uygunو (2018)** who had a study in India, where they assessed

goal orientation as a predictor of academic achievement; and they found that students had high level of goal orientation.

Also, this result come in line with **Ata and El Araby (2019)** who had a study about "Nursing Students" Metacognitive Thinking and Goal Orientation as Predictors of Academic Motivation" and clarified that the majority of nursing students' had a high level of goal orientation.

While, this result not congruent with **Khalifa (2016)**, who studied goal orientation in nursing students, in Egypt, and found that participant had medium score level of goal orientation.

Furthermore, the study results revealed that more than half of nurses had moderate level regarding total score of managerial effectiveness, followed by more than one third of them had moderate level and finally lowest percentage of them had low level of total managerial effectiveness. This result may be due to the positive work culture that created between managers and nurses; and the highly positive perception from nurses among their hospital culture that provide support to them and help them to develop their skills and knowledge.

This result come in same line with, **Hanon (2016)** in a study about perceived level of work effectiveness and readiness to change among oncology nurses reported that most of subjects had moderate and low level of work effectiveness.

In contrast with the findings of present study **Yong-Sook and Kim (2014)** who conducted a study about "Path Analysis of Empowerment and Work Effectiveness among Nurse Managers" and found that work effectiveness had the highest mean score among nurse managers.

And this result not in line with **Nasirizade et al., (2017)** who assess "the relationship between quality of work life and organizational effectiveness among hospital nurses" and their study results revealed low organizational effectiveness among the studied hospital nurses.

In addition, this result is not congruent with **Negm et al., (2021)** who had a study about first line managers to investigate the relation between work effectiveness and readiness to change; and revealed that the majority of studied first line nurse managers had high level of work effectiveness.

The study results showed that the majority of nurses exhibited high level of responses regarding all dimensions in relation to work place learning as firstly for establishing relationships dimension, then for job knowledge dimension, and followed by acculturation to the organization dimension. Finally, the majority of nurses had high level and minority of them had moderate level for total work place learning. This result explained that nurses work in a learning environment that encouraged by the administrative authorities. Also, workplace learning among nurses in their hospital was supported by individual learning by nurses, either through professional development facilitated by their supervisors or through acquiring knowledge transferred from a supervisor.

This result is congruent with **Taskase et al., (2018)** who had a study about "Effects of nurses' personality traits and their environmental characteristics on their workplace learning and nursing competence" and revealed that Japanese registered nurses had moderate level perception about the workplace planning which were related positively with personality traits personality traits, environmental characteristics.

This result come in same line with **Liljedahl et al., (2022)** who conducted a study about "How workplace learning is put into practice: contrasting the medical and

Doaa A., et al

nursing contexts from the perspective of teaching and learning regimes" and founded that nurses had positive high level of workplace learning in their hospital.

Moreover, it was reported from the study results that, the organizational learning culture had highly statistically significant correlation with goal orientation, with managerial effectiveness, and with workplace learning. Also, there were significant correlations between goal orientation with managerial effectiveness and with work place learning. Moreover, there was highly statistically significant relation between managerial effectiveness and work place learning.

These results indicated that the organizational learning culture and workplace learning had a strong positive or negative impact on nurses' goal orientation; in which when there is positive culture and workplace that enhance the learning and facilitate the development of the nurses, they get more attention on the goal of their work. Also, when the manager had a professional managerial skills, this can lead to good goal orientation and focus from nurses at their work, as well as good nurses' work and performance and higher productivity.

This result is in line with **Chadwick et al., (2012)** in their study about "Motivating Organizations to Learn: Goal Orientation and Its Influence on Organizational Learning" mentioned that there is a relation between motivation of organizational culture to learn with goal orientation and how it improve nurses work. Also, **Joo and McLean, (2020)** who had a study "Learning Organization Culture and Core Job Characteristics for Knowledge Workers in Korea" and agreed that there is statistically significant relation between the organizational culture and goal orientation among nurses.

In addition, this result is consistent with **Tan and Olaore (2022)** who had a study about "Effect of organizational learning and effectiveness on the operations, employees productivity and management performance" and revealed from their study results that there is a positive relationship between organizational learning and effectiveness, operations, employees' productivity and management performance suggesting that organization learning impact is encompassing because it affects and influences the effectiveness and efficiency of all the staff at every level within the organization.

Also, **Froehlich et al., (2014)** agreed in their study about "Informal Workplace Learning in Austrian Banks: The Influence of Learning Approach, Leadership Style, and Organizational Learning Culture on Managers' Learning Outcomes" that results showed that the choice of learning approach significantly affects several conceptualizations of learning outcome. They found that learning approaches partially mediate the effects of experienced leadership style on learning outcomes. Also, organizational learning culture moderates the effects of leadership style and learning approaches.

Moreover, **Tyagi and Moses, (2021)** in their study about "Organizational Culture and Managerial Effectiveness: A Study in Selected Institutions of Higher Learning" displayed that Organizational culture has a significantly positive influence on managerial effectiveness. These findings further represents clan culture and adhocracy culture as contributing the most to managerial effectiveness and particularly to people management and strategic management.

Furthermore, **Ngugi et al., (2021)** in their study regarding "Organizational culture, organizational learning and performance of firms" they displayed that organizational

culture had a moderating effect on the relationship between organizational learning capability and performance.

Conclusion:

The current study concluded that highest percentage of nurses had high level regarding total score of organizational learning culture; near to three quarters of nurses had high level regarding total score of goal orientation. Furthermore, the study revealed that more than half of nurses had moderate level regarding total score of managerial effectiveness, and the majority of nurses had high level of total workplace learning. Moreover, work place learning had highly statistically significant correlation with the organizational learning culture, goal orientation, and with managerial effectiveness.

Recommendations:

o Effective and continuous training programs should be provided for managers to improve their managerial skills and work effectiveness.
o Effective leadership styles should be used according to different situations
o A suitable opportunity should be provided for promotion and development for the nurses with a clear path of career, to help to retain effective nurses
o An open communication should be strengthened by conducting schedules for nurses meeting with their managers to reach a high level of work effectiveness

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