

## Determine the association of Nurses Leadership Practices with Staff Retention and Practices of Quality Care

IMRAN

Post RN Student, Lahore School of Nursing, the University of Lahore  
Pakistan

MUHAMMAD AFZAL

Principal, Lahore School of Nursing, the University of Lahore  
Pakistan

MUHAMMAD HUSSAIN

Lecturers, Lahore School of Nursing, the University of Lahore  
Pakistan

DR. SYED AMIR GILLANI

Dean, Faculty of Allied Health Sciences  
University of Lahore, Pakistan

### Abstract

**Introduction:** *Head nurses and staff nurses plays a critical role in providing safe quality care to patients every day. Nurses provide direct care to the patients and their turnover affects the quality of patient care. The goal of this study was to examine the relationship between head nurses' leadership practices with staff nurses retention and quality care.*

**Method:** *This descriptive correlational study conducted in Governmental Hospital, Lahore. The convenient sampling technique used and 137 nurses sample size was taken according to Salvain formula. Well-adopted questionnaire as per Likert scale was used to examine the nurses' perception of head nurses' leadership practices and outcomes on staff retention and staff perception of the quality of care.*

**Results:** *The finding of this study showed that staff nurses had given low rating to their head nurses use of Kouzes and Posner's five leadership practices. The all five leadership practices had positive*

*relationship with nurses' retention and quality of care. The results showed that there is statistically significance as p-value < 0.05.*

**Conclusion:** *To promote high quality of care and retention for nurses, it is important for head nurses to develop five leadership practices as defined by Kouzes and Posner.*

**Keywords:** Nurses leadership, Staff retention, Quality care

## INTRODUCTION

Nurses are the backbone who provides safe and quality care in the health care organization. It is nurse who provides direct patient care and has complex level of patients' workload (Mudihanselage & Chamaru, 2015).

The cooperative and supportive nursing management retain the nurses in the long run and provides efficient health care services. The consistent leadership is required to attain the high performance, improves the quality care and outcomes. Poor leadership could increase cost, reduce efficiency and effectiveness, and cause dissatisfaction among staff (Ghiasipour, Mosadeghrad, Arab, & Jaafaripooyan, 2017). A good leader has responsibility to provide support, give guidance and share knowledge with their employees, so they can perform better and provides quality care to their patients (Iqbal, Anwar, & Haider, 2015). Nurses' migration of origin to work elsewhere is challenging issue. Many trained nurses moved from developing countries to developed countries for good salaries and benefits (Burmeister, et al., 2019). Nurses shortage can be temporary reduced by increased hiring, but retaining nurses may be the best strategy. It will help to meet the organization objective and help to provide the quality care services (Lam, Law, Loo, Ng, & Ooi, 2015).

The effective clinical leaders need to motivate and inspire others. They need to use effective motivational approaches that inspired individual. They should be open, approachable and help people to feel part of the team (Stanley, 2016).

Patient safety and quality is crucial and main concern of health care organization around the world. The hospital tries to

improve their work environment and follow different health care standards to improve safety and quality of patients (Ammouri, Tailakh, Muliira, Geethakrishnan, & Al Kindi, 2015).The effective nursing leadership style play initial role for improve work environment, great nurses satisfaction, low the nurses turn over and improve the quality care of patient (Naidoo, 2017).

### **PROBLEM STATEMENT**

Nurses' turnover is problematic agenda in health institute, which consequently decrease the level of patient care. The quality care cannot be provided with shortage of nurses'. Head nurses play an important role in the health institute and effective leadership practices of the head nurses can overcome and play a key role to retain nurses (Al. Hussami, et al.,2014). Therefore, there is a need to investigate the relationship between leadership practices and retention of nurses.

### **OBJECTIVE**

The objectives of this study are given in the following:

1. To determine the association of nurses' leadership practices with staff retention
2. To determine the association of nurses leadership practices with quality care

### **RESEARCH HYPOTHESIS**

#### **Alternative hypothesis (H1):**

The leadership practices have relationship with staff nurses retention and quality of care.

#### **Null hypothesis (H0):**

The leadership practices have no relationship with staff nurses retention and quality of care

### **PURPOSE OF THE STUDY**

The purpose of this study is to determine the association of nurses' leadership practices with staff retention and practices of quality care.

**THEORETICAL FRAMEWORK**

Table 1, The Patient Care Delivery Model consists of three phase inputs, throughputs and outputs. This study closely related to the theory of O’ Brien model as many factors shape healthcare environment. The output depends on the inputs and throughputs (O’Brien-Pallas, et al., 2003). The throughputs are the nurses’ perceptions about head nurses’ leadership practices and interaction that takes between leaders and followers. Kouzes and Posners’ proposed that positive outcomes can take place in organizations if leaders learn, practice and use the following five leadership practices (Kouzes & Posner, 2002)

**Table 1: Patient Care Delivery Model**

<b>Inputs</b>	<b>Throughputs</b>	<b>Outputs</b>
Nurse characteristics <ul style="list-style-type: none"> <li>• Age</li> <li>• Gender</li> <li>• Employment status</li> <li>• Education</li> <li>• Experience</li> </ul>	Staff nurses rating of the head nurses’ leadership practices.  <b>Leadership Practices</b> <ul style="list-style-type: none"> <li>• Challenge the process</li> <li>• Inspire a shared vision</li> <li>• Enable others to act</li> <li>• Model the way</li> <li>• Encourage the heart</li> </ul>	Outcomes <ul style="list-style-type: none"> <li>• Retention of nurses</li> </ul> System outcome <ul style="list-style-type: none"> <li>• Staff nurses’ perception of quality of patient care</li> <li>• Staff nurses’ perception of quality of nursing care</li> </ul>

Adopted from (O’Brien-Pallas, et al., 2003)

**LITERATURE REVIEW**

The successful leadership is challenging for health care system. The study conducted to see the leadership challenges in the hospital. Leadership is a difficult process in which the person accomplishes organizational mission and objectives. It also provides the way that makes the organization more cohesive and coherent. In the health care system, leadership affects the beliefs, values, character, knowledge and skills. It has positive effects for change and achieve high standard of patient care. A Skilled and good unit managers have engaged with the employee’s works and help to achieve an organizational goal (Naidoo, 2017).

The study by researched the challenges of critical care unit manager in public and private hospital. The sample is collected from the unit manager in critical care units and identified these challenges. Such as shortage of nurses, unit manager had not proper job

description, workload on staff members, stress and not defined protocols in units. It had poor effects on the staff, unit and organization (Matlakala, Bezuidenhout, & Botha, 2014).

A retrospective study conducted to review the nurse absenteeism to see the absenteeism trend. The studies examine the relationship of nurses' absenteeism with workload. The absenteeism rate was high in work demanding departments where nurse were physical stressed. The department had higher rate of absenteeism those care for critical and sick patients, and dealing with elderly patient. Another finding observed that younger nurses had more sickness absenteeism than older nurses. Older nurses were more committed to their work, but they were affected with chronic illness (Ticharwa, et al., 2019)

Another study conducted to investigate the correlation with nurses' shortage effects with the quality of patient care and their work stress. A self-administered questionnaire and explanatory research design was used. The study found a positive relationship between nurse shortage and workload. The workload influenced by nurses' shortage. The nurses' shortage observed more in those departments those had high work load such as those units where patient were large number of patients receiving care and had lack of resources and man power. The nurses numbers were not increased comparing to increase patients number and roster remains the same. Therefore, the results showed that 35.6% nurses extended their work shift within last month. The 65.6% nurses reported that they had less time to provide care because of long duty hours with minimum nurses and their work delayed and increased chances of error (Mudihanselage & Chamaru, 2015).

## **METHODOLOGY**

A descriptive co-relational survey design used to assess the association of nurses' leadership practices with staff retention and quality care. The data was collected from Jinnah Hospital, Lahore, Pakistan through convenient sampling and data collected from 137 nurses those are directly involved in patient care. The data was conducted after permission from Principal Lahore of school of nursing, The University of Lahore. The information was provided to the

participants during collecting the data. A well-constructed questionnaire adopted by (Kouzes & Posner, 2002). The five leadership practice has 30 statements that divided as: Challenge the process, Inspire a shared vision, Enable others to act, Model the way and. Encourage the heart The responses are on a 10-point Likert scale (1 = almost never to 10 = almost always).The retention to stay and quality of care are dependent variables, which measure through questionnaire. The data was analyzed by using the statistical package of social science (SPSS) version 21.

## RESULTS

This section consists on the demographic information of study participants and determines the relationship by implementation of different test, the Pearson correlation and reliability and validity of questionnaire also checked.

S #	Variable	Characteristics	Frequency(N)	Percentage (%)
1	Gender	Female	137	100.0
2	Age Group	20-29 Years	29	21.2
		30-39 Years	63	46.0
		40-49 Years	27	19.7
		50-59 Years	15	10.9
		60 Years and above	3	2.2
		Total	137	100.0
3	Highest Level of Education	Diploma in nursing & Midwifery	53	38.7
		Baccalaureate in nursing	54	39.4
		Post RN-BSN (Baccalaureate)	28	20.4
		Master in Nursing	2	1.5
		Total	137	100.0
4	Years of employment (<= less than , >= more than)	Year <1	12	8.8
		Years >1 to <5	57	41.6
		Years > 5 to <10	43	31.4
		Years >10 to <20	24	17.5
		Over 20 years	1	.7
		Total	137	100.0

Above table 1 represents that the total participants of the study was 137 and all were female. Mostly participants 63(46.0%) were belong to the age 30-39 years and only 3 (2.2%) participants were above 60 years. The demographic variable results of qualification reveal that 53(38.7 %) nurses were under graduate, 54(39.4%) respondents did graduation and only 2(1.5%) did Master in Nursing. The demographic variables years of employment stay in organization results shows that

69 (50.36%) of respondents had less than 5 years stay in organization and similarly 68 (49.63%) had above 5 years work experience.

## CORRELATION ANALYSIS

### DEPENDENT VARIABLE

#### Retention of Nurses

Retention of nurses is important element in the development of an organization to improve quality of patient care. This variable consists of 6 questions.

**Table: 2**

S.NO		Strongly disagree (%)	Disagree (%)	Can't stay (%)	Agree (%)	Strongly agree (%)
1	I would prefer to continue working	2(1.5)	9(6.6)	14(10.2)	31(22.9)	81(59.1)
2	I would not care either way	1(0.7)	4(2.9)	14(10.2)	30(21.9)	88(64.2)
3	I would like to stay in hospital for 1 years	0(0)	4(2.9)	15(10.9)	26(19)	92(67.2)
4	I would like to stay in hospital for 2 years	1(0.7)	9(6.6)	8(5.8)	33(24.1)	86(62.8)
5	I would like to stay in hospital over 2 years	1(0.7)	8(5.8)	6(4.4)	32(23.4)	90(65.7)
6	I would leave as soon as possible	90(65.7)	18(13.1)	6(4.4)	17(12.4)	6(4.4)

Table 2 shows the participants respond to Retention of nurses' questionnaire. The 59.1% participants strongly agree that I would prefer to continue working, but 6.6% disagree. The 64.2% participants responded that I would not care either way. The 67.2% participants strongly agree that would like to stay in hospital for 1 years, 62.8% participants responded that I would like to stay in hospital for 2 years and 65.7% participants responded that I would like to stay in hospital over 2 years. The 65.7% participants responded strongly disagree to leave as soon as possible.

**Quality of Care**

Quality of patient care and delivery of nursing care are key elements in the development of an organization.

**Table. 3**

S.#		Very Poor (%)	Poor (%)	Fair (%)	Good (%)	Excellent (%)
1	Overall, in the past year, would you say the quality of patient care in your unit has:	31(22.6)	38(27.7)	58(42.3)	10(7.3)	0
2	How would you describe the quality of nursing care delivered on your last shift?	20(14.6)	37(27)	68(49.6)	12(8.8)	0

Table 3 shows the participants respond to overall quality of patient care perception in the past year. The 22.6% participants responded very poor, 27.7% responded poor, 42.3 % of participants responded fair, and 7.3% participants' responded good. The participants respond to quality of nursing care delivered in last shift, 14.6 participants responded very poor, 27 % respondents' poor, 49.6% responded fair and 8.8 % responded good.

**RELIABILITY ANAYSIS**

Instrument reliability has been tested for each constructed dependent variable and independent variables separately. It has been calculated through Cronbach's Alpha that show us the reliability of each constructed question that how much it was reliable to use and replicate it by different research under different conditions to get the reliable results. The more value of Cronbach's Alpha near to 1 the more it is reliable.

**Dependent Variable**

Reliability Statistics		
Cronbach's Alpha	Cronbach's Alpha Based on Standardized Items	N of Items
.938	.941	8

The above table describes the dependent variable reliability value of Cronbach's Alpha was .938, which meet the standard requirement.



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### Skewness and Kurtosis

		Statistics		
		Nurses Retention	Quality of patient care	Quality of Nursing care
N	Valid	137	137	137
	Missing	0	0	0
Skewness		-1.647	-.145	-.449
Std. Error of Skewness		.207	.207	.207
Kurtosis		2.657	-.975	.266
Std. Error of Kurtosis		.411	.411	.411

### Independent Variable

Reliability Statistics		
Cronbach's Alpha	Cronbach's Alpha Based on Standardized Items	N of Items
.795	.820	30

The above table describes the independent variable reliability value of Cronbach's Alpha was .795, which meet the standard requirement.

## VALIDITY

### Nurses Retention with all independent variable

KMO and Bartlett's Test	
Kaiser-Meyer-Olkin Measure of Sampling Adequacy.	.856
Bartlett's Test of Sphericity	Approx. Chi-Square
	df
	Sig.

Table shows the results that scale of nurses retention was 0.856 (> 0.50) and Bartlett's Test of Sphericity is significant (P < 0.05), so it meets the standard requirement of validity.

### Quality of patient with all independent variable

KMO and Bartlett's Test	
Kaiser-Meyer-Olkin Measure of Sampling Adequacy.	.814
Bartlett's Test of Sphericity	Approx. Chi-Square
	Df
	Sig.

Table shows the results that scale of quality of patient was 0.838 (> 0.50) and Bartlett's Test of Sphericity is significant (P < 0.05), so it meets the standard requirement of validity.

**CORRELATION ANALYSIS  
RESULTS OF THE CORRELATION ANALYSIS**

To determine the inter-relationship between independent and dependent variable correlation analysis has been done. The results are described with the help of Pearson’s coefficient of correlation (r) and the value of significant (p). The value of correlation coefficient varies between -1.0 to +1.0. The value of correlation coefficient closer to 1 shows the stronger positive relationship. On the other side the value of correlation coefficient will be closer to -1. It shows the stronger negative relationship between the variables. And if the value lies exactly at 0.0 than it shows that there is no relationship between two variables. Correlation are significant at the level of p= 0.05.

**LEADERSHIP PRACTICES CORELATION WITH NURSES RETENTION**

		Correlations					
		Nurses Retention	Challenge the Process	Inspire a shared vision	Enable others to act	Model the Way	Encourage the Heart
Nurses Retention	Pearson Correlation	1	.746**	.853**	.899**	.656**	.423**
	Sig. (2-tailed)		.000	.000	.000	.000	.000
	N	137	137	137	137	137	137

\*\* . Correlation is significant at the 0.01 level (2-tailed).

The above table emphasis that leadership practices, Challenge the Process, Inspire a shared vision, Enable others to act, Model the Way, and Encourage the Heart has strong positive relations with retention of nurses as r =.746, r =.853, r =.899, r =.656 and r=.423 respectively, and p < 0.05. Therefore, all had positively and significantly correlated.

**LEADERSHIP PRACTICES CORELATION WITH QUALITY OF PATIENT CARE**

		Correlations					
		Overall, in the past year, would you say the quality of patient care in your unit has:	Challenge the Process	Inspire a shared vision	Enable others to act	Model the Way	Encourage the Heart
Overall, in the past year, would	Pearson Correlation	1	.405**	.577**	.687**	.354**	.325**

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you say the quality of patient care in your unit has:	Sig. (2-tailed)		.000	.000	.000	.000	.000
	N	137	137	137	137	137	137
**. Correlation is significant at the 0.01 level (2-tailed).							

The above table emphasis that leadership practices, Challenge the Process, Inspire a shared vision, Enable others to act, Model the Way, and Encourage the Heart has strong positive relations with quality of patient care as  $r = .405$ ,  $r = .577$ ,  $r = .687$ ,  $r = .354$  and  $r = .325$  respectively, and  $p < 0.05$ . Therefore, all had positively and significantly correlated.

**LEADERSHIP PRACTICES CORELATION WITH QUALITY OF NURSING CARE**

Correlations							
		How would you describe the quality of nursing care delivered on your last shift?	Challenge the Process	Inspire a shared vision	Enable others to act	Model the Way	Encourage the Heart
How would you describe the quality of nursing care delivered on your last shift?	Pearson Correlation	1	.500**	.513**	.495**	.351**	.493**
	Sig. (2-tailed)		.000	.000	.000	.000	.000
	N	137	137	137	137	137	137
**. Correlation is significant at the 0.01 level (2-tailed).							

The above table emphasis that leadership practices, Challenge the Process, Inspire a shared vision and Enable others to act has positive relations with quality of nursing care as  $r = .176$ ,  $r = .209$ ,  $r = .177$  respectively, and  $p < 0.05$ . Therefore, all had positively and significantly correlated.

**DISCUSSION**

The purposes of this study descriptive correlation study was to examine the relationship between the staff perception of head nurses five transformation leadership practices in staff retention and quality care. The nursing turnover is major problem that makes management of nursing workforce a challenge for nursing leaders.

The demographic variable shows that female staff nurses were included and the common age group was 20-29 years of age. Most of

the participants were with the experience of 2-5 years. No association was found between demographic variables and retention of nurses and quality of care.

The results shows that there was positive correlation between retention of nurses and leadership practices as if leadership practices will improve the turn of nurses will decrease.

The results shows that leadership practice had significantly correlated with staff nurses' perception of the quality of patient care on their unit and quality of nursing care delivered on their last shift. A study conducted in Pakistan indicated that nursing turnover rate from 1996 to 1999 has remained is above 30%. The reason for the turnover were immigration of nurses to the UK and the USA, resignation and family responsibilities.

## **CONCLUSION**

The purpose of this study is to assess the influence of leadership practices in the retention of nurses and quality care in government hospital. The results of this study shows that leadership practices, Enable others to act have significant and positive relationship with retention (  $p < 0.05$ ,  $r=0.$  ). Therefore both variables under the current study are positively and significantly correlated.

Leadership practices behavior of head nurses have positive effects on nurses performance and increase retention of nurses. If nurses are more satisfied with their working environment and head nurses behavior they will be more satisfied and confident in their performance to improve quality of patient care and for organization development.

### **Strength**

The sample size is large which increase the generalization of results.

### **Limitation**

Convenient sampling technique was used to collect data. This study is bounded to only one hospital

Sample variability of the conducted study

## **RECOMMENDATIONS**

### **Patient**

Nurses play a vital role in patient care, more effective leadership practices by head nurses is required to improve retention rate which is necessary to improve quality of patient care.

### **Management**

It is recommended that the management of government hospital should more focus on leadership style of head nurses and develops more leadership practices in head nurses to retain nurses and improve quality care.

### **Health care provider**

It is also recommended that health care providers should be satisfied with their work environment and head nurses leadership practices in this way they will improve their standard of nursing care.

### **Future research**

In future, the conducted study will be used as base line for further research on influence of leadership practices in the retention of nurses and quality care.

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