



RESEARCH ARTICLE

FACTORS CONTRIBUTING TO NURSE PRODUCTIVITY IN OMDURMAN TEACHING HOSPITAL.KHARTOUM STATE 2023

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ABSTRACT

Background: All human being spends their life in different fields for fulfillment of their physiological and cerebral requirements of life and their survival. All professionals life is stressful due to especially, the work place is more stressful. Indifferent profession the performance factors are different. But some factors are common in all professions like knowledge and skill, work environment, association structure. These factors are seriously affecting the performance of the professionals and work out put. (Vigo, 2011). **Aim of this study:** explore the factors that affect the performance of nurse's productivities of their work in Omdurman Teaching Hospital Subjects and methods. **Research design:**, a cross-sectional descriptive research design. **Setting:** The study was conducted in Omdurman Teaching hospital with simple random sampling technique. **Subject sample:** With simple random sampling technique. The study subject were 105. **Tool and data collection.** Self-administered questionnaire with three sections. Demographic data factors contributing to nurse's performance and productivity **Results:** The study revealed that nurses performance were affected by not enrolled in service training program and no chance was given. Also low salary and low work motivations are affect directly to their productivity. **Conclusion:** From the results we found that nurses not involved in service training and no any rewarding from hospital manager and significant correlation between these factors and their qualifications, p value .000. **Recommendation:** Researcher suggest developing and implementing clear training and development programs that based on needs and performance evaluation of nurse. The hospital managers should improve the work environment to be suitable and comfortable to help the staff to do their work more easy

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INTRODUCTION

All human being spends their life in different fields for fulfillment of their physiological and cerebral requirements of life and their survival. Professions is an essential part of nearly everyone's life, and has an important part in existent's social lives. All professionals life is stressful due to especially, the work place is more stressful. Indifferent profession the performance factors are different. But some factors are common in all professions like knowledge and skill, work environment, association structure. These factors are seriously affecting the performance of the professionals and work out put (Vigo, 2011).

Nurses' are health care professionals who concentrate on the care of individualities, families, and communities so they may attain, maintain, or recover optimal health and quality of life from generality to death (Chhugani & James, 2017). Nursing service is the main service that must be done to achieve the healing of hospitalized patients. In supporting the healing of hospitalized patients, the role of nurses is crucial in providing health care in the form of nursing care, providing education to patients about things that support health and accelerate the healing of disease (Nurachmah, 2011). It seems that when patients have good evidence experiences of nursing care, nurses also experience a good, healthy work environment and they become more commitment to their work. (Cao & Naruse,

2019). The performance of nurses is always under scrutiny; this is because nurses perform accurate work that's related to the well-being of human. Nurses are care givers for patient care whether it's at home, or any care centers anywhere; and giving care is a job that has to be done completely and properly, because if not it may bring someone's life (Makunyane 2012), thus, the performance of nurses is an important aspect of making sure that people receive quality service and receive it immediately when this service is needed (Negustis 2010). The performance of nurses differs from one area to another depending on the kind of resources and professional advancement installations of human capital which was held by the organization; where there is signification due to the reflection to government performance (Monil, (2011), defined performance as a completion in a productivity of system in the form of service or good. The performance of health services is a quality of service measured based on the results of self-assessment (patient rights fulfillment and staffing needs) and review of patient records. Self-assessment is process done to see the condition of existing health services in terms of fulfilling the rights of patients and health care staff. Review patient records intend to find out the key information is accurately and precisely carefully recorded on the patient's health record and the patient acquired services in correspondence with the standards. Patient flow analysis is a method to take into account the amount of time patients spent in getting services. Review of patient records and patient flow analysis when receiving health care consist of staying time and service time (Wibowo, 2009).

Job satisfaction, and organizational commitment, influenced performance are main factors that affect nursing performance of nurses' productivity, Al-Ahmadi, (2009) study found that job performance was positively correlated with organizational commitment, job satisfaction personal and professional variables, and strong predictors of nurses' performance. Job performance is appreciatively related to some personal factors, including years of experience (Al-Ahmadi, (2009). Important factor is the working atmosphere, which is one of the most significant causes of occupational stress the impact of which may be felt in low quality services.. This case can, in turn, leads to a decline in the number of customers since, generally, customers will tend to move to other better organizations with higher quality service (Borhani *et al.* 2016(Chaniago 2017).

Organizational factors are linked to –day to- day environment where health workers carry on their duties (Awases, 2006), and their level of nursing performance may be affected by the following but not limited to; organizational factors work load, night shift work, availability of resources, education and training development and manager support which ultimately affects patient's satisfaction, organizational vision and mission and the health care situation. Some of these factors are identified and selected for assessing their effect on nurses 'performance. Additionally. High workloads, understaffing, and working under pressure with critically ill patients who have life-threatening diseases are additional factors that obviously have more effectiveness on staff nurses' commitment to their job(Alameddine, *et al.*,2019).As nurses suffer everywhere, it appears to us more seriously when nursing suffers mainly from a lack of staff, which makes matters worse. Upon examining this deficiency, we find that the inappropriate work environment is one of the basic in this case. It implicitly leads to a lack of desire for the profession or

leaving it after practicing it (Alluhidan *et al.*, 2020 & Er & Sokmen, 2020).

Significance of the study: Health care delivery is highly labor-intensive field. The quality, efficiency and equity of services are all dependent on the availability of skillful, competent and motivated health professionals when and where they are needed. There is a growing concern about the poor quality of health services rendered to the population. Also nursing staff is the largest personnel component in the public health sector and are deployed at all levels of the health care delivery system. This study is important because it address on factors that influence nursing staff performance. Therefore this study amid to explored factors contributing to Nurse Productivity in their work in Omdurman Teaching Hospital. Khartoum State

Aim of the study: The aim of this study was to explore factors contribution to Nurse Productivity in their work in Omdurman Teaching hospital Khartoum state.

Research questions

- What is factors contribution to nurses productivity in their work in Omdurman Teaching Hospital

Subjects and methods

Research design: To conduct this study, a cross-sectional descriptive research design was utilized Study area and setting:

Study setting: The current study was carried out in Omdurman Teaching hospital technique as follow;

Stage 1: Selection of district

The study was conducted in Khartoum province which consists of 7 districts. The researcher used simple random sampling technique to pick up one district, it was Omdurman district.

Stage 2: Selection of city

The researcher randomly selected one district out of 7 districts of Khartoum district (omdurman).

Stage 3: Selection of streets

The selected city was divided into one area (shuhada area) selected randomly

Stage 4: Selection of participants: Finally, the researcher picked (105) by the simple random sampling method. All eligible older adults in the randomly selected participants who accept to participate in the study were included in the study sample till reaching the calculated sample size.

Study subjects: A purposive sample of 105participants selected from the above-mentioned hospital based on the following inclusion criteria;

- Aged between 25 and more than 30.
- Accept to participate in the study (oral consent).
- Able to communicate.

Tool for data collection: Self-administered questionnaire with three sections was used to collect data;

Part I: Demographic data: It was utilized to assess the socio-demographic characteristics of the participants. It entails data about elderly's age, gender, qualification, occupation, work place.

Part II: Nurses responses performance on aspects knowledge and skills: This part is modified by the researchers guided by (Zinbarg (2005)). It contains 6 parts to explore factors that contribute to nurses productivity in their work as follows: Nurses responses performance on aspects knowledge and skills (16 Items), Performance appraisal and its utilization system (7 Items), and salary, benefits, and recognition of nurses (5 Items), Staffing and work schedule system (7 Items), Nurses' perceptions concerning staff development strategies (8 Items). Nurses' perceptions regarding the work environment (8 items).

Scoring system: Responses were scored with one representing "yes" and zero representing no and don't know. A total score of more than 70% or higher is considered satisfactory, while a score of 60% or lower is considered unsatisfactory.

Content validity and reliability: Three experts reviewed the study tool and made some modifications based on their opinions to test its content validity. In order to assess each item individually and determine whether or not it is relevant and appropriate to test the desired outcomes, the content validity of the study tools was measured.

Field work: Following approval to continue with the study, the researchers set about creating a plan for data collection. The researchers conducted self-administered questionnaire for each participant through what's due to war conflict of the country (Sudan) which the researchers gave a brief explanation of the study's aim, identified herself, and assured the participants that the information which collected would be kept completely confidential and used only for research. Also consent was acquired through what's in order to gather the required information. Each participant completed the study tools and depending on their cooperation. Data were collected online using Google Form, the questionnaire constructed reviewed and modified to be suitable for Sudanese nurses culture.

Pilot study: To ensure the clarity and comprehensiveness of the tool, a pilot study was conducted on a sample of 11 nurses who were randomly selected from the hospital; they were not included in the total number of subjects.

Administration and ethical consideration: First, the study proposal was accepted by the director for Omdurman teaching hospital. Before starting any step in the study, following full explanation of the study's aim, each participant. Participants were given the right to refuse participation and were informed that they could withdraw at any time while filling out the questionnaire. The elderly was each assigned a code number to protect their anonymity, and they were given the assurance that the information would be kept confidential and used only for research.

Statistical analyses: Data collected from the studied sample was revised, coded, and entered using Personal Computer

(PC). Computerized data entry and statistical analysis were fulfilled using the Statistical Package for Social Sciences (SPSS) version 26. Data were presented using descriptive statistics in the form of frequencies, percentages, and Mean SD. A correlation coefficient "Pearson correlation" is a numerical measure of some type of correlation, meaning a statistical relationship between two variables. Chi-square (χ^2) is a statistical test used to determine the relationship between categorical variables. It is commonly employed to assess the independence or association between two categorical variables in a sample. Linear regression analysis is used to predict the value of a variable based on the value of another variable. In correlation between sociodemographic data and factors affecting productivity of the nurse, the workplace, qualifications, years of experience we use p value as 0.001 consider as significant.

RESULTS

Table (1) shows that, half of the participants 55 (52.4%) their age was ranged from (20-30) years old and the rest their age aged (>30 years) and the majority 57 (54.3%) of them were males. Regarding their qualification half of the nurses participants 50 (47.6%) have Diploma degree, while 39 (37.1%) have Bachelor degree, concerning the years of experience among staff nurses it was noted that half of them 58 (55.2%) had (More than 5) years of experience, while the rest their experience between 1-5 years of experience.

Table 1. Distribution of socio demographic characteristics of participants (no=105)

variable	frequency	Percent (%)
Age by years		
25-30	55	52.4
More than 30	50	47.6
Gender		
Male	57	54.3
Female	48	45.7
Qualification level		
Diploma	50	47.6
BSc	39	37.1
MSc	16	15.2
Work place		
Medical ward	17	16.2
Surgical ward	21	20
Emergency department	49	46.7
ICU	18	17.1
Years of experience		
1-5 years	47	44.8%
More than 5 years	58	55.2%

Table (2) Nurses responses performance on aspects knowledge and skills showed the participants satisfied regard planning of nurse care, Assessment of patient and Patient counselling skills 75 (62%) 76 (62.8%) 75 (62%) respectively, while the majority of them make Relationship with your supervisors and Interpersonal relation 95 (78.5%) 80 (66.1%) respectively, on other hands 60 (57.1%) know how to manage their time, half of them enrolled inservice training 50 (47.6%). 67 (55.4%) satisfied toward providing health education for patient and family and 69 (57%) satisfied regard Self-evaluation in terms of outcome performance, nearly half of respondents satisfied regard Improving their work methods 48 (39.7%) the overall Mean knowledge skills Mean, SD, P value as follows 1.4990.65255, .000 respectively. Table (3) show Performance appraisal and its utilization system most of them strongly satisfied towards Objectives to be achieved are known by individuals to be assessed 64 (61%), half of them strongly

Table 2. Nurses responses performance on aspects knowledge and skills (n=105)

Item	satisfied	Not satisfied	uncertain
Planning of nurse care	75(62%)	22(18.3%)	8(6.6%)
Relationship with your supervisors	85(70.2%)	10(9.5%)	10(9.5%)
Relationship with your colleagues	65(53.7%)	21(17.4%)	19(15.7%)
Improving work methods	48(39.7%)	16(13.2%)	41(33.9%)
Overall performance as compared to your coworkers	67(55.4%)	11(9.1%)	27(22.3%)
Implementation of nursing care plans	95(78.5%)	6(5%)	4(3.3%)
Assessment of patient	76(62.8%)	13(10.7%)	16(13.2%)
Implementing nursing performance standard	63(52.1%)	16(13.2%)	26(21.5%)
Providing health education for patient and family	67(55.4%)	19(15.7%)	19(15.7%)
Clinical competency	59(48.8%)	17(14%)	29(24%)
Interpersonal relation	80(66.1%)	11(9.1%)	14(11.5%)
Patient counselling skills	75(62%)	8(6.6%)	22(18.2%)
Self-evaluation in terms of outcome performance	69(57%)	20(16.5%)	16(13.2%)
Supervision of nursing care	45(37.2%)	24(19.8%)	36(29.8%)
In-service training	50(47.6%)	29(27.6%)	29(27.6%)
Management of time	60(57.1%)	9(8.6%)	36(34.3%)
Total descriptive data(Mean, SD AND p value)	1.4990	.65255	.000

Table 3. Performance appraisal and its utilization system (n=105)

Item	Strongly dissatisfaction(1)	Dissatisfaction (2)	average, (3)	Satisfaction(4)	Strongly satisfaction (5)
Objectives to be achieved are known by individuals to be assessed	4(3.8%)	10(9.5%)	13(12.4%)	14(13.3%)	64(61%)
Performance standards expected from staff are clear and understood by	15(14.3%)	10(9.5%)	16(15.2%)	11(10.5%)	53(60%)
Regular constructive feedback on performance appraisal results	24(22.9%)	14(13.3%)	19(18.1%)	11(10.5%)	37(35.2%)
Feedback on how the staff is performing is provided throughout the year	4(3.8%)	26(24.8%)	20(19%)	14(13.3%)	41(39%)
Prompt action is taken when performance falls below accepted standards	40(38.1%)	10(9.5%)	11(10.5%)	8(7.6%)	36(34.3%)
My manager's supervision inspires me to do my best	50(47.6%)	20(19%)	10(9.5%)	6(5.7%)	19(18.1%)
Staff are given the opportunity to make comments on the result of their performance	24(22.9%)	10(9.5%)	17(16.2%)	15(14.3%)	39(37.1%)
Total descriptive data (Mean, SD and P value)	3.3197	1.04557		.000	

Table 4. salary, benefits, and recognition of nurses (n=105)

Item	yes	no
salary is competitive compared to other similar organizations	12(11.4%)	93(88.6%)
salary is based on the level of experience	23(21.9%)	82(78.1%)
salary is according to your job responsibilities	17 (16.2%)	17(16.2%)
You are aware of the fringe benefit	20(19%)	85(81%)
Opportunities exist for your career development	16(15.2%)	89(84.8%)
Total descriptive data (Mean, SD and P value)	1.8324	.31394

Table 5. Staffing and work schedule system (n=105)

Items	Strongly satisfied(5)	Satisfied (4)	Average (3)	Dissatisfied (2)	Strongly dissatisfied (1)
Opportunity to provide feedback on staffing policies & procedures exist	0	0	0	71(67%)	34(32%)
Flexible work schedule is available	0	0	0	86(81.9%)	19(18.1%)
The overall work schedule is acceptable	0	0	0	89(84%)	16(15%)
The overtime work is acceptable	0	0	0	81(77%)	24(22%)
Good balance between people who supervise work and those who do	0	0	0	89(84.8%)	16(15.2%)
The staff in my unit is adequate to handle the current workload	0	0		79(75%)	26(24%)
Staff care and support in the form of counselling are available	0	0		89(84%)	16(15%)
Total descriptive data (Mean, SD and P value)	1.7946		.33027	.000	

satisfied regard standards expected from staff are clear and understood by 53(60%) .but 40(38.1%) strongly dissatisfied toward Prompt action is taken when performance falls below accepted standards .also showed strongly dissatisfied towards their manager's supervision inspires me to do my best 50(47.6%). Mean knowledge SD and P value regard appraisal and it utilization (3.3197) (1.04557) p value .000. Table (4) show salary, benefits, and recognition of nurses the

participants majority of them said no about salary is competitive compared to other similar organizations93 (88.6%). And not recognized regard You are aware of the fringe benefit85(81%), on other hand89(84.8%)don't have Opportunities exist for career development. The overall mean SD AND P value (1.8324) (.31394) .000 respectively. Table (5) regard Staffing and work schedule system the majority of them dissatisfied towards. Opportunity to provide feedback on

Table 6. Nurses' perceptions concerning staff development strategies (n=105)

items	Strongly dissatisfied(5)	dissatisfied(4)	Average(3)	satisfied(2)	Strongly satisfied(1)
Opportunities for promotion within the institutions are available	14(13%)	66(62%)	6(5.7%)	11(10%)	8(7.6%)
Good chances for further education are available	44(41.9%)	18(17.1%)	6(5.7%)	37(35%)	0
Training is provided to ensure job effectiveness	50(47.6%)	9(8.6%)	15(14.3%)	27(25%)	4(3.8%)
Job-focused refresher courses are available	50(47.6%)	9(8.6%)	15(14.3%)	27(25%)	4(3.8%)
In-service training adequately fills the skill gap	50(47.6%)	9(8.6%)	15(14.3%)	27(35%)	4(3.6%)
Incompetent nurses are identified and given the necessary support	60(57%)	4(3.6%)	10(9.5%)	27(35%)	4(3.6%)
Effective leadership/management training available	65(61.9%)	0	6(5.7%)	24(22.9%)	10(9.5%)
Nurses help to identify their staff development needs	50(47.6%)	6(5.7%)	4(3.8%)	25(23.8%)	20(19%)
Total descriptive data (Mean, SD and P value	3.5238		1.00316	.000	

Table (7) Nurses' perceptions regarding the work environment (n=105)

item	Strongly satisfied(5)	Satisfied(4)	Average(3)	Dissatisfied(2)	Strongly dissatisfied(1)
My workplace is safe and free of environmental hazards	16(15.2%)	16(15.2%)	12(11.4%)	52(49.5%)	9(8.6%)
Good layout for working play	0	27(25.7%)	12(11.4%)	62(59%)	4(3.8%)
Comfortable temperature	12(11.4%)	15(14.3%)	6(5.7%)	63(60%)	9(8.6%)
Necessary instruments are available	5(4.8%)	5(4.8%)	5(4.8%)	75(71.4%)	15(14.3%)
Working instrument available	8(7.6%)	12(11.4%)	11(10.5%)	67(63.8%)	7(6.7%)
Material and supplements are sufficient	8(7.6%)	12(11.4%)	11(10.5%)	67(63.8%)	7(6.7%)
Antiseptic hand solutions are available to protect staff and patients	4(3.8%)	4(2.9%)	15(14.3%)	72(68.6%)	11(10.5%)
Guideline for infection control strategy is available	3(2.9%)	6(5.7%)	7(6.7%)	76(72.4%)	13(12.4%)
Total descriptive data (Mean, SD and P value	2.4333		.74175	.000	

staffing policies & procedures exist Flexible work schedule is available, the overall work schedule is acceptable, the overtime work is acceptable. Good balance between people who supervise work and those who do, the staff in my unit is adequate to handle the current workload, Staff care and support in the form of counselling are available Mean, SD and P value 1.7946.33027.000 respectively. Table (6) regard perceptions concerning staff development strategies 66(62%) dissatisfied towards opportunities for promotion within the institutions are available, and half of them 50(47.6%) dissatisfied towards Job-focused refresher courses are available, In-service training adequately fills the skill gap ,on other hand Incompetent nurses are identified and given the necessary support ,Effective leadership/management training available 60(57%). 65(61.9%) respectively, the overall Mean, SD and P value (3.5238) (1.00316) (.000) respectively.

Table (8) Correlation of contributing factors and socio demographic data

factors	sociodemographic	P value
Knowledge skills	qualification	.001
	Work place	.001
	Years of experience	.001
appraisal and its utilization system	qualification	.876
	Work place	.875
	Years of experience	.879
salary, benefits, and recognition	qualification	.372
	Work place	.272
	Years of experience	.160
Staffing and work schedule system	qualification	.001
	Work place	.001
	Years of experience	.001
staff development strategies	qualification	.708
	Work place	.708
	Years of experience	.708
work environment	qualification	.001
	Work place	.001
	Years of experience	.000

Table (7) show participants perceptions regarding the work environment majority of them dissatisfied toward availability of Working instrument and material and sufficient of supplements Again they dissatisfied towards layout for

working play ,comfortable temperature and availability of necessary instruments are available. Mean, SD and P value (2.4333).(74175) (.000) respectively. Finally from the results there is significant association between factors and qualification, work place and experience of participants

DISCUSSION

The present study is analytical descriptive study done in Omdurman Teaching Hospital among nurses to assess their contributing factors as affect their performance, as nurses constitute considerable human resource in healthcare setting and their performances are critical for the effective frugality of health care which affect their productivity and performance in their work. So there are so many factors that affect their performance level, salary and benefits level of education, experience, training on clinical tools, staffing and work schedule system, work environment, knowledge, skills, recognition that affect their performance level (Tesfaye *et al.* (2015) the work environment majority of them dissatisfied toward availability of Working instrument and material and sufficient of supplements Again they dissatisfied towards layout for working play ,comfortable temperature and availability of necessary instruments are available. Mean, SD and P value (2.4333).(74175) (.000) respectively disagree with study done by (Nureesa Dolohle *et al.* (2018) where their participants showed high work satisfaction were 0.88 times more likely to had good performance. The result of this study is consistent with a study by Aron (2015), which stated that there was a positive relationship between nurse work satisfaction and the quality of health services by nurse. Work satisfaction related to attitudes of employees to the work itself, work situation, cooperation between the leader-ship, and other employees. According to Blum, work satisfaction was a general atti-tude from the result of some special atti-tudes toward work factors, adjustments, and individual social relationships outside of work (Suyanto, 2008). Service to the customers caused or affected patient satis-faction. Again

regard work environment as factor influencing nursing staff performance according to the current study was work environment and supplies. This result was agreed with Safei and Haryanti, (2011), who measured factors affecting nursing work performance in inpatient unit of RSUD kota Tanjung Pinang; and reported that 89.0% of studied nurses determined the environment and tools as a high factor affecting on their performance. In additional Kamati *et al.*, (2014) evaluated the factors influencing the performance of registered nurses at the national referral hospital in Namibia; and reported that more than 70% of the RNs cited that the hospital does not have adequate equipment and resources that enable them to efficiently execute their duties. The last factor was training and development opportunities which considered as important contributing factor influence nursing staff performance. This result may be due to the hospital management didn't develop appropriate plans for training and development of their staff to have more effective performance. Also, the hospital did not specify an appropriate time for training staff; and nursing staff was not releasing from their work to attend the training, this result is contradicted with Abdelmaksoud, *et al.*, (2017) ,who mentioned that training and development opportunities is the 2nd ranking factor affecting nurses' performance according to mean percent of their perception. This difference in this result may be due to about one third of the Abdelmaksoud, *et al.*, (2017).

In the opposite Kuria, (2015) found in his study that about 57.8% of the respondents agreed that rate of reward was a perceived factor that enhanced the level of satisfaction; in which rewarding employees leads to improved employee's performance. Also, current study showed that there was statistically significant correlation between reward effect and qualification variable. Also it was noted that there was highly statistically significant correlation between reward effect and Work place In the same line Tabeel, (2014) concluded that there were statistically significant differences relationship between motivation (reward factors) and nurses performance in Governmental Hospitals, attributed to the workplace. Our study revealed that, there were highly statistically significant positive correlations found between years of experience and the reward factors Which result not congruent with Mohamed and Morsy, (2016) who found in their study about work design characteristics as perceived by nurse managers at Assiut university hospital that task characteristics had weak negative statistically significant correlations

CONCLUSION AND RECOMMENDATION

From the results we found that nurses not involved in service training and no any rewarding from hospital manager .Researcher suggest developing and implementing clear training and development programs that based on needs and performance evaluation of nurse. The hospital managers should improve the work environment to be suitable and comfortable to help the staff to do their work more easy.

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