

Job Performance of Clinical Nurses at Tertiary Level Hospital in Bangladesh

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Abstract.

Background: Job performance refers to nurse's activities reflects the quality of delivered care directly and indirectly concerning with health care organizations. It reflects patient care which is largely measured by patient outcomes and the achievement of organizational goals.

Objective: To explore the job performance of clinical nurses at tertiary level hospital.

Methods: A descriptive exploratory study was conducted using a convenient sampling technique with a total number of 104 clinical nurses in 2018 to 2019 at Dhaka Medical College Hospital. Data were collected by using face to face interview with a self-administered questionnaire based on the Schwirian's Six Dimensions Scale of Nursing Performance. Both descriptive and inferential statistics were used for analysis of the data (SPSS version 23).

Results: The study result showed that the average age of the participant was 34 (SD =7.16) years. Majority of them were female (84.6%), married (83.7%), & Muslim (82.7%). The findings revealed that the average job performance was 2.64 (SD =.66). In bivariate analysis result found that the MSC nurses performed both patient related and non-patient related job performance significantly ($F = 3.97, p = .02$; $F = 3.13, p = .04$) higher than that of BSc and Diploma education. Similarly, nurses job experience was statistically significant ($r = .211, p = .031$) with job performance.

Conclusion: The study findings showed that, higher educated and experienced nurses performed more patients and non-patient related tasks. ~~Therefore~~ It is recommended that nurse need to initiate to achieve higher degree and educational training program for better nursing services.

Key Words: Job Performance, Clinical Nurses, Tertiary Level, Hospital

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I. Introduction

Job Performance of nurses is a major concern for all health care organizations. The level of nursing performance and healthcare system reflects the quality of delivered care, patient outcomes and the achievement of organizational goals. Job performance may defined as the effectiveness of a person in carrying out his/her roles and responsibilities related to direct and indirect patient care (Al-Makhaita, Sabra, & Hafez, 2014) as patient related and no-patient related nursing activities. In general, it is a multidimensional phenomenon affecting by patients' high expectations, job stress, advanced technology, quality control and heavy duties and responsibilities (Samiei, Abdul Manaf R, Ismail, & Kandasamy, 2016). In addition, individual characteristics, shortage of nurse, lack of resources, work load and satisfaction, working experience, training/collaboration, critical care, supportive communication and feedback, leadership behavior and organizational climate can influence nursing performance (Kirkcaldy & Martin, 2000).

In every health care organizations, nurses are the largest work force in the health care delivery system (Samiei et al., 2016) who performing nursing activities from the aspects of nursing leadership, critical care, teaching/collaboration, planning/evaluation, interpersonal relations/communications, and professional development (Schwirian, 1978). These can be categories as patient related and non- patient related nursing job performances. Based on Schwirian (1978), patient related job performances are performing technical procedure (oral suctioning, tracheotomy and catheter care, dressing change), give emotional support to dying patient and family, managing emergency and critically ill patients, teaching patients and family members. On the other hand, the non-patient related job performances are praise to subordinate, delegate responsibility based on priority,

guide others for nursing care plan, maintain high standards of performance etc. In health care research, many studies (Al-Makhaita et al., 2014; Samiei et al., 2016; & Tesfaye et al., 2015) have measured nursing job performances using Schwirian's (1978) Six Dimension Scale of Nursing Performance (6DSNP).

The impact of high levels job performance leads to increased productivity as well as quality of service and patients care. Poor job performance is considered as a risk factor for patient safety (Al-Makhaita, Sabra & Hafez, 2014) and increased mortality and morbidity. In health care settings, the nurses' performance is always under inspection at hospital, home, or any other places aimed to achieve health well-being (Makunyane, 2012). It contains mainly two major categories (i) in-role or task performance and (ii) extra-role or contextual performance (Borman & Motowidlo, 1997; Conway, 1999). The task performance is a configuration of behaviors that implicate production of goods action (Kathya & Oral, 2018). Furthermore, contextual performance is related to efforts undertaken by individuals that are not related to his or her main job function (Werner, 2000; Werner & De Simone, 2009).

Hospitals like every other organizations, cannot be successful without effective performance. Therefore performance appraisal is very important to provide information to the higher authority about the performance of the nurses when doing their job and to ensure that the quality of care is met (Huber, 2006). According to the International Council of Nurse [ICN] the shortage of nursing staff is the problem in the global scale from the past to the present. It was stated that thirty seven percent of nurses reported that they felt ready to change jobs (Bishwajit, Khumyu & Boonyanurak, 2016). These problems may affect job performance due to lack of satisfaction in working environment, motivation of work, and quality of care (Zaghloul, Al-Hussaini & Al-Bassam, 2008).

In developing country like Bangladesh serious shortage of nurses was found in most of the hospital. According to WHO (2007) the nurse-population ratio is only 0.14:1000; nurse-doctor ratio is nearly 1:2, and the nurse-patient ratio is only 1:15-20 (Latif, 2010). The existing nursing shortage with poor working environment, shortage of resources, work load are highly affected on nursing care and job performance. Furthermore, the nursing activities between government and non-government hospitals and found that for government hospital only 5.3% of nurses' time was spent in direct contact with patient care, 32.4% was for indirect patient care and paperwork. 50.1% was spent their time with maintaining ward accessories like; counting linen, instruments, handover and taken over of equipment and remaining time was spent away from the ward that may impact on nurses' job performance that revealed patients care and organizational outcomes (Bilkis, 2010). The existing situation, people lost their faith in public & private hospitals & increasing out flow of Bangladeshi patients to neighboring countries (Andaleeb et al., 2007). These may be caused due to inappropriate or inadequate nursing performance that need to be measured.

In this regard, the researcher reviewed many literature related to job performance of clinical nurses that have been carried out worldwide. But no study was found yet in Bangladesh. Therefore, the researcher was interested to explore the job performance of clinical nurses in Bangladesh.

II. Objectives

General Objective:

The aim of this study was to explore the job performance of clinical nurses at tertiary level hospital in Bangladesh.

Specific Objectives

1. To describe the Socio-demographic characteristics of clinical nurses
2. To explore the job performance of clinical nurses
3. To examine the relationship between socio-demographic characteristics and job performance of clinical nurses

III. Methodology

This chapter described the research methodology used in this study which included study design, participants, instrument, data collection method, and data analysis of this study.

1. Study Design

A descriptive exploratory study design was conducted to explore the job performance and examine the relationship between socio-demographic characteristics and job performance of clinical nurses.

2. Study Participants

In this study the participants were clinical nurses who were working at Dhaka Medical College Hospital, Dhaka (DMCH). It is one of the largest tertiary level hospitals which located in Dhaka, the capital city of Bangladesh. This is 2600 bedded hospital where approximately 2000 nurses are clinically working and

providing multidisciplinary comprehensive health care services towards the population. The sample size was estimated based on power analysis (Polit & Beck, 2008) and calculated using G-power. Accepted minimum level of significance (α) 0.05, an expected power 0.80 ($1-\beta$) and an estimated population effect size was 0.36 (γ) based on previous study (Yuxiu, Kulaviktikul, & Thungjaroenkul 2011). The minimum sample size was 88. Due to potential risk of dropout, 20% attrition rate was added. Therefore the total sample was 104 those selected conveniently based on inclusion criteria. These are: (i) clinically involved in direct patients care (ii) had at least 2 year working experience in clinical setting (iii) willing to participant in this study. Nurses excluded who were pregnant and psychologically ill.

3. Instruments

The instrument of this study was used a set of self-structured questionnaire which consisted of two parts.

Part I: The Socio-demographic Characteristic Questionnaire (SCQ),

The Socio-demographic Characteristic Questionnaire (SCQ) was developed by the researcher based on literature review that consisted of 8 items age, sex, religion, marital status, educational status, monthly income, working experiences, Current workplace.

Part II: Six Dimension Scale of Nursing Job Performance (SDSNJP)

Measurement of the clinical nurses Job performance by using Six Dimension Scale of Nursing Performance (6DSNP) questionnaire developed by Schwirian which is used in many health care researches (Al-Makhaita et al., 2014; Tesfaye et al., 2015). This questionnaire focuses on the various aspects of nursing job performance such as; (1) Leadership (5 items), (2) Critical care (7 items), (3) Teaching/collaboration (11 items),

(4) Planning/evaluation (7 items), (5) Interpersonal relations/communications (12 items) and (6) Professional development (10 items). This questionnaire consists of 52 items on a 4-point scale which concludes two parts refers to the degree of perform. It measures nurses' performances in 2 ways, 'Column-A' and 'Column-B'. The 'Column A' mentioned 1=Not expected in this job, 2 = Never and seldom, 3 = occasionally, and, 4 = frequently. On the other hand the 'Column-B' also mentioned nurse's performance in 1-4 point scale. In this study the researcher was measured nurses performance using by 'Column B' that refers as (1) = Not very well, (2) = satisfactorily, (3) = Well, and (4) = Very well (Schwirian, 1978). In this study, these dimensions have measured under 2 job performances: (1) Patient related job performances, and (2) Non-patient related performance. The scale was developed and tested from 1974-1977 and has high reliability (Schwirian, 1978). Reliability and validity of the 6-DSNP was established and Cronbach's alpha coefficients for each sub-scale ranged from 0.90 to 0.97 (Schwirian, 1978). The Cronbach's alpha coefficients for each sub-scale ranged.97 in this study.

4. Data Collection Method

This study was approved by the Institutional Review Board (IRB) of NIANER and Bangabandhu Sheikh Mujib Medical University (BSMMU), Dhaka. IRB No. Exp. NIANER-S-2018-56. After taking permission from the concerned authority that is Director and Nursing Superintendent of Dhaka Medical College Hospital (DMCH) for data collection and informed them about the study and obtained written and verbal consent from the participant's who were willingly participate of this study. Data was collected by the researchers through a set of self structured questionnaires including the Socio-Demographic Characteristic Questionnaire (SDCQ) 9 items, and Six Dimension Scale of Nursing Job Performance (SDSNJP) 52 items with the support of nursing authority and give time for participant to answer the questionnaire at least one week and request them to return the filled the questionnaire. Privacy, Confidentiality and anonymity assured by the researcher. The participation of the respondents was voluntary and can withdraw from the study at any time without any penalty.

5. Data Analysis

Data was analyzed by using Computer Software program (SPSS version 23) for both descriptive and inferential statistics. Descriptive Statistics frequency (F), percentage (%), mean (M) and standard deviation (SD) were used to measure demographic characteristics. Inferential Statistics: Two sample t-test, Pearson correlations and ANOVA and Multiple comparisons (Post hoc) were used to examine the relationship between the socio-demographic characteristics and job performance of clinical nurses.

IV. Results

The chapter represents the result of this study. The findings of the study are described under the following headings.

1. Socio-demographic Characteristics of Clinical Nurses

The socio-demographic characteristics of the clinical nurses are presented in Table 1. Among the 104 participants the mean age was 34.58 years (SD =7.20) and ranged from 25 to 53 years. The majority of clinical nurse were female (84.6%), Muslim (82.7%) and non-Muslim only (17.3%) by their religion and got marry (83.7%). Nearly half of them clinical nurse's had Diploma in nursing degree (47.1%), and had BSc in nursing (41.3%), MSN only (11.5%) and Approximately one third (30.8%) clinical nurses who were working in Medicine unit. Average monthly income, and job experience was of clinical nurses was 35.63 thousand (SD = 6.85) and 9.03 years (SD=5.56) respectively (Table 1).

Table 1: Socio-demographic Characteristics of Clinical Nurses

Variables	Categories	n (%)	M ± SD
Age			34.58 ± 7.20
Sex/Gender			
	Male	16 (15.40)	
	Female	88 (84.60)	
Religion			
	Muslim	86 (82.70)	
	Non-muslim	18 (17.30)	
Marital status			
	Married	87 (83.70)	
	Un Married	17 (16.30)	
Professional education			
	Diploma in nursing	49 (47.10)	
	BSc in Nursing	43 (41.30)	
	MSN/MPH	12 (11.50)	
Monthly income (Thousand)			35.63 ± 6.85
Job experience (Years)			9.03 ± 5.56
Current Working Place			
	Medicine Unit	32 (30.80)	
	Surgery Unit	20 (19.20)	
	Burn Unit	16 (15.40)	
	Labor Unit	16 (15.40)	
	Cancer Unit	05 (4.80)	
	Neurology Unit	15(14.40)	

2. Job Performances of Clinical Nurses

In this study, the total mean score of nursing job performance was 2.64, (SD = .66) which is considered the overall clinical nurses had moderate level of job performance. Among subscales of nursing job performance, Firstly, highest mean score belonged to Interpersonal Relationship and Communication (Mean =2.51, SD =.63) followed by Critical Care (Mean =2.35, SD=.70), Teaching/Collaboration (Mean =2.17, SD =.76),and Planning/Evaluation (Mean =2.45,SD =.59) that is patient related job performance of clinical nurses, Secondly, highest mean score sub scale was Professional Development (Mean =2.53,SD=.66) followed by the lowest mean score belonged to Leadership (Mean =2.06,SD = .71) that is non-patient related job performance (Table 2).

Table2. Job Performance of Clinical Nurses

Subscale	M ± SD
Over all Job performance	2.64 ± .66
Patient related job performance	2.56 ± .65
Critical care	2.35 ± .70
Teaching/Collaboration	2.17 ± .76
Planning/Evaluation	2.45 ± .59
IPR/Communication	2.51 ± .63
Non-patient related job performance	2.50 ± .67

Leadership	2.06 ± .71
Professional Development	2.53± .66

3. Job Performance of Clinical Nurses

Job performance of clinical nurses by using items frequency, percentage, mean and standard deviation. Patient related job performance: Among 37 items of patient related job performance. Total mean score of patient related job performance was 2.56 (SD=.65) , three items with highest Mean score were ‘Promote the patients’ rights to privacy’ Mean was 3.34 ,(SD = .96), ‘Evaluate result of Nursing care’ Mean was 3.07 (SD= .93) and ‘Seek assistance when necessary’ Mean was 3.05,(SD=.87) .One item with the lowest mean score was ‘Identify and use community resources in developing a plan of care for a patient and his/her family’ Mean was 2.11 ,(SD =1.01).

Non- patient related job performance: There were 15items of non-patient related job performance, Total mean score of non-patient related job performance was 2.50, (SD= .67).While three items with highest Mean score were ‘Demonstrate self-confidence’ Mean was 2.98 ,(SD=1.02),‘Accept responsibility for won actions’ Mean was 2.89,(SD=- .98) and Accept and use contractive criticism’ Mean was 2.89, (SD= .98) and one item lowest mean score was ‘Delegate responsibility for care based on assessment of priorities of nursing care needs and the abilities and limitations of available health care personnel’ Mean was 2.32, (SD= 1.07) (Table 3).

Table3. Job Performance of Clinical Nurses

Items	n (%)				M± SD
	Not very well	Satisfactorily	Well	Very well	
Job performance					2.64 ± .66
Patient Related Job Performance					2.56 ± .65
Perform technical procedures: e.g. oral suctioning, tracheotomy care, IV therapy, catheter care, dressing changes.	30(28.8)	28(26.9)	19(18.30)	27(26.00)	2.41±1.16
Use mechanical devices: e.g., suction machine, Gomco, cardiac monitor, respirator	30(28.8)	33(31.7)	23(22.1)	18(17.3)	2.28±1.06
Give emotional support to family of dying patient	8(7.7)	33(31.7)	27(26.0)	36(34.6)	2.88±.98
Perform appropriate measures in emergency situations	8(7.7)	33(31.7)	28(26.9)	35(33.7)	2.87±.97
Perform nursing care required by critically ill patients.	11(10.6)	26(25.0)	27(26.0)	40(38.0)	2.92±1.03
Recognize and meet the emotional needs of a dying patient	12(11.5)	31(29.9)	34(32.7)	27(26.0)	2.73±.97
Function calmly and competently in emergency situations	10(9.6)	29(27.9)	30(28.8)	35(33.7)	2.87±.99
Teach a patient's family members about the patient's needs	26(25.0)	27(26.0)	27(26.0)	24(23.1)	2.47±1.10
Teach preventive health measure to patients and their families.	30(28.8)	16(15.4)	31(29.8)	27(26.0)	2.53±1.16
Identify and use community resources in developing a plan of care for a patient and his/her family.	38(36.5)	27(26.0)	29(27.9)	10(9.6)	2.11±1.01
Adapt teaching methods and materials to the understanding of the particular audience: e.g., age of patient, educational background and sensory deprivation.	39(37.5)	20(19.2)	22(21.2)	23(22.1)	2.28±1.18
Identify and use community resources in developing a plan of care for a patient and his/her family.	38(36.5)	27(26.0)	29(27.9)	10(9.6)	2.11±1.01
Adapt teaching methods and materials to the understanding of the particular audience: e.g., age of patient, educational background and sensory deprivation.	39(37.5)	20(19.2)	22(21.2)	23(22.1)	2.28±1.18
Develop innovative methods and materials for teaching patients.	25(24.0)	36(34.6)	25(24.0)	18(17.3)	2.35±1.03
Promote the use of interdisciplinary resource persons.	31(29.8)	31(29.8)	24(23.1)	18(17.3)	2.28±1.07
Use teaching aids and resource materials in teaching patients and their families.	25(24.0)	39(37.5)	22(21.2)	18(17.3)	2.32±1.02
Encourage the family to participant in the care of the patient	19(18.3)	27(26.0)	26(25.0)	32(30.8)	2.68±1.10
Identify and use resources within the health care agency in developing a plan of care for a patient and his/her family	33(31.7)	22(21.2)	34(32.7)	15(14.4)	2.30±1.06
Communicate facts, ideas, and professional opinions in writing to patients and their families	34(32.7)	19(18.3)	27(26.0)	24(23.1)	2.39±1.16
Plan for the integration of patient needs with family needs.	21(20.2)	40(38.5)	27(26.0)	16(15.4)	2.66±3.25
Coordinate the plan of nursing care with the medical plan of care.	20(19.2)	29(27.9)	32(30.8)	23(22.1)	2.56±1.04
Identify and include in nursing care plans anticipated changes in patient's conditions.	25(24.0)	32(30.8)	23(22.1)	24(23.1)	2.44±1.09
Evaluate results of nursing care.	8 (7.7)	18(17.3)	37(35.6)	41(39.4)	3.07±.93
Develop a plan of nursing care for a patient	7 (6.7)	21(20.2)	37(35.6)	39(37.5)	3.04±.92
Initiate planning and evaluation of nursing care with others.	11(10.6)	25(24.0)	28(26.9)	40(38.5)	2.93±1.02
Identify and include immediate patient needs in the plan of nursing care	14(13.5)	30(28.8)	33(31.7)	27(26.0)	2.70±1.00
Contribute to the plan of nursing care for a patient.	11(10.6)	24(23.1)	27(26.0)	42(40.4)	2.96±1.03
Promote the inclusion of patient's decision and desires concerning his/her care.	8(7.7)	33(31.7)	39(37.5)	24(23.1)	2.76±.89
Communicate a feeling of acceptance of each patient and a concern for the patient's welfare.	16(15.4)	31(29.8)	34(32.7)	23(22.1)	2.62±.99
Seek assistance when necessary.	5 (4.8)	22(21.2)	40(38.5)	37(35.6)	3.05±.87

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Help a patient communicate with others.	15(14.4)	29(27.9)	34(32.7)	26(25.0)	2.68±1.00
Verbally communicate facts, ideas, and feelings to other health care team members.	31(29.8)	22(21.2)	24(23.1)	27(26.0)	2.45±1.17
Promote the patients' rights to privacy.	8(7.7)	12(11.5)	21(20.2)	63(60.6)	3.34±.96
Contribute to an atmosphere of mutual trust, acceptance, and respect among other health team members.	22(21.2)	22(21.2)	30(28.8)	30(28.8)	2.65±1.11
Explain nursing procedures to a patient prior to performing them	18(17.3)	19(18.3)	32(30.8)	35(33.7)	2.81±1.08
Use nursing procedures as opportunities for interaction with patients.	14(13.5)	29(27.9)	32(30.8)	29(27.9)	2.73±1.01
Contribute to productive working relationships with other health team members.	35(33.7)	32(30.8)	21(20.2)	16(15.4)	2.17±1.06
Help a patient meet his/her emotional needs.	14(13.5)	27(26.0)	31(29.8)	32(30.8)	2.78±1.03
Use opportunities for patient teaching when they arise.	19(18.3)	40(38.5)	28(26.9)	17(16.3)	2.41±.97
Non- Patient Related Job Performance					2.50 ± .67
Give praise and recognition for achievement to those under his/her direction	19(18.3)	39(37.5)	17(16.3)	29(27.9)	2.54±1.08
Delegate responsibility for care based on assessment of priorities of nursing care needs and the abilities and limitations of available health care personnel	29(27.9)	32(30.8)	24(23.1)	19(18.3)	2.32±1.07
Guide other health team members in planning for nursing care	25(24.0)	31(29.8)	33(31.4)	15(14.4)	2.37±1.00
Accept responsibility for the level of care under his/her direction.	15(14.4)	40(38.5)	23(22.1)	26(25.0)	2.58±1.02
Remain open to the suggestions of those under his/her direction and use them when appropriate.	21(20.2)	32(30.8)	28(26.9)	23(22.1)	2.51±1.05
Use learning opportunities for ongoing personal and professional growth.	18(17.3)	31(29.8)	24(23.1)	31(29.8)	2.65±1.08
Display self-direction.	8(7.7)	46(44.20)	27(26.0)	23(22.1)	2.63±.91
Accept responsibility for own actions.	7(6.7)	35(33.7)	24(23.7)	38(36.5)	2.89±.98
Assume new responsibilities within the limits of capabilities.	7(6.7)	31(29.8)	41(39.4)	25(24.0)	2.80±.88
Maintain high standards of performance.	9(8.7)	29(27.9)	29(27.9)	37(35.6)	2.90±.99
Demonstrate self-confidence.	10(9.6)	25(24.0)	26(25.0)	43 (41.3)	2.98±1.02
Display a generally positive attitude.	15(14.4)	25(24.0)	22(21.2)	42(40.4)	2.88±1.10
Demonstrate a knowledge of the legal boundaries of nursing.	16(15.4)	31(29.8)	21(20.2)	36(34.6)	2.63±1.00
Demonstrate knowledge of the legal boundaries of nursing.	16(15.4)	31(29.8)	21(20.2)	36(34.6)	2.74±1.09
Accept and use constructive criticism.	8(7.7)	32(30.8)	27(26.0)	37(35.6)	2.89±.98

4. The Relationship between Socio-demographic Characteristics and Job Performance of Clinical Nurse

In this study, the result of bivariate analysis showed that, male nurses performed patient related ($M = 108.38$; $SD = 32.36$) and also non-patient related ($M = 43.88$; $SD = 15.14$) nursing clinical activities higher than female nurses ($M = 95.14$; $SD = 22.74$ and 39.66 $SD = 9.63$). Similarly, the nurses those were Non-Muslim and unmarried have higher job performances in both patient related ($M = 102.89$, $SD = 24.37$; and $M=102.76$, $SD =21.93$) and non-patient related, ($M = 43.00$, $SD = 11.10$ and $M = 42.59$; $SD = 10.01$) than those Muslim and married. In the demographic characteristics, the education and job experiences were revealed as significant variables. In multiple comparison analysis, the result showed that the nurses those acquired MSC or MPH education had performed both patient related and non-patient related job performance significantly ($F= 3.97$, $p=.02$; $F=3.13$, $p=.04$) higher than that of Diploma and BSc degree. Additionally, nurses job experience also reported as statistically significant relationship ($r = .211$, $p=.031$) with job performance (Table 4).

Table 4. The Relationship between Socio-demographic Characteristics and Job Performance of Clinical Nurses (N=104)

Variables	Categories	Job performance			
		Patients related		Non-Patients related	
		M ± SD	t/r/f(p)	M ± SD	t/r/f(p)
Age (Years)			.09 (.34)		.08 (.39)
Sex					
	Male	108.38 ± 32.36	1.56 (.13)	43.88 ± 15.14	-1.07(.29)
	Female	95.14 ± 22.74		39.66 ± 9.63	
Religion					
	Muslim	95.98 ± 24.79	-1.07 (.28)	39.74 ± 10.57	-1.17(.24)
	Non-muslim	102.89 ± 24.37		43.00 ± 11.10	
Marital status					
	Married	96.08 ± 25.23	-1.01(.31)	39.86 ± 10.81	-.96(.33)
	Unmarried	102.76 ± 21.93		42.59 ± 10.01	
Education					
	Diploma ^(a)	96.53 ± 21.43	3.97 (.02)	40.31 ± 8.82	3.13 (.04)
	BSc ^(b)	92.93 ± 26.62	c> a, b	38.44 ± 12.07	c> a, b
	MSc / MPH ^(c)	115.00 ± 24.57		47.00 ± 10.50	
Monthly Income (k)			.08 (.39)		.06 (.51)
Job experiences (Years)			.21 (.03)		.16 (.09)
Current Work place(Unit)					

Medicine Unit	94.81 ± 25.96	.76 (.58)	39.38 ± 10.90	.84 (.52)
Surgery Unit	105.55 ± 29.46		43.45 ± 13.16	
Burn Unit	93.38 ± 24.35		39.75 ± 9.86	
Labor Unit	99.06 ± 25.00		42.19 ± 11.41	
Cancer Unit	87.40 ± 16.50		34.80 ± 7.05	
Neurology Unit	96.33 ± 16.81		38.53 ± 6.95	

V. Discussions

A descriptive exploratory study was conducted to explore the job performance among clinical nurses. This chapter presents the discussion based on the result of the study. Job performance has an important role to an employee in terms of health and wellbeing. Hospitals with high job performance scores have been reported to have high quality of care and favorable patient outcomes. Nurses' performance and quality nursing care might involve interpersonal relationship with nurses' and influence on clinical nursing practice.

Socio-demographic Characteristics of Clinical Nurses:

The study findings showed that averagely all clinical nurses were 34.58 years old and most of the clinical nurses were Muslim. As similar to other country compared the previous study (Yuxiu et al.,2011).In Bangladesh there are four religions that recognized by government-Muslim, Hindu, Christian and Buddhist .Islam is largest religion in Bangladesh 80% and the rest on other religions. The most of them were female 84.6%.Compared with previous study (Samiei, 2016).In Bangladesh nursing is commonly considered as a women's profession most of the nurses were female and currently working in the hospital and this is similar to many other countries in the world. According Cooper (2005) reported that during the Crimean War, Florence nightingale established modern nursing in her work as a nurse based on caring. At that time most sick people who benefited from her caring recovered .from that period most entrants to the nursing profession have females and they give care to the sick in a clinical setting (Sheuly,2010).

Furthermore nearly half of them had the highest educational level on Diploma education reported the moderate level of job performance. This is in agreement with previous study (Samiei,2016) in Malaysia majority of clinical nurse's had Diploma in nursing degree still higher than others advanced degree in nursing.

There are some reasons for high percentage of diploma nurses in the profession in Bangladesh. For example bachelor and master degree course. Since 2003 in Bangladesh there was few nursing college for bachelor degree course and allowed only 120 students including 5% of foreign students. At the beginning of 2003, a private university started a bachelor degree of nursing throughout the country by open University(a private university).By the year of 2008,a large numbers of nurses completed their bachelor degree in nursing because the government extent the nursing college. Thus, the gradually increasing number of high educational personnel in the profession can contribute in the development of nursing in Bangladesh and for quality of patient care.

Regarding nursing experience, results of this study Mean score of job experience of clinical nurses was 9.03, (SD=5.56) and most of the clinical nurses had work experience from two to ten years. Compared with others study findings that most of the clinical nurses had high job experience one to five years (Ismail and Kandasamy ,2016 ; Thungjaroenkul , 2011).The current study was stated that younger nurses had high job experience on job performance and provide effective nursing care for patients, since their job performance was based on work experience and still continuing to develop nursing skills. Job experience is a significant part of nurse's knowledge, skills and attitude for providing quality of patients care. There were several reasons might be responsible for newly nurse's high job performance such as level of education, social demands for quality care, and day by day upgrade the nursing curriculum.(Table-1).

Job Performance of Clinical Nurses:

The average mean score was calculated on each subscale both patients related and non-patients related. The results indicated that the level of job performance of clinical nurses in each dimension and overall was at a moderate level. Among subscales of job performance, the highest mean belonged to Professional Development and Interpersonal Relationship and Communication followed by Critical Care, Teaching/ Collaboration ,and Planning/Evaluation while the Leadership sub-scale had the lowest mean score of total mean score that is both patient related and non-patients related job performance of clinical nurses. This result compared with previous study like Thailand this study found that job performance was perceived at a moderate level by professional nurses (M= 2.82,SD= .42) (Yuxiu et al.,2011) and also almost the same with another study like Malaysia and Jordan showed that the highest mean (standard deviation) belonged to interpersonal relationship and communication (Samiei et al ., 2016; Mrayyan & Al-Faouri,2008 ; Denise, 2010).

Several study showed that the mean of all aspects of performance are almost the same or with a small differences. The study result was stated that clinical nurses perceived moderate level of job performance might be related to many factors including nursing shortage, poor working environment, stress, job satisfaction,

increased workload, lower salaries, unreachable target, centralized management, customer dealings, technological problem, not have acknowledgement, longer time frames, be short of reward system affect the job performance for clinical nurses in health care settings in Bangladesh and also higher nurse patient ratios often lead to decrease job performance. The stronger aspects of their job performance among clinical nurses were Professional Development and Interpersonal Relationship / Communication which are the clinical nurse's nature of work in communicating with other staff to lead them and the weakest one is Leadership with the patients and their families and others health care providers. In this reason initiate to establish several training program and involved project for clinical nurses to improve knowledge, attitude, practice, self-development and professional development that perform well in implementing nursing activities and perceive high performance (Table 2).

In table 3 measured clinical nurse's job performance by items analysis with rating scale 1-4, items 52 in which the fewer score means low performance and higher score means good performance. Among items, both Patients related and non-patient related job performance among three items with highest Mean score were 'Promote the patients' rights to privacy', 'Evaluate result of Nursing care' and 'Seek assistance when necessary'. One item with the lowest mean score was 'Identity and use community resources in developing a plan of care for a patient and his/her family' outlook on patient related job performance .While the non-patients related job performance, three items with highest Mean score were 'Demonstrate self-confidence', 'Accept responsibility for won actions 'and Accept and use contractive criticism' and one item lowest mean score was 'Delegate responsibility for care based on assessment of priorities of nursing care needs and the abilities and limitations of available health care personnel'. This result was not congruent with another study. In the items analysis, the result was found that nurses had averagely moderate level of job performance on some of patients related nursing activities. Nearly 30% nurses doing work in medicine unit so this reason nurses not wily perform technical procedures e.g. oral suctioning, tracheotomy care, cardiac monitor, dressing change etc. Most of the nurses highly perform on promote the patients' rights to patient's privacy .In the health care settings, every patients are alert to his/ her personal privacy during their care and every nurses provide nursing care from beginning to end patients security. Another item is very important is nursing care plan. In this study 25% clinical nurses perform not satisfactorily both patient related and non-patient related job performance. In nursing, many reasons can affect their activities. The nurses carrying out their activities within limited resources and man powers, very poor working environment, and high workload. So the nurses do not wily perform his/her nursing activities. In additions, nurse need to give opportunity and take facilities and initiate to better performance within situations that provide high quality of patients care (Table 3).

The Relationship between Socio-demographic Characteristics and Job Performance of Clinical Nurses:

The study result was showed that positively associated between clinical nurses education level with overall job performance (Patients related job performance $F= 3.97$, $p=.02$ and non-patients related job performance $F=3.13$, $p=.04$). Comparing this result with previous study in Malaysia, a positively relationship between job performance of nurses and their education level (p value > 0.04) (Samiei et al.,2016). Many other researches positive correlation between education and job performance was proved (Springer, 2013; Mrayyan & Al-Faouri, 2008; Spector, 1997). In this study, the result stated that the high level of education among clinical nurses led to better job performance and low level of education that led to poor job performance. In clinical settings, education is very important for clinical nurse's job performance. Nursing education center part of the development of nurse's knowledge ,skills and attitude for providing quality of health care. Therefore, nurse need to give opportunity and take facilities and initiate to achieve high degree for better performance. Thus, if the clinical nurses had high degree that to provide an efficient and quality nursing care service, the productivity and performance of the hospital will be improved.

Furthermore, statistically significant association between patient related job performances with job experience of clinical nurse's .This result was congruent with the previous study was conducted by Yuxiu et al., (2011) the result showed that positive relationship between clinical nurses with work experience, had work experience from one to five years. The current study stated that the newly nurses had tall job experience and had in good health perform nursing activities that provide effective nursing care .Job performance among clinical nurses had a positive link between working experience in nursing, and level of education and in their current position and salary will also lead to increased and higher performance.(Table 4).

Limitation of this study

This study has several limitations regarding this study were identified.

1. This findings cannot be generalized to Bangladesh as a whole since it was carried out in a specific hospital in the Dhaka city.
2. It includes the study design itself, which is a descriptive study.
3. This study was based on a convenience sample there might have been a selection bias.

4. Information biases information bias. In six dimension scales of nursing performance, since the nurses rated their selves based on self-report, there might be desirability effect and nurses might not be sincere in answering the questionnaire

VI . Conclusion and Recommendations

Conclusion

In conclusion, based on the six dimensions scale of nursing performance, nurses are performing better on Interpersonal Relationship and Communication and professional development skills as compared to the others and significant relationship with education level and job experience among clinical nurse at tertiary level hospital in Bangladesh. Education and job experience were found to be the predictors of job performance that important for nursing profession, so nurses need to initiate and to establish effective strategies for achieve high degree and re-examining work conditions for better job performance that can lead to both health care providers and patients.

Recommendations

A similar study may be replicated in large scale by using other methods; such as patients and peers evaluation or observed study should be conducted in future research. In health care settings to identify the related factors affecting job performance and verify the role of the clinical nurse .There were several suggestions which can be implemented in the future study to gain better outcome and reduce some bias.

Implication

The outcomes of this study will contribute to nursing education, nursing practice, nursing administration, and future nursing research in Bangladesh. This study will provide relevant information to the management of the health care organizations its regards to level of performance which also have positive impact on the overall performance of the organization.

Clinical nurses are needed to enhance nurses' job performance for Managerial interventions from upper authority. In order to enhance their leadership, nurses must be given praise and acknowledgment for their accomplishment. Besides, to improve their critical care skills, nurses should be provided with work environment that help them function calmly and competently in emergency situations. Also, to deepen their teaching / collaboration, nurses must be provided with teaching aids and resource materials to teach patients and their families. In order to enhance their planning / evaluation, nurses should initiate planning and evaluation of care with others. In addition, to enhance their interpersonal relationship / communication skills, nurses should promote the inclusion of patient's decision and desires concerning their care. Finally, nurses should be provided with learning opportunities to keep their professional growth which will increase overall nurses' job performance.

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