

Organizational factors affecting empowerment from the perspective of nursing staff in hospitals of Medical Sciences of Yazd Shahid Sadoghei in 2013-2014

Hajeye Fatemeh Mollahoseini Bajeghani¹, Seyed Ali Naji² (corresponding author)

¹Department of Nursing and Midwifery, Khorasgan Branch, Islamic Azad University, Isfahan, Iran.

²Faculty of Department of Nursing and Midwifery, Khorasgan Branch, Islamic Azad University, Isfahan, Iran.

Abstract: Introduction: Capability as a motivational and hopefulness structure is consist of strengthening the staff, nowadays known as a major element in the efficiency of organizations. Health –care organizations can access to capability of the staff; specially nurses with providing those resources, supports, opportunities and necessary information. Nurses' capability in the organization is effective for higher productivity. **Materials & Methods:** The present research is descriptive. The sample consists of 185 nursing staff of three training hospitals of Yazd. The tool of gathering data is a two-part questionnaire including demographic data and 39 researcher-made questions about personal and organizational factors which effect on personal capability from nurses point of view. And Likret scale was used to answer. Data were analyzed in descriptive comprehensive level by using "SPSS" software "22" version. **Results:** The results show that nurses' attitude toward job professionally is positive but their attitude about their real position at the organizational level is not. Meanwhile their attitude in terms of individual factors of under controlling environment barriers is negative but their attitude toward work importance that engage employee is positive. **Discussion & Conclusion:** From nurses' point of view, their actual position and also the security and health of employee is not considered and nurses and their managers must step forward to identify the actual position and health. **The purpose:** This research was carried out in 2016 with the aim of investigation of the factors affecting the capability of nurses from their views in the training hospitals of Shahid Sadoughi Medical Science University of Yazd.

[Hajeye Fatemeh Mollahoseini Bajeghani, Seyed Ali Naji. **Organizational factors affecting empowerment from the perspective of nursing staff in hospitals of Medical Sciences of Yazd Shahid Sadoghei in 2013-2014.** *Cancer Biology* 2016;6(3):11-18]. ISSN: 2150-1041 (print); ISSN: 2150-105X (online). <http://www.cancerbio.net>. doi: [10.7537/marscbj060316.02](https://doi.org/10.7537/marscbj060316.02).

Key word: effective organizational factors, staff point, training hospitals.

Introduction

Nowadays, the competition between nations is depend on the quality of their human resources. Rapid economical and technological changes and the increase of global competition has been caused more attention to the subject of capability of employees and the gap between nations is based on dimensions of wisdom or foolishness. So the problem of human resources includes the wisdom and powerful men (Rajaei poor & colleagues, 2010) and capability is a guideline to develop the organizations (Abtahi & Abasi, 2010).

Organizations with having empowered, motive and compassion employees be able to adopt themselves with environment (Paktinat & colleagues, 2007). Capability is the result of organization formal and informal systems and we should regard that the nurses are the largest human labor in hospitals and nurses who understand their work environment empowered are more likely to present qualified care (Maleki, 1391).

Till the early decade of 1950, it was thought the main cause and the root of most backwardness in the developing countries is material and physical capitals. In the light of such thinks, these countries engaged to

raise funds from different ways which caused more dependence to them. But nowadays, they have recognized the importance of human resources and developing the quality of labor as one of the main fields and ways to accelerate society economic growth (Khanalizade & colleagues, 2010).

One of the concepts which have been considered to improve human resources is employee capability (Turani & colleagues, 2008). This means the ability of the personnel is very important for effectiveness and innovation of the organization (Memarzade & colleagues, 2010).

The most important factor to an organization survival is the quality and capability of human resources. An enable environment is where the staff cooperate each other in different groups. Capable human resources can create a capable organization (Mahmudi rad & poodinemoghadam, 2012).

Inderadiu quoted Spreitzer believe that capability focuses on staff belief about their role in relation to their organization. One of the important sources of an organization can be referred to the results of staff mobility and creativity which capability is the cause of it (Ehsan gholifar & colleagues, 2012). The increase of capability is associated with the increase of innovative

behavior (Kanol, 2009) and totally capability influence on employee performance (Jorgi, 2010).

The way of organization survival is the perfect knowledge-oriented management as human resources (Chamanicheragh tape & colleagues, Fall2012). Both managers and employees will be benefit of capability (Abesi & Kord, 2009). And the most important and most vital asset of any organization is human resources especially in health sectors (Mahmudi rad & poodinemoghadam, 2012). It is obvious that hospitals considered as the major health services and play an important role to maintain and treatment physical and mental health of patients (Zare, 2005). Also gholami in 1385 quoted Aiken says: "in hospitals where nurses have more power and authority, the rate of mortality is less than hospitals in which the staff have not enough authority" and today nurses as the largest group of treatment are responsible to different needs (Hughes, 2008). Considering the status of nursing in the health care system around the world show that at least 50% of health care is in charge of nurses (Iran Nursing Organization, 2006).

Nurses have a key role in care stability and health promotion (Zaimipur, 2005) and should be responsible for quality of presented care (USA Nursing Union). In the field of health services also capability is a new construction that use by various theorists specially Kanter, Conger and Kanungo and Spreitzer to explain the effectiveness of organizations and staff, specially nurses (Gholami, 2006). Scientists believe that the capability of human resources is an effective strategy to human resources function & improvement (Goji, 2010) and according to the studies there is a relationship between capability and professional nursing practice (Maleki & colleagues, 2012). The nurses who are competent in their work environment pay more attention to care (Nang, 2009).

Capability also has related with understanding the respect for nurses in the hospital and has effected to increase the sense of nurses respect in hospital (Faulkner, 2008).

At the present study the researcher wants to determine the effective organizational and personal factors on nurses' capability from their point of view in order to achieve some guidelines for nurses' capability.

Research questions

1. What is the effective organizational factors on capability from the staff point of view of training hospitals of Yazd Province?

Study review

A descriptive-integrative study was done in 2013 by Abbassi Moghadam and colleagues as organizational learning situation and nurses' capability in 4 hospitals of Tehran Medical Science University with random sampling method on 310 nurses through

a standardized questionnaire with 3 parts of demographic data, Gomez 16 questions questionnaire and 20 questions about capability of the staff. Results showed that the average of organizational learning was (2.99 ± 0.73) and the capability was (3.6 ± 0.57) . The strongest correlation of capability with outdoor dimension and experimentation was $(r=0.51)$ and weakest correlation with perspective system was $(r=0.39)$. There was a meaningful relation between capability $(p=0.013)$ and outdoor dimension and experiment $(p=0.005)$ with gender variable. Also a meaningful relationship was seen between dimension system perspective $(p=0.015)$ and type of nurses employment variable and conclude that there is a strong relationship between organizational learning component and dimension of the capability component. Also a research was done by Mahmudi rad and colleagues in 1391 titled "The study of capability atmosphere "in Birjand University Hospitals from nursing students point of view in nursing and midwifery faculty with descriptive method on 33 students. With the use of capability atmosphere questionnaire of Joffe and Scott contains 38 types and 9 subscales with Lykrit scale they found that the total score of capability is on average of (2.26 ± 0.34) and the score of more components (clear aim, fair treatment, sympathy, recognition and team work appreciation, cooperation, healthy work environment) is intermediate and in the case of education and communication it is low. The average rate of capability atmosphere in relation to the indigenous component was $(p= 0.035)$ and the relation fair treatment component with indigenous component was $(p=0.046)$ which had meaningful statistical difference and it concluded that all health center managers must notify the students about the programs and objectives of hospital and let them to be familiar with their work place and cooperate in group working and decision making.

Maleki and colleagues had a descriptive-cooperative research titled "The relationship between structural capability and nurses' personal readiness for change "on the 130 staff of Tehran Hasheminejad training center with the use of questionnaire and simple random method. The results showed structural capability has positive relation to the readiness of nurses for change $(p<=0.01)$. In examining the effect of structural capability on the readiness of nurses for change clarified that access to opportunity has a positive effect to determine the readiness of person to change $(p<=0.001)$ and came to this conclusion if structural capability carry out in the nurses work environment, their readiness for change will be increased and the planners and decision- makers recommend to provide the field of access to

knowledge and new skill for staff and give them the opportunity to perform challenging tasks, while making them capable to increase their readiness to change.

In a descriptive-measurable study done by Chmani Cheragh Tape and colleagues in 2011-12 titled "The effective factors on stability of learned nurses in hospitals" among 388 nurses of hospitals affiliated to Tehran Medical Science University, the results showed effective factors on stability of learned nurses are as follows:

1. Organizational factors (participation, motivation, training organizational relations and function management)
2. Personal factors (ability and skill, job satisfaction and competence)
3. Occupational factors (meaningful and challenging work, freedom, independence and clarify roles)

The findings state that: it will be better if hospitals provide necessary mechanism to increase nurses' motivation and participation, organizational relations and training. It also recommend to learned nurses to increase personal and multitude ability in order to provide field of competence and job satisfaction.

Also in a survey done by JafarI Mianani titled "The screw with premature infants admitted" was conducted randomly in Shahid Beheshti and Alzahra hospitals of Isfahan on 90 mothers with premature infants in 2013 in two groups of intervention control. The amount of stress and anxiety in two groups had not very difference before intervention but after each level of program, the amount of anxiety of mothers in intervention group was less than the control group ($p > 0.001$). Also the amount of mothers participation in intervention group was more than the control group ($p > 0.001$). These results were obtained: the program of creating capability opportunities for parents by providing a different way of teaching in hospital will reduce the amount of stress and anxiety of mothers and increase their participation.

Another descriptive-cohesive research done by Jafar Jalan and colleagues entitled "The study of nurses comprehension coherence of organizational culture with their performance" in the field of patients immunity in the hospitals of Babol Medical Science University on 250 nurses who include the entrance criteria for research. In this sampling method a number of nurses of public and emergency sections of hospital (Babol Medical Science University) selected in 1392. Nurses comprehension of organizational culture had a desirable level of 79.16 ± 11.41 and their performance in the field of patients immunity had positive coherence ($p < 0.01$). This results were obtained:

regarding the relation between nurses safe performance and their comprehension of organizational culture, it seems that optimizing organizational culture by managers of hospitals can improve the nurses performance in the field of patients immunity.

In 1391 a descriptive-measurable research performed as "The study of effective organizational-management factors on capability" of 404 numbers of faculty members of Iran Agricultural colleges.

The research samplings had done in several phases using krigersy-Morgan sampling table. The tool was questionnaire that brought these deductions forward: there is positive and expressive connection between organizational-management factors and capability. As these factors grow, the capability of the staff will be increased.

Also a descriptive-integrative research done by Fatemeh Neiestani and colleague in 1391 with the title of "The study of connection of psychological capability and efficiency" among 137 numbers of the staff of Bojnourd Imam Reza Training Hospital by the use of random sampling. 91 people (66.4%) were women and 46 people (33.6%) were men.

The average point of capability was 33.2 ± 8.2 and the average point of efficiency was 91.2 ± 15.4 . Between the point of capability and efficiency observed direct and middle relation ($r = 0.48$). According to obtained results and positive role of capability to improve efficiency of staff, the accomplishment of a comprehensive capability program will lead to increase efficiency.

Another research done by Sheikhi and colleague in 1384 with the title of "The effect of staff capability program against job stress" at Qods and Avesina training-treatment centers of Qazvin on 78 nurses.

This research was according to simple random sampling method and studied job stress with questionnaire. The results showed the amount of job stress was 43.6 ± 3.4 before instruction and after that decreased to 38.3 ± 3.2 . This variance is meaningful and resulted that training the profession of encountering with job stresses among nurses is effective to decrease the amount of stresses.

The method of research

In descriptive research the researcher attempts to report those which exists without any interference or mental concluding and get exact results from situation (Naderi and Seif Naraghi, 2005).

At this research exact and regular description of factors have done which effect on staff capability from nursing staffs' point of view, so it is a kind of descriptive research that has brought to conclusion in one phase.

The research society

The research society is consist of all nursing staff with different grades of profession such as diploma, nurse, operation room, or anesthesiology, license, nursing MBA who work in 3 training hospitals of Yazd province. Because it was not able to study all of research society, the researcher used a sample consists of a number of nursing staff at training hospitals of Yazd province whose members estimated with statistical methods.

The way of sampling

After taking the list of staff from nursing office performed random sampling with giving code to each one. In simple random sampling, all of the members in research have a same chance to select and the researcher has not any interfere to select the samples (Hojjaty and colleague, 2010).

The sample quantity

In order to determine the sample quantity used the following relation:

$$n = \frac{\frac{z^2 pq}{d^2}}{1 + \frac{1}{N} \left(\frac{z^2 pq}{d^2} - 1 \right)}$$

“N” is the quantity of society and is equal to 954 persons. “n” is the sample quantity, “d” indicates accuracy degree estimated almost 0.065. “p” is the ratio of quality which considers almost 0.5. According to the stage of meaningful level of 0.05, the amount of crisis is usually 1.96.

Table (1). Related question

| | |
|--------------------|---|
| Personal factors | 1, 2, 5, 7, 8, 9, 11, 12, 13, 15, 30, 35, 37, 38, 39 |
| Management factors | 3, 4, 6, 10, 14, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 31, 32, 33, 34, 36 |

Ravaee & Payaee of the tools

In order to determine Ravaee of the questionnaire used the opinion of experts and professors. Two professors corrected the questionnaire and after that became ready with assigning the management and personal factors separately. Ravaee or credibility is a degree which determines the measurement tools, variable, concept or what should be measures and reverses the considered concept (Abedi, 2008: 151).

To determine Payaee of the questionnaire (with regard to its researcher-made), 30 numbers of it were given to the nursing staff of three training hospitals of Shahid Sadoughi (16 questionnaire), Afshar(8 questions) and Shahid Rahnemoun (6 questionnaire) and with the use of Kroonbakh multiple alpha

Criterion of study (entrance & exit)

Criteria for entrance:

1. Having diploma of nursing or skill degree of operation room and or anesthesia, master or bachelor of nursing
2. To be interested to answer the questionnaire
3. Possibility to access the target persons at one of working shift during the period of research (not using long-time leave)
4. To be employed in Shahid Sadoughi, Afshar or Shahid Rahnemoun Hospital as a nurse (contract, official or project service)

Criteria to exit:

If after answering the questionnaire by research subjects they ask to exit from study, the researcher has cancelled the questionnaire; with regard to the type and the way of research which has done sectional with questionnaire. This was possible before statistical analysis (it informed to research subjects at the time of taking agreement).

Tools of information gathering

Questionnaire is the tool of information gathering in this research and consists of two parts: demographic information, 39 questions made by researcher. 15 questions are about personal factors and 24 about organizational factors and gathered with the use of Licort 5 options scale. Each question options are consist of: I'm completely disagree, I'm disagree, I'm agree mostly, I'm agree, I'm completely agree with numbers of 1 to 5 respectively. The minimum score is 39 and the maximum is 195. The questions about organizational and personal factors are arranged according below table in this questionnaire.

determined the amount of Payaee of the questionnaire which was about 0.7.

Payaee expresses the stability and durability of results at repetition of test or a measurement method. It means that whenever the variable measures with the same tool obtains the same result. Payaee of a tool is an important criteria for qualification of it (Abedi, 2008: 145).

The way of information gathering

The way of information gathering in this research is observational, because the researcher used questionnaire in order to gathering demographic information and management and personal factors in Yazd Medical Science Training Hospitals. The researcher submitted to Shahid Sadoughi, Afshar and Rahnemoun hospitals and contributed questionnaires

among nurses and stayed till the personnel reply. Moreover with regard to the large amount of the questionnaires, one of researcher colleagues assisted him in Afshar hospital.

The way of data analysis

Data analysis in this research was done at descriptive level with the use of abundance distribution (numbers and percent), average, standard deviation criterion and SPSS software (version 20).

The research limitation

Because of busy time, the subjects of research had not enough attention during answering the questionnaire so the researcher tried to minimize this limitation with his/her presence and asked them for more attention.

Ethical considerations

1. Before entering to the research environment, the researcher received a recommendation from Isfahan Islamic Azad University and announced to the three hospitals guarding section.

2. In each hospital after giving the recommendation and asking for permission of the head of nursing department, the researcher began sampling.

3. Before answering the questionnaires, satisfaction of the staff was taken orally and written.

4. The staff gained confidence that the information and identification would be secret.

5. It was explained to the research subjects that answering to the questionnaire will not have any effect in their job situation or condition if cooperate or not.

6. The results of research will give to the center or research subjects if they want.

7. The persons who cooperate to answer the questionnaire and also the managers of the centers will be appreciate.

8. The researcher has noticed to the morals, honesty and author's intellectual rights with use of sources like: books, journals, essays, thesis, translation of foreign texts and etc.

9. The intellectual rights of Isfahan Islamic Azad University and colleague professors will be consider in publishing the essays of their research.

Research Findings

The statistical results obtained from demographic data are gathered in table (2) to (9).

Table 2. Frequency distribution of subjects by gender

| Gender | Abundance | Abundance Percent |
|--------|-----------|-------------------|
| Male | 50 | 27 |
| Female | 135 | 73 |
| Total | 185 | 100 |

According to Table 2, we see that most frequency associated with female sex (73 %).

Table 3. Frequency distribution of subjects by age group

| Age | Abundance | Abundance Percent |
|--------------------|-----------|-------------------|
| Less than 31 years | 74 | 40 |
| Ages 31- 40 | 82 | 44.3 |
| Ages 41- 50 | 24 | 13 |
| Over 50 years | 5 | 2.7 |
| Total | 185 | 100 |

According to the results of Table 3, we see that in terms of age, the most frequency (44/3%) related to the age group 31 to 40 years and the lowest prevalence (2.7%) to the age group above 50 years.

Table 4. Frequency distribution of subjects based on years of service

| Years of service | Abundance | Abundance Percent |
|-------------------|-----------|-------------------|
| Less than 5 years | 61 | 33 |
| 6- 10years | 34 | 18.4 |
| 11- 15years | 45 | 24.3 |
| 16- 20years | 29 | 15.7 |
| Over 20 years | 16 | 8.6 |
| Total | 185 | 100 |

Table 4 shows that in terms of work experience, the most frequency (33%) related to the staff who have a history of serving less than five years and the lowest prevalence (8.6 %) to the staff with work experience over 20 years.

Table 5. Years of service and age variables mean and standard deviation

| Variable | The minimum age | The maximum age | Average | Standard deviation |
|-----------------|-----------------|-----------------|---------|--------------------|
| Age | 22 | 54 | 33/74 | 7/175 |
| Work Experience | 1 | 29 | 10/74 | 7/163 |

According to the Table 5, the mean age of the subjects is equal to 33/74 years with standard deviation of 7/175 and 10/71 years of experience with standard deviation of 7/163.

Table 6. Distribution of study subjects in terms of education

| Education | Abundance | Abundance Percent |
|------------------|-----------|-------------------|
| Diploma | 22 | 11.9 |
| Associate Degree | 11 | 5.9 |
| Bachelor | 150 | 81.1 |
| MA | 2 | 1.1 |
| Total | 185 | 100 |

Table 6 shows the distribution of the abundance of study field depending on educations and with regard to the table 150 persons with bachelor degree have most abundance (1/81%).

Table 7. Distribution of subjects by sector

| Section | Abundance | Abundance Percent | Gathering Percent |
|--------------|-----------|-------------------|-------------------|
| Special | 108 | 58.3 | 58.3 |
| Non-specific | 77 | 41.7 | 41.7 |
| Total | 185 | 100 | 100 |

Table 7 shows the distribution of subjects by sector. The most frequent (4/58 %) were related to the staff in intensive care units.

Table 8. The distribution of research subjects by answering questions related to effective organizational factors on capability

| Deviation Criteria Percent | The mean Number | Strongly agree | | agree | | Somewhat agree | | opposite of | | Strongly disagree | | Questions |
|----------------------------|-----------------|----------------|--------|-------|--------|----------------|--------|-------------|--------|-------------------|--|-----------|
| | | Percent | Number | درصد | Number | Percent | Number | Percent | Number | Percent | Number | |
| 89/3 | 6/21 | 40 | 3/50 | 93 | 8/23 | 44 | 8/3 | 7 | 0.5 | 1 | 1- Having the work in the ability range | |
| 67/3 | 7/15 | 29 | 40 | 74 | 40 | 74 | 3/4 | 8 | 0 | 0 | 2- There levels many Organization | |
| 58/3 | 8/17 | 33 | 8/36 | 68 | 33 | 61 | 3/10 | 19 | 2.2 | 4 | 3- Being useful work for the organization | |
| 52/3 | 9/11 | 22 | 9/38 | 72 | 40 | 74 | 1/8 | 15 | 1.1 | 2 | 4- The possibility of active participation in the meetings of the work | |
| 51/3 | 4/11 | 21 | 1/41 | 76 | 7/35 | 66 | 4/11 | 21 | 0.5 | 1 | 5- Stressing the hierarchy | |
| 50/3 | 7/15 | 29 | 1/34 | 63 | 8/37 | 70 | 7/9 | 18 | 2.7 | 5 | 6- Having done independence | |
| 46/3 | 6/14 | 27 | 1/34 | 63 | 4/38 | 71 | 2/9 | 17 | 3.8 | 7 | 7- The increase in the knowledge of the personnel during work | |
| 41/3 | 4/11 | 2 | 6/34 | 64 | 40 | 74 | 4/11 | 21 | 2.7 | 5 | 8- The importance of the expertise and experience | |
| 45/3 | 6/14 | 27 | 3/30 | 56 | 7/42 | 79 | 3/10 | 19 | 2.2 | 4 | 9- There communications from up to down | |
| 41/3 | 6/7 | 14 | 7/35 | 66 | 6/47 | 88 | 6/8 | 16 | 0.5 | 1 | 10- Participation in solving the problem of working environment | |
| 45/3 | 2/9 | 17 | 8/37 | 70 | 2/42 | 78 | 8/10 | 20 | 0 | 0 | 11- Control based on personal Norms | |
| 36/3 | 4/11 | 21 | 7/29 | 55 | 2/43 | 80 | 6/14 | 27 | 1.1 | 2 | 12- Personnel estimate based on work behavior | |
| 34/3 | 8/10 | 20 | 8/30 | 57 | 1/41 | 76 | 2/16 | 30 | 1.1 | 2 | 13- Having opportunity to personal initiative | |
| 32/3 | 7/9 | 18 | 3/30 | 56 | 3/44 | 82 | 1/14 | 26 | 1.6 | 3 | 14- Estimate based on the goal ahead | |
| 30/3 | 4/12 | 23 | 5/26 | 49 | 2/42 | 78 | 8/16 | 31 | 2.2 | 4 | 15- The basic participation in the affairs of | |
| 17/3 | 3/10 | 19 | 3/24 | 45 | 6/41 | 77 | 20 | 37 | 3.8 | 7 | 16- Support personnel for improvement skills | |
| 17/3 | 7/9 | 18 | 5/26 | 49 | 5/39 | 73 | 20 | 37 | 4.3 | 8 | 17- Growth and learning opportunities | |
| 12/3 | 2/9 | 17 | 6/21 | 40 | 9/45 | 85 | 9/18 | 35 | 4.3 | 8 | 18- According to the professional development of staff | |
| 07/3 | 7 | 13 | 2/23 | 43 | 9/44 | 83 | 5/19 | 36 | 5.4 | 10 | 19- Suggestions effective in the workplace | |
| 06/3 | 8/3 | 7 | 6/21 | 40 | 4/45 | 84 | 7/22 | 42 | 6.5 | 12 | 20- To provide resources to perform | |
| 05/3 | 9/4 | 9 | 6/28 | 53 | 40 | 74 | 20 | 37 | 6.5 | 12 | 21- The use of experienced personnel to improve the organization | |
| 02/3 | 1/8 | 15 | 5/19 | 36 | 7/42 | 79 | 4/25 | 47 | 3/4 | 8 | 22- Ripening fields of personal development | |
| 94/2 | 3/4 | 8 | 7/22 | 42 | 6/41 | 77 | 9/24 | 46 | 5/6 | 12 | 23- Due to the prosperity of employees | |
| 94/2 | 5/6 | 12 | 4/18 | 34 | 4/45 | 84 | 6/21 | 40 | 1/8 | 15 | 24- Recognition of the status of personnel in the organization | |

Based on the results of above table the highest mean score responses to management factors related to item (1): "My work is within my skill and potential." with the average of 3.89 and standard deviation of.... and the lowest average related to item (8): " I believe managers notice to my success and prosperity "and (9): "My actual position is known in the organization" with an average of 2.94 and standard deviation of.....

The results of table 9 show that average of personal and organizational factors have meaningful difference with supposed average of (p<0.001) and with comparison of two average clear the personal factors with an average of 3.428 are more effective than organization factors with an average of 3.322 in staff capability from their point of view.

Table 9. Comparison of score mean of personal and organizational factors with fixed and supposed average

| Question | Average | t | Sig. | Df | No. |
|------------------------|---------|------|-------|-----|-----|
| Organizational factors | 3.322 | 7.91 | 0.000 | 184 | 185 |

The final conclusion

This research was done in 1394 at the hospitals of Yazd Training Medical Science with the aim of recognizing the effective factors on nurses' capability from their point of view and showed below mentioned results:

1. Nurses consider important to their work which could be due to job and organization obligation.
2. Nurses want to have a safe and secure environment for their work including job, physical and mental security which could be due to new engagement on contract basis, companies and even start the project without any guarantee on future.
3. Nursing managers should be notice to settle the staff with regarding their abilities.
4. Nursing managers should have notification to the position of nurses as one of the important treatment jobs and defined it touchable for the staff.

Proposals

1. One of the effective factors on capability of the staff is their work environment. With regard to the fact that the work environment is the bed of creativity, innovation and authority so the health organizations should try to prepare a suitable environment for the staff to increase their profession and what seems very important is training.
2. With reinforcement a positive attitude to the environment by the staff prepare a field to promote the services and use the ability of them.
3. Hospitals can make valuable the nursing job with regard to its position, in order to elevation of capability and increase the performance of human resources.

4. Managers should express self-notification to the staff and help them to feel importance.

5. Preparing the resources to help the staff to do duties, causes the employees feel importance and being useful.

References

1. Abdollahi B, Naveh Ebrahim AR, Staff empowering golden key for human resources management. Tehran: edition; 2006, pp.154-75 (Persian).
2. Abedi, h. Ali Hosseini, the. A, Shahriari, M, Kazemi, M., country, M, Abdi, c, first published research methods in Nursing & Midwifery, Isfahan, Islamic Azad University Branch, 2008, page 233.
3. Adib, hajbaqheri, M., et al., Clinical decision making of professional power in nursing, Iranian Journal of Medical Education, No. 10/3, 2004.
4. American Nurses Association. Public Health Nursing Scope and standard of practice. Washington. D.C. American Nurses Association, 2007.
5. Bahadori M, Hamouzahed P, Qodoosinejad J, Yosef and M. Organizational learning capabilities of Nurses in Iran. Int J Glob Bus Manage Res 2012; 4: 248-54.
6. Bradaury, Jonesc, Smabrooks, Irvine, F. Empowerment and being valued: a phenomenological study of nursing students experiences of clinical practice. Nurse Educ today. 2011, 31(4): 368-72.
7. Chmani, cheragh, R, knowledge workers of retention of nurses in the hospital, Journal of Nursing Management, First Year, Volume I, Number Three, Fall 2002, p. 2119.
8. Chou S. Development and testing of the Chinese version of the Nurse work Index Revised in Taiwan. United states New York: Columbia university, 2008.
9. Conger JA, Kanggo, RN, 1988, The empowerment process Integrating theory and practice. Academy management Review, 13: 471-482.
10. Delavare, and, Methodology of Educational Sciences, the publisher, 2008, page 542.
11. Faulkener J, Laschinger H, The effects of structural and psychological empowerment on perceived respect in acuecave Nurses J Nurse Manag. 2008 Mar, 16(2): 210-214.
12. Gorji MB. "Impact study of Empoverment on Employees performance" Pajoouheshagra (J manage) 2010; 7(17): 38-56 peasian.
13. Hojati, H, sharifnia, SA, H, Taheri, N, statistics and research methods and printing of Medical

- Sciences 1, Tehran: publishing community, in 2010, healthy, Page 216.
14. Hughes RG. Nurses at the "Sharp end" of patient care patient safety and quality; an Evidence – Based handbook for nurses, 2008 Apr; 1:1-30.
 15. Khaliq MJ, Zia-ur-Rehman M, Rashid M, The role of human resource management and nurses Job satisfaction in medical service organization. African Journal of Business management.
 16. Littrell, RF. (2007), "Influences on employee preferences for empowerment practices by the ideal manager" International Journal of Intercultural Relations, 31: 87-110.
 17. Manojlovich M Predictors of professional nursing practice behaviors in hospital settings Nurs Research, 2005; 54(1): 41.
 18. Mahmoodi-Rad, G., Pudinehmoqhadam, M, study, empowerment atmosphere from the perspective of nursing interns in the university hospitals of Birjand Nursing and Midwifery 2012, Page 225 217.
 19. Narayan, Deepa (2006), Measuring empowerment, cross disciplinary perspectives. Washington, D.C: Worth bank.
 20. Niazi, Karkonan Nasrabadi M, Social investment strategy tadbir, A monthly magazine on management, 2009, 20(203): 21-26 (Persian).
 21. Ning S. Zhong H, Libo W, Siujie L, The impact of Nurse empowerment on job satisfaction J And Nurs. 2009 Dec, 65(12): 2642-8.
 22. Ninigs, zhong H, Libow Qiujie L, The impact of Nurse empowerment on job satisfaction, J Adv Nurse, 2009, Dec; 65(12)2642-8.
 23. Paktinat E, Fathizadeh, AR, "Staff Empowerment; Essential and Methods". Researcher, 2007, 5(11): 33-47 persian.
 24. Rjayipur, S., et al, factors affecting empowerment IZEH school administrators, curriculum development, science education and research in Islamic Azad University (Khorasgan), No. 27, Winter 2010, page 246 231.
 25. Rousseel L. Concepts and theories guiding professional In; Roussel L, Swansburg LC, Editors management and leadership for nurse administrators. Th Ed. New York: Jones and Bartlett, Publishers.
 26. Sajedi, oves, hopeful, empowered employees and organizations today, the monthly policy eighteenth year, 2007, Page 181.
 27. Scully N J, (2014), Leadership in nursing: the importance of recognizing inherent values and attributes to secure a positive future for the profession. Collegian Journal, in press.
 28. Slocum K. Nurse Job satisfaction and Empowerment In Magnet and non-magnet Hospitals. Unpublished MS thesis. Indiana-Muncie: Ball state university, 2008.
 29. Teymournejad K, Sarihi Asfestani R, Effects of organizational learning on psychological empowerment in the ministry of economic affairs and finance J, Manage stud Dev, 2010, 52: 37-59.
 30. Torabi M. Need to empower students [cited 2012 Novr]; Available from: URL: [Http://www.mrfi.ir/kol/magnalat/amuzesh/230htm](http://www.mrfi.ir/kol/magnalat/amuzesh/230htm).
 31. Zaimipur Kermanshahi M. Vanakiz. Hajizadeh A, "Assessment of effect retraining of management skills in nursing managers on nurse's wealth" Journal of Zanjan university of medical sciences and health services, 2005, 13(50), 14-210 (Persian).
 32. Zare GH, Hamidi M, Sajadi NA, The relationship between psychological factors and organizational empowerment and entrepreneurship experts in physical education. Journal of movement sport. 2007, 5(9): 71-81 (Persian).
 33. Valizade, L., Journal of Nursing Management, second year, the second period, the first issue, Spring 2011, page 179.

6/26/2016