Research Article

Motivation and Its Effect on Nursing Job Performance in Gaza strip Governmental Hospitals – Palestine

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Abstract

Abstract Study aimed to identify the knowledge, attitude and practice that employees had toward safety culture and determinants, also to investigate determinants of safety. The questionnaire was also used to measure the determinant of safety culture. The population are nurses and physicians working in the ICUs of all hospitals in the Gaza city. 220 questionnaires have been distributed and 180 have been returned back with a response rate of 81%. The results indicates that employees working at the ICUs have a mild positive attitude toward safety culture, unacceptable working condition, mild level of job satisfaction. There is a statistical relationship between (the commitment to safety by management, employee engagement, the trust that exists between the healthcare provider and the management, participation in decision-making, good communication).

Conclusions: *Safety culture plays a key role in improving employee and patient safety at ICUs on hospital, an environment characterized by mutual trust among health team with effective communication channels and proper participation in decision making. Recommended participate in decision-making and make comments and suggestions regarding problems concerning them and their patients. Specialized training courses targeting employees to improve their knowledge about safety measures, communication skills and job description. Activation of management role at promoting safety culture by increasing their commitment to safety culture. Recreational and financial incentives which have unique effect on the employee working at ICUs of Gaza city.*

Keywords: Motivation, Nurse Job Performance, Nurse Gaza Strip

Background

Nursing is the leading profession in Ministry of Health (MOH) which constitutes 37% of the total professions, so it must concentrate on those target population to assure quality improvement in all MOH institutions [1]. Motivation plays a major role in producing variability and change in behavior patterns. Motivation is a function of goals, emotions, and personal agency beliefs. Motivation initiates and maintains activity until the goal directing the episode is attained according to Ford Motivational Systems Theory [2]. Also described as the strength within an individual that account for the level of direction and amount of effort used at work [3]. The issue of employees' performance in relation to achieving organizational goals has occupied management's attention for a long time. Differences in levels of employees' performance are attributed to differences in skill and ability in one part and difference levels of motivation in another inadequate skills and ability are usually rectified through training and development [4]. Motivation is an accumulation of different process that influenced and direct our behavior to achieve come specific goal [5], the two types of motivation:

1. Extrinsic motivation is related to tangible rewards such as salary and fringe benefits, security, promotion, contract of service, the work environment and conditions of work. Such tangible rewards are often determined at the organizational level and may be largely outside the control of individual manager.

2. Intrinsic motivation is related to psychological rewards such as the opportunity to use one's ability, a sense of challenge and achievement, receiving appreciation, positive recognition, and being treated in caring and considerate manner. The psychological rewards are those that can usually be determined by the actions and behavior of individual managers [6].

"In fact, some writers declare that the main aim of motivation is to improve extrinsic motivation by sustaining a separate worker's supplies circuitously through earnings of wages and advantages" [7]. Performance is defined as a completion in a productivity of system in the form of service or goods [8]. Job performance shows individual behaviors that contribute to achieve organizational objectives [9]. So, job performance is not a single unified construct but a multidimensional construct consisting of more than one kind of behavior [10]. Job performance is a multi-dimensional construct which indicates how well employees perform their tasks, the initiative they take and the resourcefulness they show in solving problems [11]. Nursing performance is a complementary component of patient care and it is an important determinant of quality of

healthcare services that clarify effectiveness and efficiency that make a payment to heath organizational goals [12]. In this research the nursing staff was chosen because it is a sensitive profession that affects patient's life; if it is not given the important consideration that is supposed to be. Nursing profession provides most of care for the patient during 24 hrs/day and contacts with patient a considerable time in relation to other medical professions. So motivation for the nursing staff will impact effectively of care providers. The research problem of this study that there is an increasing jobs on need for nursing and even that there is still increasing need for nurses. It has become an extremely important component in health care system [13], researcher studied the problems and its effects on nursing job performance in governmental hospitals as (salary, job description, significations, lack of support, and being the first line of superior punishment), and recommend that this research spread for all health organizations to figure out the extent of the problem and find ways to solve this interesting situation.

Objectives of Research
Exploring the impact of motivation on employee performance among the nursing, and increasing the level of job motivation, which consequently create better performance. Assessing the level of job motivation and performance among nurses. Identifying the relationship between motivation and performance. Determining the factors that might increase the level of job motivation and performance. Explore nurses perceptions of factors related to motivation-demotivation.

Materials and Methods
The design of this study will employ descriptive correlation analytical method. And the period of study conducted at May 2013 to the mid of February 2014 among in all ministry of health governmental hospital are distributed in five GS governorates. The target population nurses employed in MOH governmental hospitals in GS as fix term permanent employment have one year at least experience. The total number of nursing who are employed in MOH governmental hospitals in GS are 1867 nurses. The sample size calculated by statistical equation of sample calculation [n = N / [(0.05) 2 (N)] +1] [14]. Therefore the sample size is 330 nurses.

Included criteria: Nurses working in GS governmental hospitals (practical nurse, staff nurse, head nurse department and nursing supervisor) working as fix term permanent employment having at least one year experience during the data collection period. Excluded criteria: Nursing managers, nurses who are working in public health care (PHC), NGO, clinics, nurses with temporary contract, part time nurses, newly employed nurses, aid nurses, none employed nurses, trainees nurse, volunteer nurse and nurses have a vocational for a long period.

Instrumental data: International instrument adapted to the nurse population by using international tools such as: Socio- demographic data. Motivation assessment Scale (Dee Beer, 1987) with some modifications to meet situation in GS and nursing situation in MOH. All of them will be used to assess motivation and performance. Regarding the timing of data collection, it will be in the first five days, middle five days and last five days of the month by interview questionnaire consist of six parts, first part include personal, demographic and social data, second part include performance of nurses, third part cover the effective motivational system, fourth part include individualized factors and relationship with the head of work, fifth part are motivational factors (payments, recognition, and work content statements), the sixth part are organizational factors divided to (benefits, training, promotion, and working conditions statements.

Data analysis: the questionnaire analyzed through SPSS, by used (percentage and frequencies, Cronbach alpha, Pearson Correlation Coefficient, T-Test, and on way anova). Then the participant asked to express his/her agreement level by using rating five points likert scale (1= strongly disagree, 2= disagree, 3= uncertain, 4= agree, 5= strongly agree).

Reliability
Cronbach's Alpha Coefficient test has been used to measure and materialize reliability of a questionnaire study and the results were as shown in the next table.

Table 1: Cronbach's Alpha Coefficient test

Domains		Number of paragraphs	Cronbach's Alpha Coefficient
Nursing Performance		8	0.736
Effective motivational system		8	0.786
Individualized Factors	individualized factors	9	0.756
	Relationship with the head of work	13	0.762
Motivational factors	Payment	8	0.774
	Recognition	11	0.726
	Work content	10	0.739
Organizational Factors	Benefits	7	0.736
	Training	10	0.771
	Promotion	6	0.781
	Working conditions	8	0.522

It clear from the results shown in Table (1) that the value of Cronbach's alpha coefficient for each area are high, ranging between (0.693, 0.746) this means that the reliability coefficient is high.

Results
At first completed of questionnaire 323 (97.87%), and missing 7 (2.13%).

Label	Data	Percentage	Frequency
Gender	Male	51.1%	165
	Female	48.9%	158
Age	Less than 30	47.4%	153
	30 – 40	29.4%	95
	40 – 50	17.3%	56
	More than 50	5.9%	19
Marital status	Single	19.5%	63
	Married	80.5%	260
Job title	Practical nurse	37.2%	120
	Staff nurse	41.2%	133
	Head nurse	17%	55
	supervisor	4.6%	15
Hospital work Place	Internal departments	59.1%	191
	ICU	9.6%	31
	Supervision nurse	9.3%	30
	ER, reception	14.6%	47
	Outpatient clinic	7.4%	24
Salary amount in dollar	Less than 600 $	52.9%	171
	600 – 900 $	21.1%	68
	More than 900 $	26%	84
Years of experience	Less than 5 years	35.6%	115
	5 – 10 years	29.4%	95
	More than 10 years	34.7%	112
Qualification	2 years diploma	24.1%	78
	3 years diploma	5%	16
	Bachelor degree	49.2%	159
	High diploma	.3%	1
	2 years midwife	6.2%	20
	Bachelor midwife	9.6%	31
	Master degree	5.6%	18

The table (2) shows that 51% are male, while 48.9% are female, the participants were from different age groups. 47.4% under the age of 30 years, 29.4% aged between 30-40 years, and 17.3% aged between 40-50 years and 5.9% their age less than 50 years. It is noted that the highest proportion is for young people category (less than 30 years) where it was 47.4%, because of the political crises between GS government and west bank government (WB) that have led some employees to leave their jobs and nurses from GS government filled the gap. It is clear that the majority were married at a rate of 80.5%, 19.5% are single.

It is clear that most of the respondents are married and their age under 30 years, so they were at the beginning of their lives, the distribution of the sample on nature of work, were the percentages as follows 41.2% staff nurse, 37.2% practical nurse, 17% head nurse and 4.6% nursing supervisor. This is normal situation due to those who work in the executive jobs (practical nurse and staff nurse) more than who work in supervisory positions (head nurse and nursing supervisor). The distribution of the sample on work place in the hospital, were the percentages as follows 59.1% internal departments, 14.6% reception & ER, 9.6% intensive care unit, 9.3% nursing supervision and 7.4% outpatient clinic. This is normal situation the internal departments has the highest percentage because it involves the many department as (internal medicines, cardiology, gynecology and obstetrics, bone surgery, dialysis and Hematology and Oncology), through the table that 52.9% their monthly salary is less than 600$, 26% monthly salary more than 900$ and 21.1% monthly salary between 600-900$. About experience it obvious that 35.6% of nurses experience less than five years, 29.4% their experience between five to ten years and 34.7% their experience more than ten years. The difference in years of experience due to political crises between GS government and WB government that have led some employees to leave their

jobs and nurses form GS government filling the gap, in qualification level the participants have academic education. The distribution of qualifications was 49.2% staff nurses bachelor degree (BSN)," 24.1% practical nurse, 9.6% registered midwife, 6.2% practical midwife, 5.6% master degree, 5% staff nurses 3 years diploma and 0.3% high diploma. It noticed that BSN was formed almost half because of the spread of universities and colleges at all GS which graduated nursing students, but staff nurses 3 years diploma the rate was small and due to the end of this certificate, in addition who hold this certification are older people who did not study bachelor degree.

Table 3: Table two by two to measure the association between variables

		Gender				Total
		Male		Female		
Work Place	Internal Departments	83	43.5%	108	56.5%	191
	ICU	17	54.8%	14	45.2%	31
	Nursing Supervision	21	70.0%	9	30.0%	30
	Reception & ER	31	66.0%	16	34.0%	47
	Outpatient Clinic	13	54.2%	11	45.8%	24
Total		165	51.1%	158	48.9%	323
		Salary Side				Total
		Gaza Strip		West Bank		
Years of Experience	Less than 5 years	115	100%	0	0%	115
	(5-10) years	79	82.3%	17.7%	17.7%	96
	More than 10 years	22	19.6%	90	80.4%	112
Total		216	67.6%	107	32%	323
		Gender				Total
		Male		Female		
Years of Experience	Less than 5 years	53	46.1%	62	53.9%	115
	(5-10) years	40	41.7%	56	58.3%	96
	More than 10 years	72	64.3%	40	35.7%	112
Total		165	51.1%	158	48.9%	323
		Gender				Total
		Male		Female		
Job Title	practical nurse	60	50.0%	60	50.0%	120
	staff nurse	57	42.9%	76	57.1%	133
	head nurse	36	65.5%	19	34.5%	55
	nursing supervisor	12	80.0%	3	20.0%	15
Total		165	51.1%	158	48.9%	323

Workplace by Gender: Through the table it is clear that the distribution of the workplace by gender was as follows: it is clear that the female ratio was for them only in the internal department while the remaining other places were in favor of males. Ratios for each department: internal department 43.5% were male, 56.5% were female, while ICU 54.8% males and 45.2% females, 70% of the area of supervisory males and 30% females either reception of emergency was male and 66% female and 34%, while outpatient clinic 54.2% males and 45.8% females.

Years of Experience by Salary Side: The experience of the employees who get their salary from GS government a few were 115 nurses their experience (less than 5 years) constituted 35.6% of the study sample. As for those whom their experience more than 10 years, their salary from WB government and the proportion is 80.4%. Attributed that after the year 2007 have not been recruiting only through GS government.

Years of Experience by Gender: The distribution of expertise by gender was 53.9% of the female experience less than 5 years, while males 46.1%, but Those experience from 5 - less than 10 years, 58.3% of males and 41.7% females and those experience more than 10 years males was 64.3% and females 35.7%, nevertheless general rate male experience was slightly more than females.

Job Title by Gender: Through the table the distribution of job title by gender was as follows:

Executive jobs, first practical nurse was 50% for both genders, second staff nurse 57.1% female, 42.9% were male.

On the other hand supervisory positions, first head nurse were males 65.5% and females 34.5%, second nursing supervisor majority of males with rate 80% male and 20% female. The higher proportion of males more than females in supervisory filed is due to this position is under pressure and faces large volume of work, in addition to skills and techniques not available in female nurses like a creative solution to work problems, leadership skills and decision-making optimization. Moreover there are some cases female nurses in supervisory positions can't follow up nursing workflow. Furthermore according to item 88 in Civil Service Law all female employees have to take maternity leave during 70 days, then take an hour breastfeeding for a year (Palestinian Civil Service Law, 2005).

Over all Questionnaire Domains

The researcher used parametric test to analyze the items of the questionnaire (T test for one sample) to see whether the average degree of response has reached a degree of neutrality which is 3 or not. Table (4) discussed all questionnaire domains where the overall results as follow:

1. Individualized factor ranked first domain and the mean equals 78.41 (74.68%), test value (94.986), p-value (.000).
2. Nursing performance ranked seconded domain and the mean equals 22.37 (63.93%), test value (78.103), p-value (.000).
3. Motivational factor ranked third domain and the mean equals 78.41 (58.08%), test value (82.455), p-value (.000).
4. Organizational factor ranked fourth domain and the mean equals 85.938 (55.441%), test value (94.385), p-value (.000).
5. Effective motivational system ranked fifth domain and the mean equals 17.24 (43.10%), test value (46.417), p-value (.000).

Table 4: the mean and p-value (Sig) for all questionnaire domains

#	Domains	Mean	Test value	Proportional mean (%)	Rank	P-value (Sig.)
1	nursing performance	22.37	78.103	63.93	2	.000
2	Effective motivational system	17.24	46.417	43.10	5	.000
3	individualized factors	78.41	94.986	74.68	1	.000
4	motivational factors	78.41	82.455	58.08	3	.000
5	organizational factors	85.938	94.385	55.441	4	.000
6	Total domains	283.63	98.869	60.35		.000

It's noticed that Three factors have been at the forefront (individualized factors, nursing performance and motivational factor) this indicates the presence of distinct nursing staff and special relationship with their managers.

Organizational factor was ranked fourth because of most organizational factors has similar conditions in most hospitals.

Effective motivational system ranked at the final, this indicates that there is no motivational system for nursing staff in MOH.

Table 5: Test results "T- for two independent samples"- gender

Domains		Means		Test value	P-value (Sig.)
		Male	Female		
1	Nursing performance	22.6182	22.1203	.869	.386
2	Effective motivational system	17.0121	17.4747	-.622-	.534
3	Individualized factors	78.6364	78.1772	.278	.781
4	Motivational factors	79.4545	77.3165	1.124	.262
5	Organizational factors	87.4970	86.8797	.282	.778
	Total	285.2182	281.9684	.566	.572

From the results shown in Table (5) can be concluded as follows:

There is no statistically significant differences between motivation and its impact on the performance of nurses in GS hospitals due to gender. Where the value of T = 0.566, and the sig = 0.572, that means there is no difference between male and female in the degree of motivation and its impact on the performance of nurses in GS hospitals.

Table 6: Test results "T - for two independent samples" – age groups

Domain		Mean				Test value	p- value
		Less than 30	30- 40	40 - 50	More than 50		
1	Nursing performance	22.189	21.979	23.393	22.8421	1.036	.377
2	Effective motivational system	17.621	16.137	18.554	15.7895	2.074	.104
3	Measuring individualized factors	78.647	78.242	79.107	75.3158	.332	.802
4	Measuring motivational factors	75.863	78.432	83.482	83.8421	3.497	.016
5	Measuring organizational factors	87.569	83.800	92.857	84.4737	2.671	.048
	Total	281.89	278.589	297.393	282.263	1.707	.166

From the results shown in Table (6) can be concluded as follows:

There is no statistically significant differences between the degree of motivation and its impact on the performance of nurses in GS hospitals due to age. Where the value of T = 1.707, and the sig = 0.166 , that means there is no difference between age groups on the degree of motivation and its impact on the performance of nurses in GS hospitals. While in the sub-domain (motivational factors) and (organizational factors) were significant differences, and the differences were favor in the older aged groups (more than 50 years) in the domain of motivational factors measured an average of 83.8421and the age group of (40-50 years) with an average 83.482. While the domain (organizational factors) were significant differences, and the differences were favor in the older aged groups, the age group (40-50 years) with an average of 92.857. The reason of finding significant differences in the older aged groups is that they become Seniority then the salary grow and multiply then adapted in work, so the result higher level of motivation, performance and satisfaction. Another possible reason is older aged groups the opportunities of employment ended in distinct places outside MOH.

Table 7: ANOVA test for Marital Status P

Domains		Mean		Test value	P-value (Sig.)
		Single	Married		
1	Nursing performance	18.4138	22.6500	3.313	.020
2	Effective motivational system	14.454	17.3269	1.014	.387
3	Measuring individualized factors	61.8736	78.873	4.046	.008
4	Measuring motivational factors	60.939	78.989	2.712	.045
5	Measuring organizational factors	65.3046	87.950	3.206	.023
	Total	220.985	285.781	4.247	.006

From the result shown in table (7) can be concluded as follows: There were statistically significant differences between the degree of motivation and its impact on the performance of nurses in GS hospitals attributed marital status. Where the value of T = 4.247, and sig = 0.006, that means there is a difference between the marital status on the degree of motivation and its impact on the performance of nurses in GS hospitals. The reason of finding significant differences in marital status especially in married people groups due to having and enjoying psychological and emotional stability therefore they are more active than others. On other hand, sub domain (effective motivation system) showed no significant differences due to absence of legislation and controls for the motivation system to the nursing staff and the rest of the health care providers in MOH.

Table 8: ANOVA test for job title and work place

Domains		Mean				Test value	P-value (Sig.)
		Practical Nurse	**Staff Nurse**	**Head nurse**	**Nursing Supervisor**		
1	Nursing Performance	22.9833	21.3534	23.1273	23.8000	3.140	.026
2	Effective motivational system	18.2833	16.1654	17.5636	17.2000	2.194	.089
3	Individualized factors	80.1833	76.5038	78.3091	81.5333	1.533	.206
4	Motivational factors	78.2083	75.0301	84.0000	89.4667	6.067	.001
5	Organizational factors	86.9333	85.0526	91.218	93.5333	1.834	.141
Total fields		286.5917	274.1053	294.218	305.533	3.395	.018
Domains		Mean					Test value	P-value (Sig.)
		Internal Departments	**ICU**	**Supervision**	**Reception & ER**	**Outpatient Clinic**		
1	Nursing performance	22.2984	19.7097	23.2000	22.6809	24.7917	3.769	.005
2	Effective motivational system	17.2827	14.7419	16.9333	17.6383	19.7083	1.990	.096
3	Individualized factors	79.7906	69.9355	77.4667	17.6383	78.7083	3.062	.017
4	Motivational factors	77.6440	74.0968	85.1667	78.8511	82.5000	2.144	.075
5	Organizational factors	87.1204	79.6129	89.8333	77.9574	90.7083	1.592	.176
Total Fields		284.136	258.097	292.60	89.0213	296.42	2.579	.037

From the results shown in Table (8) can be concluded as follows:

There were statistically significant differences between the degree of motivation and its impact on the performance of nurses in GS hospitals attributable to job title. Where the value of T = 3.39, sig = 0.018, that means there is significant difference between the types of job titles on the degree of motivation and its impact on the performance of nurses in GS hospitals precisely nursing performance and motivational factors domains. The reason of finding significant differences in address especially in supervision work domains Precisely nursing performance and motivational factors domains due to nurses or other people in supervision work cannot refuse or interception performance system performance that make these work in this place. On other hand motivational factors are significant differences due to high salary and comfortable work content. The relation of work place, there were statistically significant differences between the degree of motivation and its impact on the performance of nurses in GS hospitals, attributed the workplace. Where the value of T = 2.579, and sig = 0.037, that means there is a difference between the workplace about the degree of motivation and its impact on the performance of nurses in GS hospitals. The reason of finding significant differences in work place especially in outpatient clinic absenteeism of a work night shifts, low size of work with little actual working hours almost three hours each working day.

Table 9: ANOVA test for salary amount, and years of experience

Domains		means			Test value	P-value (Sig.)
		Less than 600 $	600 – 900 $	More than 900 $		
1	nursing performance	22.3509	22.3088	22.4337	.012	.988
2	Effective motivational system	7.5965	16.4853	7.0361	.714	.490
3	individualized factors	79.4386	76.1324	78.3012	1.214	.298
4	motivational factors	76.0409	77.1765	84.2169	6.833	.001
5	organizational factors	87.1520	83.9559	89.8554	1.684	.187
Total fields		282.579	276.058	291.843	1.826	.163
Domains		**means**			**Test value**	**P-value (Sig.)**
		less than 5 years	(5-10) years	more than 10 years		
1	Nursing performance	22.3826	22.0313	22.6607	.385	.681
2	Effective motivational system	18.1478	15.9271	17.4286	3.003	.051
3	Individualized factors	79.6261	77.2292	78.1786	.703	.496
4	Motivational factors	79.0870	71.4062	83.7143	14.699	.000
5	Organizational factors	89.4261	82.3229	89.0804	4.285	.015
Total fields		288.669	268.916	291.063	5.790	.003

From the results shown in Table (9) can be concluded as follows:

There is no statistically significant differences between the degree of motivation and its impact on the performance of nurses in GS hospitals salary amount. Where the value of T = 1.826, and sig = 0.163, that means there is no difference between salary amount groups and degree of motivation and its impact on the performance of nurses in GS hospitals. While in the sub-domain (motivational factors) were significant differences = 0.001, and the differences were for the benefit of their salaries more than 900 $. Because owing higher salary and disposal bonuses and allowance that satisfy their needs and wants. The second findings show there is no differences between the degree of motivation and its impact on the performance of nurses in GS hospitals attributable nursing qualifications. Where the value of T = 0.445, and sig = 0.849, that means there is no difference between the nursing qualifications on the degree of motivation and its impact on the performance of nurses in GS hospitals.

Discussion

The general level of performance is 63.93%. Performance system application in the MOH, like the rest of the governmental sectors that follow Civil Service Law. So the outcomes are there is no connecting between motivation system physical and moral, beside there is a belief that there is no fair tool for measuring performance based on scientific base and performance system is not linked to a basic things promotions, training and rewards. There is only one way used to evaluation process followed in MOH, which the employee evaluated by his only direct supervisor. There is statistical significant relationship and effect of effective motivational system on nursing performance at (a = 0.05) level. The overall rate for the effective motivational system is 43.10%, which indicates a decline and weak response of nurse's items that relate to effective motivational system and showed the weakness of the role of MOH in motivation process, thus the concept of effective motivational system has wasted their meaning. There is statistical significant relationship and effect of individualized factors on nursing performance at (a = 0.05) level. The general level of individualized factors which is 74.68%, therefore there is a satisfaction from Individualized factors. There is a satisfaction for bosses at work and supervisory pattern, beside prevails presence of family work and teamwork in medical field. There is statistical significant relationship and effect of motivational factors on nursing performance at (a = 0.05) level. The overall rate for all the motivational factors, which include is 58.08%. So there is dissatisfaction from motivational factors. There is dissatisfaction about salary policy in all its aspects. The reason is two thirds of the size of the sample receiving their salaries from GS government because of the tightening of the blockade resulted a severe financial crisis in addition to the salary for a nursing profession in MOH follows the civil Service system, In spite of the weakness of the financial situation in GS but 70% of nurses prefer non-financial sides that financial incentives were found to be the most important motivating factor for nurses rather than recognition. There is satisfaction from the weekly working hours of 35 hours per week 71.64%. There is statistical significant relationship and effect of organizational factors on nursing performance at (a = 0.05) level. The overall rate for all the organizational factors, which include is 56.25%. So there is dissatisfaction from organizational factors. The study showed dissatisfaction with the pension system, sick leave or regular vacation, because they follow the desire of direct manager, also dissatisfaction with the medical services provided to the employee or his family. There is satisfaction for the transport vehicle for the transfer of employees to work night shifts, because 48.9% of the size of the study are female, the law Ensure transporting only female in the night shifts, but males are called up as needed. Nursing staff working in department according to their desire and of their choice is 59.69%. Shifting system (evening and night) have a significant impact on the relationship with other nurses and their own lives.

Conclusions

Safety culture plays a key role in improving employee and patient safety at ICUs on hospital, an environment characterized by mutual trust among health team with effective communication channels and

proper participation in decision making.

Recommendation

- Performance should be linked to the motivation in terms of extrinsic and intrinsic motivation, in addition to linked performance to promotion, training and rewards.

- The need to strengthen the role of the (Nursing Association) to communicate with the officials in MOH towards the strengthening of the role of nursing and claim their rights.

- Monthly salary should be linked with the high cost of living

- Disbursement acknowledgement certificates for outstanding nurses on a quarterly basis at the level of each hospital and then at the level of all hospitals are then published in specialized magazines and the Nursing Association.

- Reduce the problem of sick leave and regular staff with the help of psychologists, which in turn solving the problems of the employee while not reflected on the work.

- Increase the effectiveness of training to include training process to all nursing staff through the activation of the role of internal courses for Nursing management at different hospitals as well as activating the directorate general of human resources development.
- Work as much as possible in MOH institutions to follow professional process in promotions, and be based on scientific bases in ways that are fair and link them with training, experience and competence.

- Reduce the burden of working shifts for the old nurse with experience and benefit from it in the street mooring so that every 4 years relieve one shift on a monthly basis.

- Conducting training courses and workshops to show the humanitarian role for functional role of nursing and that is not limited to the therapeutic role while stretching to provide nursing care for the patient and according to physical, psychological and spiritual needs.

- Good choice to given the freedom to nurses to choose a department that does not contradict with the work objective, to reduce the problem of nurses out of the department and finish their felling that they are in a prison.

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