Cross-sectional survey of British newly qualified nurses' experience of organizational empowerment and assertive communication behaviors

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Background

- Empowering employees within the organization is a key to responding creatively to any challenges within the job (Orgambidez-Ramosab and Borrego-Ales, 2014).

- Structural Empowerment Theory (Kanter, 1993, 2008) relates employees power to access to: Opportunity, information, support and to resources. Formal and informal power are two ways of accessing these elements of structural empowerment

- Kanter's empowerment theory was used extensively to examine the relationships between nurses' perceived structural empowerment and other important nursing performance, social and work-related outcomes (Laschinger et al., 2001) , job satisfaction (Manojlovich, 2005 and workplace bullying (Laschinger et al., 2010) and several others.

Speaking up:

- Speaking up was defined as "standing up for yourself, in such a way as not to disrespect the other's person opinion "(Flin, O'Connor & Crichton 2008, p. 81)

- Key non-technical communication skill that is pre-requisite for effective inter and intra-team communication.

- Newly-graduated nurses perceive the transition into their new professional role as highly stressful (Gerrish, 2000; Higgins, Spencer & Kane, 2010; Parker, Giles & Lantry, 2014).

- Newly-graduated nurses are seen as vulnerable health care professionals who face difficulties in clearly highlighting their concerns on unsafe practice to other nurses and healthcare professional.

- **Reasons as why Newly-graduated nurses may lack assertiveness skills:**
  - Theory-practice gap was a common disincentive for raising concerns against poor practice (Mooney, 2007)
  - Unrealistic expectation from the Professional regulator body (NMC 2008)
  - reported that newly-graduated nurses sometimes face a defensive response from the new work environment (Francis 2013, Maben et al., 2007).

- Little empirical evidence that utilized Kanter organizational empowerment theory in assessing the British newly-graduate nurses self-reported empowerment and its association with their speaking up behaviors against unsafe practice.

Research Aim:

- The aim of this study is to examine the British newly-graduated nurses' experience of their perceived organizational empowerment and willingness to challenge unsafe practice.

Methods

- A cross-section survey, with both quantitative and qualitative elements, was utilized in this study. This paper reports on the findings from the quantitative part.

- The questionnaire was distributed to a convenient sample of 84 newly-graduated nurses who are working at four acute hospitals in the East of England.

  ❑ Conditions of Work Effectiveness Questionnaire (CWEQ-II)): 19 items, a five-point semantic differential scale (1= none, 5 = a lot) (Laschinger et al., 2001) which examines access to: Information, Support, opportunity, resources (previously validated)

  ❑ Four Clinically-challenging hypothetical scenarios (Sharon and Mansour, 2013)

- Piloted on 6 newly-graduated nurses

- The study adopted the UK Department of Health (2009)' definition of the newly-graduated health care professionals, including nurses, as "a nurse…who is entering employment in England for the first time following professional registration with the Nursing and Midwifery Council or Health and Care Professionals Council. It includes those who are recently graduated students, those returning to practice, those entering a new part of the register e.g.…overseas-prepared practitioners who have satisfied the requirements of, and are registered with, their regulatory body" (p.6).

Newly-graduated nurses were eligible to participate in this study if they

- Had graduated from a UK higher education institution

- Had actual working experience of eighteen months or less

- Had been enrolled in a hospital-based preceptorship program.

Recruitment

- RA visited the Newly -graduated nurses in their wards at a particular shift and handed over the questionnaires directly to them.

- Copies are left for those newly-graduated nurse who were physically presented at that particular shift

- Data collection lasted from June 2015 - January 2016

Data Analysis:

- SPSS version 21

- Demographic data was analyzed using summary statistics including frequencies, mean and standard deviations

- Scatterplot display confirmed a non-linear, monotonic relationship (i.e. To use non-parametric Spearman Correlation Coefficient).

- The research was approved by the Anglia Ruskin University FREP Panel.

Results

- 51 questionnaires were completed and returned by the participants, with a response rate of (61%)

Demographics characteristics		(n)	(%)
Gender	Male	4	(7.8)
	Female	47	(92.2)
Age	20-25	29	(58.0)
	26-30	10	(20.0)
	31-35	2	(4.0)
	36-40	3	(6.0)
	more than 40	6	(12.0)
	Missing	1	(2.0)
Length of experience (Months)	0-6	23	(47.9)
	7-12	16	(33.3)
	12-18	9	(18.8)
	Missing	3	(5.9)
Type of clinical work settings	Medical Ward	16	(31.4)
	Surgical Ward	18	(35.3)
	High Dependency Unit	2	(3.9)
	Coronary Care Unit	1	(2.0)
	Accident & Emergency	1	(2.0)
	Others	13	(25.5)
Hospital Campus	Hospital A	16	(31.4)
	Hospital B	16	(31.4)
	Hospital C	14	(27.5)
	Hospital D	5	(9.8)

Table .2 Cronbach's alphas (Alpha), Means (M), Standard Deviations (DS) and Correlations Coefficients

*Correlation is significant at the 0.05 level (2-tailed).
**Correlation is significant at the 0.01 level (2-tailed).

		Alpha	Mean	SD	1	2	3	4	5	6	7	8
1.	Average Total Empowerment	0.86	13.80	0.52	-							
2.	Opportunity	0.64	4.13	0.71	.570**	-						
3.	Access to Information	0.79	3.40	0.76	.575**	.242	-					
4.	Access to Support	0.82	3.35	0.91	.815**	.353*	.451**	-				
5.	Access to Resources	0.76	2.90	0.73	.454**	.089	-.020	.309*	-			
6.	Formal Power	0.78	2.93	0.82	.689**	.200	.197	.550**	.352*	-		
7.	Informal Power	0.75	3.70	0.75	.720**	.511**	.395**	.412**	.243	.407**	-	
8.	Speaking Up Attitudes	0.76	4.47	0.69	.472**	.326*	.395**	.215	.044	.279	.480**	-

Discussion

- The newly-graduated nurses reported moderate workplace empowerment of 13.8 (SD= 0.52) (Laschinger et al., 2010) and is similar to other previously reported work on empowerment levels for newly-graduated nurses (Laschinger at al., 2010; Bushell, 2013).

- There is a substantial congruence between the nurses' expectations and their working conditions (i.e. being treated fairly and rewarded for their contributions toward organizational values (Greco et al., 2006).

- The findings confirm that work empowerment may contributes toward developing and nurturing the newly-graduated nurses' communication skills and speaking up behaviours

- Interestingly, the participants reported high level of confidence in challenging unsafe practice in the given scenarios, in contrast with many evidence from the literature which suggests otherwise (Law & Chan, 2015; Schwappach & Gehring, 2014).

- The Cronbach Alpha for the CEWQ II was 0.86, which is consistent with previous measures for the internal consistency (Laschinger et al., 2010; Bish et al., 2014).

- Newly-graduated nurses tend to develop social connections with other health care professionals in order to fit better into the new team (Levett-Jones & Lathlean, 2009). Findings from this study suggest that such a strategy, which Kanter (2008) refers to as informal power, may have an influential role in developing and consolidating newly-graduated nurses' assertive communication behaviours.

Conclusion

- The findings from this study demonstrate links between the newly-graduated nurses' perceived structural empowerment in their work setting, and their assertive speaking up behaviors based on four hypothetical scenarios of unsafe practice

- Supporting newly-graduate nurses in their transition to their new-role (empowering., and feeling secure) is likely to help faster development of effective assertive communication skills.

- Further research is needed to better understand the contextual factors which drive for such high assertiveness skills, given the evidence from the literature which suggest otherwise.

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