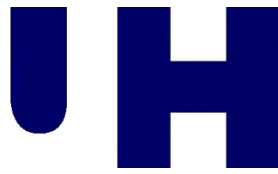


University of
Hertfordshire



Amany Alabdullah
Nursing Lecture
**Princess Nora bint
Abdul Rahman University**

PhD student
University of Hertfordshire
Supervised by:

Prof. Brian Littlechild & Dr. Lisa Whiting

Workplace Stress among Registered Nurses in Pediatric Intensive Care Units in Saudi Arabia





Outline

Literature Review

Gaps in Research

Aim of the Study

Methodology

Results

References

Workplaces Stress



References:

(Lu et al., 2012; Gholamzadeh, Sharif, & Rad, 2011)



Reference:

(Aboshaiqah, 2016)



References:

(Bahnassy et al., 2014; Fore & Scull, 2013; Mann & Cowburn, 2005; Saksvik-Lehouillier, Bjorvatn, Magerøy, & Pallesen, 2016; Lim, Bogossian, Ahern, 2010; Milutinović et al., 2012; Sharma et al., 2014; van Wyk & Pillay–van Wyk, 2010; Watson et al., 2008; Yau et al., 2012)

Workplace Stress

Quality of Care

References:

(Taylor et al., 2007; Karadzinska-Bislimovska et al., 2014)



2008

2018

Quantitative
studies

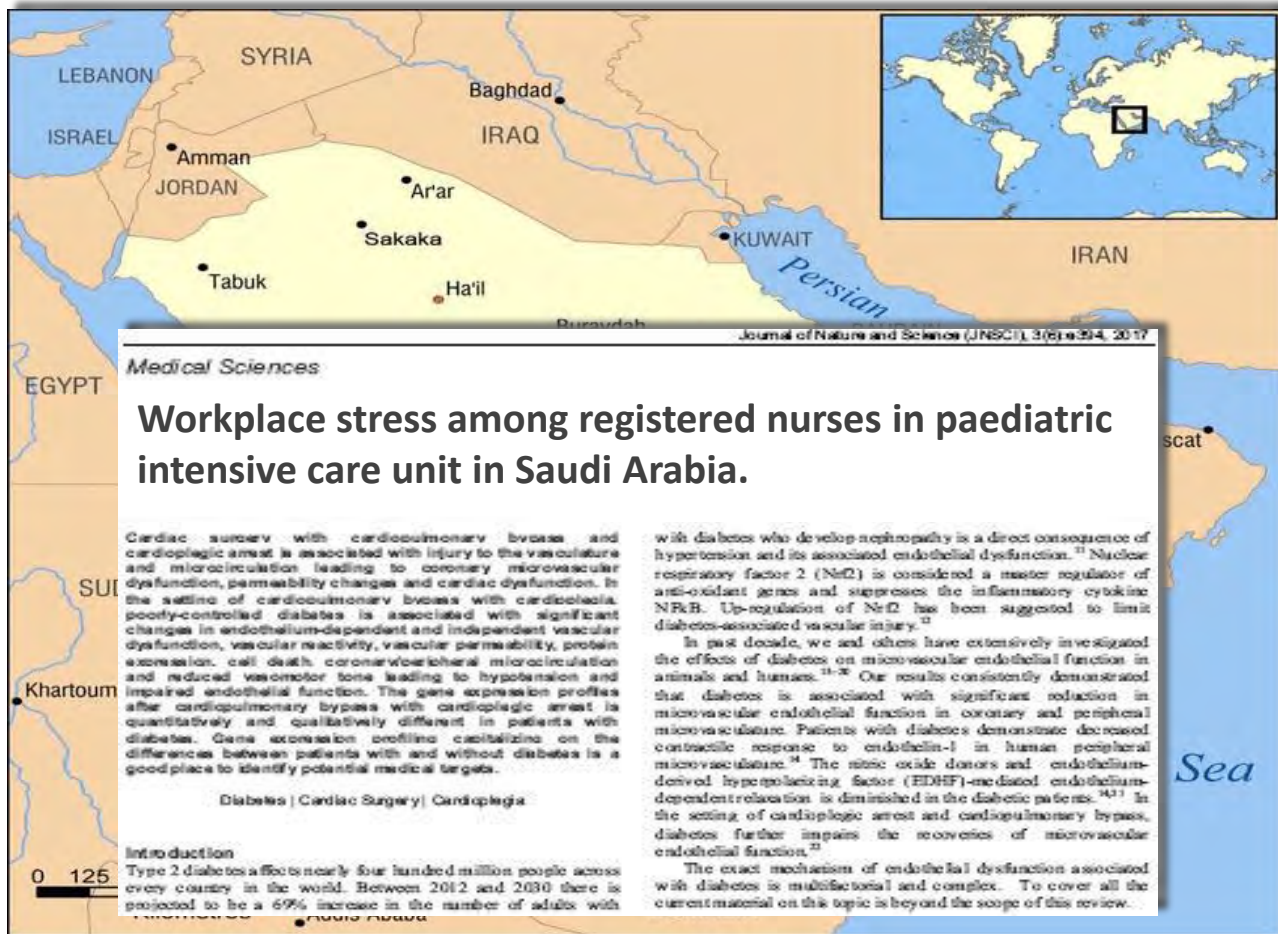
No in-depth
studies

Focus on non-
specialist nurses



References:

(Abdollahi, Abu Talib, Yaacob, & Ismail, 2014; Chang, Hancock, Johnson, Daly, & Jackson, 2005; Foglia, Grassley, and Zeigler, 2010; Gelsema et al., 2006; Watson et al., 2008, Karkar, Dammang, & Bouhaha, 2015; Sayed & Ibrahim, 2012; Xianyu & Lambert, 2006)



Aim of Study

This study aims to determine the workplace stress perceptions and experience of registered nurses working in pediatric intensive care units in Saudi Arabia.

Methodology

Study design: **Mixed Method**

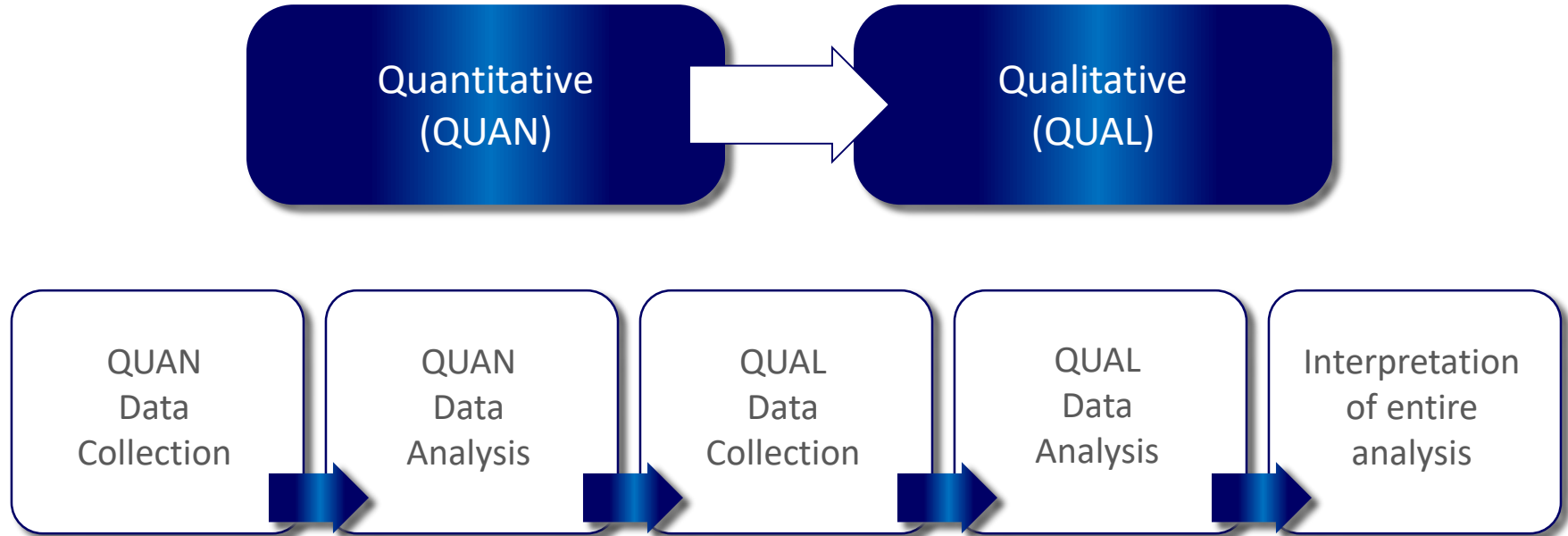
Phase
ONE

Questionnaire (quantitative data)

Phase
TWO

Interviews (qualitative data)

Sequential Explanatory Approach



Sample

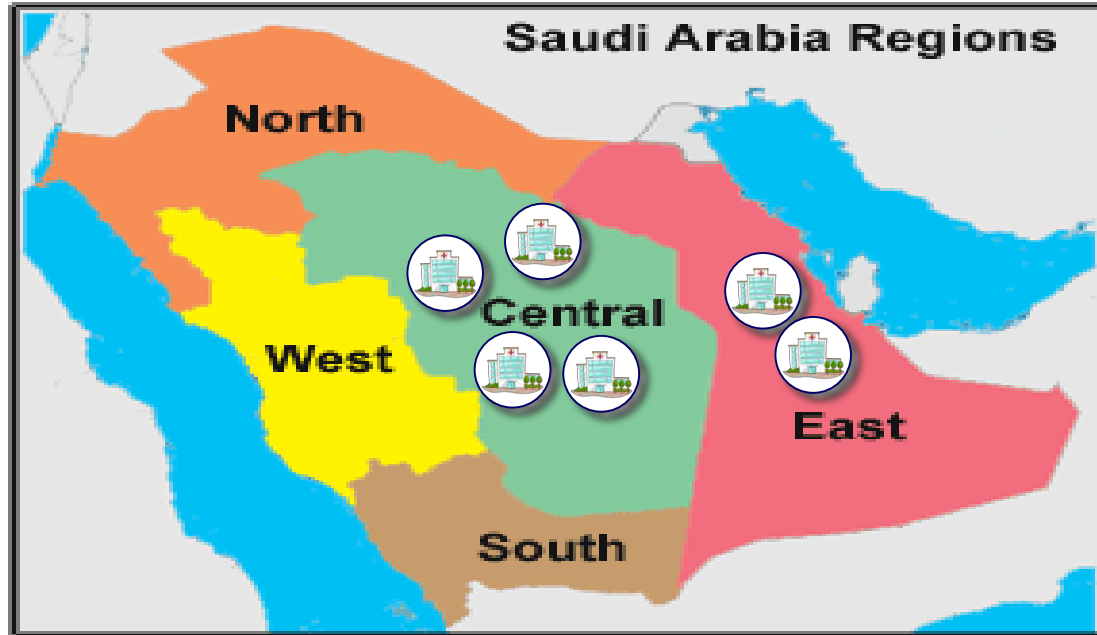
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ONE



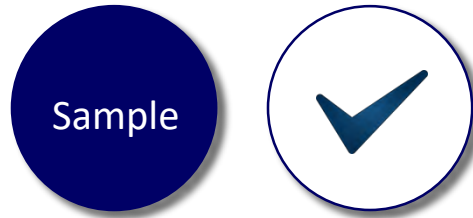
172
nurses

1 April 2017 and conclude on 30 June 2017

Setting of the Study

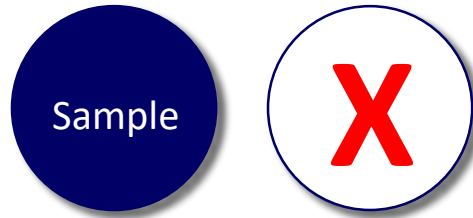


Inclusion Criteria



- Is a nurse
- Works as an independent nurse on all shifts without supervision.
- Has completed the orientation period
- Holds an active registered licence
- Can read and speak English

Exclusion Criteria



- Is a charge nurse (manager) or supervisor
- Is in an orientation period at the hospital
- Has not yet independently cared for patients
- Does not have an active registered licence
- Does not speak or read English
- Is permanently on one shift

Study Tool

Section B: Expanded Nursing Stress Scale (French et al., 2000)²

Below is a list of situations that commonly occur in a paediatric intensive care unit (PICU). For each situation that you have encountered in your **PRESENT PICU SETTING**, please indicate **HOW STRESSFUL** it has been for you:

(Enter the number in the right-hand column that best applies to you. If you have not encountered the situation, write '0'.)

Never Stressful 1	Occasionally Stressful 2	Frequently Stressful 3	Always Stressful 4	Does Not Apply 5
-------------------------	--------------------------------	------------------------------	--------------------------	------------------------

1. Performing procedures that paediatric patients experience as painful.....
2. Criticism by a doctor.....
3. Feeling inadequately prepared to help with the emotional needs of a paediatric patient's family.....
4. Lack of opportunity to talk openly with other personnel about problems in the PICU setting.....
5. Conflict with a supervisor.....
6. Inadequate information from a doctor regarding the medical condition of a paediatric patient.....
7. Paediatric patients making unreasonable demands.....
8. Being sexually harassed.....
9. Feeling helpless in the case of a paediatric patient who fails to improve.....
10. Conflict with a doctor.....
11. Being asked a question by a paediatric patient for which I do not have a satisfactory answer.....
12. Lack of opportunity to share experiences and feelings with other personnel in the PICU setting.....

(2) French, S. E., Lenton, R., Walters, V., & Eyles, J. (2000). An empirical evaluation of an expanded nursing stress scale. *Journal of Nursing Measurement*, 8(2), 161-178.

Phase ONE

1. Demographic and work characteristics questions

Gender

Nationality

Level of
Nursing
qualification

Years of experience in
previous and current
PICU settings

2. Expanded Nursing Stress Scale

This scale consists of 57 items under 9 subscales

Procedures

Phase
ONE

Tool Permission from the author



Ethics obtained



A pilot study



Reference:

(French et al., 2000)

Procedures

Phase
ONE

Meeting with
head nurse then
Meeting with the
nurses

Remind the
nurses
(after two
weeks)

Collect the
questionnaires
and thanks the
nurses
(after a month)

0

2 weeks

1 month



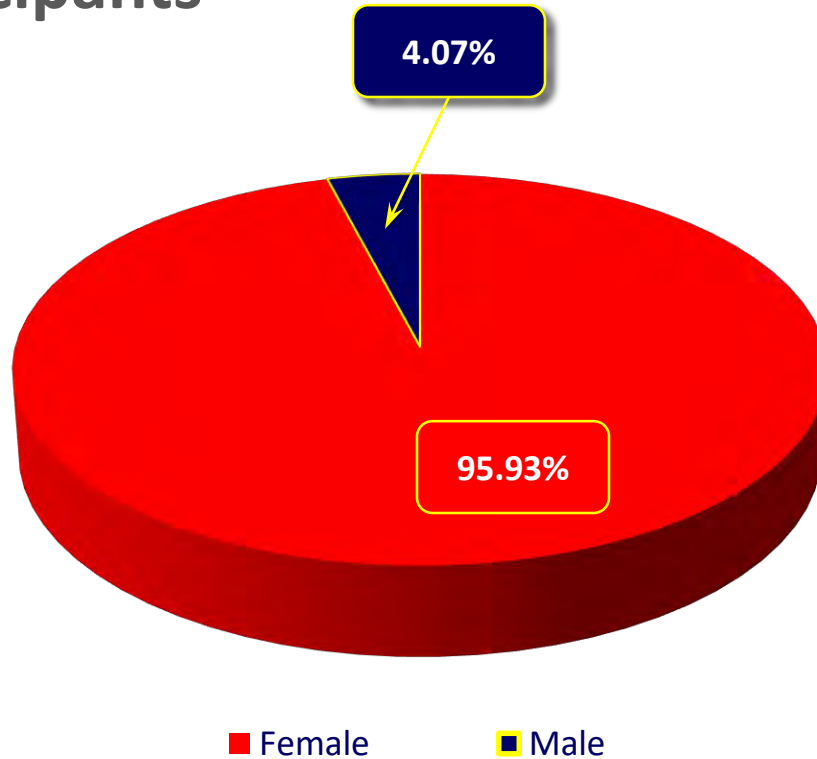
Phase
ONE

Quantitative data analysis:

1. Profiles of participants
2. Workplace stress Subscale response: Statistical analysis
3. Relationships of workplace stress subscale and the profiles of the participants

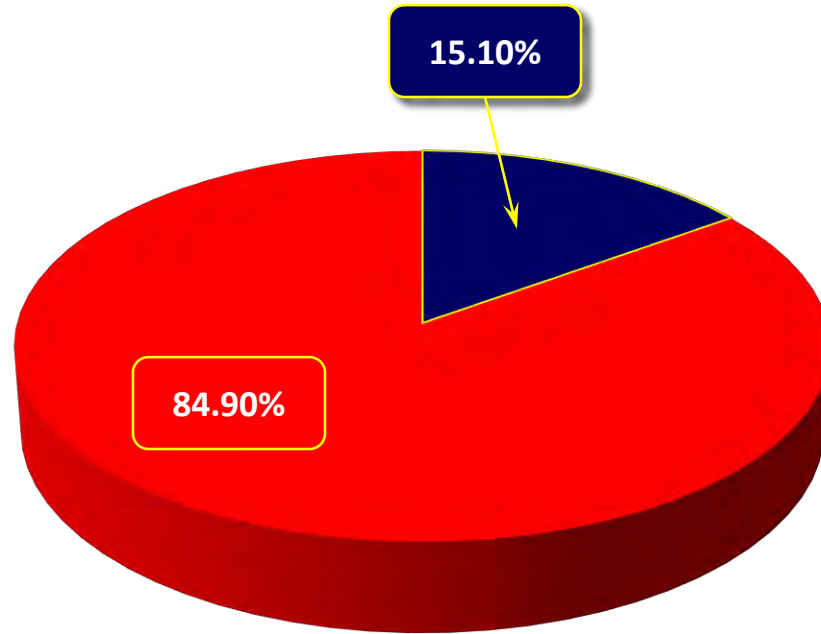
1. Profiles of participants

1.1 Gender



1. Profiles of participants

1.2 Nationality

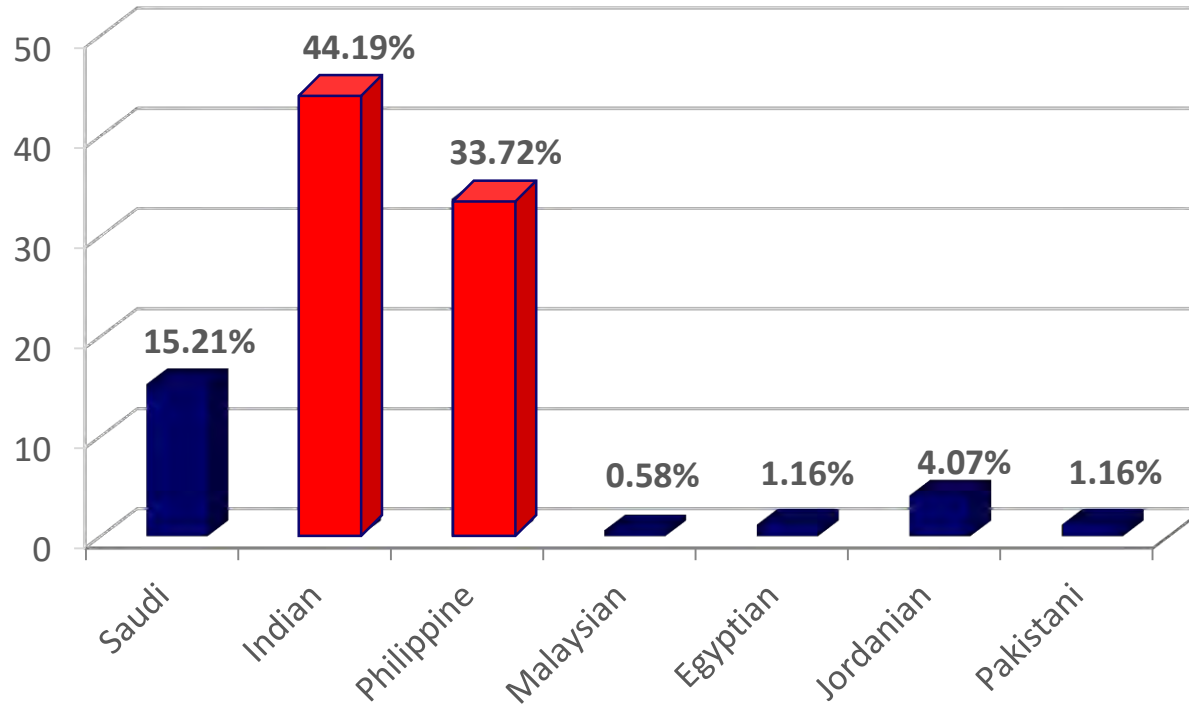


■ Saudi Nurses

■ Expatriates Nurses

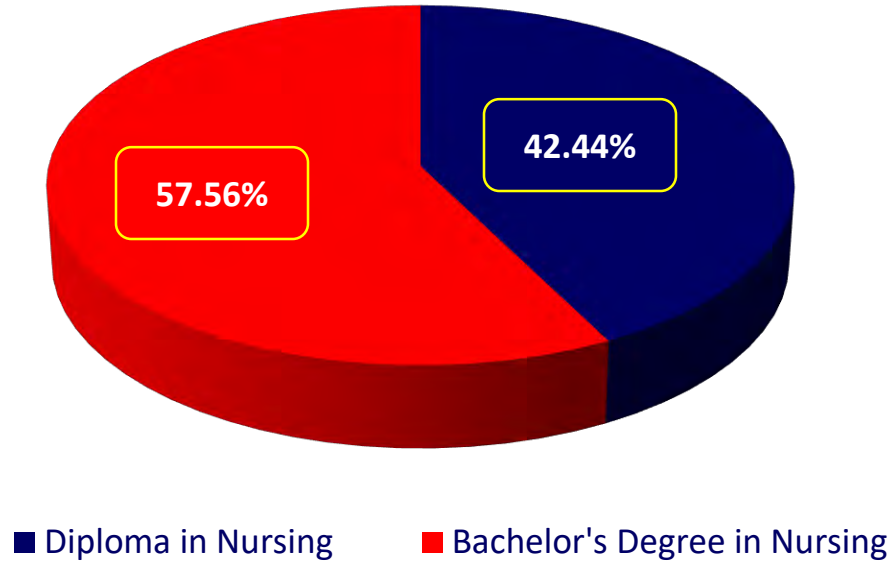
1. Profiles of participants

1.2 Nationality



1. Profiles of participants

1.3 Level of Nursing qualifications



1. Profiles of participants

1.4 Years of PICU work experience among the participants

Participants	Country of PICU experience	N	%	Mean (yrs.)	SD
Participants with <u>no previous</u> PICU work experience in a country other than Saudi Arabia	Inside Saudi Arabia	91	52.9%	6.857	4.9768
	Outside Saudi Arabia	--	--	--	--
Participants <u>with PICU work experience</u> in a country other than Saudi Arabia	Inside Saudi Arabia	81	47.1%	7.642	4.1723
	Outside Saudi Arabia	81	47.1%	5.062	3.3292
Total years of PICU work experience	Inside Saudi Arabia and in a country other than Saudi Arabia	172	100%	9.6773	5.90049

2.Workplace stress Subscale response

Statistical analysis

Subscale	Mean	SD
Death and dying	2.072	0.77194
Conflict with physicians	1.9174	0.87053
Inadequate preparation	2.0097	0.81524
Problems with peers	1.6860	0.81107
Problems with supervisors	1.9917	1.01389
Workload	2.2946	0.81033
Uncertainty concerning treatment	1.9354	0.89624
Patients and families	2.0196	0.79361
Discrimination	1.1453	0.99129
Total	1.962	0.720

Occasionally stressful

3. Relationships of workplace stress subscale and the profiles of the participants, including demographic and work characteristics

3.1 Comparison of workplace stress scale and gender among participants using a statistical analysis(t-test).

Subscale variable	Gender				T	P
	Male (N = 7, 4.1%)		Female (N = 165, 95.9%)			
	Mean	SD	Mean	SD		
Death and dying	2.6327	0.61	2.0485	0.77	1.978	0.050*
Conflict with physicians	2.2857	0.40	1.9018	0.88	1.144	0.254
Inadequate preparation	2.8571	0.72	1.9737	0.80	2.867	0.005**
Problems with peers	2.5000	0.75	1.6515	0.80	2.763	0.006**
Problems with supervisors	2.4490	0.82	1.9723	1.02	1.220	0.224
Workload	2.7619	0.95	2.2747	0.80	1.564	0.120
Uncertainty concerning treatment	2.5873	0.54	1.9077	0.90	1.982	0.049*
Patients and their families	2.6607	0.43	1.9924	0.79	2.207	0.029*
Discrimination	2.0952	0.96	1.1051	0.98	2.633	0.009**
Total scale	2.5664	0.46	1.9365	0.72	2.294	0.023*

3.2 Comparison of the workplace stress scale and nationality among participants using a statistical analysis (t-test).

Subscale variable	Nationality - Mean(SD)				T	P
	Saudi (N = 26,15.1%)		Expatriates (N = 146,84.9%)			
	Mean	SD	Mean	SD		
Death and dying	1.9396	0.758	2.0959	0.775	-0.951	0.343
Conflict with physicians	1.8154	0.873	1.9356	0.872	-0.648	0.518
Inadequate preparation	1.8333	0.655	2.0411	0.839	-1.199	0.232
Problems with peers	1.7628	0.542	1.6724	0.851	0.709	0.481
Problems with supervisors	1.9835	0.919	1.9932	1.033	-0.045	0.965
Workload	2.1624	0.848	2.3181	0.804	-0.902	0.368
Uncertainty concerning treatment	1.9060	0.753	1.9406	0.922	-0.181	0.856
Patients and their families	1.8365	0.739	2.0522	0.801	-1.279	0.203
Discrimination	1.1026	0.540	1.1530	1.053	-0.368	0.714
Total SCALE	1.8812 (0.657)		1.9766 (0.732)		-0.621	0.536

3.3 Comparison of workplace stress scale and nursing qualification level among the participants using a statistical analysis (t-test).

Subscale variable	Level of nursing qualification				T	P
	Diploma in Nursing (N = 73,42.4%)		Bachelor of Science in Nursing (BSN/BScN) (N = 99,57.6)			
	Mean	SD	Mean	SD		
Death and dying	2.0372	0.71	2.0981	0.82	-0.511	0.610
Conflict with physicians	1.7397	0.90	2.0485	0.83	-2.329	0.021*
Inadequate preparation	1.9452	0.76	2.0572	0.85	-0.890	0.375
Problems with peers	1.5320	0.84	1.7997	0.78	-2.162	0.032*
Problems with supervisors	1.8356	1.03	2.1068	0.99	-1.744	0.083
Workload	2.1355	0.75	2.4119	0.83	-2.237	0.027*
Uncertainty concerning treatment	1.6849	0.86	2.1201	0.88	-3.233	0.001**
Patients and their families	1.9401	0.71	2.0783	0.85	-1.161	0.247
Discrimination	1.0731	0.93	1.1987	1.04	-0.820	0.413
Total SCALE	1.8238	0.67	2.0642	0.74	-2.186	0.030*

3.4 Comparison of workplace stress scale and total years of PICU work experience among the participants using a statistical analysis (ANOVA).

Subscale variable	Years of PICU work experience			F	P	
	Participants total years of PICU w					
	0-10 years	11-20 years				21-30 years
	Mean (SD)	Mean (SD)				Mean (SD)
Death and dying	2.0394 (0.72199)	2.1732 (0.83281)	1.6429 (0.75593)	1.911	0.1510	
Conflict with physicians	1.9408 (0.84668)	1.9152 (0.90812)	1.6500 (0.91183)	0.410	0.6640	
Inadequate preparation	2.0170 (0.74516)	1.9848 (0.92160)	2.1250 (0.79557)	0.113	0.8930	
Problems with peers	1.6803 (0.67761)	1.7020 (0.95833)	1.6250 (1.08288)	0.038	0.9630	
Problems with supervisors	2.0394 (0.96929)	1.9481 (1.06923)	1.7679 (1.17043)	0.362	0.6970	
Workload	2.2857 (0.77442)	2.3434 (0.87743)	2.0000 (0.67717)	0.652	0.5220	
Uncertainty concerning treatment	2.0068 (0.83603)	1.8687 (0.97508)	1.6111 (0.93530)	1.018	0.3640	
Patients and their families	1.9834 (0.79921)	2.1136 (0.77265)	1.6875 (0.87372)	1.270	0.2840	
Discrimination	1.1429 (0.95007)	1.1616 (1.04798)	1.0417 (1.13302)	0.052	0.9490	
Total SCALE	1.9705 (0.68100)	1.9806 (0.77116)	1.7083 (0.80592)	0.522	0.5940	

Subscale variable	Years of PICU work experience - Mean(SD)			F	P
	Participants total years of PICU work experience				
	0-10 years	11-20 years	21-30 years		
	Mean (SD)	Mean (SD)	Mean (SD)		
Death and dying	2.0394 (0.72199)	2.1732 (0.83281)	1.6429 (0.75593)	1.911	0.1510
Conflict with physicians	1.9408 (0.84668)	1.9152 (0.90812)	1.6500 (0.91183)	0.410	0.6640
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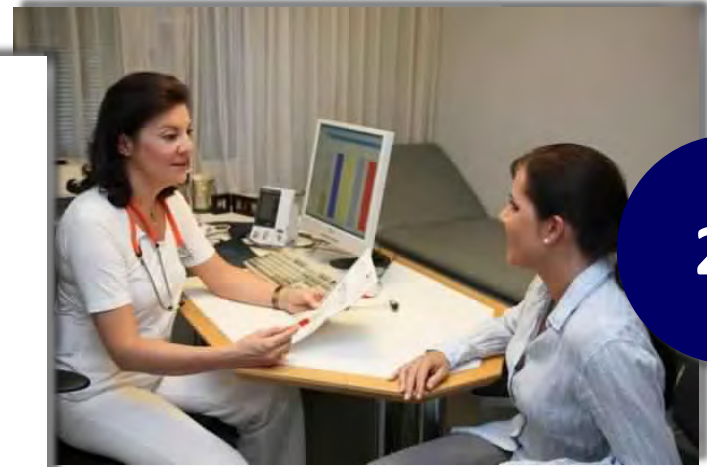


PHASE 2





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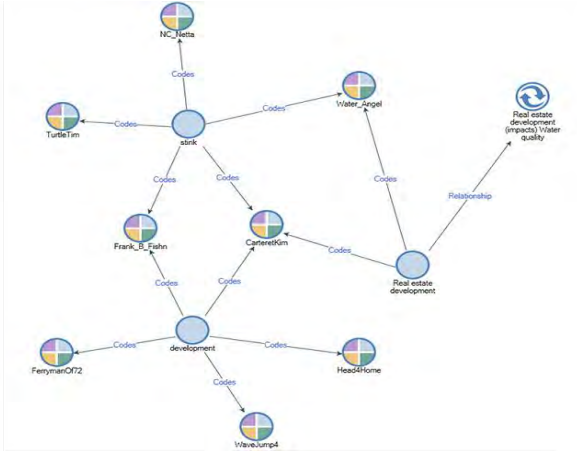
1 December 2017 and
conclude on 30 Junary 2018

Phase
TWO

Interviews (qualitative data)

ETHICS





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Go Refresh Open Properties Edit Paste Copy Cut Merge Format Paragraph Styles Reset Settings Editing

Workspace Item Clipboard

Nodes

- Nodes
 - Self Reflection
 - Relationships
 - Node Matrices
- Sources
- Nodes
- Classifications
- Collections
- Queries
- Reports
- Models

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Self Reflection

Name	Sources	References	Created On	Created By	Modified On	Modified By
Learnt	3	10	4/10/2012 8:31 PM	ASNA	4/10/2012 8:43 PM	ASNA
Skills Acqui	2	2	4/10/2012 8:59 PM	ASNA	4/10/2012 11:24 PM	ASNA
Understan	4	12	4/10/2012 11:29 PM	ASNA	4/10/2012 11:45 PM	ASNA

Self-Reflection Week 10 Self-Reflection Week 11 Self-Reflection Week 12 Self-Reflection Week 8 Self-Reflection Week 9

[Click to edit](#)

Last Wednesday was my group's (Group A) presentation on phenomenological research along with other Group D and Group E, in which both presenting about grounded theory. From group D, I learnt the formation of grounded theory and how the inductive nature of qualitative research in grounded theory was considered essential for generating theory as it searches to identify the core social processes within a given social situation. It was very interesting because group D has prepared a very detail explanation on the meaning and

In Nodes Code At Knowledge (Nodes\Self Reflection) X

ASNA 4 Items



Initial Themes



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THANK
YOU!



**ANY
QUESTIONS**



AASA31@Hotmail.com