

High Involvement Work Process and Its' influence on Organizational Effectiveness and Nurses' Well-Being

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Abstract: Involvement of the employee is a strong approach to enhance performance of organization. It delegate decision making downward in the organization so nurses can take decisions rapidly, overcome problems and close contact to their source. High Involvement Work Process (HIWP) plays a key role in creating work environment that optimize organizational performance, effectiveness and nurses' well-being. The study aimed to explore the influence of High Involvement Work Process on Organizational Effectiveness and staff nurses wellbeing at Main Mansoura University Hospital and Health Insurance Hospital. A descriptive correlation design was used in carrying out this work. All nurses working in Main Mansoura University Hospital (n=124), and Health Insurance Hospital (n=137) who fulfills the criteria of having a minimum of one year experience were included in the study. The data collected by three tools; High Involvement Work Processes questionnaire (HIWP), Organizational Effectiveness Questionnaire (OEQ), and Psychological Well-being Questionnaire (PWQ). Major results were statistical significant positive correlation between (HIWP) and Organizational effectiveness in both hospitals. But no statistical significant correlation was found between (HIWP) and Nurses Well-being at both study hospitals. Also, Main Mansoura University Hospital have the highest mean score of total High Involvement Work Processes (HIWP), total Organizational effectiveness and total Nurses Well-being in comparison to Health Insurance Hospital. It was concluded that attributes of high involvement work Processes are beneficial not only for the organizational effectiveness but also for nurses' wellbeing. It is recommended that creating a culture of high involvement work practices, sharing information, tied rewards with performance standards and gives power to do the jobs effectively.

Keywords: High Involvement Work Processes, Organizational effectiveness, Nurses Well-being.

Abbreviations: HIWP- High Involvement Work Processes, OE - Organizational Effectiveness, PW- Psychological Well-being, PIRK- Power ,Information, Rewards, and Knowledge

1. INTRODUCTION

New practices in work require wide definitions of job and going to the decision making to employees in lower-level. This at all event need higher involvement of employee, which has in force the researchers to point out toward these new models as high-involvement work processes (HIWP) ⁽¹⁾. In health care organizations, HIWP are a logic part of a hospital to provide many values humanistic ally as autonomy and oversight on the work. They are key factors for enhancing the care of patient and are vital to supplement innovations of management in health care such as the patient-centered care model that considered needs and preferences of the patients in the search to enhance the patient care quality ⁽²⁾.

Indeed, nurses shortage itself is raising critical questions, how to attract, retain, and motivate quality nurses ⁽³⁾. High-involvement work Processes keep HR systems strongly through conveying visible and consistent signals to nurses about their weight in the work place ⁽⁴⁾. Moreover, HIWP leads to outcomes positively to employee and organization that may high involving organizations are able to and more likely tolerate the cost of management practices of HR ⁽⁵⁾.

International Journal of Novel Research in Healthcare and Nursing

Vol. 5, Issue 3, pp: (153-169), Month: September - December 2018, Available at: www.noveltyjournals.com

Furthermore, the benefits of HIWP include high quality services, foster decision making and problem solving, decrease absenteeism and turnover, in short, greater effectiveness of organization ⁽⁶⁾. Indeed, the organizational practices found in HIWP are intended to deal employees as resources in which to invest, rather than controlled the costs.

HIWP refers to the opportunity of individual employees to be more responsible in work by involving them in the decision-making process. It is defined in three elements i.e. the requirements for high relative skills; jobs prepared to provide chance working in teams; and lastly the incentive framework ⁽⁷⁾. Moreover, HIWP is defined as a plural set of reciprocally support practices that have synergistic influence. Accordingly, HIWP is defined in four alternately reinforcing attributes, which are: Power (P), Information (I), Rewards (R), and Knowledge (K) (PIRK) ⁽⁸⁾.

Power can be characterized as the sharing of power with employees and increasing their level of autonomy ⁽⁹⁾. Maximizing the employees' involvement when the power level is highest and pushed down to the lower level employees where they carry out the decisions ⁽⁵⁾. Information includes increase employees updating about the goals of organization-unit as well as promoting performance feedback timely. A great defy for managers designing HIWP is to create system of information that access nurses with timely and relevant data to their work process ⁽¹⁰⁾.

Rewards provide incentives for nurses to exert effort to improve the performance of organization. It is a main dimension in HIWP that connect recognition, promotions and compensation to performance of individual, group, and organization ⁽¹¹⁾. Knowledge or training means a commitment to training and development ⁽¹⁰⁾. For nurses, they are already trained as professionals so they have the basic skills necessary for high involvement. However, interpersonal and managerial skills are as much important as clinical skills in implementing HIWP ⁽³⁾.

Moreover, HIWP can be achieved by reinforcing all PIRK together. Thus, the power that the nurses have to make decisions related their work, the access of information and knowledge to help in decisions, and the incentives for performance enhancing resulted in high involvement exists ⁽¹¹⁾. So, power nurses without access information and knowledge are possibly to take improper decisions or mistrust in their ability to perform the work independently. Those without rewards based-performance are may be frustrated and unmotivated because they cannot be influenced by their incentives ⁽¹²⁾.

HIWP ensure that values conveyed to nurses are high consistent and coherent that have a reinforcing role. In fact, HIWP enhance key strategic goals and values in terms of what is expected from nurses at work through their function, In addition, stimulating desired employee behavior is a prominent role of development and reward processes, which should be consistent with the organization values ⁽²⁾. Thus, organizations with HIWP are flexible and employee oriented and are thought to be effective organizations ⁽¹³⁾.

Attaining a high level of organizational effectiveness (OE) is the ultimate goal for almost all organizations ⁽¹⁴⁾. Although there is no single definition for OE, it is widely perceived as the efficiency with which an organization is able to meet its aims and objectives ⁽¹⁵⁾. OE explains how the outcome the organization intends to produce can be achieved through effective an organization. So, OE is continuously improving an entire organization step by step ^(16,17). Effective organization makes a planned, concerted effort to assure all interrelated parts of the organization are strategically aligned to achieve the goals and mission. Thus, it should improve its own operation to promote conventional and expanded roles effective as possible ⁽¹⁸⁾.

OE is being seen through timely respond of an organization or management to threats and opportunities in a purposeful, accurate and effective manner, with access knowledge of situations, goals, opportunities, and threats. An effective organization is the capable to utilize its access historic, real time trends and status information in addition to knowledge of alternative strategies to decisions making at the high suitable level to fulfill the highest advantage for the organization ⁽¹³⁾. OE can be achieved through an integrated framework that addresses the following organizational effectiveness elements: Training/Staff development, employee relations, strategy/planning, leadership, employee engagement, client experience, performance improvement and change management ⁽¹⁹⁾.

Training promotes instructions formal and informal, opportunities for learning, development professional and organizational purposed to improve client outcomes ⁽²⁰⁾. Employee Relations should be flexible and less formal or structured and rely mainly on employee's preferences and personality and not title or position ⁽¹³⁾. Strategy/planning clarify the purpose, role, and direction that being clear and appropriate summarize the organization and/or division work.

Leaders, they play a core role in creating a culture of employees' engagement through estimate of employees, promoting opportunities of career development and insuring have the adequate resources for employees needed to be successful in their roles ⁽²¹⁾.

Indeed, high levels of clients loyalty and satisfaction is an important element that obtained by elevate nurses awareness about client needs, working on feedback of client, and being supported to meet the requirements of clients ⁽²²⁾. Also, performance improvement has inclusion health outcomes of patients and has the essential roles of nurses in locating healthcare system efficiency and effectiveness. In addition to that, change management is a vital element that determines how managers support, prepare and equip employees to adopt change successfully in order to push successful organization and outcomes ⁽²³⁾.

In addition to that, nurses' well-being achieved at work provide long term benefits for the organization, nurses become more committed, more positive impressions of the nurses are creating and decrease absences, sickness and work-related accidents. Thus, good well-being nurses at work are more efficient and provide favorable patient outcomes ^(24, 25). Well-being is the ability of a person to experience physical, mental and psychosocial health. It is the self-reported evaluation of individual happiness and their quality of life ⁽²⁶⁾.

Well-being includes six dimensions which are personal growth, environmental mastery, and purpose in life, self-acceptance, autonomy and positive relations with others ⁽²⁷⁾. Personal growth; a sense of self development continues, as self-growing and expanding, accept new experiences openly, able to realize his or her potential, over time improvement in behavior and self should be see, in addition, using different ways that reflect more self-effectiveness and knowledge. Environmental mastery; a feeling of competence and mastery in environment management, dominance of difficult of external activities, use the surrounding opportunities effectively and ability to select or create contexts appropriate to personal needs and values ⁽²⁸⁾.

Purpose in life; life goals and directedness sense, the feeling of meaning to present and past life, maintain beliefs that enhance life purpose, has aims and objectives for living. Self-acceptance; the self-positive attitude; accepts and admit all aspects of self, including positive and negative aspects; feels favorable about past life. Autonomy; determine the self and autonomous, the ability to resist and fight social pressures to thought and work in certain ways, adjust behaviors from within, self- evaluates by personal standards. And relations with others positively; intimate, adequate, trusting and friendly relationships with others; is important for welfare of others; ability of empathy strongly, passion, and domesticity ⁽²⁹⁾.

Significance of the study:

Today, significant challenges in health care are a desire to locate methods to elevate locate nurses' effect to the organization whilst better understanding how effective HIWPs models operate ⁽³⁰⁾. HIWPs provide organizations with resources such as autonomy, participative decision-making, sharing information, feedback, learning opportunities and coaching ⁽³¹⁾. These resources influence psychological state of nurses which, they are motivated to realize their intrinsic motivation for growth, learning, development and general wellbeing and their extrinsic motivation to achieve work goals and then improve organizational effectiveness ⁽³²⁾. In addition to that, findings related HR practices effectiveness in the health care sector is still not known ⁽³³⁾. Therefore, investigating the relationship of HIWP to organizational effectiveness and nurses' well-being in the health care context represents a significant contribution to the field.

Research questions:

- 1- What is the influence of High Involvement Work Process on Organizational Effectiveness?
- 2- What is the influence of High Involvement Work Process on nurses' well-being?
- 3- What are the differences at both studied hospitals regarding influence of High Involvement Work Process on Organizational Effectiveness and nurses' well-being?
- 4- What are the differences at both studied hospitals regarding relation between High Involvement Work Process, Organizational Effectiveness, nurses' wellbeing and demographic characteristics of the studied nurses?

Aim of the study:

This study aims to explore the influence of High Involvement Work Process on Organizational Effectiveness and staff nurses wellbeing at Main Mansoura University Hospital and Health Insurance Hospital.

2. SUBJECTS AND METHODS**Design**

A descriptive correlation design was used in carrying out this study.

Setting

The study was conducted at two hospitals: Main Mansoura University Hospital with bed capacity 900 beds and Health Insurance Hospital with bed capacity 360 beds. These hospitals provide a wide spectrum of health services at Delta Region.

Subjects

All nurses working in Main Mansoura University Hospital (n=124), and Health Insurance Hospital (n=137) who fulfills the criteria of having a minimum of one year experience and available at time of data collection included in the study.

Tools of data collection

Three tools were used for data collection, namely; High Involvement Work Processes questionnaire (HIWP), Organizational Effectiveness Questionnaire (OEQ) and Psychological Well-being Questionnaire (PWQ).

I. High Involvement Work Processes questionnaire (HIWP).

It was developed by **Vandenberg et al** ⁽⁸⁾ and modified by the researcher based on literature review. This questionnaire divided into two parts:-

The first part: It was used to identifying demographic characteristics of the staff nurses as: age, educational qualifications, and years of experience.

The second part: consisted of (20 items) defining the attributes of power (5 items), information (6 items), reward (4 items), and Training (5 items), to measure staff nurses involvement in working process. The assessment was done on 4-point Likert agree/disagree format.

II. Organizational Effectiveness Questionnaire (OEQ).

It was developed by the researchers based on **Deutsch & Maddalena** ⁽³⁴⁾ and **10 Star Organizational Effectiveness Survey** ⁽³⁵⁾. This questionnaire include 52 items used to measure 9 dimensions of organizational effectiveness namely Leadership(5 items), Staff development (6 items), Customer / Client Service (5 items), Performance Improvement (5 items), Change Management (8 items), Communication (4 items), staff Engagement (7 items), Planning (6 items), staff Relations (6 items). Accordingly, each response was assigned a score from along a 5-point scale, varying from 1 (strongly disagree) to 5 (strongly agree).

III. Psychological Well-being Questionnaire (PWQ).

This instrument was developed by **Ryff** ⁽³⁶⁾ & **Dierendonck** ⁽³⁷⁾ and modified by the researchers. It composed of six dimensions were 29 items in total. The dimensions length varied between five items (Autonomy, Environmental mastery, Personal growth), four items (Self-acceptance, Purpose in life), and six items (Positive relations with others). A four-point answering scale was used for all scales, ranging from 1 (disagree) to 4 (agree).

Methods of Data Collection:

1. To conduct the study, permission was obtained from the director of Main Mansoura University Hospital and Health Insurance Hospital.

2. Interviewed explaining the purposes and procedures of the study for all participants, and any time during the study, they have the right to withdrawal from the study. Oral consent to participate was assumed by attendance of filling questionnaire sheet.

3. Tools of data collection were translated into Arabic and were tested for its content validity and relevance by a jury consisted of 3 academic staff in Nursing Administration Department at Mansoura, 4 staff nurses from two study hospitals. The necessary modifications were performed.

4. A pilot study was conducted on 10% of staff nurses at two study hospitals in order to ascertain its clarity and feasibility.

5. The questionnaires were distributed to the staff nurses to answer the questions. Each sheet took 10-15 minutes to be answered. Data collected in two months starting October 2017.

Statistical analysis:

The collected data were organized, tabulated and statistically analyzed using SPSS software statistical computer package version 19. Data summarized using mean and standard deviation for numerical variables. Multiple regression analysis was used In order to test the hypotheses; standard linear regression analyses were conducted. The r-test was used for correlation analysis between quantitative variables. The threshold of significance was fixed at the $p < 0.05$ level.

3. RESULTS

Table (1): Demographic characteristics of staff nurses at both study hospitals.

Characteristics	Main Mansoura University Hospital (n=124)		Health Insurance Hospital (n=137)	
	No	%	No	%
Age				
< 25	12	9.7	17	12.4
25- 30	33	26.6	57	41.6
31- 35	79	63.7	63	46.0
Mean±SD	33.20±6.84		30.70±5.66	
Marital status				
Married	110	88.7	119	86.9
Single	13	10.5	18	13.1
Educational qualification				
Bachelor of nursing	20	16.1	33	24.1
Technical nursing institute	72	58.1	51	37.2
Nursing school diploma	32	25.8	53	38.7
years of experience				
< 5	19	15.7	37	21.7
5-9	23	19.0	44	26.0
10≥	79	65.3	56	52.3
Mean±SD	12.24±6.92		8.64±5.18	

Table 1 depicts demographic characteristics of staff nurses at both study hospitals. Most of nurses were included in 31-35 years old. Most nurses in both study hospitals had diploma degree of technical nursing institute with 58.1% and 37.2% respectively and mainly having 10 or more years of experience 65.3% and 52.3 % respectively and the majorities were married.

Table (2): Mean, standard deviations and t-value differences of nurses' perceptions in relation to High Involvement Work Processes (HIWP), Organizational effectiveness and Nurses Well-being at both study hospitals (n=261)

High Involvement Work Processes (HIWP) dimensions	Main Mansoura University Hospital (n=124)	Health Insurance Hospital (n=137)	t	p
	Mean±SD	Mean+S.D		
Power	15.80±2.92	15.17±4.30	1.37	0.17
Information	18.11±3.63	17.20±4.34	1.82	0.07
Reward	11.49±2.75	10.45±3.85	2.46	0.01**
Training	15.46±3.47	14.51±4.26	1.96	0.05*
Total	60.87±10.22	57.35±14.12	2.28	0.02*
Organizational effectiveness dimensions				
Leadership	16.42±3.24	13.91±4.19	5.37	0.000**
Staff development	18.54±3.53	16.35±5.40	3.81	0.000**
Customer/Client Service	16.60±2.79	14.58±4.28	4.46	0.000**
Performance Improvement	15.63±2.95	13.77±4.27	4.05	0.000**
Change Management	25.02±4.36	21.74±7.21	4.38	0.000**
Communication	12.08±2.46	10.68±3.47	3.70	0.000**
Employee Engagement	21.71±4.27	19.42±5.48	3.74	0.000**
Planning	19.66±3.76	16.59±5.38	5.29	0.000**
Employee Relations	20.33±3.30	18.70±4.34	3.38	0.000**
Total	166.03±23.78	145.77±38.01	5.09	0.000**
Nurses Well-being dimensions				
Autonomy	12.39±2.50	12.05±2.60	1.06	0.29
Environmental mastery	12.60±2.18	11.67±1.90	3.66	0.000**
Personal Growth	14.95±2.46	14.02±2.37	3.10	0.002**
Positive Relations	18.45±3.44	17.12±2.95	3.37	0.001**
Purpose in life	11.03±2.36	10.71±2.37	1.08	0.28
Self-acceptance	12.19±2.01	11.43±2.48	2.70	0.007**
Total	81.63±10.74	77.02±10.07	3.57	0.000**

*Significant at $p < 0.05$ level.

Table (2) shows Mean, standard deviations and t-value differences of nurses' perceptions in relation to HIWP, organizational effectiveness and nurses well-being at both study hospitals. This table showed a statistical significant difference between mean scores of reward, training and total score at both study hospitals. Nurses were highly work involved (60.87, 57.35), highly rewarded (11.49, 10.45) and trained (15.46, 14.51) respectively in Main Mansoura University Hospital than Health Insurance Hospital. There were statistical significant difference between both study hospitals regarding all items of organizational effectiveness, the highest mean score was reported for all items of organizational effectiveness at Main Mansoura University Hospital and followed by Health Insurance Hospital. There were statistical significant differences between two hospitals in all items of nurses well-being except autonomy and purpose of life, nurses in Main Mansoura University Hospital more wellbeing than others in Health Insurance Hospital.

Figure (1): Total high Involvement Work Processes (HIWP), total Organizational effectiveness and total Nurses Well-being mean score at both study hospitals

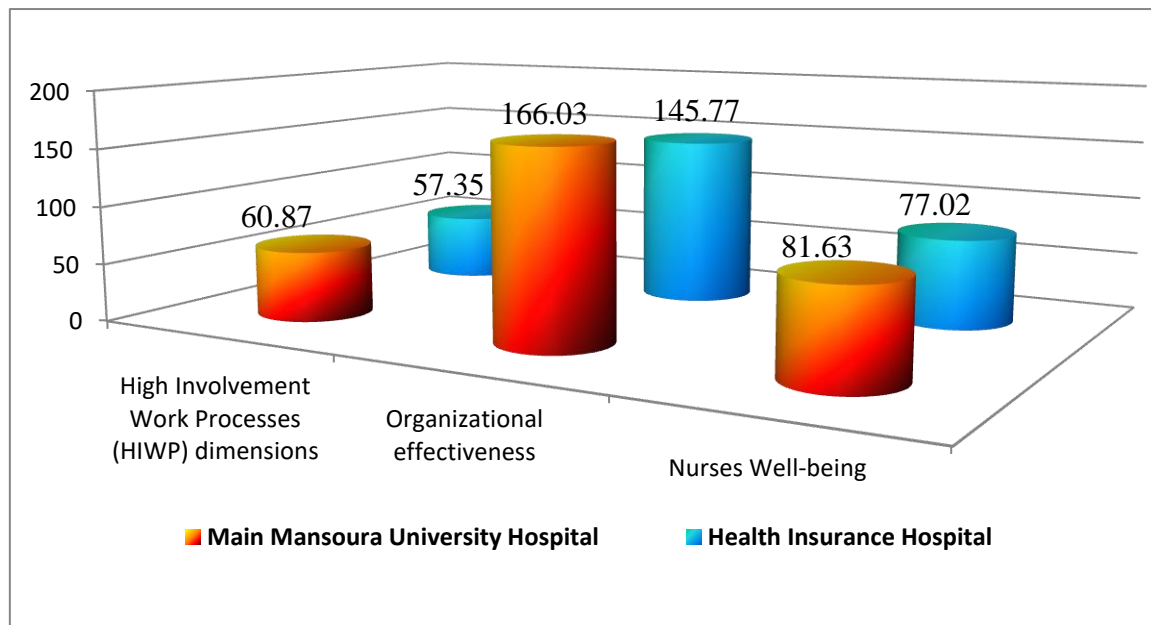


Figure (1) shows HIWP, total organizational effectiveness and total nurses' well-being mean score at both study hospitals. Main Mansoura University Hospital have the highest mean score of total HIWP, total organizational effectiveness and total nurses well-being in comparison to Health Insurance Hospital.

Table (3): Relation between HIWP with organizational effectiveness and well-being as perceived by nurses at both study hospitals. (n= 261).

Organizational effectiveness	High Involvement Work Processes (HIWP)							
	Main Mansoura University Hospital (n=124)				Health Insurance Hospital (n=137)			
	Power	Information	Reward	Training	Power	Information	Reward	Training
Leadership	0.000**	0.000**	0.000**	0.000**	0.000**	0.000**	0.000**	0.000**
Staff development	0.000**	0.000**	0.000**	0.000**	0.000**	0.000**	0.000**	0.000**
Customer/Client Service	0.09	0.005**	0.002**	0.007**	0.000**	0.000**	0.000**	0.000**
Performance Improvement	0.000**	0.000**	0.000**	0.000**	0.000**	0.000**	0.000**	0.000**
Change Management	0.000**	0.000**	0.000**	0.000**	0.000**	0.000**	0.000**	0.000**
Communication	0.000**	0.000**	0.000**	0.000**	0.000**	0.000**	0.000**	0.000**
Employee Engagement	0.000**	0.000**	0.000**	0.000**	0.000**	0.000**	0.000**	0.000**
Planning	0.001**	0.000**	0.000**	0.000**	0.000**	0.000**	0.000**	0.000**
Employee Relations	0.14	0.01**	0.008**	0.085	0.000**	0.000**	0.000**	0.000**
Nurses Well-being								
Autonomy	0.12	0.21	0.05	0.89	0.42	0.25	0.46	0.58
Environmental mastery	0.93	0.96	0.89	0.81	0.42	0.82	0.28	0.11
Personal Growth	0.50	0.83	0.79	0.04*	0.003**	0.005**	0.37	0.008**
Positive Relations	0.47	0.86	0.80	0.62	0.41	0.18	0.39	0.78
Purpose in life	0.83	0.53	0.45	0.89	0.18	0.20	0.50	0.34
Self-acceptance	0.23	0.02*	0.03*	0.26	0.002**	0.000**	0.20	0.004**

*Significant at $p < 0.05$ level

Table (3) shows relation between HIWP with organizational effectiveness and well-being as perceived by nurses at both study hospitals. This table showed statistical significant positive relation between items of HIWP and items of organizational effectiveness in both study hospitals except employee relation with power and training in Main Mansoura Hospital. There were statistical significant positive relation between items of HIWP and items of personal growth with training in Main Mansoura Hospital and with power, information and training in Health Insurance Hospital. Also statistical significant positive relation were found between items of self-acceptance with information and rewarded in Main Mansoura Hospital and with power, information and training in Health Insurance Hospital. While relation of other items of nurses well-being were positive with items of HIWP but not statistical significant.

Table (4): Relationship between HIWP, organizational effectiveness, nurses well-being and demographic characteristics of staff nurses at both study hospitals (n=261).

Characteristics	Main Mansoura University Hospital (n=124)			Health Insurance Hospital (n=137)		
	Total high Involvement Work Processes (HIWP) score	Total organizational effectiveness score	Total psychological Well-being score	Total high Involvement Work Processes (HIWP) score	Total organizational effectiveness score	Total psychological Well-being score
Age						
< 25	63.91±6.90	171.66±15.39	80.83±6.43	55.47±14.53	140.23±42.53	78.94±8.19
25- 30	63.81±9.75	173.66±16.41	78.90±8.62	58.10±12.26	147.94±36.48	76.24±8.46
31- 35	59.26±10.69	162.10±26.87	82.94±12.05	57.19±15.67	145.30±38.57	77.22±11.79
F value	3.07	3.29	1.66	0.23	0.27	0.48
P*	0.05*	0.04*	0.19	0.79	0.76	0.61
Marital status						
Single					146.72 ±	
Married	68.21±5.14	179.50±8.15	82.92±8.18	57.83±16.92	45.51	77.38±9.52
	60.01±10.44	164.46±24.80	81.46±11.17	57.28±13.73	145.63±36.97	76.97±10.19
T value	2.93	2.28	0.47	0.15	0.11	0.16
P*	0.004**	0.024*	0.63	0.87	0.91	0.87
Educational qualification						
-Bachelor of nursing	67.55±9.15	180.25±10.29	79.55±7.99	51.93±16.54	127.03±44.13	76.48±13.27
-Technical nursing institute	60.18±10.21	166.01±21.51	84.29±11.91	58.84±11.90	149.29±32.48	78.09±8.32
-Nursing school diploma	58.43±9.73	156.90±31.02	76.73±7.57	59.30±13.86	154.05±35.51	76.33±9.41
F value	5.79	6.70	6.36	3.32	5.88	0.45
P*	0.004*	0.002**	0.002**	0.04*	0.004**	0.63
years of experience						
< 5	65.36±6.38	173.89±13.71	77.31±5.67	57.29±12.80	146.75±38.01	79.24±8.48
-5-9	64.13±8.26	172.39±17.79	81.13±9.54	58.34±13.18	147.18±38.75	75.56±8.78
-10≥	58.98±11.09	162.55±26.66	82.82±11.91	56.62±15.77	144.01±38.05	76.71±11.77
F value	4.52	2.73	2.03	0.18	0.10	1.39
P*	0.01**	0.06	0.13	0.83	0.90	0.25

Table (4) shows relationship between HIWP, organizational effectiveness, nurses' well-being and demographic characteristics of staff nurses at both study hospitals. In Main Mansoura University Hospital, there were statistical significant positive relations between demographic characteristics and total HIWP and total organizational effectiveness. Also there was statistical significant positive relation between education qualification and nurses' well-being only. While in Health Insurance Hospital, there were no statistical significant relations between demographic characteristics and total HIWP, total organizational effectiveness and nurses' well-being except education qualification.

Table (5): Correlation of HIWP, organizational effectiveness and nurses well-being at both study hospitals (n= 261).

	Hospitals' name	Correlation with Organizational effectiveness		Correlation with Nurses Well-being	
		r. value	p. value	r. value	p. value
High Involvement Work Processes (HIWP)	Main Mansoura University Hospital (n=124)	0.654	0.000**	0.009	0.923
	Health Insurance Hospital (n=137)	0.684	0.000**	0.112	0.192

Table (5) shows correlation of HIWP, organizational effectiveness and nurses well-being at both study hospitals. There were statistical significant positive correlation between HIWP and organizational effectiveness in both hospitals. But not statistical significant correlation was found between HIWP and nurses well-being at both study hospitals.

Table (6): Correlation of HIWP, organizational effectiveness and nurses well-being at study hospitals (n= 261).

	Correlation with Organizational effectiveness		Correlation with Nurses Well-being	
	r.value	p. value	r. value	p. value
High Involvement Work Processes (HIWP)	0.799	0.000**	0.090	0.148

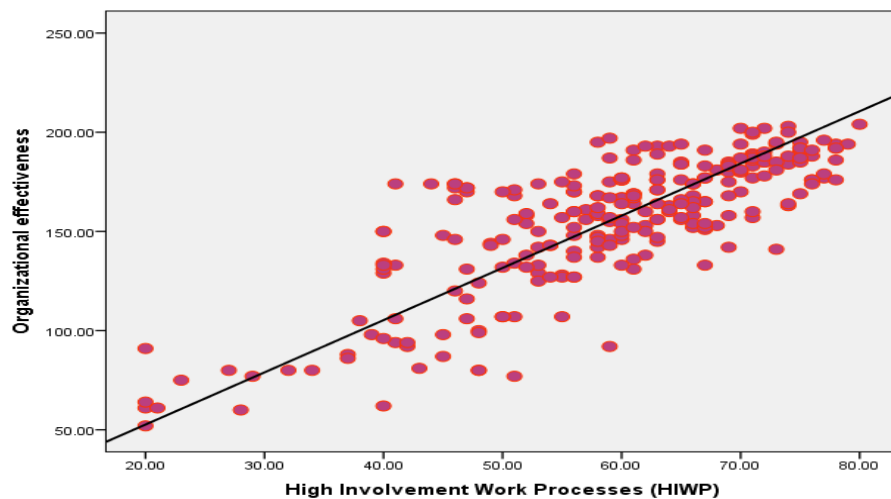


Figure 2: Correlation of Involvement Work Processes (HIWP) with organizational effectiveness (P=0.000).

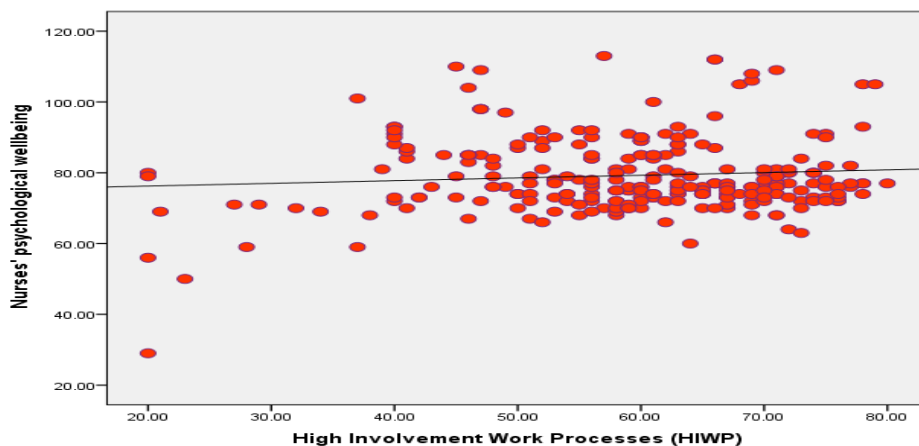


Figure 3: Correlation of Involvement Work Processes (HIWP) with Nurses' Well-being (P=0.923).

Table 6 & Fig. 2, 3 show correlation of HIWP, organizational effectiveness and nurses' well-being at both study hospitals. There were statistical significant positive correlation between HIWP and organizational effectiveness. But there were no statistical correlation between HIWP and nurses well-being.

4. DISCUSSION

There are increasing body of facts that new systems of high involvement work processes (HIWP) occupy an important position in the attainment of positive organizational outcomes as organizational effectiveness and employees' outcomes as improving nurses' well-being⁽¹¹⁾. The results of the present study revealed that there was a statistically significant positive correlation between HIWP and organizational effectiveness at both study hospitals. HIWP provides the organization with the essential tools that enhance organizational effectiveness through sufficient authority and power, access of information, appropriate rewards and enough training to fulfill the job responsibilities, improve leadership abilities, staff development and performance improvement.

These results agreed with results of **Vandenberg, Richardson & Eastman**,⁽⁸⁾ who concluded that the HIWP affect organizational effectiveness both indirectly and directly through its positive effect on nurses morale. Moreover, effective organizations encourage nurses to do more than just the job through promoting the right team spirit; cooperating the right nurses at the right time with the right things⁽³⁸⁾. It could be related to that; the dimensions of HIWP are expected to constantly enhance nurses' skills, experience and knowledge which enable the organization to be productive and adaptable.

This also consistent with **Fey & Denison**,⁽³⁹⁾ who stated that high involvement work systems and practices play a key role in improving organizational effectiveness through achievement of long-term and short-term results at the organizational and individual level. Furthermore, high involvement organizations empower nurses, organize them around teams, and develop their capabilities. Thus, nurses at all categories know that their involvement in decisions will influence their work and have a direct link to the goals of the hospital⁽⁴⁰⁾.

This is the same view of **Cottini, Kato, & Westergaard**,⁽⁴¹⁾ who reported a direct connection between organizational effectiveness and perceived involvement climate; which composed of four features: information sharing, performance-based rewards, training, and participative decision making. Moreover, managers should give nurses proper power to participate in decision-making and perform their work effectively. Information about organization performance and goals should be participated with nurses. Finally, rewards that are attached to the desired performance standards are essential for enhancing required behaviors that contribute to the long-term effectiveness of the organization. Moreover, involved nurses are likely to have superior understanding regarding their viewpoint and the administration on various operational aspects of the work. This, in turn, can raise their approval of and believes in organizational goals and values⁽⁴²⁾.

Moreover, a truly effective organization is one that is productive, financially sound, and characterized by low turnover, and high quality services⁽⁵⁾. It makes a planned, concerted effort to ensure all interrelated parts of the organization are aligned strategically to accomplish the goals and mission. Additionally, HIWP is appreciated by hospital nurses because it enhances humanistic worth and it also confirms that the hospitals concerns with their well-being. It provides them with the necessary mix of skill development and autonomy which are highly valued resources⁽³³⁾. In this view, **Yan, & Wei Liub**,⁽⁴³⁾ stated that in high involvement organizations, nurses are accountable for and engaged in its achievement; they have more knowledge, work and participation. Moreover, they have rewards, power and training to practice at the highest level. Therefore, HIWP provides nurses with vital information and many chances for self- advancement that will enable even nurses at lower levels to begin to satisfy senior orders, such as those for challenge, recognition, support, independence and responsibility⁽⁸⁾.

The result of the present study indicated positive correlation between HIWP and nurses well-being at both study hospitals but not statistical significant. HIWP composed of human resource elements in order to enhance organizational performance and nurses' wellbeing through acquiring them training, knowledge, skills, and abilities that enhance their growth, help them to perform effectively and link reward with their performance. These results agreed with the results of **Vanhala, Bonsdorff, & Janhonen**,⁽⁴⁴⁾ who stated that, high involvement work practices as perceived by employees themselves were positively associated with various aspects of their well-being. Greater employee involvement has favorable outcomes such as work-life balance, organizational commitment, subjective well-being and job satisfaction.

These results also consistent with **Riordan, Vandenberg and Richardson**,⁽⁴⁵⁾ who stated that, the greater the realized climate for involvement, the higher the morale and well-being of the nurses, the powerful the financial performance of the organization and the lower the turnover rate. Furthermore, **Tung, Baird, and Schoch**,⁽²⁰⁾ stated that, when nurses at lower level are encouraged to take the initiative in determining their responsibilities and taking decisions considering environmental issues, they will be more motivated, accountable and committed to practices of environmental management.

Highly statistical positive relation was found between all items of HIWP with all items of organizational effectiveness and all items of nurses' wellbeing at both hospitals. It could be related to that; nurses at both hospitals have sufficient authority to fulfill their job responsibilities, are involved in achieving its vision and mission. Also, they have training and development programs that enable them to perform their job more effectively. In this respect, **Boxall and Winterton**⁽⁴⁶⁾ reported that high-involvement model is linked to rising levels of employee influence on designing work procedures and carrying out work process and job tasks. Advancement in working performance is more common in organizations where nurses are more involved in decision-making in groups or as individuals than in workplaces where their involvement is more restricted⁽⁴⁷⁾. HIWP has a key role in improving patient satisfaction and reducing medication errors and mortality rates. It has also been related to improved wellbeing outcomes in both the public and private sector⁽⁴⁸⁾.

Furthermore, HIWP is a system of inclusion based on four integral features (PIRK) giving nurses reinforced power to make decision related their work (P), pertinent information flows (I), rewards attached with organizational outcomes (R) and a chance to promote task - and organizational-related knowledge (K)^(6,68). So, the four features work as indicators of a higher order involvement. It has a direct effect on organizational effectiveness and an indirect effect on nurses' morale. This Workplace condition fosters a friendly and supportive work environment that empowers nurses to optimize work performance and enhance well-being and retention⁽⁴⁹⁾. The PIRK model also improves nurses' well-being through job enrichment which provides them with more meaningful jobs that enable greater levels of control and adequate feedback⁽²⁾.

Again, the findings of this study highlight the importance of PIRK practices in molding personal values through enhancing well-being elements which are: the ability to manage life and one's surroundings (environmental mastery), being open to new continued experiences (personal growth), a positive attitude toward one's past life and oneself (self-acceptance), high quality, satisfying relationships with others (positive relations with others), having life goals and a belief that one's life is meaningful (purpose in life), and a sense of self-determination, freedom from norms, and independence (autonomy)⁽⁵⁰⁾. Moreover, **Burnazi**⁽⁵¹⁾ stated that if employees experience strong morale and perceive the organization as caring about their well-being through empowerment, trust, knowledge sharing, and rewards, they will be less likely to engage in aggressive actions.

While these results disagreed with **Oppenauer**,⁽⁶⁾ who stated that the PIRK characteristics of HIWP in a work unit is positively related to higher levels of job responsibility and work overload which, in turn, affect employee well-being negatively⁽⁵²⁾. In this view, high involvement management reduces employee well-being by intensifying work and increasing the perceived level of stress⁽⁵³⁾. Additionally, **Wood et al.**,⁽⁵⁴⁾ and **Kilory et al.**,⁽²⁾ mentioned that, numbers of employees may overtly perceive high involvement management as a stressor, so their health and performance may be affected or they may leave the organization.

Bonet,⁽¹⁾ & **Wood et al.**,⁽⁵⁴⁾ stated that HIWP has varied results. It may have positive impact on nurses through higher salary and higher levels of satisfaction. Or, it may have a more negative influence, relating these processes to bad health outcomes. Accordingly, **Bockerman**⁽⁵⁵⁾ concluded that, high involvement system is positively linked to mental strain and employee perceptions of occupational risks but it is associated with decreased possibility of work accidents. This is related to increased job demands, which lead to more stress on nurses unless they can deal with these demanding duties in a best way.

The result discovered statistical significant differences between mean scores of reward, training and total scores of HIWP at both hospitals. Nurses were highly work involved, highly rewarded and trained in Main Mansoura Hospital than Health Insurance Hospital. It could be related to that, management in Main Mansoura Hospital welcomes input and ideas from nurses and encourages them to make and share in decisions that influence their daily activities. They also give them a real chance to develop their skills by implementing training and educational programs. In addition nurses at Main Mansoura

Hospital receive more recognition for doing a good job than in Health Insurance Hospital. These results agreed with **Felstead et al.**,⁽⁴⁷⁾ who found that, working in an organization where nurses involvement is increased has multiple probability that their work request them to learn on a permanent form.

Moreover, **Tung, Baird, & Schoch**⁽²⁰⁾ indicated that training in organizations clarify the relation between organizational goals and new initiatives, and offers a mechanism for nurses to realize, agree and feel satisfaction with these initiatives. In addition to that, HIWP are employee-centered practices. It treats staff as the most significant organizational resource. It identifies their developmental needs, inspiring them with respect, confidence, and pride, motivating them with high anticipation and trust in their ability to attain their goals, and by assisting them to look at old problems in modern manner and with new solutions⁽⁵⁾. Thus organizations that offer more training are capable of achieving higher effectiveness regarding administration practices. It also provides funds for innovative employees to keep moving the organization ahead.

These findings also agreed with **Burton**⁽⁵⁶⁾ who stated that, two vital causes that nurses should be motivated which are to attain both organizational and personal goals. Additionally, new administrative practices are useful for nurses' wellbeing through enriching their work and providing them with fairly rewards. Furthermore, organizations with rising levels of PIRK had powerful financial performance and decreased turnover rate than organizations with minimized levels of PIRK. So, the use of these practices increase nurses' opportunity to exercise direct voice over working methods, giving those more training and control over their work⁽⁵⁷⁾.

Regarding organizational effectiveness dimensions, the result stated that highly statistical significant differences between two hospitals, where nurses working in Main Mansoura Hospital were highly effective in work than nurses working in Health Insurance Hospital. Main Mansoura Hospital regularly measure organizational performance to meet the clients' needs. Its performance measures are shared regularly with staff and incentive plan to achieve the organizational objectives. Also, they have the materials and equipments needed to do their job effectively. In this same respect **Saleem and Sayej**⁽⁵⁸⁾ reported that the availability of facilities like protective clothing and equipment encourage the nurses to do their work in an effective way. These provide a safe and healthy workplace which ultimately affects patient's satisfaction and organizational effectiveness.

Moreover, **Basso et al.**,⁽¹⁸⁾ reported that organizational effectiveness is a systemic and systematic process to constantly developing an organization's performance, patient outcomes and performance capability. So, **Young et al.**,⁽⁵⁹⁾ mentioned that HIWP occupies a vital role in the accomplishment of organizational goals and organizational effectiveness.

In relation to nurses' wellbeing dimensions, highly statistical differences were found between two hospitals with all dimensions except autonomy and purpose in life. Nurses working in Main Mansoura Hospital were more wellbeing than others in Health Insurance Hospital. It could be related to that, nurses working in Main Mansoura Hospital feel they are responsible for the situation in which they live. So, they can manage several tasks of their daily life. They think life has been a permanent process of learning, growth and changing. Also, they feel confident and positive about themselves and they can trust others, and others can trust them. In this same respect, **Zhao, Liu, and Chen**⁽²⁴⁾ stated that nurse's well-being can be improved by having a reasonable payment system and a plan to provide professional growth to the nurses.

Taking an attention in nurses' health as a strong driver of workforce confidence and improving levels of wellbeing has been shown to be related to more sustained levels of performance and involvement⁽⁶⁰⁾. In this same respect, **Chartered Institute of Personnel and Development**,⁽⁶¹⁾ reported that, across all sectors, respondents in larger public organizations are more likely to report their organization has a standalone proactive well-being strategy than others.

The results of the present study indicated that there was statistical significant positive relation of education qualification with three variables of study at Main Mansoura Hospital and with HIWP and organizational effectiveness at Health Insurance Hospital (the higher qualification, the higher HIWP, the higher organizational effectiveness and the higher well-being). High qualified nurses have more information that enables them to participate actively in decision making, they take enough authority to act and make decisions on their work. Also, they have experiences that challenge how they think about themselves and the world. In this same line, **Felstead et al.**,⁽⁴⁷⁾ reported that for involvement to be effective nurses should develop their learning capacities and abilities to fully participate in decision-making processes. Greater experiences of sharing in decision-making and autonomy can enhance the nurses' sense of responsibility for outcomes and encourage them for learning and long-run health. It permits nurses to promote strategies to treat with particular situations, assists them to improve their skills and develop their personality generally⁽⁶²⁾.

This finding agreed with **Qu, & Wang**,⁽²⁶⁾ who found that nursing staff with an advanced technical title and nurses with educational background of a bachelor's degree or above had a higher level of life wellbeing and have a higher sense of happiness than the others. Education enhances the essence of task performance by giving nurses more procedural and declarative information with which they can accomplish their duties effectively⁽⁶³⁾. Accordingly, **Davis et al.**,⁽⁶⁴⁾ & **Kieft et al.**,⁽⁶⁵⁾ mentioned that effective nurses must continually invest in nursing knowledge and education and keep their mind open to fresh ideas and input.

The study result indicated that statistical significant relation of age with HIWP and organizational effectiveness at Main Mansoura Hospital, younger nurses were more involved and effective in work than older nurses. This finding is unexpected because the skills and knowledge necessary for organizational effectiveness are likely to be sharpened and strengthened over years of experience and learning. It could be related to that, young nurses feel that their supervisors cares for them as persons and if they perform their job well and they are likely to be promoted. They are interested in activities that will expand their horizons. Supervisors also helped them obtain further job-related training when they wanted it. They get pleasure from putting plans for the future and working to make them fact. Moreover, they feel that they have the opportunity to learn and grow. This finding agreed with **Ryff and Keyes**⁽²⁹⁾ who reported that well-being scores of the oldest respondents significantly lower than younger age groups especially personal growth and purpose in life dimensions.

In this same line **Madanchian et al.**,⁽⁶³⁾ indicated that, well organized and effective supervisors facilitate timely and excellence directions and training of subordinates to be able to perform their roles with positive organizational outcomes. Furthermore, **Burton**⁽⁵⁶⁾ mentioned that, cost related to loss of knowledge and experience is one of the most important nurses' assets. This cost could be lessened or avoided by motivating nurses by making them committed and involved to the organization.

Also, high statistical significant relation between marital status with HIWP and organizational effectiveness at Main Mansoura Hospital only. This means single nurses were highly involved in work process and highly organizational effectiveness than married nurses. It could be related to that, married nurses have more family responsibilities than single nurses. Therefore, they are often overwhelmed by these responsibilities and can't make work-life balance. In this same line, **Crane and Ward**⁽⁶⁷⁾ reported that successful and effective nurses recognize that practicing self-care on a daily basis and achieving a work-life balance is critical to their wellbeing and overall health and will make them more effective in the long run.

5. CONCLUSION AND RECOMMENDATIONS

The present study confirms that attributes of high involvement work practices are beneficial not only for the organizational effectiveness but also for nurses' wellbeing. They are key factors for improving patient care and are supposed to supplement other management innovations in health care. Based on the findings of the present study, the following can be recommended:-

- Identify nurses' developmental needs inspiring them with trust, respect, pride and high expectations in their capability to attain organizational goals.
- Develop, implement and maintain educational programs for future and current skills, interpersonal and technical skills of experienced and new hires nurses aimed at increasing their awareness of HIWP and enhancing their growth to perform effectively.
- Establishing a cohesive coordinated series of HIWP across the organization and consistently sharing nurses the PIRK.
- Constructing forums for nurses to promote and share ideas. Encouraging their active participation in the work process through teams and problem-solving groups.
- Creating a culture of high involvement work practices that support, promote and maintain staff health and well-being.
- Managers should share information about organizational performance and goals with nurses, giving them feedback on their work with patients to promote their well-being and give nurses decision-making power and proper authority to perform their tasks effectively.

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- Utilizing effective leadership styles that help nurses to improve their work-related autonomy, knowledge and skills.
- Linking the organizational reward system to the required performance standards that contribute to the organization's long-term effectiveness.
- Intervention study of high involvement work practices should be carried out in future research.

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