Job crafting and Adaptive Performance among Staff Nurses

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Abstract: Healthcare organizations started to pay increased attention to the concept of job crafting and adaptive performance especially among staff nurses, which considered the cornerstone of quality care with in health care organization. Aim: This study aimed to investigate the relationship between job crafting and adaptive performance among staff nurses. Research design: A descriptive correlational design was used. Setting: The study was conducted in Ain-Shams University Hospitals. Subjects: Two hundred and fifty staff nurses were included in the study. Tools of data collection: Job crafting scale and adaptive performance questionnaire were used to collect data for this study. Results: increasing structural job resources dimension of job crafting had the highest mean score. Meanwhile, the lowest mean score was decreasing hindering job demands. The training and learning effort dimension of adaptive performance had the highest mean score, while managing work stress and dealing with unpredictable work situations dimension had the lowest mean score. Slightly less than half of staff nurses had low level regarding adaptive performance. Conclusion: There was strong positive correlation between job crafting and adaptive performance among staff nurses. Recommendations: Organizations have to map out strategies for enhancing adaptive performance and permit nurses’ crafting to their jobs to improve quality, productivity and organizational success.

Keywords: Adaptive performance, Job crafting, Job demands -resources model, Staff nurses.

I. INTRODUCTION
Healthcare industry is in a period of rapid growth. Because of increasing economic, social and technological changes in Volatile, Uncertain, Complex and Ambiguous environment (VUCA) (Bakker & Van-Woerkom 2017). Facing changes in VUCA world, driven by events occurring in the larger healthcare system, workers need to be adaptive to adequately deal with the complexity and flexibility of their jobs and careers (Demerouti, Bakker & Halbesleben, 2015). Nurses should take initiative for their careers and craft their own work roles by navigating self-development opportunities, such as training and challenging assignments, rather than just relying on career paths determined by their organization (Kim & Beehr, 2017).

Today, since jobs are more complicated and challenging than in the past, it is important for employees to change the way they do work and job characteristics. Due to the fact that working within formal job descriptions is not enough today; it is expected that the employee will take more initiative and proactively contribute more to work environment (Karabey & Kerse, 2017). In healthcare, there is a growing awareness that recognizes the need for health care professionals to take a proactive role in shaping their future jobs to improve healthcare systems (Gordon et al., 2018).

One way to handle changes and challenges is job crafting, the process where employees act as active agents, shaping, redefining, and creating their job to ensure a good person–job fit in their work environment (Tims, Bakker & Derks, 2015). Job crafting is significantly pertinent from a practical view, because it indicates how health care professionals enhance the work environment and promote career competency, job performance and well-being (Bakker, 2017). Therefore, health care organizations should use nurses more efficiently and effectively by recognizing their individual variations and encouraging them to craft their jobs (Bipp & Demerouti, 2015).
Job crafting is the extent to which workers can redesign characteristics of their job. It has been referred to as "something that organizations can stimulate to improve the working conditions for their employees. It is a proactive behavior to make one’s own job more meaningful, engaging and satisfying and there by uses the potential of the employee’s own knowledge," as they know their own job best (Le Blanc et al., 2017). Job crafting is often classified as a proactive behavior as it reflects a self-initiated effort to bring about change in the meaning and identity of work (Wingerden & Niks, 2017).

According to (Tims, Bakker & Derks, 2015) job crafting was explained using the job demands -resources model (JD-R model), the concept is a multidimensional process. These researchers assessed job crafting in four dimensions: increasing structural job resources, increasing social job resources, increasing challenging job demands, and decreasing hindering job demands. Increasing structural job resources is an effort by employees to learn new things in their work and to improve their competence and professional skills. Increasing social job resources is the development of relationships with employees’ colleagues and direct managers. Increasing challenging job demands is actively researching proactive behaviors and interesting things in an employee's work. Decreasing hindering job demands is a way of proactively reducing employee job demands requirements (Wille, 2017).

Employees who exercise job crafting may devote their energy in changing their job characteristics to achieve the goals, they have a positive emotion which beneficial assets for organizations and they have the higher possibility to channel their enthusiasm towards their task performance (Tims, Bakker & Derks, 2016). Also, they can balance job demands and resources with their personal capacities and needs (Rudolph, Lavigne & Zacher, 2017). Job crafting will make employees happier and more involved in the work. It provides higher creativity, motivation and more effectiveness. In addition, people are more inclined to stay in a job where they have a say in defining their tasks and improve citizenship behaviors (Wong & Tetrick, 2017; Bavik et al., 2017). Additionally, it is enhancing wellbeing of the nurses, and improves job satisfaction (Yepes-Baldo et al., 2016). It plays an active role in the overcoming of the stress of the employee at work (Niessen & Jimmieson, 2016).

Organizations and managers are struggling to stay afloat and aligned in the volatile, uncertain, complex, and ambiguous nature of today's global business environment (Ellershaw et al., 2016). Likewise, health care sector is also confronting with these dynamics and develop quite fresh challenging environment to all employees to keep up their performance (Sakuraya et al., 2017). Adaptive performance refers to the ability of an individual to change his or her behavior to meet the demands of a new environment (Mang, Aondo, & Fada, 2016). Adaptive performance is considered as general intelligence, problem understanding, and problem solving constructs which make unique contributions to creative problem solving performance (Dustin et al., 2015).

The concept of adaptive performance is relevant to organizations that face especially complex and volatile business conditions (Eldor & Harpaz, 2016). Adaptive performance is important for the various roles of staff nurse as team member, and as member of the organization. Adaptive behavior contributes to effectiveness for three roles as main requirements of competent work performance (Javed, et al., 2016). Individual task adaptively (e.g. adjusting to new equipment and work processes), team member adaptively (e.g. respond constructively to team changes), and organization member adaptively (e.g. cope with changes the way the organization operates (Huang, Ran, & Blume, 2017).

However, all job crafting behaviors are part of a creative and improvised process that captures how individuals adapt their jobs. (Wong & Tetrick, 2017). Job crafting helps employees to adapt to uncertain and changing work conditions and is particularly viewed as a strategic advantage during organizational change (Goštautaitė & Bučiūnienė, 2015). The changes people make by crafting their jobs are also called adaptations (Gordona et al., 2018). One of the most characteristic features of job crafting is that it helps the employee adapt to changes at work in order to gain a more positive experience of the job. The degree to which individuals cope with, respond to, and/or support changes that affect them is called adaptive performance (Holman & Axtell, 2016).

**Significance of the study:**

Health care organizations required the contributions of highly performing individuals, in order to successfully attain their goals and achieve competitive advantage. Employee health and performance is a necessity for organizations’ functional capability. Organizations should acknowledge top-down leadership and bottom-up job crafting as drivers of employees'
health and performance. So, organizations should stimulate job crafting especially the behaviors 'seeking resources' and 'seeking challenges' that have beneficial effects on adaptive performance, and possibly on quality and productivity.

Additionally, it stimulates positive behaviors that spread around nurses in efficient way and devote their energy in changing their job characteristics to achieve the goals, and they have the higher possibility to channel their enthusiasm towards their performance which decreases nursing shortage, turnover while increasing work engagement and satisfaction and increase their ability to cope with stress and emergencies.

Researchers observed that, staff nurses can't manage work stress and dealing with unpredictable work situations effectively and inadequate reactivity in the face of emergencies and crisis. Through job crafting, staff nurses can cope with uncertainty and changes, and can adapt to challenges and constrains caused by their job. When staff nurses engage in job crafting, they can create ways to regain meaning in their work. So, researchers were interested to find out the relationship between job crafting and adaptive Performance.

**Aim of the study:**

This study aimed to investigate the relationship between job crafting and adaptive performance among staff nurses

**Research hypothesis:**

There is a relationship between job crafting and adaptive performance among staff nurses.

### II. SUBJECTS AND METHODS

**Research design:**

A descriptive co-relational design was used for carrying out this study.

**Setting:** The study was conducted at Ain Shams University hospitals. It includes four main hospitals namely, Ain Shams, El Demerdash, Obstetric and Gynecological and Pediatrics hospitals.

**Study subjects:**

The sample size included (250) out from (720) staff nurses, working in the above mentioned setting. Sample size was calculated using Open Epi, and taking into consideration that sample size was calculated with (5%) standard error at (95%) confidence level and a power of (80%).

\[
\text{Sample size } n = \left[ \text{DEFF} \times N \times (1-p) \right] / \left[ (d^2/Z^2) - \alpha/2 \times (N-1) + p \times (1-p) \right]
\]

*(Dean & Sullivan, 2013)*

A proportionate stratified random sample was obtained from staff nurses at different university hospitals as follow; (51) staff nurse from pediatrics hospital, (78) staff nurse from Ain Shams hospital, (51) staff nurse from Obstetrics and Gynecology hospital and (70) staff nurse from El Demerdash.

**Tools of data collection:**

Two tools were used for data collection, namely; Job Crafting Scale (JCS) & Adaptive Performance Questionnaire (APQ).

1- **The Job Crafting Scale (JCS):** This tool aimed to assess job crafting among staff nurses. It was developed by *(Tims et al., 2012)* and modified by the researcher. It comprises two parts:

   **Part 1:** Socio demographic sheet: It used to gather socio demographic data including years of experience, educational qualification, and marital status.

   **Part 2:** It consists of (21) items which divided into four subscales namely; increasing structural job resources (5 items), decreasing hindering job demands (6 items), increasing social job resources (5 items), and increasing challenging job demands (5 items).

   **Scoring system**

   Staff nurse response was scored on 5 point Likert scale. It ranged from one (never) to five (always).
2- Adaptive Performance scale:

It aims to assess adaptive performance among staff nurses. It was developed by (Charbonnier-Voirin & Roussel, 2012). It consists of (36) items categorized under five dimensions: solving problems creatively (5) items, Reactivity in the face of emergencies and crisis (7) items, Interpersonal, cultural and physical adaptability (10) items, Training and Learning effort (5) items, and Managing work stress and dealing with unpredictable work situations (9) items.

Scoring system:

Responses were measured on a five point likert scale as follow: Strongly agree = 5, Agree = 4, Neutral = 3, Disagree =2, strongly disagree = 1.

Tools validity:

Two types of tools validity were done namely face and content validity. It was ascertained by jury group consists of seven experts specialized in nursing administration and psychiatric mental health nursing. Jury group reviewed the tools to judge its clarity, comprehensiveness and accuracy. Their opinions were elicited regarding tools format, layout, parts and scoring system.

Tools reliability:

Internal consistency was done by Cornbach Alpha was (0.89) for job Crafting scale and (0.92) for Adaptive Performance Scale.

Pilot study:

Prior for field work a pilot study was conducted on (25) staff nurses. They represent (10%) of study subjects to examine the feasibility, practicability and clarity of the language. It also used to estimate time needed to fill the sheets which ranged between (25-35) minutes. Staff nurses who participate in the pilot study were excluded from the main study sample.

Field work:

The field work for this study extended through six months. It is started at the beginning of September 2018, and was completed by the end of February 2019. Researchers introduced themselves to staff nurses and simply explained the purpose of the study to staff nurses who agree to participate in the study. Data was collected two days per week in the presence of the researchers to explain any ambiguity. The method of filling out the sheet was explained prior data collection. The researchers collected data through meeting staff nurses in groups at the work place, at different times.

Ethical considerations:

Official permission to conduct the study was secured. Researchers clarified to staff nurses that participation was voluntary and anonymity was assured. Approval of each hospital director was taken first also suitable time for data collection was determined with each head nurse of the participated units and oral consent was taken from each participant. The participants were informed their right to withdraw from the study at any time and notified that data were collected for the purpose of scientific research only.

Statistical analysis:

Statistical Package for Social Sciences (SPSS) version 20.0 analyzing and scoring sheets were followed in tabulation and calculation. Data were presented using descriptive statistics in the form of frequencies and percentages for qualitative variables, and median, means ± standard deviations for quantitative variables. Pearson correlation was used for assessment of interrelationship among quantitative variables, to assess the relationship between job crafting and adaptive performance among staff nurses. The confidence level chosen for the study was 95%. The differences were considered significant if the p-value was less than 0.05 at the appropriate degrees of freedom.
Table (1): Socio demographic characteristic of staff nurses in the study sample (n= 250).

<table>
<thead>
<tr>
<th>Demographic characteristics</th>
<th>Nursing staff (n= 250)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Age</td>
<td></td>
</tr>
<tr>
<td>&lt;25</td>
<td>131</td>
</tr>
<tr>
<td>25-30</td>
<td>106</td>
</tr>
<tr>
<td>&gt; 30</td>
<td>13</td>
</tr>
<tr>
<td>Mean ± SD</td>
<td></td>
</tr>
<tr>
<td>Range</td>
<td></td>
</tr>
<tr>
<td>Years of experience</td>
<td></td>
</tr>
<tr>
<td>≤1-10</td>
<td>131</td>
</tr>
<tr>
<td>11-20</td>
<td>106</td>
</tr>
<tr>
<td>≥21-30</td>
<td>13</td>
</tr>
<tr>
<td>Mean ± SD</td>
<td></td>
</tr>
<tr>
<td>Range</td>
<td></td>
</tr>
<tr>
<td>Educational qualification</td>
<td></td>
</tr>
<tr>
<td>Diploma</td>
<td>42</td>
</tr>
<tr>
<td>High average</td>
<td>77</td>
</tr>
<tr>
<td>Bachelor</td>
<td>131</td>
</tr>
<tr>
<td>Marital status</td>
<td></td>
</tr>
<tr>
<td>Single</td>
<td>98</td>
</tr>
<tr>
<td>Married</td>
<td>147</td>
</tr>
<tr>
<td>Divorced</td>
<td>4</td>
</tr>
<tr>
<td>Widow</td>
<td>1</td>
</tr>
</tbody>
</table>

Table (1) shows the demographic characteristics of the study staff nurses in the study hospitals. As regard to the age, about 52.4% of staff nurses were in the age group less than 25 years old and 42.4% were age ranged from 25 to 30 years old. More than half of staff nurses in the study 52.4% held a bachelor nursing and 16.8% had diploma degree. As for years of experience in nursing profession, more than half of staff nurses in the study ranged from one to ten years of experience, and 58.8% of them were married.

Table (2) Job crafting dimensions as perceived by staff nurses (n= 250)

<table>
<thead>
<tr>
<th>Job crafting Dimension</th>
<th>Mean</th>
<th>±SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Increasing structural job resources</td>
<td>2.96</td>
<td>±0.72</td>
</tr>
<tr>
<td>2. Increasing social job resources</td>
<td>2.89</td>
<td>±0.68</td>
</tr>
<tr>
<td>3. Increasing challenging job demands</td>
<td>2.26</td>
<td>±0.72</td>
</tr>
<tr>
<td>4. Decreasing hindering job demands</td>
<td>2.12</td>
<td>±0.87</td>
</tr>
<tr>
<td>Total job crafting</td>
<td>2.52</td>
<td>±1.15</td>
</tr>
</tbody>
</table>

Table (2) illustrates that increasing structural job resources had the highest mean score. Meanwhile decreasing hindering job demands had the lowest mean score.
Table (3) Adaptive performance dimensions as perceived by staff nurses (n= 250)

<table>
<thead>
<tr>
<th>Adaptive Performance Dimensions</th>
<th>Mean</th>
<th>±SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>1- Solving problems creatively.</td>
<td>3.08</td>
<td>±1.15</td>
</tr>
<tr>
<td>2- Reactivity in the face of emergencies and crisis.</td>
<td>2.85</td>
<td>±1.38</td>
</tr>
<tr>
<td>3- Interpersonal, cultural and physical adaptability.</td>
<td>3.31</td>
<td>±1.26</td>
</tr>
<tr>
<td>4- Training and Learning effort.</td>
<td>3.33</td>
<td>±1.42</td>
</tr>
<tr>
<td>5- Managing work stress and dealing with unpredictable work situations.</td>
<td>2.46</td>
<td>±1.33</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>2.36</td>
<td>±1.26</td>
</tr>
</tbody>
</table>

Table (3) identifies that training and learning effort dimension of adaptive performance had the highest mean score, while managing work stress and dealing with unpredictable work situations dimension had the lowest mean score.

Figure (1): level of adaptive performance among staff nurses

![Figure 1](image)

Figure (1) shows that less than half (47.6%) of staff nurses had low adaptive performance level, while the minority (10%) of them had a high adaptive performance level.

Table (4): Correlation matrix between job crafting and adaptive performance dimensions.

<table>
<thead>
<tr>
<th>Adaptive performance</th>
<th>Solving problems creatively</th>
<th>Reactivity in the face of emergencies and crisis</th>
<th>Interpersonal, cultural and physical adaptability</th>
<th>Training and Learning effort</th>
<th>Managing work stress and dealing with unpredictable work situations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Job Crafting</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1-Increasing structural job resources</td>
<td>0.217*</td>
<td>0.170*</td>
<td>0.147</td>
<td>0.660**</td>
<td>0.130</td>
</tr>
<tr>
<td>2-Increasing social job resources</td>
<td>0.149</td>
<td>0.084</td>
<td>0.222*</td>
<td>0.216*</td>
<td>0.119</td>
</tr>
<tr>
<td>3-Increasing challenging job demands</td>
<td>0.790**</td>
<td>0.279**</td>
<td>0.181*</td>
<td>0.063</td>
<td>0.249**</td>
</tr>
<tr>
<td>4-Decreasing hindering job demands</td>
<td>0.111</td>
<td>0.383**</td>
<td>0.749**</td>
<td>0.461**</td>
<td>0.220*</td>
</tr>
</tbody>
</table>

(*)Statistical significant at p <0.05   (**) Highly statistical significant at p< 0.001

Table (4) illustrates that there were statistically significant positive correlation between adaptive performance dimensions and job crafting dimensions.
Table (5): Correlation between total staff nurses job crafting and their total adaptive performance.

<table>
<thead>
<tr>
<th>R</th>
<th>p. value</th>
</tr>
</thead>
<tbody>
<tr>
<td>0.89</td>
<td>000**</td>
</tr>
</tbody>
</table>

(**) Highly statistical significant at p< 0.001

Table (5) shows that there was highly statistically significant positive correlation between job crafting and adaptive performance.

Table (6): Co-relation between staff nurses’ socio-demographic characteristics and their job crafting; adaptive performance score.

<table>
<thead>
<tr>
<th>Variable</th>
<th>Staff nurses ( n= 250)</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Job crafting score</td>
<td>Adaptive performance score</td>
<td></td>
</tr>
<tr>
<td></td>
<td>R</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age</td>
<td>0.27</td>
<td>0.11</td>
<td></td>
</tr>
<tr>
<td>Sex</td>
<td>0.37</td>
<td>0.105</td>
<td></td>
</tr>
<tr>
<td>Marital status</td>
<td>0.324**</td>
<td>0.80</td>
<td></td>
</tr>
<tr>
<td>Educational qualifications</td>
<td>0.25</td>
<td>0.155</td>
<td></td>
</tr>
<tr>
<td>Years of experience</td>
<td>0.49</td>
<td>0.346**</td>
<td></td>
</tr>
</tbody>
</table>

Table (6): shows that there was statistically significant positive correlation between staff nurses' Job crafting and marital status. Also, there was highly statistically significant positive correlation between staff nurses’ adaptive performance and their years of experience.

IV. DISCUSSION

Under conditions of high uncertainty and rapid changing conditions, adaptation is fundamental for professionals to thrive in twenty-first century organizations (Jundt et al., 2015). Thus, in order to remain, professionals need to develop their self-regulatory capacity in a way that helps them maintaining and improving adaptive performance in rapid change and unpredictable work environments (Breevaart, et al., 2015; Lee, Willis & Tian, 2018).

Findings of the present study revealed that increasing structural job resources dimension had the highest mean score. This result could be due to the structural job resources is an effort by employees to learn new things in their work and to improve their competence and professional skills that help individuals to achieve their goals. Meanwhile, decreasing hindering job demands had the lowest mean score. This may be due to nurses will tend to lower their job demands when they observe that the demands have exceeded their capabilities and when nurses can't manage work and unable to minimize contact with people whose problems affect them emotionally. In line with this, (Dubbelt, Demerouti & Rispens 2019) emphasized present study results and found that Decreasing job demands was the lowest mean score which negatively affected work engagement, task performance, and career satisfaction. Meanwhile, (Van den Heuvel, Demerouti, & Peeters 2015) reported that increasing structural job resources had the lowest mean score.

Findings of the present study clarified that less than half of staff nurses had low adaptive performance level, while only the minority of them had a high adaptive performance level. This result may be attributed to lack of standardized nursing care besides lack of nurse manager support. This result was supported by (Huang, Ran & Blume, 2017) who reported that three quarters of staff nurses experienced low adaptive performance level. Similarly, the study implemented by (Jundt et al., 2015; Vogel, Rodell & Lynch, 2016) found that a very low percent of staff nurses had a high adaptive performance level.

The present study findings demonstrated that training and learning effort dimension of adaptive performance had the highest mean score. This may be attributed to the ability of staff nurses to demonstrate enthusiasm for learning new approaches and technologies for conducting work; doing what is necessary to keep knowledge and skills current and participate continuously in staff development program. This was supported by (Beck & Schmidt, 2018; Bhuvanaiah & Raya, 2015). Meanwhile, managing work stress and dealing with unpredictable work situations dimension had the lowest mean score. This result may be due to reaction of staff nurses with inappropriate and improper way and face difficult
circumstances or a highly demanding workload/schedule and response to unexpected news or situations; managing frustration well by directing effort to constructive solutions. Present results was supported by (Dubbelt, Demerouti & Rispens, 2019) who found that nurses prior to intervention by on job training program about the value of job crafting for work engagement, task performance, and career satisfaction had low adaptive performance related to managing work stress and dealing with unpredictable work situations, leading to lower career satisfaction. Meanwhile, the current study finding was disagreed with, (Calarco, 2016) who found that culture adaptability and interpersonal adaptability had the highest mean score but reported the same result concerning the ability to deal with work stress and physical adaptability had the lowest mean score.

The aim of the present study was to examine the relationship between job crafting and adaptive performance among staff nurses. The present study findings illustrate that there was a statistically significant positive relation between adaptive performance and job crafting among staff nurses, and this result support research hypothesis which was There is a relationship between job crafting and adaptive performance among staff nurses. This result may be due to the Job crafters may be better at fulfilling the job requirements and can create the work environment that is beneficial to them which in turn improve wellbeing and adaptive performance. In this same respect, (Wang, Demerouti & Bakker, 2017; Sohee & Sunyoung, 2019) demonstrated that there is a positive relation between employee job crafting and employee adaptive performance. By doing so, job crafting is a way to enhance job satisfaction since healthcare workers are allowed to redesign their job in order to make it more satisfying for them by adapting their performance. Applied to the healthcare sector, employee performance might be seen as the delivered care and will thus be higher when job crafting is implemented in the organization. Moreover, (Beck & Schmidt, 2018; Marques-Quinteiro, et al., 2015) argued that when there are high levels of perceived politics in the workplace, the relationship between adaptive performance and job crafting was positive.

On the same line, (Lichtenthaler & Fischbach, 2018) supported present results and ensured that job crafting had the strongest positive impact on adaptive performance through promotions or prevention focused ways. This finding was matched with (Bhuvanaiah & Raya, 2015; Bavik, Bavik & Tang, 2017) who ensured that employees are empowered to deal on their own with such challenging job demands. Also, (Tims, Bakker & Derks, 2016) found that employees who crafted their structural and social resources reported an increase in their adaptive performance, which in turn was positively related to increased job satisfaction. The overall picture of research on the outcomes of job crafting confirms its beneficial effects on both individual adaptive performance and organizational outcomes.

Another interesting result is that there was statistically significant positive relation between staff nurses’ job crafting and their marital status. This may be due to married nurses who feel emotionally stable are more likely to join into job crafting activities. They modify the way during perform their work or include tasks more related to their needs and abilities, and have positive personal relations with their co-workers. In addition to that married staff nurses have to deal with the present economic downturn coupled with the need to balance budgets with dwindling financial resources adds further burden on the nurses owing to the necessity of job crafting. This result was supported by (Bindl, et.al., 2018; Lazazzara, Tims & de Gennaro, 2019). On the other hand, the result of (Federici, Boon & Den-Hartog, 2019) who contradicted present study results and reported that single nurses are more likely to craft their jobs.

Lastly, the Present study results ensured that there was highly statistically significant positive relation between staff nurses’ adaptive performance and their years of experience. This result agreed with (Nijssen & Jimmieson, 2016; Shahidan, Abdul Hamid & Ahmad, 2018) who indicated that elder workforces with more years of experience have high adaptive performance level for two reasons. Firstly, they want to make their job more in line with their desires and capabilities. Secondly, they are likely to use their skills and capabilities near the end of their career in order to make considerable and consistent input. As a result, wellbeing and career development are enhanced.

V. CONCLUSION

The results indicated that increasing structural job resources had the highest mean score. Meanwhile the lowest mean score was decreasing hindering job demands. The training and learning effort dimension of adaptive performance had the highest mean score, while managing work stress and dealing with unpredictable work situations dimension had the lowest mean score. Slightly less than half of staff nurses had low level regarding adaptive performance. There was statistically significant positive correlation between job crafting and adaptive performance among staff nurses.
VI. RECOMMENDATIONS

Based on the study findings, the following recommendations were suggested:

1- Managers have to encourage job crafting as the perfect tool to adopt a supportive work environment that cultivates a healthy, engaged workforce.

2- Equip Supervisors and managers with job crafting strategies to create effective working environment for their subordinates which will lead to many positive outcomes.

3- Managers should attract and select persons during hiring new employees who are capable of crafting their jobs to deal effectively with the frequent world challenges and changes.

4- Management have to adopt Job-related factors affecting adaptive performance include decision-making autonomy, job demands, job resources, job uncertainty, and role change for nurses to increase their motivation and engagement.

1- Healthcare organizations have to provide Job resources which play a functional role in achieving work goals by reducing job demands and facilitating personal growth and development.

2- Conduct training programs and workshops on the principles of job crafting and adaptive performance.

6-Futher researches are suggested as

a) Influence of job crafting on work engagement.

b) Assess factors affecting adaptive performance.

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