

Nurses' Perception of Performance Appraisal and its effect on their Work Outcomes

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Abstract: Perception of nurses regarding performance appraisal had positive and negative effect on work outcomes such as organizational commitment, work performance, turnover intention, job motivation, and job satisfaction. **Aim of the study:** The present study aims to assess performance appraisal, work performance, commitment, and turnover intention as perceived by staff nurses and explore the effect of nurses' perception related performance appraisal on work performance, commitment, and turnover intention. **Subjects and Methods:** A descriptive correlational design was utilized to attain the aim of the present study. The study included (102) staff nurses who represent all staff nurses responsible for providing nursing care to patients at main Mansoura university hospital. Data were collected through using four scales; performance appraisal scale, work performance scale, affective commitment scale and turnover intention scale. **Results:** nurses' perception related performance appraisal, work performance, affective commitment was at high level and moderate level for turnover intention. Nurses' perception of performance appraisal has positive relation with work performance and affective organizational commitment and negative relation with turnover intention. **Recommendations:** Nursing performance appraiser should use a standard format for evaluating nurses' performance, it should be specific, accurate, and related to nurses' job and duties to prevent subjectivity and overcome problems as central tendency errors during performance appraisal process. Nurses should have feedback about their performance to help them to improve weakness area related to their performance

Keywords: Nurses' Perception, Organizational Commitment, Performance Appraisal, Turnover Intention, Work Performance, Work Outcomes.

1. INTRODUCTION

Performance appraisals have become central to the success of health care organizations. Therefore, having a performance appraisal system is important for managing a workforce effectively, by encouraging nurses to maintain their high level of performance and to motivate poor performers to improve eventually ensuring the sustainability and success of the organization (Torabi & Setodeh, 2010; Mani, 2002).

Performance appraisal is "a managerial process that links organizational objectives, performance standards and evaluation, to which the performance review are often applied" (Sudin, 2011). Performance appraisal has been defined as "a procedure to evaluate how nurses perform, how they can improve their performance and contribute to overall organizational performance" (Grubb, 2007). Performance appraisal can include many organizational processes such as performance measurement, objective formation, and reward management. Performance appraisal analyzes the shortcomings and achievements of nurses and estimates whether they deserve training or promotion in the future (Bekele, Shigutu, & Tensay, 2014).

Performance appraisal has two types; (1) Subjective in which the appraisers have to record details about the performance of subordinates and (2) objective which emphasizes on employee performance evaluation in term of quantity. In subjective performance appraisal process there is more room for the appraiser to distort the ratings whereas, the objective type of appraisal has less chances of distortion in the ratings. The most frequently considered reactions to the performance appraisal system are job satisfaction, motivation, organizational commitment and productivity (Pettijohn, Pettijohn, & d'Amico, 2001; Jawahar, 2006; Brown, Haytt, & Benson, 2010).

Nurses who perceive performance appraisal positively will reciprocate with positive attitudes and behaviors. On the other hand, negative experiences of the performance appraisal and hence, low performance appraisal satisfaction may lead to unwanted organizational outcomes such as lower organizational commitment, work performance and higher turnover intentions, which can be detrimental to the organization (Hannah & Iverson, 2004; ISMAIL & GALI, 2017).

Work performance in nurses can be viewed as the effectiveness of the nurse in carrying out his/her roles and responsibilities related to direct patient care (AbuAIRub, 2004). Borman and Motowidlo (1993) hypothesized that work performance can be divided into two distinct categories: task performance and contextual performance.

Task performance is defined as "behaviors that contribute directly to the organization's technical core and includes those activities that are typically recognized as part of a workers job". Contextual performance refers to "those behaviors that maintain the broader social environment in which the technical core must function". It includes more discretionary that assist the hospital to function. Task performance behaviors are delineated according to role requirements and should be identified through analysis of the job (Greenslader & Jimmieson, 2007).

Commitment can be defined as "a psychological force connecting an individual to a course of action of relevance to one or more targets" (Gulch, 2016). This bond can involve different mindsets, such as affective attachment and involvement with the target (affective commitment), felt obligation to the target (normative commitment), or perceived cost associated with interrupting involvement with the target. These three components reflect different types of attachment, and affective commitment in particular contributes to positive results such as increased job satisfaction and well-being among nurses (Huyghebaert et al., 2017).

Nursing turnover remains a challenging issue within the concerns for those in nursing management. Intentions for nurse turnover has been defined as the individual nurses' decision for leaving a nursing unit and perhaps even leaving the facility (Brewer et al., 2012; Toren et al., 2012).

High turnover in nurses are attributed to the high incidence of medical errors, adverse patient events, and errors, reduce staff morale, suppress their motivation to work, and eventually their productivity and the low quality of patient care. For the organization, turnover may impact the hospital budget as it entails the need for use of temporary overtime, orientation and training for new staff, continuous recruitment, advertising and hiring (Roche et al., 2015; North et al., 2013; Hayes et al., 2012; O'Brein-Pallas et al., 2010; Jones & Gates, 2007).

Significance of the study

Performance appraisal help nurses to identify their weak and strength area that related to their performance. Therefore, it will help nurses to enhance their knowledge and develop their competencies that will help them to provide quality of nursing care. Perception of nursing staff regarding performance appraisal had positive and negative effect on work outcomes such as organizational commitment, work performance, turnover intention, job motivation, job satisfaction and nurses' empowerment.

Nursing management needs to evaluate outcomes of nurses' performance appraisal to prevent negative outcomes as turnover intention and achieve positive outcome for health care organization such as maintain health care quality through satisfying needs of nurses and developing their abilities and skills. Therefore, this study aims to assess performance appraisal, work performance, commitment, and turnover intention as perceived by staff nurses and explore effect of nurses' perception of performance appraisal on work performance, commitment, and turnover intention.

2. AIM OF THE STUDY

The present study aims to assess performance appraisal, work performance, commitment, and turnover intention as perceived by staff nurses and explore the effect of nurses' performance appraisal on their work performance, commitment, and turnover intention.

Research questions

1. What is nurses' perception level regarding performance appraisal?
2. What is nurses' perception level regarding their performance?
3. What is nurses' perception level regarding affective commitment?

4. What is nurses' perception level regarding turnover intention?
5. What is the effect of nurses' performance appraisal on their work performance, commitment, and turnover intention?

3. SUBJECTS AND METHODS

The study design

The design of this study was descriptive correlational design.

The study setting:

The study was conducted at Main Mansoura University Hospital (MMUH) that provides a wide spectrum of health service at delta region and occupied with 1800 beds in twenty departments in addition to many units attached to the main building.

Study Subjects

The subjects of this study included all staff nurses (102) which represent staff nurses responsible for providing nursing care to patients in the predetermined setting during the time of data collection.

Tools of Data collection:

Data was collected through using questionnaire that included five parts as follows: (I) personal characteristics of nurses such as age, marital status, and experience years. (II) Performance appraisal scale, it developed by Bekele, Shigutu & Tensay (2014) to assess nurses' satisfaction regarding their performance appraisal system and, included 12 items such as "performance appraisal process help me to find out about my level of performance". (III) Work performance scale: it developed by Bekele, Shigutu & Tensay (2014) to assess nurses' perception related their performance and, included 10 items such as "I often perform better than what can be expected". (V) Affective commitment scale: It developed by Allen and Meyer (1990) to assess nurses' affective organizational commitment and, included 8 items such as "I feel 'emotionally attached' to my organization". (VI) Turnover intention scale: it was adapted from Bekele, Shigutu & Tensay (2014) and included (8) items to assess nurses' turnover intention such as "I often think about quitting my present job".

Scoring system:

The responses for the 38 items of three scales were on five-point Likert Scale (1=strongly disagree, 2= Disagree, 3= Neutral, 4= agree and 5= strongly agree). Total score of the three scale was classified into three levels; high > 75%, moderate 50%-75% and low <50% (Bekele, Shigutu, & Tensay 2014).

Pilot study:

Pilot study was included (10%) of the staff nurses from total study, after the development of the tools and before starting data collection to determine the applicability and clarity of the designed tool. It helped in identifying potential obstacles and problems that may encountered during period of data collection. It also, served to estimate time needed to fill the questionnaire. Nurses included in pilot study were excluded from the main study sample. Data obtained from pilot study were analyzed.

Validity and reliability

The data collection tools were reviewed by five professors in nursing administration to test face and content validity of these tools. The tools were tested for its reliability by using Cronbach alpha test; it was 0.9, 0.9, 0.9, and 0.8 for performance appraisal scale, work performance scale, affective commitment scale, and turnover intention scale respectively.

Ethical considerations and data collection and

The purpose of this study was explained to hospital director, head nurses of the units and participants. Written permission was obtained from the faculty of nursing, Mansoura University to the hospital director to carry out this study. Ethical approval was obtained from ethical research committee - faculty of nursing, Mansoura University. All subjects were informed that participation in the study is voluntary and oral consent was obtained from each participant in the study. Confidentiality of the collected data maintained. Subjects were informed that the content of the tools will be used for the

research purpose only. Participants had right to withdraw from the study at any time was ascertained. The actual field work started from the beginning of October 2018 to the end of December 2018 for collecting data.

Statistical analysis

The collected data were organized, tabulated and statistically analyzed using SPSS software (Statistical Package for the Social Sciences, version 21, SPSS Inc. Chicago, IL, USA). Data were presented using descriptive statistics in form of frequencies and percentages for qualitative data and mean & SD for quantitative data. For comparison between more than two means of parametric data, F value of ANOVA test was calculated. Correlation between variables was evaluated using Pearson's correlation coefficient (r). P- Value, which were less than 0.05 and 0.001 were considered as statistically significant.

4. RESULTS

Table (1) showed that mean age of the studied nurses and their experience were 34.40, 15.32 respectively, slightly more than half of them had diploma degree in nursing, and the majority of them were married.

Table (2) showed that work performance has the highest agreement (29.4%) by the studied nurses while turnover intention had the lowest agreement (7.8%) by the studied nurses, while performance appraisal had the highest mean (43.88± 8.91) and turnover intention had the lowest mean (19.39 ±4.53) as reported by the studied nurses.

Table (3) showed that nurses had highest level of satisfaction (93.1%) regarding their performance and lowest level (2.9 %) regarding turnover intention.

Table (4) showed that there was statistically significant relation between age of the studied nurses and their perception regarding performance appraisal. Regarding to nurses' commitment, there was statistically significant relation between nurses' commitment, their age and experience. Regarding to turnover intention, there was statistically significant relation turnover intention among the studied nurses and their education qualification and experience years.

Table (5) showed that there was statistically significant positive correlation between nurses' perception regarding performance appraisal, work performance, and affective commitment. But performance appraisal was statistically significant correlated negatively with turnover intention.

Table (1): Personal characteristics of the studied nurses (n=102)

Variables	No	%
<u>Age (years)</u>		
20-30	50	49.0
31-40	23	22.5
>40	29	28.4
Mean ±SD	34.40±10.08	
<u>Marital status</u>		
Single	4	3.9
Married	91	89.2
Widow	7	6.9
<u>Educational qualification</u>		
Bachelor degree	8	7.8
Technical institute	40	39.2
Diploma of nursing	54	52.9
<u>Experience years</u>		
1-5	20	19.6
6-10	21	20.6
>10	61	59.8
Mean ±SD	15.32±10.01	

Table (2): Performance appraisal, work performance, affective commitment and turnover intention as perceived by the studied nurses (n=102).

Variables	Strongly disagree (1)		Disagree (2)		Sometimes (3)		Agree (4)		Strongly agree (5)		Mean ±SD
	n	%	n	%	n	%	n	%	n	%	
Performance appraisal	2	2.0	18	17.6	10	9.8	56	54.9	16	15.7	43.88± 8.91
Work performance	0	0.0	5	4.9	3	2.9	64	62.7	30	29.4	41.69 ±5.42
Affective commitment	8	7.8	16	15.7	13	12.7	46	45.1	19	18.6	28.13± 7.27
Turnover intention	21	20.6	48	47.0	8	7.8	17	16.7	8	7.8	19.39 ±4.53

Table (3): Levels of performance appraisal, work performance, affective commitment and turnover intention as perceived by the studied nurses (n=102).

Variables	Low (<50%)		Moderate (50%-75%)		High (>75%)	
	No	%	No	%	No	%
Performance appraisal	8	7.8	36	35.3	58	56.9
Work performance	3	2.9	4	3.9	95	93.1
Affective commitment	12	11.8	44	43.1	46	45.1
Turnover intention	47	46.1	52	51.0	3	2.9

Table (4): Mean scores of performance appraisal, work performance, affective commitment and turnover intention in relation to personal characteristics of the studied nurses (n=102).

Variables	Performance appraisal	Work performance	Affective commitment	Turnover intention
	Mean±SD	Mean ±SD	Mean ±SD	Mean ±SD
Age (years)				
20-30	42.18±9.54	42.80±5.09	25.64±8.06	20.42±5.38
31-40	42.65±8.84	40.17±6.94	27.65±4.97	18.78±3.93
>40	47.79±6.59	41.00±4.25	32.82±4.86	18.10±2.74
F value / P*	4.16 / 0.01**	2.23 / 0.11	10.75 / 0.000**	2.75 / 0.06
Marital status				
Single	49.50±9.98	46.50±3.41	31.25±6.02	19.25±1.50
Married	43.35±8.90	41.35±5.53	27.71±7.38	19.49±4.71
Widow	47.57±7.50	43.42±3.04	31.85±5.45	18.14±3.18
F value / P*	1.57 / 0.21	2.15 / 0.12	1.44 / 0.24	0.28 / 0.75
Educational qualification				
Bachelor degree	43.50±10.81	44.37±3.70	27.00±8.79	16.25±4.23
Technical institute	43.77±9.93	41.75±6.52	28.50±8.15	20.75±4.47
Diploma of nursing	44.01±7.95	41.27±4.64	28.03±6.44	18.85±4.35
F value / P*	0.01 / 0.98	1.14 / 0.32	0.15 / 0.86	4.36 / 0.01**
Experience years				
1-5	43.25±8.53	43.25±4.01	24.70±8.57	21.30±5.52
6-10	43.57±10.07	41.09±6.06	26.57±9.02	20.00±5.85
>10	44.17±8.74	41.39±5.57	29.80±5.56	18.55±3.39
F value / P*	0.99 / 0.90	1.04 / 0.35	4.62 / 0.01**	3.11 / 0.04*

*P<0.05 / **P<0.01

Table (5): Correlation between performance appraisal, work performance, affective commitment and turnover intention among the studied nurses (n=102).

Variables	Performance appraisal	
	r	p
Work performance	0.23	0.01**
Affective commitment	0.67	0.000**
Turnover intention	-0.24	0.01**

**P<0.01

5. DISCUSSION

To achieve the aim of the current study, the findings will be demonstrated through two parts

I. Nurses' perception of performance appraisal, work performance, commitment and, turnover intention and its relationship with their personal characteristics.

Regarding nurses' perception of performance appraisal; the present study revealed that two third of the studied nurses were agreed about performance appraisal system and slightly more than half of them had high satisfaction level about performance appraisal system. This may be due to nurses' performance appraisal was fair, unbiased, provide nurses with feedback about weak and strength area regarding their performance and recognition for good model of nurses.

These results agreed with Moradi, Mehraban, & Moeini (2017) noted that less than half of the staff nurses had a positive perspective toward the performance appraisal. Ghamari Zare et al., (2013) reported that more than half of the nursing staff stated that performance appraisal was satisfied and essential. Also these finding in accordance with Vasset, Marburg, & Furenes, (2011) who revealed that nurses were satisfied about performance appraisal and they perceived it as a learning tool. Torabi and Setodeh (2010) showed that less than half of the staff had a positive view regarding the implementation performance appraisal method.

These results disagreed with Jahangiri (2000) reported that more than half of employees were not satisfied with the performance appraisal. Also Timmreck (1998) reported that employees had strong negative feelings toward performance appraisals. The present study revealed that there was a significant relationship between performance appraisal of the studied nurses and their age. This may be due to nurses with old age had experience about performance appraisal and had ability to satisfy the standard of required care.

Regarding nurses' performance; the present study revealed that majority of the studied nurses agreed and highly satisfied level about their performance. This may be due to nurses expend a great deal of effort and work hard to carry out their nursing duties, perform better than what can be expected from them. The results agreed with Vahidi, Areshtanab, Bostanabad (2016) reported that nurses' perception of job performance was above moderate level. AlMakhaita, Sabra & Hafez (2014) and Kelley et al. (2013) reported that nurses' job performance level was high. These results agreed with Ingersoll et al. (2002) reported that nurses in critical care units and medical surgical specialty areas had the highest level of job performance. These results disagreed with the studies of Bakr & Safaan, (2012) & Yuxiu, Kunaviktikul, & Thungjaroenkul (2011) which showed that nurses' perception of job performance is moderate and low. Also it disagreed with Kanamori et al (2011) revealed that the majority of the studied nurses were not met the required standard of patient care. The present study revealed that there was no relationship between nurses' performance and their personal characteristics such as age, marital status, educational qualification and experience years. These results in accordance with Amarneh, Abu Al-Rub & Abu Al-Rub (2010) who found that there was no significant relationship between nurses' performance, their marital status and, educational qualification. This findings disagreed with Amarneh, Abu Al-Rub & Abu Al-Rub (2010) reported that there was relationship between nurses' job performance, their age and experience years.

Regarding nurses' commitment; the present study revealed that more than half of the studied nurses agreed about their affective commitment and slightly less than half of them had high affective commitment level. This may be due to nurses found their work more purposeful, personal goals are in compliance with their hospitals' values and they may have greater

connectedness with their co-workers. Nurses' affective commitment act as indicator for nurse manager. Thus, assessing the commitment levels among nursing staff members are imperative for nurse managers to better understand what motivates nurses (Zangaro, 2001). In nursing, role stress, job rotation, communication management, and external activity have been related with organizational commitment (Chang & Chang, 2009; Ho et al., 2009). These results agreed with Brunetto et al (2013) found that about half of nurses' commitment to their hospitals. These results disagreed with Labrague et al (2018) who reported that Philippine nurses were moderately committed to their hospital.

The present study revealed that there was a significant relationship between nurses' commitment, their age and experience. These results agreed with Labrague et al (2018) reported that nurses' age, education, experience correlated significantly with organizational commitment. Jafari et al (2015) revealed that there was relationship between nurses' age and their organizational commitment.

Regarding nurses' turnover intention; the present study revealed that a quarter of the studied nurses agreed about turnover intention and half of them had moderate level of turnover intention. This may be due to ineffective communication between nursing staff and managers, low salary, utilizing inappropriate leadership style and high workload. These results agreed with Mosadeghrad (2013) found that more than quarter of nurses stated that they are considering leaving the hospital, if they could find another job opportunity. It also agreed with Jaw, Akkadechanunt, & Wichaikhum (2016) who found that the overall level of turnover intention among nurses was at high level.

The present study revealed that there was a significant relationship between nurses' turnover intention, educational qualification and experience years. These results agreed with Al-Hussami et al. (2014) who revealed that there was relationship between nurses' turnover intentions and their experience. These results disagreed with Royer (2011) found that nurses' ages were found to significantly influence their turnover intentions. Also these finding disagreed with Shader et al. (2001) reported that nurses' age was significant predictors of nurses' intention to quit

II. Relationship between Nurses' perception of performance appraisal, work performance, commitment and, turnover intention

The present study revealed that there was a significant relationship between nurses' performance appraisal, and their performance. Rahman and Shah (2012) suggested conducting performance appraisals as a way to boost job performance and improve organizational effectiveness. This study agreed with Kuvaas (2006) who reported that an effective performance appraisal system can motivate employees, increase job performance, increase job satisfaction, and provide feedback to employees. Shrivastava and Purang (2016) explored the perception of fairness within performance appraisals affect work performance among employees. Bekele, Shigutu, & Tensay, (2014) found that employees' perception of performance appraisal practice had positive and significant relationship with work performance. Monis and Sreedhara (2010) reinforced that performance appraisals influence employee behavior and that positive satisfaction with appraisals lead to overall job satisfaction resulting in enhanced performance.

The present study revealed that there was a significant relationship between nurses' performance appraisal and their organizational commitment. When the perception of the performance appraisal is negative, an observable inconsistency occurs that can lead to a lack of job satisfaction and commitment, demotivation, and increase turnover intentions (Sudin, 2011;Jawahar, 2006). Bekele, Shigutu, & Tensay, (2014) found that employees' perception of performance appraisal practice had positive and significant relationship with affective organizational commitment. Ahmed et al. (2013) found that employees' performance appraisal perceptions positively influenced job reaction, organizational commitment, and satisfaction if those employees viewed their performance appraisal as fair. Iqbal (2012) revealed that performance appraisals have a strong relationship with employees' increase of satisfaction and organizational commitment. These finding in accordance with Brown et al. (2010) who found that employees with low perceptions of the performance appraisal experienced low organizational commitment and job dissatisfaction.

The present study revealed that there was a significant negative relationship between nurses' performance appraisal, and their turnover intention. Sharma, Sharma & Agarwal (2016) suggested that better understanding the performance appraisal and how it is perceived can lead organizations to create better systems that lead to positive outcomes, such decrease retention. These findings agreed with Nawaz and Pangil (2016) who revealed that performance appraisal have a significant negative relationship with turnover intention. Rubel & Kee (2015) & Bhalla & Giri (2014) there is a significant negative correlation between how nurses perceive performance appraisals and their intention of leaving the organization.

Bekele, Shigutu, & Tensay, (2014) found that employees' perception of performance appraisal practice had negative significant relationship with employees' turnover intention. Arshad, Masood, and Amin, (2013) reported that there was relationship between perceptions of performance appraisals and turnover intentions.

6. CONCLUSION

It was concluded from the present study that:

Perception of the nurses regarding to their performance appraisal, work performance, affective commitment was at high level, and turnover intention was at moderate level. Nurses' perception of performance appraisal has positive relation with work performance and affective organizational commitment and negative relation with turnover intention.

7. RECOMMENDATIONS

1. Nursing performance appraiser should use a standard format for evaluating nurses' performance, it should be specific, accurate, and related to nurses' job and duties to prevent subjectivity and overcome problems as central tendency errors during performance appraisal process.
2. Nurses should have feedback about their performance to help them to improve weakness area related to their performance
3. Nurse Managers should have feedback about nurses' performance to reward nurses with their good performance.
4. Nurse Manager should develop training programs based on performance appraisal feedback to improve nurses' skills and abilities.

Further nursing research

Nursing research should explore the other predictors of organizational commitment to maintain its positive outcomes as job satisfaction and maintain nurses' well-being. Also it should explore factors affecting nurses' performance and predictors of nurses' turnover to prevent negative consequences of turnover and maintain quality of patient care

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