Vol. 8, Issue 3, pp: (148-158), Month: September - December 2021, Available at: www.noveltyjournals.com

Nursing Personnel' Perception about Magnetic Hospital Forces

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Abstract: The organizational system that attracts nurses to Magnet hospitals have found to be consistently and significantly associated with quality care significantly associated with better patient outcomes. Also, the Magnet hospitals shared certain organizational characteristics that served to promote professional nursing practice. Aim of the study: Was to assess nursing personnel' perception about magnetic hospital forces. Design: A descriptive design was utilized in conducting this study. Setting: At a private hospital, Cairo, Egypt. Subjects: All available nursing personnel's working full time at in-patient units with total number of nurses was (200). Tools of data collection: One tools namely nursing personnel' perception about magnetic hospital questionnaire. Results: The study findings revealed that, the majority percentage (88.5%) of the studied sample were satisfied about; nursing leaders have authority and accountability on all nursing practices. Also, the majority percentage (89.5) % of the studied sample was satisfied about the organizational structure of the hospital shows the responsibilities and communication channels clearly. Conclusion: There was statistically significant deference (P < 0.05) in all magnetic hospital forces (Transformational leadership, structural empowerment, exemplary professional practice, new knowledge and innovation and improvements, empirical quality). Recommendations: Assess nursing leader needs in conflict resolution strategies between nursing team members and physicians. Further, assessment of magnet hospital forces in governorate sector. Improve a design tools for nursing work environment in magnet hospitals.

Keywords: Magnet hospital forces, Magnet recognition and Professional work environment.

I. INTRODUCTION

In today's highly competitive healthcare environment, and with the high requirements of safe, efficient, effective, and timely patient centered care demonstrated by healthcare providers the magnet status provides a system for organizing the nursing care processes (*McCaughey*, 2020).

Magnet status is not an award; it is a credential of organizational recognition of nursing excellence. According to American Nurses Credentialing Center, magnet status is a worldwide recognition awarded of hospitals that have the highest quality of nursing care. Additionally, the magnet connotation is an organizational performance influences the behavior of nurses, so that they choose to stay in the health care organization (*Haller, et al., 2018*).

Magnet reflects the highest recognition of excellence in the delivery of nursing service provided in a professional practice environment, which promotes quality and evidence based practice and result in positive patient outcomes .Healthcare organizations striving for the achievement of nursing excellence in professional practice through including and supporting magnet recognition elements and forces in their strategic plan. It also reflects the way that patients seek objective benchmarks that will aid them in finding a hospital with a higher level of care (*Hamadi, 2021*).

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Magnet nurse's work environment is defined as the workplace that is able to attract and retain professionally qualified nurses to provide quality healthcare services (*Alshahrani, et al., 2018*). This environment consists of characteristics that help in maintaining the standards of nursing practice as well as provide high quality of patient's care services which consequently helps to achieve organizational goals, better outcomes, and high level of nurses' performance (*L'Ecuyer, 2019*). Nursing work's environment has been a major subject for research since 1980 and widely studied in the nursing literature. It has received high attention globally because of the redesign and restructure of healthcare systems in many different countries during the last two decades (*Mohr, 2018*).

American Nurses Credentialing Center refers to magnetic environmental as the environment that achieves patient safety, reduce medical error rates, eliminating nursing shortage, increase consumers' satisfaction, attract the best of the best in all disciplines, provide low nursing staff turnover rates and improve their feeling of satisfaction throughout the organization. It demonstrates a high performance of attraction and retention of high quality nurses. These hospitals create a working environment that supports the staff nurse and superior nursing practice to achieve optimal patient outcomes (*Melanie, 2018*).

Worldwide, the development of magnet hospitals has become the trend for solving the nursing shortage, and it has been viewed as the gold standard for nursing excellence. Many countries face difficulties in attracting and retaining nursing staff. Nurses are vital members of the health care team, their clinical knowledge, skills, and engagement are essential to the promotion and health maintenance of society (*Lasater, 2019*).

Nurses play an important role in patient care in hospital organizations. Their ability to provide excellent patient care is influenced by the health of the work environment, defined as the extent to which they can engage in professional practices identified as essential to quality patient outcomes, this significance reflects in job satisfaction. Further, the theory of nursing as caring relates to job satisfaction as it relates that nurses must believe they are caring and others are caring rather than just an instrument used by an organization in order to be satisfied in their job. Many of the magnetic forces focus around the nurses' feelings of value in an organization (*Holmberg, et al., 2018*).

Nurse staffing, education, and work environment are the pillars that lend to the superior patient outcomes evident in Magnet hospitals. Magnet hospitals have a higher rate of nursing satisfaction, lower turnover, and a higher percentage of nurses with graduate degrees and national certification. To achieve Magnet status, hospitals must demonstrate a high standard of excellence in five areas: Transformational leadership: Supporting and advocating for patients and staff, and having strong nursing leaders at every level (*Iheduru-Anderson, 2021*).

Significance of the study

A magnet work environment which are major for providing job satisfaction, increase work productivity that is essentials for patients and hospitals outcomes because magnet refers to attracting and retaining quality nurses and the ability of creating a work environment that recognizes and rewards professional nursing practice and this designation fosters a positive work environment and a sense of pride among the nurses. The core values of magnetism include empowerment, pride, mentoring, respect, nurturing, integrity and teamwork and it helps to improve nursing administrator's leadership tools necessary to enhance healthy nursing work environment (*Melanie, 2018*).

Nurses actively involved in assessing and improving care to bring about quality improvements with positive image of nursing across the organization so nurses feel valued and respected. Magnet program it is strong emphasis on personal, professional growth and staff development. Also, interdisciplinary relationships characterized by shared decision making and mutual respect (*Carthon, et al., 2021*).

So, it is important to assess nursing personnel' perception about magnetic hospital forces in health services sectors, to highlight dimensions and factors are important to support and may help in improving the quality of nursing care, and achieving excellence in nursing profession.

Aim of the study:

The aim of this study was to assess nursing personnel' perception about magnetic hospital forces.

Research question:

Are the nursing personnel perceive magnetic hospital forces?



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II. BODY OF ARTICLE

Subject and Methods

- I. Technical Design.
- II. Operational Design.
- **III.Administrative Design.**

IV.Statistical Design.

I. <u>Technical Design</u>

The technical design for the study includes; research design, setting of the study, subjects, and tools of the data collection.

Research Design

A descriptive design was utilized in conducting this study.

<u>Setting</u>

The study was conducted at a private hospital, Cairo, Egypt. It is organized into the following units: inpatient, intensive care, emergency, outpatient, operations, recovery, cardiac catheterization, laboratory, pharmacy, blood bank and others. The study was conducted at inpatient units in the selected hospital, day care has (10) rooms, 7th floor has (30) rooms (4 rooms double) and (26 rooms single) with total number of (34 beds). 8th floor has (41) rooms, and 9th floor has (8 rooms) double and (32) rooms single with total number of (48 beds).

<u>Subjects</u>

The subjects of this study were all available nursing personnel's working full time at in-patient units with at least one year of experience were included in the study total number of nurses were (200).

Tools of Data Collection

The data for this study was collected using one tool namely **Nursing personnel' perception about magnetic hospital questionnaire** consisted of two parts as the following:

Part 1: Personal characteristic of the participants such as: (Age, gender, qualification and years of experience).

Part 2: Nursing Personnel' perception about Magnetic Hospital Questionnaire: It was developed by (Sharma, 2019) which based on (**Pischke-Winn, et al., 2013**) and modified by the investigator to determine the nursing personnel' perception about magnetic hospital forces. This tool was consisted of five dimensions namely; (Transformational leadership, structural empowerment, exemplary professional practice, new knowledge, innovation and improvements and empirical quality result).

Scoring system: Total nurses perception was classified into (**Unsatisfied** if the total score was less than 60 % and consider low) and (**Satisfied** if the total score was equal 60% or more and consider high).

Validity of the Instrumentation:

Validity of the tool was done namely face validity (include format, layout and clarity of parts) and content validity (to determine the appropriateness of each item to be included in the questionnaire sheet. It was translated into Arabic and was tested by a jury group of three experts specialized in nursing administration (1 professor, 1 assistant professor and 1 lecturer) from Faculty of Nursing, Ain-shams University and Helwan University through using an opinionnaire sheet to measure the validity of the tool. Minor modifications were done based on the jury recommendations.

Reliability of the tools:

It was tested using Cronbach's alpha coefficient to determine the extent to which the questionnaire items were related to each other. Test of reliability for Magnetic Hospital Questionnaire yield Cronbach's alpha showed (0.86). Statistical equation of Cronbash's alpha reliability coefficient normally ranges between 0 and 1, higher values (more than 0.7) this indicates that both instruments were showed an excellent reliability.

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Ethical Consideration:

Prior study conduction approval was obtained from the Scientific Research Ethical Committee in faculty of nursing, Helwan University in addition an approval was obtained from the manager of El-Salam international Hospital for data collection.Verbal approval obtained from the nurses before conduction of the study to assure that anonymity and confidentiality would be guaranteed and to secure that all the gathered data was confidential and used for research purpose only. The nurses informed that, they are allowed to choose to participate or not in the study and they have the right to withdraw from the study at any time. Ethics, values, culture and beliefs were respected and the study subjects were informed about research purpose.

II. Operational Design:

The operational design includes preparation phases, validity and reliability of the tool, pilot study and the field work.

The Preparatory Phase

It included reviewing of past, current, national and international related literature and theoretical knowledge of various aspects of the study using books, articles, internet, periodicals, journals and magazines to develop tools for data collection.

Pilot Study

After reviewing of the tools by the experts, the investigator conducted a pilot study before administering the final questionnaire. The purpose of the pilot study was to ascertain clarity, relevance, applicability of the study tool and to determine obstacles that may be encountered during data collection. It also helped to estimate the time needed to fill the questionnaire tool. The pilot study was carried on (20) nurses which presented (10%) of the sample size and excluded from the main study sample to fill out the questionnaire. Based on the result of the pilot study, rephrasing of some questions was done to ensure clarity of the questions and to be easily understood by nurses and the final version was proposed for distributing to the nurses.

Fieldwork

The actual fieldwork started at the beginning of February 2020 after securing all official permissions. It was completed by the end of July 2020. The investigator met the hospital manager of Al- Salam hospital and nursing director to explain the aim of the study to gain the official written consent, then the investigator collected data through meeting the nurses, before beginning to collect data from the study subject, the investigator introduced herself to them, explained the aim of the study, obtained a verbal consent to participate in the study, and informed them that, their information will be treated confidential and will be used only for the purpose of the research, additionally, each participant was notified about the right to accept or refuse to participate in the study. Then the investigator estimate the time needed by the nurses to complete the tool was ranged between (20 to 30 minutes) and checked the completeness of each field in the questionnaire sheet after the study subject complete it to insure absence of any missing data. Questionnaire sheet was completed by the investigator from each nurse (3 days / week, from 9 am -2pm).

III. ADMINISTRATIVE DESIGN

To carry out the study, official letters were issued from the Faculty of Nursing Helwan University. The investigator introduced official letter to manager of Al-Salam hospital, explained the aim and objectives of the study to get nursing and medical official written consent to conduct the study. The investigator also explained the aim of the study to obtain the individual oral consent from each nurse in the study.

IV. STATISTICAL ANALYSIS

The data obtained were synthesized, analyzed, and presented in the form of tables and figures using the Statistical Package for Social Sciences version 20.0 (SPSS). Qualitative variables were presented in the form of frequencies and percentages; quantitative variables were presented in the form mean and standard deviation. Test of significance was used to compare between two groups. Chi-square (x2) statistical value used to measure how a model compares to actual observed data. Spearman's rank correlation coefficient (r) was used to assess the degree of significant association between

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two sets of variables, if one or both of them was skewed. T-Test was used to compare between means of two groups of parametric data of independent samples. The confidence interval was set to 95% and the margin of error accepted was set to 5%. So, the p-value was considered significant as the following:

- P value <0.05 was considered significant.
- P value <0.001 was considered as highly significant.
- P value >0.05 was considered insignificant.

V. RESULTS

Table 1: Distribution of personal characteristics (age, gender, qualifications, and experience) among the study nurses (n =200).

Person	al Characteristics	No.	(%)			
Age:						
	-Less than 25 years	125	62.5			
	-25-35 years	56	28			
	-More than 35 years	19	9.5			
	Mean ± SD	1	.47 ± 0664			
Gender:						
	-Male	107	53.5			
	-Female	93	46.5			
Qualification:		•				
	-Nursing Bachelor	151	75.5			
	-Technical nursing institution	49	24.5			
Years of Experience:						
	-Less than 5 years	141	70.5			
	-5-10 years	45	22.5			
	-More than 10 years	14	7			
	Mean ± SD	1.37 ± 0.611				

Table (1): This table displays that, distribution of studied sample according to their personal characteristics. As showed in this table about two thirds (62.5%) of the studied sample were less than 25 year, while mean scores and standard deviation (1.47 ± 0.664) . Also, more than half (53.5%) of them were male, while less than half of them (46.5%) were female. additionally, about the three quarters (75.5%) of them had bachelor degree while one quarter (24.5%) of them were had Technical Nursing Institution. Furthermore, about more than two thirds (70.5%) of them had less than 5 years of experience with mean scores and standard deviation (1.37 \pm 0.611).

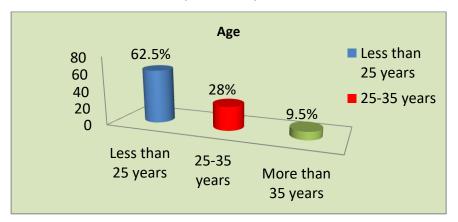


Figure 1: Distributions of personal characteristics (Age) among the studied nurses.

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Figure 1. Displays that, distribution of personal characteristics (Age) among the studied nurses, which presents that, the lowest percentage (9.5%) of them were more than 35 years, while more than three fifths (62.5%) of the studied sample had less than 25 year, while mean scores and standard deviation (1.47 ± 0.664) .

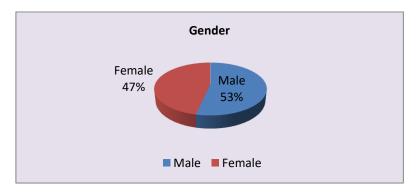


Figure 2: Distribution of personal characteristics (Gender) among the studied nurses.

Figure 2. Illustrates that, distribution of personal characteristics (Gender) among the studied nurses, which shows that, about two fifths (47%) of the studied sample were females, while about more than half (53%) of them were males.



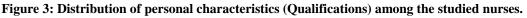


Figure 3. Shows that, distribution of personal characteristics (Qualifications) among the studied nurses, which reveals that, about the three quarters (75.5%) of the studied sample had bachelor degree of nursing, while the lowest percentage (24.5%) of them had Technical institute degree of nursing.



Figure 4: Distribution of personal characteristics (Years of experience) among the studied nurses.

Figure 4. Reflects that , distribution of personal characteristics (Years of experience) among the studied nurses, which plays that, more than two thirds (70.5%) of the studied sample had less than 5 years of experience, while lowest percentage (7%) of them had more than 10 years of experience, and mean scores and standard deviation (1.37 ± 0.611) .

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Table (2): Perception of nursing personnel' regarding the 14 Magnetic Hospital Forces (n=200).

		Satisfa	iction	Unsatisfaction		
Domain	Items	No.	%	No.	%	
1- Transformational	1-Quality of Nursing Leadership	148.7	74.4	51.3	25.6	
leadership	2-Management Style	155	77.5	45	22.5	
	Total	151.85	75.93	48.15	24.08	
	3-Organizational Structure	138	69	62	31	
	4-Personnel Policies and Programs	127	63.5	73	36.5	
2- Structural empowerment	5-Community and the Hospital	142.8	71.4	57.2	28.6	
empowerment	6-Image of Nursing	148.2	74.1	51.8	25.9	
	7-Professional Development	158.6	79.3	41.4	20.7	
	Total	142.92	71.46	57.08	28.54	
	8-Professional Models of Care	156	78	44	22	
	9-Consultation and Resources	139.4	69.7	60.6	30.3	
3- Exemplary professional practice	10-Autonomy	140.6	70.3	59.4	29.7	
practice	11-Nurses as Teachers	152	76	48	24	
	12-Interdisciplinary Relationships	166.4	83.2	33.6	16.8	
	Total	150.88	75.44	49.12	24.56	
4- New Knowledge, Innovation and Improvement	13-Care Quality Improvement	165.2	82.6	34.8	17.4	
	Total	165.2	82.60	34.8	17.40	
5- Empirical quality	14-Quality of Care	174	87	26	13	
	Total	174	87.00	26	13.00	
	Total	150.9	75.4	49.2	24.6	

(*) Statistically significant at P < 0.05.

Table (2): This table Arrays that, the studied nursing personnel were had satisfied perception regarding all magnetic hospital forces, the highest percentage was related to "Quality of Care", while the lowest percentage was related to "Personnel Policies and Programs".

 Table (3): Total score regarding 14 Magnetic Hospital Forces among the studied nurses (n = 200).

Domain	Items	T- test	P-value		
1- Transformational leadership	1-Quality of Nursing Leadership	74.195	.000**		
	2-Management Style	113.421	.000**		
	Total	168.705	.000**		
	3-Organizational Structure	78.426	.000**		
	4-Personnel Policies and Programs	72.624	.000**		
2- Structural empowerment	5-Community and the Hospital	162.159	.000**		
	6-Image of Nursing	83.099	.000**		
	7-Professional Development	140.766	.000**		
	Total	225.371	.000**		
	8-Professional Models of Care	87.650	.000**		
	9-Consultation and Resources	80.939	.000**		

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3- Exemplary professional	10-Autonomy	66.751	.000**
practice	11-Nurses as Teachers	75.509	.000**
	12-Interdisciplinary Relationships	80.692	.000**
	Total	194.661	.000**
4- New Knowledge, Innovation and Improvement	13-Care Quality Improvement	87.449	.000**
	Total	87.449	.000**
5- Empirical quality	14-Quality of Care	90.148	.000**
	Total	90.148	.000**

(**) Highly statistically significant at P < 0.005

Table (3): This table showed that, the five Magnetic dimensions among the studied nurses, which were high statistical significance difference (P < 0.005) in all dimensions of magnetic forces (transformational leadership, structure empowerment, exemplary professional practice, new knowledge, innovation and improvement, and empirical quality results). The structural empowerment was the highest T. test score (225.371), while the new knowledge, innovation and improvement was the lowest T. test score (87.449).

Table (4): Correlation between magnetic hospital forces in correlation to each of other as perceived by the studied nurses

	Domains	I. Transformational	leadership	IL-Structural empowerment					III-E xemplary professional practice				IV-New	Knowledge,Innov ation and	V-Empirical quality	
	Items	Quality of Nursing Leaders	Management Style	Organizational Structure	Personnel Policies and Programs		Community and the Hospi Image of Nursing	Professional Development	Professional Modek of Car	Consultation and Resource	Autonomy	Nurses as Teachers	Interdisciplinary Relationships	Care Quality Improvement		Quality of Care
	Quality of Nursing Leadership															
Т.	Management Style	.000 **														
	Organizational Structure	.000 **	.006**													
	Personnel Policies and Programs	.000 **	.000 **	.000 **												
	Community and the Hospital	.435	.000 **	.666	.001**											
н.	Image of Nursing	.024*	.000 **	.000 **	.601	.000										
	Professional Development	.000 **	000 **	.012*	.000 **	.035	.735									
	Professional Models of Care	.000 **	.000 **	.210	.000 **	.000	.055	.857								
ш.	Consultation and Resources	.033	.000 **	.302	.905	.001	.000 **	.011	.000 **							
	Autonomy	.000 **	.000 **	.000 **	.000 **	.000	.000 **	.100	.000 **	.621						
	Nurse as teacher	.000 **	.000 **	.087	000 **	.020	.096	.000 **	.710	.002**	.000 **					
	Interdisciplinary Relationships	.306	.000 **	.534	.000 **	.613	.843	.002	.000 **	.000 **	.000 **	.000 **				
IV.	Care Quality Improvement	.010*	0.698	.000 **	.000 **	.000	0.368	.000 **	.000 **	.000 **	.000 **	.000 **	0.952	.010		
v	Quality of Care	.000 **	.000 **	.000 **	.000 **	.000	.002	.000 **	.724	.411	.001	.017	.010	.000 **		

(*) Statistically significant at P < 0.05

(**) Highly statistically significant at P < 0.005

Table(4): This table revealed that, there were insignificant statistical correlations (p > 0.05) between the magnetic hospital forces (image of nursing, personal policies and programs, professional model of care and professional development). There was a moderate correlation between nurse as a teacher and community and hospital (r=.000). And there was a high correlation between organizational structure and quality of nursing leadership (r=.000).

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VI. DISCUSSION

Nurses are essential for improving the quality of healthcare delivered to patients in work environment through their practice, the need for nursing personal will continue to grow. Reasons why nursing personal leave are; increasing workload, more prisoners with extremely complex care, dependency of correctional officers, medicalization of minor problems, and more administrative tasks. Moreover lack of a healthy work environment, lack of job satisfaction and high rates of intention to leave. Health work environment is associated with improved patient outcomes and better quality of care. With the problem of nursing personal shortage the way was retention is extremely important to all facilities and magnet status factors are a way to employ the better work environment to maintain the nurses they have accomplishment of the forces of magnetism develops the recruitment and retention of nurses.

The study aimed to assess the nursing personnel' perception about magnetic hospital forces, and the research question was: "Are there nursing personnel' perceive magnetic hospital forces? This part presents a discussion of the findings for this study sample as personal characteristics of the nursing personnel' and their perception regarding transformational leadership, structural empowerment, exemplary professional practice, new knowledge and innovation and improvements, empirical quality results.

Regarding personal characteristics of the studied nursing personnel, the present study shows that, two third of the studied sample had less than twenty five years old, most of them were female and having bachelor degree, also, more than two thirds of them had less than five years of experience. These results were in agreement with the findings of **Abou hashish and Fargally**, (2017), in a study of "Assessment of professional nursing governance and hospital magnet components at Alexandria, Medical Research Institute, Egypt", who revealed that, most of nurse personnel were females and had less than five years of experience.

Regarding the perception of magnetic hospital forces of the participants, the current study showed that, majority of the studied sample were have satisfactory perception level about interdisciplinary relationships regarding magnetic hospital forces, while highest un satisfactory perception of them were personnel policies and programs regarding magnetic hospital forces. Also, the most of nursing personal agreed upon the magnetism of their hospitals were three quarter.

These finding were opposite to the study result of **El Meghawri, et al., (2017)**, in a study of "Assessment of essential of magnetism in nursing practice environment at Fayoum University Hospital, Egypt", who found that, around half of the nurses agreed upon all the dimensions of magnetism in their hospitals. While agree with same authors' in more than three quarter of the nurses agreed upon the dimension of relations between nurses and physicians.

Regarding the Relation between perception of nursing personnel' regarding all Magnetic Hospital Forces, the current study cleared that, majority of the studied sample were have satisfied perception level about interdisciplinary relationships regarding magnetic hospital forces, while little of them were had unsatisfied perception about personnel policies and programs Also, most of the nursing personals were agreed upon the magnetism of their hospitals. These finding results were in accordance with the result of **Anderson, et al., (2018)**, in a study of "Impact of magnet hospital designation on nursing culture: an integrative review" who showed that, there is a positive impact in all magnet forces designation on organizational environment on the nursing staff. Characteristics of the clinical environment relevant to nurses such as nurse control, professional relationships and leadership were defined as key areas that highly influence workplace culture for nursing staff during creation of magnet status. regarding "14 magnetic hospital forces".

These finding were in the same line to the result of **Hess, et al., (2021**), in a study of "Perceptions of Nurses in Magnet Hospitals, Non-Magnet Hospitals, and Hospitals Pursuing Magnet Status" who found that, the magnet program continues have a positive influence on nurses, and most of them satisfactory about all magnet forces and majority satisfied about decision making, and professional relationships.

VII. CONCLUSION

In the light of the present study results, it can be concluded that; the nursing personnel were had satisfied perception regarding all magnetic hospital forces, the highest percentage was related to "Quality of Care", while the lowest percentage was related to "Personnel Policies and Programs". There were insignificant statistical correlations between the magnetic hospital forces (image of nursing, personal policies and programs, professional model of care and professional development). There was a moderate correlation between nurse as a teacher and community and hospital. And there was a high correlation between organizational structure and quality of nursing leadership.

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VIII. RECOMMENDATIONS

Based on the findings of this study and the review of the literature, the following recommendations are proposed:

I. At Managers Level:

1- Develop educational program about conflict resolution strategies to solve the conflict among nursing team members & among them and physicians.

2- Improve head nurses` awareness about their right regard voting on crucial decisions that are made by the hospital board.

II. At Organizational Level:

- 1- Develop policies are fair and equal to all nursing personal.
- 2- Provide salary according nursing effort to maintain nurses' satisfaction and retain.
- 3- Encourage nursing personnel toward scientific research to improve their profession.
- 4- Provide healthy work environment to encourage the leader to involve their staff in work activities.

III. At Educational Level:

- 1- Incorporate updated magnet hospital forces into nursing curriculum.
- 2- Orient the governorate sector about benefits of magnet hospital forces, to hospital all staff members.
- 3- Design work environment in ways that create safe care for patients and health work environments for nurses.

IV. At Research Level:

1- Assess of magnet hospital forces and professional nursing governance in governmental sector.

2- Improve a design tool for nursing work environmental characteristics in magnet hospital, especially from nurses' point of view.

3- Improve nurse's satisfaction in magnetic hospital.

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