Relationship Between Head Nurses' Leadership Styles and Staff Nurses' Job Performance

Ameer Aqeel Al-Hasnawi[1], Murtadha Kanim Adea Aljebory[2]

Abstract

Nurses play a vital role in providing care across all levels of the healthcare system and represent a large part of hospital operating costs. Despite the crucial role they play in delivering high-quality healthcare, there is still much to be learned about their performance and contribution. Unfortunately, policymakers and managers often overlook the importance of nursing care. Therefore, optimizing nurses' performance in healthcare settings is essential to ensure the quality of care and patient well-being. This study aimed to determine the relationship between head nurses' leadership styles (established via staff nurses' points of view) and staff nurses' job performance (according to the head nurse's opinion) and find out the relation between the head of nurses' leadership styles and their demographic characteristics, as well as find out the relationship between staff nurses ' job performance and their demographic characteristics. A descriptive (correlational) research study design was used. This study was conducted in Al-Najaf city hospitals. The study subjects included (51) head nurses and (350) staff nurses working in all units of selected hospitals. A non-probability (convenience) technique was used to collect data. Data collection tools were a leadership styles questionnaire and a job performance questionnaire, in addition to a socio-demographic data questionnaire. The results of our study revealed that there is a highly significant intermediate positive correlation between leadership styles and job performance scores. Also, there is a significant relationship between the leadership style utilized by the head of nurses and their marital status. In addition, the current study did not find a relationship between staff nurses' job performance and their socio-demographic data. The study recommends that leadership and management training should be considered a prerequisite for head nurses to occupy their position. It also recommended the need to develop a periodic evaluation system for evaluating the job performance of nursing staff to provide health institutions with a database about the job performance levels of nursing staff.

Introduction

Nursing leadership refers to the ability of a nurse to guide and direct other nurses in providing quality patient care. It is an essential component of the nursing profession and is critical to the success of any healthcare organization [1].

Nursing leadership is an essential aspect of healthcare delivery, as it helps to ensure that patients receive the best possible care from highly skilled and motivated healthcare

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[1] Master student, Community Health Nursing, Faculty of Nursing, University of Kufa, Iraq,
ameera.hassan@student.uokufa.edu.iq
[2] Assistant Professor, Community Health Nursing in Nursing Department University of Warith Al- Anbiyaa, Karbala, Iraq,
murtadha.gh@uowa.edu.iq

professionals [2]. Nursing leaders are responsible for creating a positive work environment that fosters teamwork, collaboration, and continuous learning and development. They work closely with other healthcare professionals, such as physicians, pharmacists, and social workers, to ensure that patients receive comprehensive and coordinated care [1].

Nursing leaders also play a critical role in ensuring that healthcare organizations meet their strategic objectives and goals. They are responsible for managing resources, such as staff, equipment, and supplies, and ensuring that they are used efficiently and effectively. They are also responsible for monitoring and evaluating the quality of care provided by their team and implementing strategies to improve patient outcomes [3].

Effective leadership is crucial for successfully delivering healthcare services, as it can significantly affect nurses and patients. Optimal leadership can create a positive and engaged staff culture, leading to improved patient satisfaction and enhanced healthcare outcomes [4].

Effective head nurses possess several key characteristics that help them to lead and manage their teams effectively. The Nursing Leadership Institute over time has frequently identified six types of leadership qualities: Personal mastery; interpersonal effectiveness; financial management; human resource management; caring; and system thinking [5].

Leadership style is the approach and manner of stimulating people, providing direction, and achieving goals. Style can either motivate or demotivate employees, which can in turn lead to improving or disimproving performance levels. Human resources are valuable assets, inimitable, and can be generating of sustainable competitive advantage through innovative ideas [6]. Leadership styles play a critical role in the job performance of nursing staff. Effective leadership styles can motivate and inspire nurses to deliver high-quality patient care while impaired leadership styles can lead to job burnout, dissatisfaction, and poor performance [7].

Job performance can be defined as the ability of a person to effectively carry out their roles and responsibilities related to providing direct patient care. There are several factors that can affect job performance, including individual characteristics, workload, job satisfaction, personal competencies, recognition of achievements, social support, communication, leadership behavior, and organizational climate [8].

Healthcare organizations consider nurses' job performance a significant concern. The quality of care provided, patient outcomes, and the achievement of organizational goals are all reflected in the level of nursing performance [9].

Methodology

A descriptive correlational research design was used to determine the relationship between head nurses' leadership styles (established via staff nurses' points of view) and staff nurses' job performance (established via head nurses' points of view). The study has been conducted between 8 August and 27 July.

This study was conducted in Iraq/AL-Najaf city Teaching hospitals (Al-Sadder Medical City, Middle Euphrates Hospital, Al-Hakim General Hospital, Al-Zahraa Teaching Hospital, Al-Najaf Al-Ashraf Teaching Hospital, and National Cancer Teaching Hospital), This hospitals is public hospitals and the largest general hospitals in Al-Najaf city.

A non-probability sampling approach has been used (convenience sampling) of (401) nurses from total (2519) nurse working at Al Najaf City Hospitals, as follows; Al-Sadder Medical City (110), Middle Euphrates Hospital (60), Al-Hakim General Hospital (80), Al-Zahraa Teaching Hospital (60), Al-Najaf Al-Ashraf Teaching Hospital (50) and National Cancer Teaching Hospital (41).

The sample of the study was divided into two groups, first group consisted of (350) staff nurses working in all care units of mentioned hospitals. The second group consisted of (51) head nurses working in those units.

The current study included that head nurses questionnaire. It consisted of two parts:

Part I: Socio-Demographic Characteristics

Demographic data in this part is used to assess the demographic characteristics of studied head nurses, which are comprised of (6) items, which include (age, gender, marital status, level of education, years of experience, and shift time).

Part II: Job performance questionnaire

This tool is used to evaluate the job performance of nursing staff according to the opinion of the head nurses. It is adapted from [10], and it is composed of 14 domains to assess the overall nurse's job performance, (Quality of Work, Productivity, Knowledge of the Job, Adaptability, Dependability, Initiative, and Resourcefulness, Judgment and Policy Compliance, Relations with People & Customer Service, Attendance and Punctuality, Safety and Security, Leadership Ability, Appraisal and Development of People, Planning, and Organization and finally Communication Skills).

Results and Discussion

The Socio-demographic characteristic of staff nurses according to their demographic characteristics

The demographic data of staff nurses are presented in Table (1). This table shows that (41.71%) of the nurses were in the age group (26 – 31) years. Also (67.43%) most of the staff nurses were females. Regarding Level of Education, it was clear that (42.57%) of the staff nurses had a Diploma level of education and (66.86%) of them had <=5 years of nursing experience. For Time Shift, the majority of staff nurses (84.86%) were working in the morning. Finally, more than half of staff nurses (52.57%) were married.

The results of the demographic data of 350 nurses who participated in the study are reported. According to Table (1), the study results indicated that the majority of participants age groups were between (26 – 31) years old. Regarding years of experience, the majority of the study sample had less or equal to 5 years of nursing experience.

These results agreed with the findings of a study done by [11], their study outcomes revealed that about (29.4%) of the samples with age group between were (25-29) and (56.5%) of participants had less than 5 years of experience. The Current study results also agree with [12], whose results showed that the majority of 83.1% of age groups were (20-29) years old, and most of the nurses (49.4%) were less than 5 years of experience. Results of the current study also agree with the study conducted by [13] , whose results revealed that the age group of staff nurses was (60.5%) between (20-30) years. Related to years of experience, they found 44.5% of nurses services were (1-5) years.

This may be because these ages are more efficient and active in dealing with the patient, while the older age has administrative and organizational work. In addition, it may be interpreted by the fact that nurses in these age groups and years of service show interest in, and resent employment more than others which pushes them to express their opinions more than other age groups.

Related to gender, the current study found that the highest percentage represented (67.43%) of nurses were female with only 32.57% of them being males. This may be because of the field of nursing has recently witnessed an increase in the percentage of nurses inside hospitals, due to changing the ideas and views of society towards this humanitarian profession and the acceptance of females in this field.

This finding was agreed with a study conducted by [14], which revealed that females were (93.8%) of the staff nurses. Also, [15], stated that the highest percentage of nurses were female. It may be that female numbers are still greater than males in the nursing field.

Regarding the marital status of the nurses; the result of the present study reveals that more than half of staff nurses (52.57%) were married. This may be due to the majority of nurses' ages in the study being above 26 years old. As previously mentioned, this age, according to the traditions and customs of Iraqi society, is considered eligible for marriage. That is consistent with a study done by [16], who revealed that (85.5%) of the study participant were married. In an Egyptian study, results also were consistent with the results above results toward the marital status of nurses. In this study, most of the nursing staff were married.

Regarding level of education, it was clear that the majority of the staff nurses had a Diploma level of education. This result agrees with a study conducted by [17], whose study revealed that most nurses had Diploma in Nursing. Also, [18] stated that slightly over half of the participants in his study had a diploma in nursing/midwifery. A Turkish study done by [19], indicates that the majority (58%) of nurses staff were with a Diploma in nursing.

The study also describes the shift times of the nurses. The findings indicate that (84.86%) of the nurses worked in the morning shift, which is consistent with a previous study conducted by [20], The results show 85.8% of nurses work in morning shift. And this agrees with [21], who revealed that most of the nurses worked in the morning shift.

Table (1) The Socio-demographic characteristic of staff nurses according to their demographic characteristics (n=350)

Demographic characteristics		Freq.	%
Age groups (Years)	<= 25	137	39.14
	26 - 31	146	41.71
	32 - 37	16	4.57
	38 - 43	27	7.71
	44 and more	24	6.86
	Mean ± SD	28.82 ± 7.1	
Gender	Males	114	32.57
	Females	236	67.43
Level of Education	Nursing prep.	61	17.43
	Diploma	149	42.57
	B.Sc.	140	40.00
	M.Sc. / Ph.D.		
Time Shift	Morning	297	84.86
	Evening	36	10.29
	Night	17	4.86
Years of Experience (Binned)	<= 5	234	66.86
	6 - 11	61	17.43
	12 - 17	23	6.57
	18 and more	32	9.14
	Mean ± SD	6.14 ± 6.3	
Marital Status	Single	162	46.29
	Married	184	52.57
	Separated	1	.29
	Divorced	1	.29
	Widow	2	.57
Total		350	100%

The study reported the demographic data of 51 head nurses who took part in the research. Table (2) revealed that the majority of the sample, comprising 47.06% of the head nurses,

fell in the age group of 26-31 years. Regarding years of service about (52.94%) of head nurses had (6 – 11) years of nursing experience.

These results agreed with the findings of a study done by [16], who found that the prominent age among the head of nurses was (26-35) years old. It also agreed with [22], whose results revealed that the majority of the study sample have years of experience between (5-14) years.

That may be interpreted by the fact that the head of nurses in these age groups and years of experience show more interest, and resent employment than most other groups, which indicate they are more active than other groups.

Related to gender, the current study found that the highest percentage represented (68.63%) of head nurses were male. This may be due to the interest of males in leadership and responsibilities of management more than females, in addition to the fact that males may be more assertive in making decisions.

That is consistent with a study done by [23], who found that males represented the majority of the study participants. Contrarily, an Egyptian study conducted by [24], who reported that the majority of head nurses were females. This may be due to differences between Iraqi and Egyptian populations.

Regarding marital status, the result of the present study reveals that more than half of head nurses (72.55%) were married. That may be due to the majority of the head of nurses' ages in the study where above 26 years old, and this age. According to the traditions and customs of Iraqi society, this age is considered eligible for marriage. In an Iranian study, the researchers agree with the above results regarding the marital status of head nurses in this study majority of the sample were married [25]. Also [26], in their study, conclude that the majority of the study sample was married.

 According to the head of nurses' level of education, it was clear that (68.29%) of the head nurses had a B.Sc. level of education followed by (25.49%) of the sample with a Diploma. Perhaps this is because nurses with this level of educational level have the qualifications that make them able to lead others and make decisive decisions, according to their scientific knowledge.

This result agrees with a study conducted by [27], they found that the majority of the study sample had a BSN nursing degree followed by with Diploma. According to another study conducted in Iran by [28], they found that the head nurses with BSC in nursing were formed the majority.

Finally, the current study indicates that the majority of head nurses were working the morning shift. This result agreed with a study conducted by [29], about the time management behaviors of head nurses and staff nurses. They found that (89.3%) of head nurses were working the morning shift.

Table (2) The Socio-demographic characteristic of head nurses according to their demographic characteristics (n=51)

Demographic characteristics		Freq.	%
Age groups (Years) (Binned)	<= 25	1	1.96
	26 - 31	24	47.06
	32 - 37	9	17.65
	38 - 43	8	15.69
	44 and more	9	17.65
	Mean ± SD	34.73 ± 8.35	
Gender	Males	35	68.63
	Females	16	31.37
Level of Education	Nursing prep.	7	13.73
	Diploma	13	25.49
	B.Sc.	27	52.94

	M.Sc / Ph.D	4	7.84
Time Shift	Morning	50	98.04
	Evening	1	1.96
	Night		
Years of Experience (Binned)	<= 5	14	27.45
	6 - 11	19	37.25
	12 - 17	8	15.69
	18 and more	10	19.61
	Mean ± SD	11.35 ± 8.22	
Marital Status	Single	14	27.45
	Married	37	72.55
	Separated		
	Divorced		
	Widow		
Total		200	100%

The evaluation of scores job performance according to the opinion of the head nurses

The results of current study as shown in Table (3), the assessment (mean of scores) of performance evaluation according to the opinion of the head nurses. It reveals that the assessment of all items (1 and 14) was (Often Exceeds Expectations) except item (11) was (Meets Expectations).

Performance in healthcare depends on the availability, qualifications, productivity, and responsiveness of staff. If service providers perform poorly or are dissatisfied, it can lead to inadequate care, resulting in reduced health outcomes and patients either not seeking services because of being mistreated. Poor performance may be due to insufficient staffing or staff failing to provide care according to established standards or patient needs [14]. Unclear expectations, deficits in skills and knowledge, shortages of resources or equipment, and lack of motivation are often the main causes of performance issues [30].

Table (3): The mean scores of job performance evaluation according to the opinion of the head nurses (n=350)

Items		F.	%	MS	SD	RS%	Assess.
1. Quality of Work	Major Improvement Needed	32	9.14	2.95	0.99	59	Often Exceeds Expectation
	Some Improvement Needed	73	20.86				
	Meets Expectations	139	39.71				
	Often Exceeds Expectations	93	26.57				
	Consistently Exceeds Expectations	13	3.71				
2. Productivity	Major Improvement Needed	32	9.14	2.95	0.96	59	Often Exceeds Expectation
	Some Improvement Needed	62	17.71				
	Meets Expectations	158	45.14				
	Often Exceeds Expectations	87	24.86				
	Consistently Exceeds Expectations	11	3.14				
3. Knowledge of Job	Major Improvement Needed	32	9.14	2.78	0.99	56	Often Exceeds Expectation
	Some Improvement Needed	106	30.29				
	Meets Expectations	136	38.86				
	Often Exceeds Expectations	60	17.14				
	Consistently Exceeds Expectations	16	4.57				
4. Adaptability	Major Improvement Needed	30	8.57	3.01	0.99	60	Often Exceeds Expectation
	Some Improvement Needed	61	17.43				
	Meets Expectations	151	43.14				
	Often Exceeds Expectations	90	25.71				
	Consistently Exceeds Expectations	18	5.14				
5. Dependability	Major Improvement Needed	19	5.43				

	Some Improvement Needed	106	30.29				
	Meets Expectations	124	35.43				
	Often Exceeds Expectations	87	24.86				
	Consistently Exceeds Expectations	14	4.00				
6. Initiative and Resourcefulness	Major Improvement Needed	45	12.86	2.73	1.02	55	Often Exceeds Expectation
	Some Improvement Needed	99	28.29				
	Meets Expectations	122	34.86				
	Often Exceeds Expectations	75	21.43				
	Consistently Exceeds Expectations	9	2.57				
7. Judgment and Policy Compliance	Major Improvement Needed	22	6.29	3.04	0.90	61	Often Exceeds Expectation
	Some Improvement Needed	58	16.57				
	Meets Expectations	164	46.86				
	Often Exceeds Expectations	96	27.43				
	Consistently Exceeds Expectations	10	2.86				
8. Relations w/ People & Customer Service	Major Improvement Needed	16	4.57	3.13	0.92	63	Often Exceeds Expectation
	Some Improvement Needed	64	18.29				
	Meets Expectations	145	41.43				
	Often Exceeds Expectations	110	31.43				
	Consistently Exceeds Expectations	15	4.29				
9. Attendance and Punctuality	Major Improvement Needed	35	10.00	2.89	1.03	58	Often Exceeds Expectation
	Some Improvement Needed	86	24.57				
	Meets Expectations	124	35.43				
	Often Exceeds Expectations	91	26.00				
	Consistently Exceeds Expectations	14	4.00				
10. Safety and Security	Major Improvement Needed	46	13.14	2.91	1.10	58	Often Exceeds Expectation
	Some Improvement Needed	67	19.14				
	Meets Expectations	136	38.86				
	Often Exceeds Expectations	76	21.71				
	Consistently Exceeds Expectations	25	7.14				
11. Leadership Ability	Major Improvement Needed	78	22.29	2.38	1.04	48	Meets Expectation
	Some Improvement Needed	123	35.14				
	Meets Expectations	95	27.14				
	Often Exceeds Expectations	46	13.14				
	Consistently Exceeds Expectations	8	2.29				
12. Appraisal and Development of People	Major Improvement Needed	53	15.14	2.70	1.05	54	Often Exceeds Expectation
	Some Improvement Needed	92	26.29				
	Meets Expectations	125	35.71				
	Often Exceeds Expectations	68	19.43				
	Consistently Exceeds Expectations	12	3.43				
13. Planning and Organization	Major Improvement Needed	62	17.71	2.56	1.08	51	Often Exceeds Expectation
	Some Improvement Needed	112	32.00				
	Meets Expectations	112	32.00				
	Often Exceeds Expectations	46	13.14				
	Consistently Exceeds Expectations	18	5.14				
14. Communication Skills	Major Improvement Needed	35	10.00	2.95	1.07	59	Often Exceeds Expectation
	Some Improvement Needed	80	22.86				
	Meets Expectations	130	37.14				
	Often Exceeds Expectations	79	22.57				
	Consistently Exceeds Expectations	26	7.43				

MS: Mean of Scores; Major Improvement Needed: MS =<1.49; Some Improvement Needed: MS = 1.5-2.49; Meets Expectations: MS= 2.5-3.49; Often Exceeds Expectations: MS =3.5-4.49; Consistently Exceeds Expectations: MS ≥ 4.5; RS: relative sufficiency percentage.

The assessment (mean of scores) of overall domains of leadership styles according to the opinion of the staff nurses

According to results of the current study, Table (4) shows the assessment (mean of scores) of overall domains of leadership styles according to the opinion of the staff nurses. It reveals that the majority of nurses have (Sometime) level (70.59%); while (29.41%) of them have (Always) level; finally (0%) of them have (Never) level. See figure (1).

Table (4): The Mean scores of overall leadership styles items according to the opinion of the staff nurses (n=350).

Overall domains		Freq.	%	MS	SD	RS%	Assess.
Leadership styles	Never	0	.00	2.24	0.19	75	Sometime
	Sometime	36	70.59				
	Always	15	29.41				

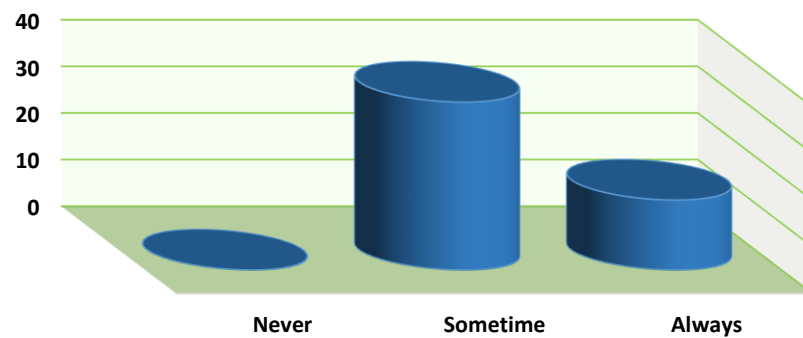MS: Mean of Scores; Never: MS =<1.66; Sometime: MS = 1.67-2.33; Always: MS ≥ 2.34.

Figure (1): Descriptive statistics of overall items of overall domains of leadership styles according to the opinion of the staff nurses.

According to the opinions of the nursing staff participating in the study regarding the leadership styles used by head nurses (Table 5), the results of the current study indicated that (3.92%) of the head nurses never used transformational leadership, while (33.33%) of them used this style sometimes. In contrast, (62.75%) always used this style to lead the nursing staff.

Table (5): The Mean scores of overall items of Transformational leadership style according to the opinion of the staff nurses (n=51)

Overall items		Freq.	%	MS	SD	RS%	Assess.
Transformational leadership style	Never	2	3.92	2.31	0.32	77	Sometime
	Sometimes	17	33.33				
	Always	32	62.75				

MS: Mean of Scores; Never: MS =<1.66; Sometime: MS = 1.67-2.33; Always: MS ≥ 2.34
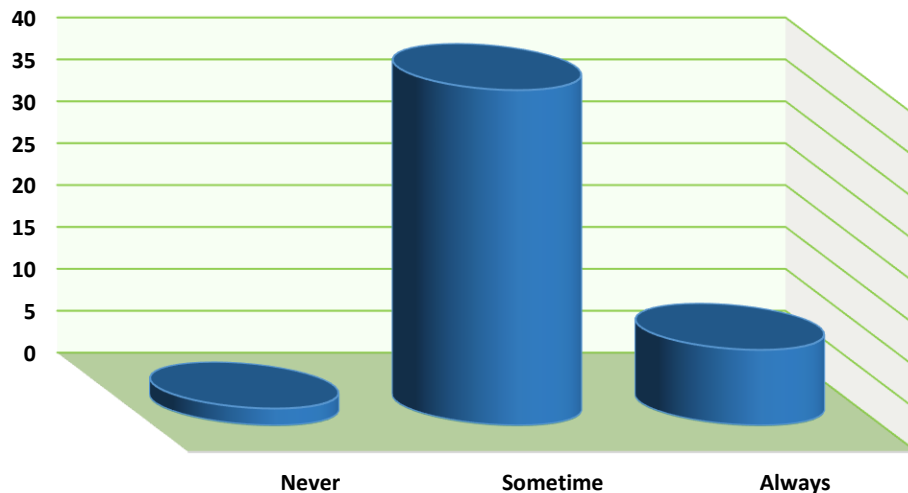
Figure (2): Descriptive statistics of overall items of transformational leadership style according to the opinion of the staff nurses.

The relationship between head nurses' leadership styles and their demographic data.

Table (6) shows that there is only a significant relationship between head nurses' leadership styles and their marital status, while other data were statistically not significant.

Leadership style refers to the approach a leader takes to guide, motivate, and direct their team or organization. There are several different leadership styles, each with its own strengths and weaknesses, and the most effective style for a particular situation depends on various factors, such as the nature of the task, the personalities of the team members, and the organization's culture [31]. Effective leadership involves using a combination of all three styles, depending on the situation and the needs of the team. Leaders who are able to use a variety of behaviors and adapt to different situations are more likely to be successful than those who rely on a single approach.

Table (6): ANOVA table for the differences between head nurses' leadership styles and their demographic data.

Demographic characteristics		Mean	SD	Statistics (F)	P-value
Age groups (Years)	<= 25	2.25		0.499	0.974 (NS)
	26 - 31	2.21	.18		
	32 - 37	2.26	.17		
	38 - 43	2.25	.13		
	44 and more	2.28	.29		
Gender	Males	2.22	.18	330.5	0.305 (NS)
	Females	2.28	.21		
Level of Education	Nursing prep.	2.36	.26	6.664	0.083 (NS)
	Diploma	2.26	.15		
	B.Sc.	2.18	.18		
	M.Sc / Ph.D	2.36	.07		
Time Shift	Morning	2.24	.19	24.0	0.980 (NS)
	Evening	2.25			
	Night				
Years of Experience	<= 5	2.22	.16	1.662	0.645 (NS)
	6 - 11	2.20	.20		
	12 - 17	2.30	.10		
	18 and more	2.30	.26		
Marital Status	Single	2.14	.18	362.0	0.030 (S)
	Married	2.28	.19		

	Separated				
	Divorced				
	Widow				

The relationship between Performance Evaluation overall scores and staff nurses' demographic data

According to the relationship between Performance Evaluation overall scores and ages, gender, and the time shift of staff nurses shown in Table (7), results revealed that is no significant difference. The outcome was comparable to findings obtained by [14], who noted that ages, gender, and the time shift of staff nurses have no significant impact on their performance, this aligns with previous research on the some topic. This suggests that age, gender, and time shift is not determining factor in nurses' ability to perform their job duties efficiently.

Also regarding years of experience, level of education, and marital status, the current study had not found a significant correlation between these data and nurses' job performance. This may be because the effect of that demographic data is concentrated on the quality of work more than its impact on job performance in general. This finding contrasts with those noted by [15],[32], who stated that years of experience, level of education, and marital status had a positive impact on nurses' job performance.

Table (7): ANOVA table for the differences between overall evaluation scores of staff nurses' job performance and their demographic data.

Demographic characteristics		Mean	SD	Statistics (F)	P-value
Age groups (Years)	<= 25	2.76	.64	2.01	0.093 (NS)
	26 - 31	2.91	.70		
	32 - 37	3.06	.84		
	38 - 43	2.69	.97		
	44 and more	3.05	.61		
Gender	Males	2.83	.75	0.435	0.664 (NS)
	Females	2.86	.68		
Level of Education	Nursing prep.	2.80	.70	0.432	0.649 (NS)
	Diploma	2.83	.75		
	B.Sc.	2.89	.66		
	M.Sc / Ph.D				
Time Shift	Morning	2.86	.69	0.695	0.487 (NS)
	Evening	2.77	.91		
	Night	2.78	.45		
Years of Experience	<= 5	2.81	.67	1.315	0.269 (NS)
	6 - 11	2.96	.71		
	12 - 17	3.04	.78		
	18 and more	2.81	.84		
Marital Status	Single	2.85	.68	1.683	0.153 (NS)
	Married	2.86	.72		
	Separated	2.64			
	Divorced	2.14			
	Widow	1.68	.15		

Conclusions

The results of the current study concluded the following:

1.   There was a statistically significant relation between one of the socio-demographics (marital status) and the head nurses' leadership styles.

2.   The performance of the nursing staff met expectations, and the leadership style of the nurses' officials was relatively transformational leadership style.

3.   There was a positive and significant relationship linking the independent variable (the leadership style of the nurses' officials) with the dependent variable (the job performance of the nursing staff).

4.   There was not a statistically significant relation between staff nurses' job performance and their socio-demographic data.

Recommendations

1.   Leadership and management training should be considered a prerequisite for head nurses to occupy their position.

2.   To provide health institutions with a database for evaluating the job performance of their nursing staff, it is crucial to set up a regular assessment system for hospitals. This system should focus on assessing the overall job performance of nurses.

Ethical Considerations and Administrative Agreements

In nursing research, it is crucial to follow this procedure to ensure ethical principles before gathering data. Official permissions were obtained from the following sources for consideration of the administrative agreements and moral principles:

1.   The Ethical Committee of Kufa University / Faculty of Medicine gave their approval to this study (Appendix-A).

2.   Also, obtain approval to accept the study questionnaire from the Ministry of Planning\Central Council for Statistics (Appendix-C).

3.   Al-Najaf Al-Ashraf Health Directorate; Al-Sadder Medical City/Middle Euphrates Hospital/Al-Hakim General Hospital/Al-Zahraa Teaching Hospital/Al-Najaf Al-Ashraf Teaching Hospital and National Cancer Teaching Hospital to obtain permission (Appendix-C).

Prior to collecting data, the researcher provided an explanation of the study's purpose to the nurses and conducted interviews to ensure their participation. The nurses were briefed on the confidentiality of their information, the study's nature, their right to withdraw, and the confidentiality of the subject data.

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