

The Relationship between Control over Nursing Practice, Job Satisfaction, and Quality of Care as Perceived by Jordanian Pediatric Nurses

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Abstract

Background: Control over Nursing Practice (CONP) is one of the main positive attributes of workplace environment. When the Jordanian pediatric nurses have CONP, outcomes related to child care such as improving child and family satisfaction and safety might improve. Having CONP will also decrease length of stay and child mortality rates, improve nurses' job satisfaction, decrease turnover and burnout and improve quality child care.

Aim: To measure the level of CONP and its relationship with both job satisfaction and quality of childcare based on Jordanian pediatric nurses' perception.

Methods: A descriptive cross-sectional correlational study design was adopted. A convenience sample of 178 pediatric nurses was selected from Queen Rania Al-Abdullah Hospital for Children. Self-administered questionnaires consisting of three survey instruments related to demographics of the participants, CONP level, job satisfaction level, and child quality care.

Results: Pediatric nurses have a moderate level of CONP with mean of (2.42, SD = 0.609). Nurses' control over practices is positively correlated with their job satisfaction ($r = 0.300$, $p = 0.001$), and with their perception toward quality of child care ($r = 0.189$, $p < 0.05$).

Conclusion: CONP among pediatric nurses is moderate and nurses appeared slightly dissatisfied with their job. They perceived the quality child care in their work settings as a moderate quality. Moreover, results supported a positive correlation between CONP and both of pediatric nurses' job satisfaction and quality of childcare.

Keywords: Control over Nursing Practice, Job Satisfaction, and Quality of Care.

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العلاقة بين التحكم والسيطرة في ممارسة التمريض والرضا الوظيفي وجودة الرعاية من وجهة نظر ممرضين الأطفال الأردنيين

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ملخص

الخلفية: أن التحكم والسيطرة في ممارسة التمريض (CONP) واحدة من السمات الإيجابية الرئيسية لبيئة مكان الممارسة للرعاية التمريضية. أن قدرة ممرضات الأطفال الأردنيات السيطرة على ممارسه العمل التمريضي سوف يؤدي ذلك إلى تحسين النتائج المتعلقة برعاية الأطفال مثل تحسين رضا الأطفال والأسرة، والسلامة، وتقليل مدة الإقامة، ومعدلات وفيات الأطفال. من ناحية أخرى، وكذلك تؤدي إلى تحسين الرضا الوظيفي للممرضات، وتقليل معدل دوران الموظفين، والإرهاق وجودة الرعاية المقدم للأطفال وأسره.

الهدف: تهدف هذه الدراسة إلى قياس مستوى التحكم والسيطرة على ممارسة التمريض وعلاقته بكل من الرضا الوظيفي وجودة رعاية الأطفال من وجهة نظر ممرضين الأطفال الأردنيين.

المنهج: تم اعتماد تصميم دراسة ارتباطية وصفية مقطعية. حيث تم اختيار 178 ممرضة من مستشفى الملكة رانيا العبد الله للأطفال. الاستبيانات ذاتية الإدارة التي تتكون من ثلاث أدوات مسح تتعلق بالخصائص الديموغرافية للمشاركين، ومستوى التحكم والسيطرة على ممارسة التمريض، ومستوى الرضا الوظيفي، ورعاية جودة الطفل.

النتائج: اظهرت النتائج أن لدى ممرضين الأطفال مستوى معتدل من التحكم والسيطرة على ممارسة التمريض بمتوسط (2.42، 0.609 SD). يرتبط سيطرة الممرضات على الممارسات ارتباطاً إيجابياً برضاهن الوظيفي (0.300، $r = 0.001$ ، $p > 0.05$).

الخلاصة: التحكم والسيطرة على ممارسة التمريض بين ممرضات الأطفال معتدل ويبدو أن الممرضات غير راضيات قليلاً عن عملهن. لقد أدركوا أن جودة رعاية الأطفال في أماكن عملهم ذات جودة معتدلة. علاوة على ذلك، دعمت النتائج وجود علاقة إيجابية بين التحكم والسيطرة على ممارسة التمريض وكلا من الرضا الوظيفي لممرضات الأطفال وجودة رعاتهم.

الكلمات الداله: التحكم في ممارسة التمريض، الرضا الوظيفي، وجودة الرعاية.

Introduction:

Pediatric nursing is the practice of nursing care with children and their families across the health illness continuum including health promotion, illness management, and health restoration (Taylor, 2006). Pediatric nurses should have strong evidence based scientific knowledge, good interacting skills, empathy, and immense love for children; they should also have flexibility, control over their emotions, and stress management skills. These characteristics will increase the ability of the pediatric nurses to have control over their practice (American Nurses Association, 2014).

Control over nursing practice describes how pediatric nurses influence decisions related to their practice. Control over nursing practice is prevalent in professional practice environments that foster pediatric nurses' satisfaction and quality child outcomes. Additionally, nurses CONP build a healthy work environment that impact positively on the quality and safety of children outcomes and nurse satisfaction (Al-Hamdan, Smadi, Ahmad, Bawadi, & Mitchell, 2019)

Studies found that CONP is one of the most important features of the magnet hospitals that positively affect the levels of job and professional satisfaction and leads to greater children care quality (El-Bialy & Elaal, 2013). At an individual level, Yurek, Havens, Hays, and Hughes (2015) described CONP as an professional vital component to have a healthy nursing work environment and as an approach for involving knowledgeable nurses in autonomous health care decisions for the good of their patients and organizations. At a unit level, CONP is concerned with a group of nurses working together to deliver quality child care and reflects the degree of their freedom to make decisions and to practice their career autonomously as determined by the rules of empowerment set by their organizations (Laschinger & Fida, 2015).

Quality of childcare is a central global priority for pediatric nurses that aim to improve the quality of delivered healthcare to children and their families (American Academy of Pediatrics, 2018). The Office of Health Standard Compliance (OHSC), which aims to protect and to enhance the

quality of healthcare and patient's safety, supports health organizations to enhance effective management; it also supports health care organizations to enforce compliance to the prescribed standard norms of the quality of child care (Armstrong, Rispel, & Penn-Kekana, 2015).

Many definitions have been used to explain the quality of childcare. These multifaceted definitions encompasses all kinds of health services which are provided for children and their families to reach the required level of outcomes based on current professional knowledge (Castner, Ceravolo, Foltz-Ramos, & Wu, 2013; Kutney-Lee, Wu, Sloane, & Aiken, 2013). The American Academy of Nursing Expert Panel defined childcare quality in term of indicators. The quality of care indicators of positive nursing practice involve: quality of life, demonstration of health-promoting behaviors, perception of being well-cared for, and achievement of appropriate self-care. On the other hand, mortality, morbidity, and adverse events showed to be indicators of the negative nursing input (Kramer, Schmalenberg, & Maguire, 2010). Patient's safety and quality of care are linked to nurses' satisfaction. When nurses are happy in their work, they focus on their professional tasks instead of being distracted from negative workplace environment (Asegid, Belachew, & Yimam, 2014). Previous studies have concluded that unsatisfied health care employees negatively affect the quality of care which in turn adversely affects patient satisfaction and loyalty to a hospital (Van Bogaert, van Heusden, Timmermans, & Franck, 2014). Job satisfaction among health care professionals have been a topic of global interest for a long time as it is related to CONP. It reflects the pediatric nurses general attitude or perception towards his/her work (Chien & Yick, 2016). Job satisfaction is defined as the degree of pleasure that the working employee could get from their job in both emotional and cognitive components. This, in essence, includes intrinsic components such as the individual's perceptions and emotions towards advancement, recognition, the responsibility level. The extrinsic components are job

related factors such as work setting environment, salary, and supervision (Negussie & Demissie, 2013).

The current study was conducted at Queen Rania Al Abdullah Hospital for Children which is the only specialized military hospital that provide specialized care for children and their families. The working environment in this hospital reinforce the CONP and job satisfaction; support the teamwork and the educational preparation for pediatric nurses.

The study aims to measure the level of CONP and to find out the relationship between CONP and pediatric nurse's satisfaction and the quality of childcare.

Research questions

1. What is the level of CONP among pediatrics nurses?
2. What is the relationship between CONP and job satisfaction, and childcare quality from the pediatrics nurses' perceptions?
3. Is there relationship between nurses' demographics and CONP?

Methods

Study design and setting

A descriptive, cross-sectional design was used. This study was conducted at Queen Rania Al Abdullah Hospital for Pediatrics in Jordan at Amman. This hospital is the first medical specialized hospital for children in Jordan, which is located within the campus of Al-Hussein Medical city of Royal Medical Services. The Hospital's capacity is 200 beds distributed over three floors and sections. The hospital receives around 213,940 child patients annually; 75, 082 of them are referred to emergencies, 133, 534 of them are referred to specialized clinics, and 5324 child are referred to dental and other clinics (Royal Medical Services, 2018). The military health sector serves the military and the civilian population. The leadership and managerial style combines democratic and autocratic styles. The health care environment is conducive for professional development and continuous self-learning.

Population and sample

A convenience sampling method was employed to select the subjects for the study. A Sample size of 178 registered pediatric nurses was estimated using G power system at $\alpha = .05$, medium effect size 0.15 and Power of 0.85. The available nurses who agreed to participate were recruited over different work shifts. The nurses who agreed to participate filled the questionnaires and the response ratio was 100%. The inclusion criteria were as follow: Male and female registered nurses with at least a bachelor degree, working full time on both day and night shifts and have at least one-year clinical experience or more.

Instruments

The Socio-Demographic Data

This part of questionnaire was developed by the researcher who asked the participants to report information about: age, gender, marital status, educational level, experience, family status, type of shift work, type of the workplace, and working position.

Revised Nursing Work Index (NWI-R)

Revised Nursing Work Index is a self-report measure which is used to measure CONP of the nurses. The NWI-R consists of 57 items, divided into 25 subscales; autonomy, control over the environment, the relationship between doctors and nurses and organizational support. A team of experts examined the content validity and were consulted for their suggestions for any modifications (Slater, & McCormack, 2007). The instrument was translated into Arabic, and then back translated into English for comparison with the original version. Then, it was reviewed by three experts who have good experience in the nursing field. After that, a comparison between the two versions was conducted to avoid misinterpretation and to insure face validity (Hamed, 2016). In addition, the instruments were piloted with 15

nurses before data collection to assess the clarity and appropriateness of items, to determine the needed time to fill the questionnaire, and to assess the readability of the instrument.

Nurses' Job Satisfaction Scale

This scale was used to measure the staff nurse's perception of their job satisfaction. The following question was asked: "How satisfied are you with your current primary job?" The responses ranged from very dissatisfied (1) to very satisfied (4), higher scores indicate greater satisfaction (Lin., Wang., & Huang, 2007).

Child Quality Outcomes Scale

This is a 4-point-one item scale. The item sentence was: "In general, how would you describe the quality of nursing care delivered to patients on your unit?". The nurses' responses range from excellent (1) to poor (4) (Harms., Clifford& Cryer, 2005)

Data Collection Procedure

The study was recommended by Queen Rania Al Abdullah Hospital administration unit for accreditation purposes. A meeting was conducted to discuss the purpose of the study and to motivate the nurses to participate. The head nurses of wards were informed to facilitate the study conduction. All participants who met the inclusion criteria for the study were invited to participate in the study. Those who agreed to participate were asked to sign an informed consent which included a detailed description of the purpose, benefits, and duration of the study. Confidentiality and participants' right of voluntary participation was also clarified.

One hundred and seventy-eight questionnaires were distributed to participants. The researchers provided the participants with the needed instructions on how to fill the questionnaires, and then, the data were collected from each participant. The total session time ranged from 15-20 minutes for each participant to fill out the questionnaires.

Ethical Considerations

The study was conducted after authorization from the hospital management. Then ethical scientific research approvals from the Royal Medical Services Center and Queen Rania Al Abdullah Hospital for Pediatric were obtained. Several steps were taken to ensure that participants were protected; the head nurses and other nurses were invited by the researcher to participate in the study and they were informed about the purposes and significance of the study. All participants were informed that they have the right to refuse to participate or withdraw from the study. The participants confidentiality was also preserved.

Data Analysis

The collected data were organized and analyzed by using the Statistical Package for Social Sciences (SPSS), version 20. Descriptive statistics were used to describe the socio-demographic data and to determine the frequency distribution for each variable in the study. Demographic data were analyzed to describe the sample, using frequency, percentage, mean and standard deviation.

Simple and Multiple Regression Correlation was used to determine the relationships between CONP and pediatric nurses' job satisfaction, and to find out the relationship between CONP and pediatric nurses' perceptions about quality child care. The level of significance was set at 0.05.

Results

One hundred and seventy-eight registered nurses participated in the study; with a return rate of 100%. The mean age was 27.8 years with an average of clinical experience of 4.80 years, the majority of the nurses had a Baccalaureate degree in nursing (n=166; 93.3%). More than half of the participants were women (n= 173; 97.2%), most of them were married (n=116; 65.2%). Regarding the working position, most of the participants

were registered nurses who works as direct care provider (n=136; 76.4%) while thirty-five nurses (19,7%) were working as in charge nurses. Participants worked in a variety of departments, including medical-surgical wards (n = 42; 32.6%), intensive care units (ICUs) (n = 34; 19.1%), operation/recovery room (n = 21; 13.5%) and others (n=44; 24,7%). Approximately half of the participants (n = 104; 58.4%) provided nursing care for more than 6 patients during a shift. The participant's characteristics are presented in Table 1.

Table (1) Demographic data for participant nurses (n=178)

Participants' characteristics	N	Mean	SD
Age		27.79 years	3.852
Years of experience in current position		4.80 years	3.196
	Percent (%)		
Gender			
Male	5	2.8 %	
Female	173	97.2 %	
Marital status			
Single	61	34.3%	
Married	116	65.2%	
Divorced	1	0.6 %	
Educational level			
Post graduate Diploma	6	3.4%	
Baccalaureate	166	93.3%	
Master	3	1.7%	
Other	3	1.7%	
Work position			
Staff nurse	136	76.4%	
In charge nurse	35	19.7%	
Second senior	7	3.9%	

The Relationship between Control over Nursing Practice, Job Satisfaction, ...

Hala M. Obeidat, Neeveen M. Al-Zeriny
Abdullah M. Khamaiseh, Doa'a A. Dwairej

Shift patterns		
Regular rotating shifts	54	30.3%
7.30 am-3pm (A shift)	50	28.1%
3pm-10pm (B shift)	19	10.7%
10pm-7.30 am (C shift)	21	11.8%
(Only first shift) 7.30 am- 4 pm	34	19.1%
Work setting		
Surgical pediatrics wards	22	12.4%
Medical pediatrics wards	20	11.2%
Pediatric dialysis unit	8	4.5%
Pediatric intensive care units	34	19.1%
Pediatrics operation department	13	7.3%
	8	4.5%
Pediatric recovery	16	9%
Pediatrics emergency department	13	7.3%
	44	24.7%
Pediatrics clinics		
Other		
Average of assigned patients:		
(1-3) patients	50	28.1%
(4-6) patients	24	13.5%
>6 patients	104	58.4%

Control over Nursing Practice (CONP)

The descriptive statistics for control over nursing practice scale's data showed that nurses have a mean CONP of 2.421 (SD=0.609). Data about the mean, standard deviation, and level for the different CONP items are presented in Table 2.

Table (2) Mean, Standard Deviation, and Level for Each Item in CONP Scale

Item	Mean	SD	Rank	CONP Level
Opportunity to work on a high specialized unit	3.02	.628	1	High
Enough time and opportunity to discuss patient care problems with other nurses	2.30	.778	5	Medium
Patient assignment foster continuity of care	2.47	.903	3	Medium
A nurse manager who is a good manager and leader	2.77	.835	2	Medium
Enough staff to get the work done	2.00	.974	7	Medium
Adequate support services allow me to spend time with my patients	2.38	.901	4	Medium
Enough registered nurses on staff to provide quality patient care	2.02	1.00 0	6	Medium
Total of CONP	2.42	.609	-	Medium

Pediatrics Nurses’ Job Satisfaction

Participants’ job satisfaction was measured by the following single global item: “How satisfied are you with your current primary job? The Results indicated that nurses’ have different levels of job satisfaction and they were ranked as following: strongly satisfied (9.0%; n=16), satisfied (38.2%; n=68), dissatisfied (35.4%; n= 63), strongly dissatisfied (17.4%; n=31). Data about the mean and stander deviation of nurses’ job satisfaction are presented in Table 3.

Table (3) Mean Standard Deviation, Frequencies and Percentages for

The item	The response	No.	%
"How satisfied are you with your current primary job?"	Strongly dissatisfied	31	17.4
	Dissatisfied	63	35.4
	Satisfied	68	38.2
	Strongly satisfied	16	9.0
	Total	178	100.0
N= 178	Mean (SD)	2.39 (.877)	

Pediatrics Nurses' Job Satisfaction:

Quality of Child Care

The rank order of the participants' response to the quality patient care

Table (4) Mean and Standards Deviation for Quality Child Care Scale

The item	The response	NO.	%
"In general, how would you describe the quality of nursing care delivered to patients on your unit?"	Poor	15	8.4
	Fair	45	25.3
	Good	81	45.5
	Excellent	37	20.8
	Total	178	100.0
N= 178	Mean (SD)	2.79 (.870)	

scale was as following: excellent (20.8%; n=37), good (45.5%; n=81), fair (25.3%; n=45), poor (8.4%; n=15). Data about the mean and standard deviation for quality patient care scale are presented in Table 4.

The relationship between each of nurses' demographical variables and CONP

The results showed that there is a significant relationship between the nurses usual work shift and CONP ($R=0.188$, $R^2=0.035$, $\beta=0.077$, $P < 0.05$). Table 5 demonstrate the relationship between demographics and CONP.

Table (5) Multiple Regression (Stepwise Method) examining CONP and nurses' demographical variables

Variable	B	SE B	β	R 2	F
Usual work shift	0.077	0.030	0.188	0.035	6.461*

* $p < 0.05$

The relationship between CONP and pediatrics nurses job satisfaction.

There were a significant, medium and positive relationship between CONP and pediatric nurse job satisfaction ($R= 0.300$, $df =177$, $P<0.05$). There is a shared variance between variables (R^2), CONP help to explain about (9.0 %) of the variance in the pediatrics nurses job satisfaction ($B =0.369$ $F=12.337$, $P < 0.05$) . Data about CONP and nurse' job satisfaction relationships are presented in Table 6.

Table (6) Simple Linear Regression Correlation Coefficient examining CONP and job satisfaction relationship

Variable	B	SE B	β	R 2	F
Total of CONP	.369	.105	.256	.090	12.337*

* $p < 0.05$

The relationship between CONP and quality of child care

Simple Linear Regression correlation was used to assess if there is relationship between control over nursing practice and pediatrics nurses' perception of quality childcare in their hospitals. The results illustrate that there is a significant relationship between CONP and quality of childcare as perceived by pediatrics nurses ($R=0.189$, $R^2=0.036$, $B =0.270$, $P < 0.05$). Pearson linear correlation revealed a weak and positive relationship between CONP and quality childcare ($R= 0.189$, $df =177$, $P<0.05$); the higher levels of CONP the higher the levels of quality childcare. The results showed that CONP helps to explain the (4.0%) of the variance in the participants' score on quality patient care scale ($R^2=0.036$, $F\text{-test}=6.521$, $P < 0.05$). Data about CONP and quality of childcare relationship are presented in Table 7.

Table (7) CONP and quality of child care Using Simple Linear Regression

Variable	B	SE B	β	R ²	F
Total of CONP	.270	.106	.189	.036	6.521*

* $p < 0.05$

Discussion

Control over Nursing Practice (CONP)

The purpose of this study was to measure and to describe the level of CONP and to find out the relationship between CONP and pediatric nurse's satisfaction, and the quality of childcare. In general, the results of this study showed that Jordanian Pediatric nurses have a moderate level of CONP (2.42 out of 4), $SD= (0.609)$. These findings are similar to the findings of other studies that were conducted in different countries. Laschinger & Fida, (2015), in a cross sectional provincial survey study ,which included 723

critical care staff nurses in Ontario, Canada, examined the relationship between perceived empowerment, perceived magnet hospital traits, and mental health. The researchers found out that the nurses have moderate level of CONP with a mean of 2.52; they concluded that CONP is one of important magnet hospital attributes .

In Patrician et al. (2011) study, US nurses reported also a moderate level of CONP with a mean of 2.61. However, in Castner et al., (2013) study which included 456 registered nurses from 5 different hospitals in Northeastern metropolitan area, USA, nurses reported higher level of CONP with a mean of 3.

To the best of the researchers knowledge, few studies have searched the concept of CONP in the Middle East region. Within this context, one descriptive study was conducted in Egypt at Alexandria German Hospital(El-Bialy & Abd Elaal, 2013). The study aimed to assess the staff nurses' perceptions towards the essentials of magnetism. The result of the study revealed that the majority of participants (85.1%) believe that CONP in their hospitals is moderate and only about 13.8% of participants believed that they have high levels of control over nursing practice. Nurses less than 30 years old reported the highest level CONP with a mean of 2.73 (El-Bialy & Abd Elaal, 2013).

In Lebanon, a cross-sectional survey aimed to investigate the CONP of 1,793 registered nurses in 69 hospitals. Nurses reported moderate level of CONP with a mean of (2.56) (El-Jardali, Dimassi, Dumit, Jamal, & Mouro, 2009).

Then the two dimensions of CONP, content, and context, have been applied well to have one attribute of positive work environment, and then positive outcomes (pediatrics nurses' job satisfaction and quality child care). These results were supported by Papastavrou et al international study that concluded that positive work environment, which magnetizes nurses and fosters quality in work, improves nurses' turnover and provides safe patient care (Papastavrou et al., 2015).

Pediatrics Nurses' Job Satisfaction Level

This study revealed that pediatric nurses working at Queen Rania hospital for children were slightly dissatisfied with their current job with a mean level of job satisfaction of 2.39 out of 4. Such a result is comparable with the results of a previous studies. In A study in Egypt the findings showed that about 62% of nurses have low job satisfaction (Elsherbeny, 2018). Similarly, Shanghai and Pakistani nurses were found to be dissatisfied with their current job (Hamid, Malik, Kamran, & Ramzan, 2014; Liu et al., 2012)

In contrast to the findings of the current study , Marcelino, et al (2014) study findings showed that only 21.3% of nurses were unsatisfied and very unsatisfied in their job (Marcelino, Alves, Gasparino, & Guirardello, 2014). Similarly, high percentage of Brazilian nurses (70.7%) were satisfied with their jobs. Also , 81% of Australian nurses reported high level of job satisfaction (Desborough, Phillips, Banfield, Bagheri, & Mills, 2015).

Nurses job satisfaction level in the current study was close to the level of job satisfaction of mental health nurses in Jordan (Hamaideh, 2011). This dissatisfaction can be explained by many factors: heavy workload and time consuming bedside paper work for the purpose of accreditation was also another reason for dissatisfaction at Queen Rania Al Abdullah hospital for children. Children and their families pressure for counseling is expanding, especially that they are becoming more health-educated and are aware of their rights and their child diagnoses, medications, and complications This consumes the time and effort of pediatric nurses and requires them to be more skillful and up to date with regard to professional knowledge.

Quality of childcare

Pediatrics nurses reported that the level of quality childcare was good with a mean of 2.79. This result is consistent with the results of other

studies in other countries such as: England, U.S.A, and Germany in that nurses perceived quality of patient care as good (2.9). Similarly, nurses' perception of quality patient care in the Swiss region was good (Zúñiga et al., 2015). The study included 4311 nurses from 402 hospitals and a four-points single global item scale was used ; 70.3% of nurses reported good level of quality child care, 20% of nurses reported excellent levels of quality child and Only 9.7% reported poor level of quality child care (Zúñiga et al., 2015).

However, Canadian (2.75) and Korean (2.45) nurses had reported slightly lower levels of quality childcare. On the other hand Chinese nurses had reported the highest level of quality child care with a mean of (3.35) (Aiken et al., 2012).

Control over Nursing Practice (CONP) and Pediatrics Nurses' Job Satisfaction

The results of the current study were consistent with the results of Marcelino et al study (2013) which demonstrated that nurses who had more control over their practice in their work environment had 1.63 times higher possibility to be satisfied in nursing job ($p= 0.017$)(Kitson, Wiechula, Conroy, Muntlin Athlin, & Whitaker, 2013). Such association was also found by Carla et al (2014) whose study revealed positive significant correlation ($r = 0.48$, $n= 150$, $p< 0.0001$) between CONP and job satisfaction among Brazilian nurses from two hospitals: a maternal-infant hospital, and a tertiary hospital(Marcelino et al., 2014).

By looking at the items of CONP scale, it can be expected that there will be a positive correlation between CONP and job satisfaction. It can be also noticed that the highest means were reported regarding satisfactory dimensions among nurses in their workplace. This study was conducted in central pediatric hospital where the availability of resources, supplies, and equipment allows nurses to perform their job in an easy manner. This in turn give them more time to care for their patients without losing their time and efforts searching for devices or carrying out different request procedures which can interfere with accomplishing their assignments.

As for Queen Rania Al Abdullah Hospital for Pediatrics, the results indicated that there is a moderate, rather than high, positive correlation between CONP and job satisfaction. This result could be rationalized by having a medium agreement scores related to CONP and medium job satisfaction. This seems to be an indication of inadequate application of the CONP strategy in military hospitals' work environment. When pediatric nurses perceive themselves as having control in their work settings and as having a participation in decision making, they are more likely to be satisfied in their jobs and thus more likely to stay in their jobs (Rastegari, Khani, Ghalriz, & Eslamian, 2010; Saber, 2014)

Control over Nursing Practice (CONP) and Perceived Quality Child Care

The positive significant correlation between CONP and pediatric nurses' perception of quality child care in our study is consistent with the findings of (Castner et al., 2013) study that showed how nurses with more control over practice perceived better quality of care in their institution. In contrast, Chul et al (2013) concluded that the presence of CONP could not predict good assessment for quality of patient care ($B = -0.10$, $p = 0.617$) (Kitson et al., 2013).

The moderate positive correlation between CONP and perceived quality of child care in Queen Rania Al Abdullah Hospital for Pediatrics in this study can be explained by the continuous drive by this hospital to overcome barriers of quality child care that include: (1) availability of equipment's (Zúñiga et al., 2015) (2) skillful nurses (Gurková, Čáp, Žiaková, & Ďurišková, 2012), and (3) opportunity for development (Yurek et al., 2015).

Control over Nursing Practice and Pediatric Nurses' Demographic Data

Our study results revealed no significant differences between participant nurses' control over nursing practice according to their demographic data. However, according to the multiple regression model the nurses' usual work shift was the only demographic variable that influenced CONP indicators statistically ($R=0.188$, $R^2=0.035$, $F=0.077$, $P < 0.05$).

This result is not consistent with results of some other studies which examined the correlation between CONP among nurses and their demographic variables such as El-Bialy & Abd Elaal, (2013) study. The study was conducted to assess the magnetism attributes at Alexandria German Hospital. The results reflected a significant correlation between CONP and each of participants' age and years of experiences ($F= 6.174$, $p= 0.003$), ($F=2.871$, $p= 0.041$) respectively, at a good level of significance ($p \leq 0.05$), while ,similar to the current study result, no significant correlation was found with type of unit and educational level of nurses (El-Bialy & Abd Elaal, 2013).

The lack of correlation between participants' demographic data and their CONP in the current study can be explained by the fact that the culture of CONP has not been implemented, enforced, or assured by nurses' managers at Queen Rania Al Abdullah Hospital for Pediatrics. In addition, pediatrics nurses are not trained enough to participate in decision making and are not rewarded for such an action despite of the adopted strategies of attracting and retaining nurses in the health organizations as autonomy and control over practice

Nursing Implications

The findings of this study helps the administrators and managers at Queen Rania Al Abdullah hospital for children to know the level of CONP, job satisfaction and quality of children care among pediatric nurses so they can initiate interventions and strategies that support CONP, maintain the highest possible level of pediatric nurses' job satisfaction and

patient care quality. More over the study add to the body of knowledge about CONP and the healthy professional practice nursing environments through explicating the importance and benefits of applying CONP at work setting. The nursing educators have to highlights the importance of CONP, job satisfaction and quality of child care and related decision making strategies in nursing curriculum syllabus for the purpose of providing well-prepared nursing students with useful professional practices in their future career.

Conclusion and Recommendations

The results revealed that pediatrics nurses' control over their practices is moderate and that they are slightly dissatisfied with their nursing job. Generally, nurses seemed to perceive the level of the quality of childcare as moderate in their work settings. Moreover, the results support the positive correlation between CONP and both of pediatrics nurse's job satisfaction and the quality of childcare. This needs attention and necessary intervention from nurses, nurse educators, and researchers, hospital administrators, and policy makers to support CONP strategies and initiatives to maintain the highest possible levels of nurses' job satisfaction, and quality of care to children and their families.

Reference:

- Aiken, L., Cimiotti, J., Sloane, D., Smith, H., Flynn, L., & Neff, D. (2012). Effects of nurse staffing and nurse education on patient deaths in hospitals with different nurse work environments, *The Journal of nursing administration*, 42(10).
- Al-Hamdan, Z., Smadi, E., Ahmad, M., Bawadi, H. & Mitchell, A. (2019). Relationship Between Control Over Nursing Practice and Job Satisfaction and Quality of Patient Care, *Journal of nursing care quality*, 34(3), E1-E6.
- American Academy of Pediatrics, 2018. About Bright Futures. Retrieved from: <<https://brightfutures.aap.org/about/Pages/About.aspx>>
- American Nurses Association. (2014). What is nursing? Retrieved from: <http://www.nursingworld.org/EspeciallyForYou/What-is-Nursing>
- Armstrong, S., Rispel, L. & Penn-Kekana, L. (2015). The activities of hospital nursing unit managers and quality of patient care in South African hospitals: a paradox, *Global health action*, 8(1), 26243.
- Asegid, A., Belachew, T., & Yimam, E. (2014). Factors Influencing Job Satisfaction and Anticipated Turnover among Nurses in Sidama Zone Public Health Facilities, South Ethiopia. *Nursing research and practice*, 2014, 909768. <https://doi.org/10.1155/2014/909768>
- Castner, J., Ceravolo, D., Foltz-Ramos, K., & Wu, Y. (2013) "Nursing Control Over Practice and Teamwork" *OJIN: The Online Journal of Issues in Nursing*, 18 (2), doi: 10.3912/OJIN.Vol18No02Man03
- Chien, W. & Yick, S. (2016). An investigation of nurses' job satisfaction in a private hospital and its correlates, *The open nursing journal*, 10, 99.
- Desborough, J., Phillips, C., Banfield, M., Bagheri, N. & Mills, J. (2015). 'Impact of nursing care in Australian general practice on the quality of care: A pilot of the Patient Enablement and Satisfaction Survey (PESS)', *Collegian* 22 (2), 207-214.
- Elsherbeny, E. (2018). Job Satisfaction Among Nurses Working in Mansoura University Hospital: Effect of Socio-Demographic and Work Characteristics, *Egyptian Journal of Occupational Medicine*, 42(2), 227-240.

- El-Bialy, G. & Abd Elaal, N. (2013). Essentials of Magnetism as Perceived by Staff Nurses at Alexandria German Hospital, *Life Science Journal*, 10(4), 2889-2899.
- El-Bialy, G. & Elaal, N. (2013). Essentials of Magnetism as Perceived by Staff Nurses at Alexandria German Hospital, *Life Science Journal*, 10(4), 2889-2999.
- El-Jardali, F., Dimassi, H., Dumit, N., Jamal, D. & Mouro, G. (2009). A national cross-sectional study on nurses' intent to leave and job satisfaction in Lebanon: implications for policy and practice, *BMC nursing*, 8(1), 3.
- Franck, E., Timmermans, O., Van Bogaert, P. & Van Heusden, D. (2014). Nurse work engagement impacts job outcome and nurse-assessed quality of care: Model testing with nurse practice environment and nurse work characteristics as predictors, *Frontiers in Psychology*, 1261. doi: 10.3389/fpsyg.2014.0
- Gurková, E, Čáp, J, Žiaková, K. & Ďurišková, M. (2012). Job satisfaction and emotional subjective well-being among Slovak nurses, *International Nursing Review*, 59(1), 94-100.
- Hamaideh, S. (2011). Burnout, social support, and job satisfaction among Jordanian mental health nurses, *Issues in Mental Health Nursing*, 32(4), 234-242.
- Hamid, S., Malik, A., Ullah, K. & Ramzan, M. (2014). Job satisfaction among nurses working in the private and public sectors: a qualitative study in tertiary care hospitals in Pakistan, *Journal of multidisciplinary healthcare*, 7, (25).
- Hamed, T. (2016). Validity and Reliability of the Research Instrument; How to Test the Validation of a Questionnaire/Survey in a Research, *International Journal of Academic Research in Management (IJARM)*, 2016, 5. fahal-02546799f
- Harms, T., Clifford, R. & Cryer D. (2005). *Early childhood environmental rating scale-revised edition*, Teachers College Press; New York, NY: 2005.

Jordan Royal Medical Services (2018). Health statistics of RMS. Retrieved from:<http://www.JRMS.GOV.JO>.

Kitson, A., Wiechula, R., Conroy, T., Muntlin A. & Whitaker, N. (2013). The future shape of the nursing workforce: A synthesis of the evidence of factors that impact on quality nursing care.

Kramer, M., Schmalenberg, C. & Maguire, P. (2010). Nine structures and leadership practices essential for a magnetic (healthy) work environment, *Nursing administration quarterly*, 34(1), 4-17.

Kutney-Lee, A., Wu, S., Sloane, M., & Aiken, H. (2013). Changes in hospital nurse work environments and nurse job outcomes: an analysis of panel data, *Int J Nurs Stud*; 50(2): 195-201, doi:10.1016/j.ijnurstu.2012.07.014.

Laschinger, H. K & Fida, R. (2015). Linking nurses' perceptions of patient care quality to job satisfaction: the role of authentic leadership and empowering professional practice environments. *J Nurs Adm.*45(5):276-83.doi:10.1097/NNA.0000000000000198.

Lin, C., Wang, H., Li, T. & Huang, L. (2007). Reliability and validity of nurses' job satisfaction scale and nurses' professional commitment, *Mid-Taiwan Journal of Medicine*, 12(2), 65-75

Liu, C., Zhang, L., Ye, W., Zhu, J., Cao, J., Lu, X, & Li, F. (2012). Job satisfaction and intention to leave: a questionnaire survey of hospital nurses in Shanghai of China. *J Clin Nurs.* 21(1-2):255-63. doi: 10.1111/j.1365-2702.2011.03766.x.

Carla, F., Daniela, A., Renata, G, & Edinêis, G. (2014). Validation Of The Nursing Work Index-revised Among Nursing Aides And Technicians [validac, ão Do Nursing Work Index-revised Entre Auxiliares E Técnicos De Enfermagem]. *Acta Paulista de Enfermagem. Acta Paul Enferm.* 27(4):305-10. DOI <http://dx.doi.org/10.1590/1982-0194201400052>

Negussie. N. & Demissie, A. (2013). Relationship between leadership styles of nurse managers and nurses' job satisfaction in Jimma University Specialized Hospital. *Ethiop J Health Sci.* 23(1):49-58.

-
- Papastavrou, E., Acaroglu, R., Sendir, M., Berg, A., Efstathiou, G., Idvall, E., Kalafati, M., Katajisto, J., Leino-Kilpi, H., Lemonidou, C., da Luz, M.D, & Suhonen, R. (2015). The relationship between individualized care and the practice environment: an international study. *Int J Nurs Stud.* 52(1): 121-33. doi: 10.1016/j.ijnurstu.2014.05.008.
- Patrician, P.A., Loan, L., Mc Carthy, M., Fridman, M., Donaldson, N., Bingham, M, & Brosch, L. R. (2011). The association of shift-level nurse staffing with adverse patient events. *J Nurs Adm.* 41(2):64-70. doi: 10.1097/NNA.0b013e31820594bf
- Rastegari, M., Khani, A., Ghalriz, P., & Eslamian, J. (2010). Evaluation of quality of working life and its association with job performance of the nurses. *Iranian journal of nursing and midwifery research*, 15(4), 224–228.
- Saber, D. (2014). Frontline registered nurse job satisfaction and predictors over three decades: A meta-analysis from 1980 to 2009, *Nursing Outlook*, 62(6), 402-414.
- Slater, P. & McCormack, B. (2007). An exploration of the factor structure of the nursing work index. *Worldviews on Evidence-Based Nursing / Sigma Theta Tau International, Honor Society of Nursing*, 4(1), 30–39. doi:10.1111/j.1741-6787.2007. 00076.x
- Taylor, M. (2006). Mapping the literature of pediatric nursing, *Journal of the Medical Library Association: JMLA*, 94(2 Suppl), E128–E136.
- Yurek, L., Havens, D., Hays, S. & Hughes, L. (2015). Factorial Validity of the Decisional Involvement Scale as a Measure of Content and Context of Nursing Practice. *Res Nurs Health.* 38(5):403-16. doi: 10.1002/nur.21668.
- Zúñiga, F., Ausserhofer, D. & Hamers, J. (2015). Are Staffing, Work Environment, Work Stressors, and Rationing of Care Related to Care Workers' Perception of Quality of Care? A Cross-Sectional Study. *Journal of the American Medical Directors Association.*16(10): 860-866.DOI: 10.1016/j.jamda.2015.04.012.