# Situational Leadership Styles, Staff Nurse Job Characteristics Related to Job Satisfaction and Organizational Commitment of Head Nurses Working in Hospitals under the Jurisdiction of The Royal Thai Army

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**Objective:** To analyze the relationships between the situational leadership styles, staff nurse job characteristic with job satisfaction and organizational commitment of head nurses working in hospitals under the jurisdiction of the Royal Thai Army.

*Material and Method:* The cross-sectional analytical study was conducted in 128 head nurses working in hospitals under the jurisdiction of the Royal Thai Army. Data were collected by mailed questionnaires. A total of 117 completed questionnaires (91.4%) were received for analysis. Statistical analysis was done using Pearson's Product Moment Correlation Coefficient. *Results:* It was found that situational leadership styles were not correlated with job satisfaction and organizational commitment of head nurses. Staff nurse job characteristics had a low level of positive correlation with job satisfaction and organizational commitment of head nurses at 0.05 level of significance (r = 0.202 and 0.189 respectively).

**Conclusion:** The hospital administrators should formulate policy to improve working system, human resource management and formulate policies and strategies based on situational leadership. In addition, they should improve the characteristics of staff nurse job by using surveys to obtain job satisfaction and organizational commitment.

Keywords: Situational leadership styles, Staff nurse job characteristics, Job satisfaction, Organizational commitment

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The hospitals under the jurisdiction of the Royal Thai Army, Ministry of Defense have the obligation to provide service in nursing, health campaign, disease protection and rehabilitation for soldiers and their families and general people. Moreover, they have the obligation to provide medical equipment for the army units in the field, which is one of the important missions of the hospitals under the jurisdiction of the Royal Thai Army aside from providing nursing service. Therefore, the hospitals that are under

Intaraprasong B, Department of Public Health Administration, Faculty of Public Health, Mahidol University, Bangkok 10400, Thailand. Phone: 0-2644-8833 E-mail: phpit@mahidol.ac.th the jurisdiction of the Royal Thai Army have a different role in hospital service compared to other hospitals. These hospitals have professional nurses who are important resources for health services and most of their staff is composed of nurses.

The economic situation has seriously affected everyone in society, businesses have stopped and the government made a loan from the International Mutual Fund (IMF) because of higher debts. It had to follow the agreement that it made with the IMF such as: reduce the government budget, reduce the government investment including reducing the hiring of government officers. As an effect of the army system reform, the army created the structure improvement plan for the year 2000-2007. The Army had to freeze manpower hiring and adjust the manpower rate. Nurses, who are

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considered as the most important resource in nursing, were affected just like in other professions that reduced their manpower. Nurses have more responsibilities than before while the number of the patients remains the same. They have to work in full capacity while their economic benefits have decreased. This situation affects the mental condition of the nurses; they worry and are insecure in the society and in their career. These are the causes of boredom, frustration and lack of energy to work, which affects the quality of their nursing service to the patients. Therefore, in the period of constraint from every aspect of the problems and economic pressure, the service provider has to reform the service system so as to achieve an economical and efficient quality of life. The nurses have to build their physical or mental strength to have good physical and mental health<sup>(1)</sup>. Then they will be happy and satisfied in their job.

Job satisfaction is the key or the core of work efficiency<sup>(1)</sup>. Organizational effectiveness depends on the satisfaction of the human resources. A factor that is related to job satisfaction is organizational commitment<sup>(2)</sup>. If the resources have high organizational commitment then job satisfaction will be in the high level. There are more scholars and administrators who are paying more attention to the concept of commitment. They have found that high organizational commitment is related to the turnover rate. They believe that they are able to forecast turnover rate better than job satisfaction<sup>(3)</sup>.

Due to the rapid changes in the economy, society, science and technology, nurses are one of the professionals that nursing administrators have to take good care of so that they will get least affected and understand their situation. To adapt the good leadership style to the situation will decrease pressure from society. Every level of nursing administrator or head nurse who is in the low level of management must be a leader and the one who sees the big picture of the changing environment<sup>(4)</sup>. The process of authority is used on the persons or groups to stimulate them to achieve the target under the situation<sup>(5)</sup>. Leaders of change must evaluate the person or target group's willingness and abilities. Then they will be able to choose the related strategies to apply to the topic that they have evaluated<sup>(6)</sup>. Leaders are the ones who are able to change their interest and needs, to convince the followers to change their own interest, needs or target group. This makes them succeed in reaching the goals that they want to achieve<sup>(7)</sup>. The administrators use their leadership to command, orient or motivate the nurses to perform efficiently<sup>(8)</sup>. The efficient leaders make them collaborate to achieve the targets of the organization that causes satisfaction in the workers' group and organization<sup>(9)</sup>. Commitment is the person's character that relates to the affective commitment, continuance commitment and normative commitment<sup>(10)</sup>. The person who is committed to the organization will affect the motivation in working, have good performance and increase the organization's productivity and also reduce the turnover rate and job rotation<sup>(11)</sup>. If the resources have low organizational commitment, this can cause absenteeism, resignation, increase in job rotation and it could affect the organization's efficiency<sup>(12)</sup>.

Lack of commitment in the resources causes the problem of resignation of the nurses in many government hospitals. According to the discussion with the nurses who quit, changed the job and rotated jobs, the researcher got various answers such as overwhelmed by the job, manpower is not enough, job characteristics are frustrating, they did not see the meaning of the job, they need to have relationship with many levels of management, management does not motivate them to work, or cannot adapt themselves to the organization. If the authors consider the exact problem that caused the nurses to guit or change their job, there is something in the job description that the nurse cannot choose<sup>(13)</sup>. Most of the nursing staff are female and among all of the professions with job descriptions that focus on gender roles, the authors can see that nursing is the profession that is being taken advantage of by social forces and medical limitations.

Army nurses provide health services to the soldiers, their family and civilians quality of life. Resignation and job rotation of the nurses under the jurisdiction of the Royal Thai Army not only causes the Army to lose their important manpower but also indicates that the organization is unable to build the relationship with its members. The organization has the obligation to find the new resources to replace them and the job will not run smoothly<sup>(14)</sup>. Even though Thailand is under the era of government and health reform or decentralization, no matter what is the direction of health development, the nursing staff will still be a root and the major group which has an important role in supporting concept and policy in order to achieve the target efficiency and productivity according to the objectives of Thai people's health development.

The above information review shows the

change in external environment. Reform of the government and health system development made nurses worry and insecure about their society and career. This has caused them to be tired, frustrated and lack willingness to work and to confront with the heavy job and pressure. Researcher is interested in analyzing the situational leadership style, staff nurse job characteristics and building up the job satisfaction and organizational commitment of the head nurses which is under the jurisdiction of the Royal Thai Army.

According to the literature review and related researches, it was found that leadership style by the concept of the situational leadership of Hersey and Blanchard, the style that selling is the first and second is the participating. There are few people in this field who have studied this concept. Staff nurse job characteristics, job satisfaction and organizational commitment was in the level of middle to high. Also leadership style and staff nurse job characteristics have a relationship to job satisfaction and organizational commitment. Therefore, researcher is interested in using these variables in the present study.

#### **Objectives of Study**

The objective of the present study is to analyze the relationship between situational leadership styles, staff nurse job characteristics with job satisfaction and organizational commitment of head nurses working in hospitals under the jurisdiction of the Royal Thai Army.

### **Material and Method**

A cross-sectional analytical study was conducted in 128 head nurses working in hospitals under the jurisdiction of the Royal Thai Army. The questionnaires formulated from literature review, was divided into 4 parts as follows:

Part 1: was composed of the Job Satisfaction Questionnaire and the Organizational Commitment Questionnaires. The researcher had applied the Satisfaction measurement named "Minnesota Satisfaction Questionnaire" and the "Organizational Commitment Questionnaire" of Meyer and Allen.

The Minnesota Satisfaction Questionnaire (MSQ) of Weiss et al<sup>(15)</sup> consisted of 50 Items: 43 positive questions and 7 negative questions. Each item was in the rating scale with 5-point Likert scale where "5" represents the "strongly agree" response and "1" represents "strongly disagree" response and "5" represents the "excellent" response and "1" represents "very poor" response. The MSQ composed of 5 components including general job satisfaction (17 items), working condition (8 items), supervision (9 items), compensation (8 items) and co-worker (8 items).

Meyer & Allen<sup>(16)</sup> created the organizational commitment measurement called "Meyer and Allen's Three-Component Model". It was the tool that measured the feeling of the person in the organization. There were three commitment scales including affective commitment, continuance commitment and normative commitment with 18 items: 14 positive items and 4 negative items. Each statement will provide the 5 choices of rating scale according to Likert Scale where "5" represents the "strongly agree" response and "1" represents "strongly disagree" response.

Part 2: Situational leadership style of head nurse questionnaire. The researcher had applied the concept and theory of Hersey and Blanchard in order to construct questionnaires about the situational leadership style of the head nurses. Then, this part of questionnaire will be used for evaluating the primary and secondary style, the flexibility to use leadership style and leadership style adaptability of the head nurse.

In the assessment of the leadership style and leadership effectiveness of the situational leadership of Hersey & Blanchard, they developed the tool called "Leadership Effectiveness and Adaptability Description, LEAD". LEAD has the administrator assessment called "LEAD Self" and the others assess the administrators called "LEAD Other". The type of the questionnaire is the simulation of the 12 situations<sup>(17)</sup>.

It describes 12 situations involving a leader's immediate subordinates. Each of the 12 situations presented in the questionnaire has four alternative responses and the respondent is to pick the choice which best describes their probable behavior in the same situation. Items are scored as one of four subscales, each one representing a different level of job readiness. The one who gets the high score means they have effectiveness in leadership much more than the one who gets a low score. There are 3 aspects to evaluate the leadership style; 1) primary style, 2) secondary style and 3) style range. The leadership style that is used the most will be the primary style and the others that have inferior use will be the secondary style. Each column means the following leadership styles. Column S1 means the "Telling" style, column S2 means the "Selling" style, column S3 means the "Participating" style and column S4 means the "Delegating" style.

The flexibility of the style range is divided into 3 levels as follows:

The high level means "Theuse of at least 3 leadership styles".

The moderate level means "The use of 2 leadership styles".

The level of improvement means "The use of only one leadership style".

### The evaluation of leadership style adaptability

The Evaluation of Leadership style adaptability starts with indicating the score for each item. The value given to each item depends on the suitable in leadership style adaptability in a situation. Score 3 means the performance is the most suitable, score 2 means the performance is rather suitable, score 1 means the performance is a little suitable and score 0 means the performance is not suitable. The score of leadership style adaptability can be calculated by substituting the answer of A, B, C and D in each situation with the score of each item. Then, sum all score, the result means the score of adaptability of the participant who answer those questionnaires.

Part 3: The researcher had applied the measurement from the statements which were indicate the nurse task named "Staff Nurse Job Characteristic Index: SNJCI" referred in the research of Tonges et al<sup>(18)</sup>. Such statements were conducted by the relationship among SNJCI, Job Descriptive Survey: JDS and Critical psychological states: CPS. It was found that 27 out of 100 items of the SNJCI were significantly related; therefore, this instrument can be used to measure job characteristic concerning skill variety, task identity, task significance, autonomy, feedback from work, feedback from agents and required interaction.

The staff nurse job characteristics consisted of 27 items: 20 positive questions: and 7 negatives questions. Using a 5-point Likert scale which were (level of working in real conditions) "always", "often", once a while", "never" and "no evaluate". The score for positive statement was 5 to 1 respectively and score was convert for negative statement.

Part 4 was about demographic characteristics of the samples such as age, marital status, highest educational Level, experience of work and experience in head Nurse position.

Three experts had examined the constructed questionnaires focusing on the content completeness, and to clarified the language and relevant of the issue. Some corrections were made based on the suggestion provided in order to cover the necessary content. The researcher tested the reliability of the questionnaires regarding situational leadership style, job characteristics, job satisfaction and organizational commitment by trying out with the sample group that had the characteristics similar to the research population (30 nurses working in the hospital under the jurisdiction of the Royal Thai Navy). After that the data was analyzed by using Pearson's product moment correlation and Cronbach's alpha coefficient. The researcher indicated the Alpha coefficient  $\geq 0.70$ . From the analysis of content reliability regarding situational leadership style, job characteristics, job satisfaction and organizational commitment questionnaires, the Alpha coefficient were 0.64, 0.78, 0.89 and 0.90 respectively.

Data were analyzed by descriptive statistics such as percentage and frequency to describe the distribution of situational leadership style, staff nurse job characteristics, job satisfaction and organizational commitment of head nurses. Pearson's product moment correlation coefficient was used to test the relationship among situational leadership style, staff nurse job characteristics job satisfaction and organizational commitment of head nurses.

The level of correlation coefficient according to the criteria of Elifson<sup>(19)</sup> can be divided as follows:

Correlation coefficient	Level of relationship
r = 0.00	There is no relationship.
$r = \pm 0.01 - 0.30$	The level of relationship is
	low.
$r = \pm 0.31 - 0.70$	The level of relationship is
	moderate.
$r = \pm 0.71 - 0.99$	The level of relationship is
	high.
$r = \pm 1.00$	The level of relationship is
	very high.

#### Results

Data were collected by mailed questionnaires. A total of 117 completed questionnaires (91.4%) were received for analysis.

### Demographic characteristics of head nurses

Results about demographic characteristics of head nurses in Table 1 showed that majority of head nurses (37.6%) aged between 45-53 years and 64.1% of them was married. Most head nurses (82.1%) completed bachelor degree or equivalent degree. Considering working years, 29.1% had been in nursing professional for 20-24 years. Besides, it appeared that head nurses (65.8%) had been being in their positions for 1-5 years, and 58.1% of all head nurses received training about leadership and nursing administration.

# Situational leadership style, job characteristics, job satisfaction and organizational commitment Situational leadership style

Most of head nurses (42.5%) used "Participating" (S3) in dealing with different situations. "Selling" (S2), "Telling" (S1) and "Delegating" (S4) were used 36.8%, 13.7% and 6.9% respectively.

Considering situational leadership style, research results from Table 2 indicated as following:

"Telling" (S1): Situation 9, task force but the group is not clear on it goals was the most chosen by head nurses (40.2%). Situation 5, reminding group members to have their task done on time, situation 8, performance and interpersonal relations are good but insecure about performance effectiveness and situation 12, some difficulties in working 33.3%, 31.6% and 15.4% respectively.

"Selling" (S2): Most of head nurses (80.3%) chose situation 10, no responding to redefining of standards. Situation 3, group performance and interpersonal relations have been good but unable to solve problems, was chosen up to 70.1%. While situation 5, reminding group members to have their task done on time and situation 7, flexibility in its operations were less chosen with percentage of 17.1.

"Participating" (S3): Head nurses chose situation 7, flexibility in its operations, up to 79.5%. Situation 4, a fine record of accomplishment and respect

Table 1.	Number and percentage of head nurses demographic
	characteristics $(n = 117)$

Demographic characteristics	n	%
Age (years)		
28-29	5	4.3
30-34	9	7.7
35-39	29	24.8
40-44	30	25.6
45-53	44	37.6
Marital status		
Single	34	29.1
Married	75	64.1
Widowed/Divorced	8	6.8
Educational level		
Bachelor degree/Equivalent degree	96	82.1
Master degree	21	17.9
Experience of work (years)		
5-9	8	6.8
10-14	17	14.5
15-19	27	23.1
20-24	34	29.1
25-30	31	26.5
Experience in current position (years)		
1-5	77	65.8
6-10	24	20.5
11-15	9	7.7
16-20	6	5.1
21-24	1	0.9
Training leadership and nursing administration		
No	49	41.9
Yes	68	58.1

Table 2. Situational leadership style of head nurses by situations (n = 117)

Situations	Situational Leadership Style						
	S1-selling n (%)	S2-telling n (%)	S3-participating n (%)	S4-deligating n (%)			
s1 situation 1	3 (2.6)	56 (47.9)	52 (44.4)	6 (5.1)			
s2 situation 2	11 (9.4)	43 (36.8)	61 (52.1)	2 (1.7)			
s3 situation 3	1 (0.9)	82 (70.1)	32 (27.4)	2 (1.7)			
s4 situation 4	9 (7.7)	7 (6.0)	85 (72.6)	16 (13.7)			
s5 situation 5	39 (33.3)	20 (17.1)	48 (41.0)	10 (8.5)			
s6 situation 6	3 (2.6)	67 (57.3)	45 (38.5)	2 (1.7)			
s7 situation 7	4 (3.4)	20 (17.1)	93 (79.5)	-			
s8 situation 8	37 (31.6)	34 (29.1)	46 (39.3)	-			
s9 situation 9	47 (40.2)	46 (39.3)	24 (20.5)	-			
s10 situation 10	3 (2.6)	94 (80.3)	18 (15.4)	2(1.7)			
s11 situation 11	9 (7.7)	35 (29.9)	55 (47.0)	18 (15.4)			
s12 situation 12	18 (15.4)	13 (11.1)	84 (71.8)	2 (1.7)			
Total	193 (13.7)	517 (36.8)	597 (42.5)	97 (6.9)			

for changes and situation 12, some difficulties in working were chosen in pretty high percentage, 72.6 and 71.8 respectively. However, situation 9, task force but the group is not clear on it goals and situation 10, no responding to redefining of standards were less chosen, 20.5% and 15.4% respectively.

"Delegating" (S4): Head nurses chose situation 11, handled its tasks and direction and situation 4, a fine record of accomplishment and respect for changes, with percentage of 15.4 and 13.7 respectively. Nevertheless, none of head nurses chose situation 7, flexibility in its operations, situation 8, performance and interpersonal relations are good but insecure about performance effectiveness and situation 9, task force but the group is not clear on it goals.

Data and results in Table 3 indicated that more than half of head nurses (58.1%) reported that "Participating" (S3) was the most frequent style they used. Only 24.8% of head nurses reported the use of "Selling" (S2) and 3.4% reported the use of "Telling" (S1). None of head nurses reported the use of "Delegating" (S4) and 13.7% reported the use of two to three leadership styles all together.

According to findings from Table 4, head nurses (28.2%) reported the usage of "Selling" (S2) as their secondary style of leadership. "Telling" and "Selling" (S1 & S2) was 21.4% reported. Head nurses (13.7%) reported the usage of "Participating" (S3) and 10.3% reported the usage of "Telling" and "Participating" (S1 & S3). Only 6% of head nurses reported the use of "Telling" (S1) and no one reported the use of "Delegating" (S4). There was 6.8% of head nurses reporting merely usage only primary leadership style. When head nurses utilized two styles of leadership as their secondary leadership style, "Selling" (S2) or "Participating" (S3) would be chosen as a part of a co-leadership style. However, "Delegating" (S4) would be considered when head nurses utilized 2 or 3 leadership styles together.

Data and results from Table 5 indicated that more than half of head nurses (53.8%) was flexible in using leadership style in high level and 45.3% of head nurses expressed flexibility in moderate level. However, it was unclear about the level of flexibility in using style of leadership of one head nurse.

In conclusion, generally, head nurses expressed flexibility in using style of leadership in high and moderate levels; though, the present study could not indicate one head nurse's level of flexibility.

Regarding Table 6, researcher used scores of situational leadership to transform to Leadership Effectiveness and Adaptability Description of Hersey & Blanchard. The results of adaptability description of head nurses working in hospitals under the jurisdiction of the Royal Thai Army indicated that 57.3% of head

**Table 3.** Situational leadership style of head nurses by primary leadership style (n = 117)

Primary Leadership Style	n	%
Telling (S1)	4	3.4
Selling (S2)	29	24.8
Participating (S3)	68	58.1
Delegating (S4)	-	-
Telling and Selling (S1 & S2)	2	1.7
Selling and Participating (S2 & S3)	13	11.1
Telling, Selling and Participating	1	0.9
(S1 & S2 & S3)		

Table 4. Situational leadership style of head nurses by secondary leadership style (n = 117)

Secondary leadership style	n	%
Telling (S1)	7	6.0
Selling (S2)	33	28.2
Participating (S3)	16	13.7
Delegating (S4)	-	-
Telling and Selling (S1 & S2)	25	21.4
Telling and Participating (S1 & S3)	12	10.3
Selling and Participating (S2 & S3)	2	1.7
Selling and Delegating (S2 & S4)	8	6.8
Participating and Delegating (S3 & S4)	2	1.7
Telling, Selling and Delegating (S1 & S2 & S4)	2	1.7
Telling, Participating and Delegating (S1 & S3 & S4)	1	0.9
Selling, Participating and Delegating (S2 & S3 & S4)	1	0.9
Using Only Primary Leadership Style	8	6.8

nurses' adaptability was moderate and 42.7% needed self-development and none of head nurses had high adaptability in using situational leadership.

#### Job characteristics

Overall, head nurses had nurse job characteristics in a high and moderate levels. Nurse job characteristics in each aspect appeared to be in a high level as well. Data and results from Table 7 indicated that staff nurse job characteristics in each aspect were pretty much in high level.

For instance, head nurses reported required interaction in the highest level (mean = 4.32), follow by skill variety, autonomy and task identity (mean = 4.10, 4.02 and 3.95 reports respectively). Feedback from agents somehow, presented in low and very low levels with mean score 3.09 in total.

# Job satisfaction

The present study found that head nurses had job satisfaction in a moderate level. According to Table 8, mean score of head nurses were satisfied with overall job in a moderate level (mean = 2.96) and their satisfaction in each aspect of job was in a moderate level as well. General job satisfaction, ranging from moderate to high levels was in the first rank (mean = 3.38). Satisfaction with co-worker, working conditions, and supervision appeared in a moderate level (mean = 3.24, 3.22 and 2.98 respectively). Besides, head nurses were satisfied with compensation in low levels (mean = 2.16).

# Relationship analysis of situational leadership style, staff nurse job characteristics, job satisfaction and organizational commitment of head nurses

In Table 10 of the present study used Pearson's product moment correlation coefficient as a

statistical tool. The present study found that there was no relationship between situational leadership styles with job satisfaction and organizational commitment.

The findings indicated that staff nurse job characteristics had a positive significant low positive

 Table 5. Level of flexibility of situational leadership style

 of head nurses (n=117)

Level of Flexibility	n	%
High ( $\geq$ 3 styles or more) Moderate (2 styles)	63 53	53.8 45.3
Required improvement (cannot predict)	1	0.9

**Table 6.** Levels of leadership style adaptability of head nurses (n = 117)

Scores/levels of leadership style adaptability	n	%
0-23 (Needed self-development)	50	42.7
24-29 (Moderate Adaptability)	67	57.3
30-36 (High Adaptability)	-	-

 Table 7. Mean and Standard Deviation of staff nurse job characteristics of head nurses (n=117)

Job Characteristics	Mean	SD
Overall staff nurse job characteristics Skill variety Task identity Task significance Autonomy Feedback from work Feedback from agents	3.65 4.10 3.95 3.78 4.02 3.49 3.09	0.72 0.99 0.93 0.86 1.00 0.89 0.96
Required interaction	4.32	0.86

Job Characteristics	Mean	SD		Leve	Level of working in real conditions			
			Very High n (%)	High n (%)	Moderate n (%)	Low n (%)	Very Low n (%)	
Overall job satisfaction	2.96	0.48	-	9 (7.7)	96 (82.1)	10 (8.5)	2 (1.7)	
General Job satisfaction	3.38	0.69	8 (6.8)	34 (29.1)	71 (60.7)	3 (2.6)	1 (0.9)	
Working conditions	3.22	0.88	8 (6.8)	33 (28.2)	57 (48.7)	15 (12.8)	4 (3.4)	
Supervision	2.98	0.94	8 (6.8)	14 (12.0)	75 (64.1)	8 (6.8)	12 (10.3)	
Compensation	2.16	0.88	-	2 (1.7)	50 (42.7)	30 (25.6)	35 (29.9)	
Co-worker	3.24	0.69	9 (7.7)	18 (15.4)	82 (70.1)	8 (6.8)	-	

**Table 8.** Levels of job satisfaction of head nurses (n = 117)

relationship with job satisfaction and organizational commitment at the 0.05 level (r = 0.202, 0.189 respectively). In addition, skill variety was negative significantly related to the aggregate job satisfaction (r = -0.184) and three of seven staff nurse job characteristics sub dimensions (autonomy, feedback from agents and required interaction) were positively significantly associated with job satisfaction.

From Table 10, it can be seen that there was no relationship between staff nurse job characteristics with continuance commitment sub dimension of organizational commitment.

#### **Organizational commitment**

The present study found that head nurses had organizational commitment in a moderate level. Data and results from Table 9 indicated that head nurses had moderate level of organizational commitment (mean = 3.14). In specific, head nurses reported high to very

**Table 9.** Level of organizational commitment of head nurses(n = 117)

Job Characteristics	Mean	SD
Overall organizational commitment	3.14	0.54
Affective commitment	3.88	0.84
Continuance commitment	2.39	1.00
Normative commitment	3.15	0.93

high affective commitment to their organizations (mean = 3.88) where as normative commitment and continuance commitment predominated in a moderate level, 3.15 and 2.39 respectively.

#### Discussion

According the results, it was found that situational leadership styles had no relationship with job satisfaction and organizational commitment.

In regard to leadership style adaptability of head nurses, findings indicated that head nurses' leadership style adaptability was in a moderate level, and none of head nurses had a high level. Since head nurses did not use proper leadership styles by using too often of "Participating" (S3) and "Selling" (S2) so, their leadership style adaptability resulted in a moderate level and needed self-development. So, they mainly used only 2 mentioned leadership styles. In addition, the present study found that about half of head nurses received training about leadership and nursing administration. As a result, the leadership style adaptability of head nurses was in a moderate level and needed self-development. In compare the level of adaptability of head nurses to another study', they appeared to gain different outcomes. The present study of Sompit Karndumri<sup>(20)</sup>, which studied the motivation and leadership effectiveness among head nurses working in the over 90-beds hospital in Chiangmai, founded that a lot of head nurses had leadership

 Table 10.
 Correlation coefficient between situational leadership styles, staff nurse job characteristics with job satisfaction, and organizational commitment of head nurses (n = 117)

	Correlations							
	Staff nurse job charac- teristics	Skill variety	Task identity	Task signi- ficance	Auto- nomy	Feedback from work	Feedback from agents	Required interaction
Job satisfaction	0.202*	-0.184*			0.194*		0.359**	0.176
General job satisfaction	0.203*					0.232*	0.251**	0.196*
Working condition				0.191*			0.253**	
Supervision	0.276**			0.205*	0.247**	0.189*	0.373**	
Compensation	-0.123	-0.327**		-0.188*				
Co-worker		-0.262**					0.367**	
Organizational commitment	0.189*		0.184*					0.241**
Affective commitment Continuance commitment	0.187*		0.187*					0.311**
Normative commitment	0.245**		0.194*	0.211*	0.190*		0.209*	0.230*

\*\* Correlation is significant at the 0.01 level

\* Correlation is significant at the 0.05 level

effectiveness in a low level. Adams's study, which studied the leader behavior of directors of nursing in rural hospitals, found that directors of nursing had leadership effectiveness slightly above standard levels<sup>(21)</sup>.

Furthermore, the result of Pearson's product moment correlation coefficient analysis, staff nurse job characteristics had a significant low positive relationship with job satisfaction and organizational commitment. It could be that job satisfaction and organizational commitment of head nurses had in a moderate level. Regarding job satisfaction aspect, head nurses were satisfied with general job in the most because they got valuable experiences from their jobs. Job satisfaction is a composition of feelings between expectation and experiences gained from working. Head nurses' satisfaction in work is not only from the expectation from works but also from personal expectation based on experiences and psychology needs. Satisfaction of co-worker was the second most reported. Many of head nurses were impressed when hospital personnel would say hello when passed that their co-workers had good co-operation. These findings were associated with the present study of Thanita Chimwong<sup>(22)</sup> which reported that total satisfaction of the staff nurse was in a moderate level. In contrast to Wandee Chookarn's study<sup>(23)</sup>, she found that job satisfaction of nurse instructors was in a moderate level but their organizational commitment in high level. Hackman & Oldham<sup>(24)</sup> stated that when practitioners received direct and clear information regarding consequences of their actions, they would be satisfied in working. Moreover, Roongnapa Poonnart(25) studying professional nurses in Phyathai Hospital, Chirapan Pooneung<sup>(26)</sup> studying nurses in Community Hospital in Chainat and Tonges et al<sup>(17)</sup> studying professional nurses in Center Hospital founded relationships between staff nurse job characteristics and nurse job satisfaction.

Organizational commitment of head nurses, generally, was in a moderate level. Regarding, affective commitment was in a high level because head nurses emotional attached to their organizations. Some head nurses also felt that their organizations were their homes and they themselves were family members. Normative commitment was in a moderate level. Some head nurses reported that they did not feel guilty if they left their organizations but they were ready to leave whenever they had a chance. Continuance commitment was reported in a moderate level. In short, although head nurses already put a lot of effort in their organizations, it could not guarantee that they would not consider finding a new job. In reality, head nurses' opportunity to get a new job was still available. So, these made head nurses' organizational commitment be in a moderate level. This part of the present study was in line with the study of Anchalee Magbunsong<sup>(27)</sup> that organizational commitment of head nurses at the regional hospitals and general hospital under the Ministry of Public Health was in a moderate level. Manee Taworntaweewong<sup>(28)</sup> who studied the organizational commitment of personnel responsibility for health services in municipal health centers in Bangkok found relationship between job characteristics and organizational commitment.

Findings suggest that formulating policy to improve working system to be friendly for performance effectiveness by designing systems that support feedback from work, skill variety and required interaction. Formulating policy for human resources management by emphasizing task identity and required interaction. By developing interactions and better communication with patients, patient's relatives and co-worker, employees will have a positive feeling to their jobs and organizations and they will continue working for organizations because of their own desires. Formulating policies and strategies based on situational leadership concept in order to develop leadership styles along with the readiness of followers. "Delegating" style of leadership which turned over responsibility for decision making and implementation of the tasks to the subordinates should be emphasized more during the time of seeking a new head nurse as well as when head nurses are active.

Staff nurse job characteristics should be improved by developing methods of sharing opinion by using surveys to obtain satisfaction of nurses, coworker and service receivers and evaluating and analyzing findings. The following are things that need to be focused on. Future research might consider getting information from subordinates such as professional nurses in order to gain more qualitative outcomes.

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#### **Potential conflicts of interest**

None.

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# ความสัมพันธ์ระหว่าง ผู้นำเชิงสถานการณ์ ลักษณะงานของพยาบาล กับความพึงพอใจในงานและ ความยึดมั่นผูกพันต่อองค์การของหัวหน้าหอผู้ป่วย โรงพยาบาลสังกัดกองทัพบก

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**วัตถุประสงค**์: เพื่อวิเคราะห์ความสัมพันธ์ระหว่างผู้นำเชิงสถานการณ์ ลักษณะงาน ความพึงพอใจในงานและ ความยึดมั่นผูกพันองค์การของหัวหน้าหอผู้ป่วย โรงพยาบาลสังกัดกองทัพบก

วัสดุและวิธีการ: เป็นการวิจัยเชิงวิเคราะห์แบบภาคตัดขวาง โดยใช้แบบสอบถามส่งทางไปรษณีย์ ไปยังหัวหน้า หอผู้ป่วย โรงพยาบาลสังกัดกองทัพบกจำนวน 128 คน เก็บรวบรวมข้อมูล ได้รับแบบสอบถามคืน 117 ฉบับ คิดเป็น ร้อยละ 91.4 สถิติที่ใช้ในการวิเคราะห์คือ สถิติสัมประสิทธิ์สหสัมพันธ์แบบเพียร์สัน

**ผลการศึกษา**: ผลการวิเคราะห์ความสัมพันธ์พบว่า ผู้นำเชิงสถานการณ์ไม่มีความสัมพันธ์กับความยึดมั่นผูกพัน องค์การของหัวหน้าหอผู้ป่วย ลักษณะงานการพยาบาลมีความสัมพันธ์เชิงบวกระดับต่ำกับความพึงพอใจในงาน และความยึดมั่นผูกพันองค์การของหัวหน้าหอผู้ป่วยอย่างมีนัยสำคัญทางสถิติ (r = 0.202 และ 0.189 ตามลำดับ) **สรุป**: ผู้บริหารโรงพยาบาลควรกำหนดนโยบายการปรับปรุงระบบการทำงาน การบริหารทรัพยากรบุคคล การกำหนดนโยบายและยุทธศาสตร์บนพื้นฐานผู้นำตามสถานการณ์ รวมทั้งปรับปรุงลักษณะงานด้วยการสำรวจ ความคิดเห็นเพื่อนำไปสู่ความพึงพอใจในงาน และความยึดมั่นผูกพันต่อองค์การ