

Nursing Team Work Effectiveness and Organizational Commitment among Intensive Care Units Staff Nurses: The Pathway for Enhancement

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Abstract:

Background: Nursing team work effectiveness is a vital aspect of the functioning of any hospital and a basic structural component of hospitals' design. Effective nursing team work can be predicted as one of the effectively adopted of the health services and associated with organizational commitment. **Aim of the study:** Determine the relation between nursing work team effectiveness and organizational commitment among intensive care units staff nurses. **Subjects and Method: Research design:** A descriptive correlational research design was utilized in this study. **Setting:** Tanta University Main Hospital in all intensive care units. **Subjects:** A convenience sample including all staff nurses (n=332) working in previous setting. **Tools of data collection:** Two tools were used. **Tool I:** Nursing Work Team Effectiveness Structured Questionnaire that included two parts. Part 1 concerned with socio demographic data, part2 included eight dimensions of team effectiveness. **Tool II:** Organizational Commitment Scale that used to assess staff nurses organizational commitment. **Results:** Slightly less than half 45.36% of staff nurses have moderate level of total team effectiveness. More than half 62.58% of staff nurses had moderate level of organizational commitment. There is positive significant correlation between total team work effectiveness and total organizational commitment among staff nurses $p < 0.001$. **Conclusion:** Staff nurses had moderate level of work team effectiveness and also organizational commitment. Nursing team work effectiveness has a positive influence on organizational commitment. **Recommendation:** Adjust hospital policies to focus hospital systems and structures on team-based rather than hierarchical. Creating continuous assessment and evaluation of team effectiveness to determine which dimensions of team effectiveness need to be improved.

Key Words: ICU Staff nurses, Nursing team work effectiveness, Organizational commitment, Pathway for enhancement.

Introduction

One of the most essential disciplines is nursing team work effectiveness, because it is known that more nurse's effective teams lead to better team performances, innovativeness, and sustainability⁽¹⁾. The need for effective nursing team work has been highlighted as being essential for successful care superiority and growing the complexity of healthcare systems. Ineffective team work has been known as a key reason donating to decline patient outcome and it is important predictor for missed nursing care, thus effective team work worldwide is crucial for enhancing nurses' productivity, efficiency, creativity and performance^(2, 3). Teams provide variety in knowledge, attitudes, abilities, and engagement, and their integration allows for speedy, flexible, and inventive answers to issues and difficulties, while also enhancing staff nursing work team satisfaction.⁽⁴⁾

The efficacy of teams has a huge impact on the performance of hospitals and the total creation of nurses' knowledge⁽⁵⁾. A nursing team is made up of registered nurses, licensed practical nurses, and nursing assistants who collaborate on a patient care unit

to provide nursing care to a number of inpatients^(6, 7). Team work effectiveness in any organization, we must focus on; purpose and goals, roles, team processes, team relationships, intergroup relations, problem solving, passion and commitment, and skills and learning⁽⁸⁾. Effective nursing teams must have clear responsibilities, a common purpose, standards, and goals, as well as a shared knowledge of the intended outcome. For good performance, nursing team members should have a feeling of responsibility and innovation⁽⁹⁾. Specific knowledge and abilities in working as an effective team are required. The nursing staff must be able to develop their talents, and it is critical to track development at both the personal and team levels. Team conferences should be beneficial. Decision-making and problem-solving skills are essential for nursing team members. For team members to make informed decisions, they must have access to the required information. Teamwork should be founded on constructive relationships and cohesion, and communication should be open and straightforward.^(10, 11)

There is a widespread perception that effectiveness of nurses' teams

received top priority within diverse healthcare setting especially in intensive care unit ⁽¹²⁾. A specialized hospital unit called the intensive care unit (ICU) is devoted to providing treatment for patients who need to be kept alive and are in grave danger of dying or having their organs fail ⁽¹³⁾. Patients' health and well-being must be regularly monitored and reported on by ICU nurses. They are in charge of all patients at all times, as opposed to other ICU staff members. Being intimately involved in the bulk of ICU treatments makes nurses crucial members of the ICU team; they are in charge of checking vital signs, giving medicines, and monitoring for therapy problems. Essentially, a team is a body of coordinated and consistent performance that blends task fulfillment with interconnected ideas, behaviors, and emotions. Teamwork is intended to improve organizational performance and increase nurses' commitment to the organization ^(14, 15).

Hospitals need commitment to continue and to realize the objectives. Nurses with high organizational commitment expose higher performance and achieving the organization's objectives ⁽¹⁶⁾. organizational commitment referred to

as an individual's affiliation with and engagement in a particular organization ⁽¹⁷⁾. Organizational commitment may be defined as a desire to remain a member of the organization, a willingness to perform well within the organization, and faith in the organization's aims and ideals⁽¹⁶⁾.

Committed nurses are self-motivated. Their intrinsic incentives are derived from actions and favorable outcomes rather than externally controlled conditions. Organizational commitment improves nurses' performance, work satisfaction, and organizational productivity while lowering staff turnover and absence rates. Personal traits, roles and job features, structural characteristics, work experience, and the state of the working environment are all described as variables influencing the degree of organizational commitment in a similar way ⁽¹⁴⁾. The organization commitment includes three essential domains, namely affective, continuance and normative commitment. First, continuous commitment reproduces the perceived costs-benefit analysis of maintaining organizational membership; second, affective commitment refers to emotional

engagement to an organization; third, normative commitment refers to the duty to remain with the organization. (18, 19)

Significance of study

Nursing is an important pillar of society, and healthcare delivery is strongly reliant on nursing personnel (20). Internationally, nurses face a variety of challenges, including absenteeism, a high turnover rate, and a lack of organizational commitment. (18). So it is imperative to find path way for enhancement the nurses' commitment to their work to enhance the organization as a whole especially in ICU where it requires specialized nursing care, high levels of attention and responsibility to provide effective care for critically ill patients who admitted to it.

Many studies have been conducted by academics and management consultants on the positive benefits of successful work teams for organizations. Well understanding for team work effectiveness is a path way for enhancement (2). More precisely, teams are claimed to contribute to improved organizational results by improving performance, productivity, and dedication to the organization. (14). As

a result, the purpose of this study was to examine the relationship between staff nurses' team work effectiveness and organizational commitment in ICU at Tanta Main University Hospitals.

Aim of the study

Determine the relation between nursing team work effectiveness and organizational commitment among intensive care units staff nurses

Research questions

- 1- What is the level of nursing team work effectiveness?
- 2- What is the level of staff nurses organizational commitment?
- 3- Is there relation between nursing team work effectiveness and their organizational commitment?

Subjects and Method

Study design

Descriptive correlational study design was used in the present research. It is a design that uses questionnaire to detect variables and relationship among them when enough information occurs. This type of study allowed variables to be examined in a situation that has already occurred, and no attempt was made to control or manipulate the situation (21).

Setting

The study was conducted at Tanta Main University Hospital at

Gharbia Governorate, Egypt in six intensive care units which included Neurological, Medical, Chest, Psychiatric, Neonatal and Cardiology intensive care units.

Subjects

A sample of convenience including all staff nurses n = (332) working in previous settings and available at time of data collection.

Tools of data collection

Two tools were utilized to collect the study data

Tool I: Nursing Team Work Effectiveness

Structured Questionnaire. It was developed by Lurie, et al. (2011)⁽²²⁾ and modified by the researchers to assess staff nurses team effectiveness. It included two parts:

Part 1: Nurses personal data as age, gender, marital status, unit name, job, qualification and years of experience.

Part 2: It consists of (56) items which divided into eight dimensions as follows;

- Purpose and goals (seven items)
- Roles (seven items)
- Team processes (seven items)
- Team relationships (seven items)
- Intergroup relations (seven items)
- Problem solving (seven items)

- Passion and commitment (seven items)
- Skills and learning (seven items)

Scoring system

Nurses' response was scored on 5 point Likert Scale. It ranged from 1=strongly disagree, 2=disagree, 3=neutral, 4=agree, 5=strongly agree. The total score calculated by cutoff point and summing scores of all categories. The total scores represent varying levels as follows:

- High level of team effectiveness >75%
- Moderate level team effectiveness 60-75%
- Low level team effectiveness <60%

Tool II: Organizational Commitment Scale

This tool developed by Meyer and Allen (1997)⁽²³⁾ and modified by the researchers. It was used to assess the organizational commitment of staff nurses. It was made up of (18) elements that were divided into three dimensions, as shown below:

- Affective commitment (six items)
- Continuance commitment (six items)
- Normative commitment (six items)

Scoring system

Nurses' responses were measured on a five point Likert scale ranging from 1=strongly disagree, 2=disagree, 3=neutral, 4=agree,

5=strongly agree. The total score was calculated by cutoff point and summing scores of all categories. The total score represent varying levels of nurses' organizational commitment as follows:

- High level of nurses' organizational commitment < 75%
- Moderate level of nurses' organizational commitment from 60 % to 75%
- Low level of nurses' organizational commitment >60%.

Method

Tools Validity

The contents of the study instruments were prepared and tested for validity by a jury of five academic staff in nursing administration from various nursing faculties. The instruments' validity was evaluated based on their clarity, comprehensiveness, relevance, and accuracy. All of their suggestions were considered, and some elements were revised.

Tools Reliability

The Cronbach's Alpha test was used for study tools reliability. The calculated reliability was

- (r = 0.982) for Nursing Team Work Effectiveness Questionnaire

- (r = 0.901) Organizational Commitment Scale

Approval

An official permission was obtained from the hospital authorities in the identified setting to gather the necessary data.

Pilot Study

After the experts' opinion and before starting the actual data collection a pilot study was done. It was carried out on a sample 10% of staff nurses (30) and they excluded from the main study sample during the actual collection of data. The pilot study's goal was to examine the item sequence, clarity, application, and relevance of the questions. The necessary changes were made. The pilot study also served to estimate the time needed to complete the questionnaire sheets.

Ethical Considerations

Each study subject received an explanation of the study's goals and anticipated results. They received assurances that the study is safe, all information acquired will be used solely for research purposes, and their consent to participate is required in order to be included in the study. Each participant received a guarantee that they might leave at any time.

Field Work

-The data was collected from the identified subject by the researchers. The researchers met the staff nurses in small groups during their work shifts to distribute the questionnaire. The staff nurses recorded the answer in the presence of the researchers to ascertain all questions were answered and giving clarification.

- The appropriate time for data collection different according to the type of work and work load for each intensive care unit; sometimes it was done in the middle of the shift in other times before the end of the shift. The time needed to complete each questionnaire items from staff nurses were between 10-20 minutes.

-The data were collected over period of three months started from November 2019 to January 2020.

Statistical Analysis

Data entry and analysis were completed using statistical package for social science (SPSS) version 18. Data were presented using: Descriptive statistics in the form (frequency, percentage, mean and standard deviation, and Chi-square). Test of significant was prepared. Significant level value was measured when $p \leq$

0.05 and a highly significant level value was measured when $p \leq 0.01$.

Results

Table (1): Represents staff nurses distribution according to personal data. It was observed that high percent (83.11%) of staff nurses' age ranged from 21- 30 years. The majority staff nurses (89.40%) were female nurses and 84.77% were married. Regarding working unit, 26.82%, 19.54%, and 18.87% working in Neurological, Neonatal and Psychiatric intensive care units respectively. More than half (53.97%) of staff nurses had 5-10 years of experience. Regarding job qualification, high percent (67.55%) had bachelor degree while only 32.45% of them had nursing diploma.

Table (2): Shows level of staff nurses' team work effectiveness. It was observed that, slightly less than half 45.36% of staff nurses have moderate level of total team effectiveness. Also, about half 50.66% and 49.01% of staff nurses have moderate level of team effectiveness regarding intergroup relations and roles dimensions respectively. Equal percent 45.03% and 45.36% have moderate level of team effectiveness regarding passion

and commitment and team process dimensions respectively

Table (3): Shows distribution of staff nurses' mean scores and stander deviation related to team work effectiveness dimensions. As observed in the table, staff nurses' total mean scores and stander deviation related to total team effectiveness was 179.384 ± 34.906 . The highest mean score 23.553 ± 4.292 was related to skills and learning dimension and the lowest mean score 21.195 ± 4.938 was related to team processes dimension.

Figure (1): Represents level of staff nurses' organizational commitment. It was noticed that, more than half 62.58% of staff nurses had moderate level of organizational commitment.

Figure (2): Illustrates level of organizational commitment dimensions. It was detected that, more than half 55.63%, 53.31% and 49.34% of staff nurses had moderate level regarding continuance, normative and affective commitment respectively.

Table (4): Illustrates distribution of staff nurses' mean scores and stander deviation related to organizational commitment dimensions. It was noticed that staff nurses' mean scores

and stander deviation related to total organizational commitment was 30.530 ± 4.858 . The highest mean score 11.053 ± 2.109 was related to continuance commitment dimension.

Figure (3): Represents relation between staff nurses total team effectiveness and their total organizational commitment. As observed, there is positive significant correlation between staff nurses total team work effectiveness and their total organizational commitment at $p < 0.001$.

Table (5): Demonstrates relation between total team effectiveness and staff nurses' personal data. As observed in the table, there is highly positive significant correlation between total staff nurses team effectiveness and their personal data regarding years of experience, marital status and job qualification at $p < 0.001$.

Table (6): Shows relation between total organizational commitment and staff nurses' personal data. It was discerned that there are positive significant correlations between total organizational commitment and nurses' age, marital status and years of experience at $p < 0.001$

Table (1): Staff nurses personal data (n=302)

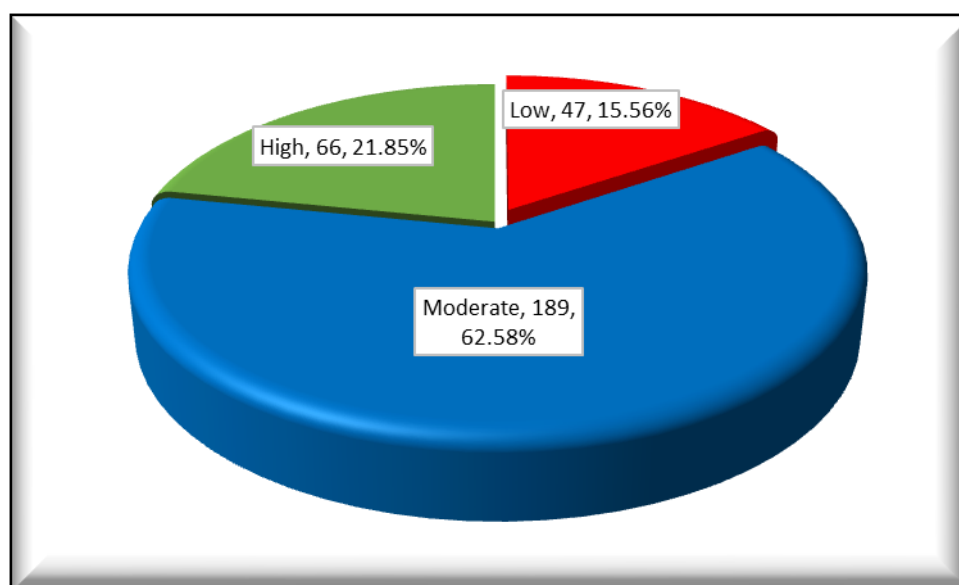
personal data		No.	%
Age group	21-30 Years	251	83.11
	31-45 Years	51	16.89
	Range	21-45	
	Mean± SD	28.384±4.855	
Gender	Male	32	10.60
	Female	270	89.40
Marital status	Single	46	15.23
	Married	256	84.77
Unit	Neurological	81	26.82
	Psychiatric	57	18.87
	Cardiology	42	13.91
	Chest	30	9.93
	Neonatal	59	19.54
	Medical	33	10.93
Years of Experience	<5 Years	104	34.44
	5-10 Years	163	53.97
	>10 Years	35	11.59
	Range	1-25	
	Mean± SD	6.671±4.844	
Job Qualification	Bachelor of Nursing	204	67.55
	Nursing Diploma	98	32.45

Table (2): Level of staff nurses' team work effectiveness dimensions (n=302)

Dimensions of team work effectiveness	Low		Moderate		High		Chi-Square	
	N	%	N	%	N	%	X ²	P-value
Purpose and goals	107	35.43	131	43.38	64	21.19	22.894	<0.001*
Roles	97	32.12	148	49.01	57	18.87	41.331	<0.001*
Team processes	131	43.38	137	45.36	34	11.26	66.404	<0.001*
Team relationships	105	34.77	124	41.06	73	24.17	13.199	0.001*
Intergroup relations	100	33.11	153	50.66	49	16.23	53.728	<0.001*
Problem solving	121	40.07	128	42.38	53	17.55	34.099	<0.001*
Passion and commitment	102	33.77	136	45.03	64	21.19	25.775	<0.001*
Skills and learning	74	24.50	139	46.03	89	29.47	23.013	<0.001*
Total nursing team work effectiveness	112	37.09	137	45.36	53	17.55	36.960	<0.001*

Table (3): Distribution of staff nurses' mean scores and stander deviation related to team work effectiveness dimensions (n=302)

Descriptive Statistics					
	Range	Mean	±	SD	
Purpose and goals	14 - 35	22.702	±	4.624	
Roles	12 - 35	22.556	±	4.565	
Team processes	11 - 35	21.195	±	4.938	
Team relationships	13 - 35	22.553	±	4.677	
Intergroup relations	11 - 35	22.407	±	4.529	
Problem solving	12 - 35	21.841	±	4.902	
Passion and commitment	13 - 35	22.576	±	4.824	
Skills and learning	13 - 35	23.553	±	4.292	
Total Team Effectiveness	103 - 280	179.384	±	34.906	

**Figure (1): level of staff nurses' organizational commitment (n=302)**

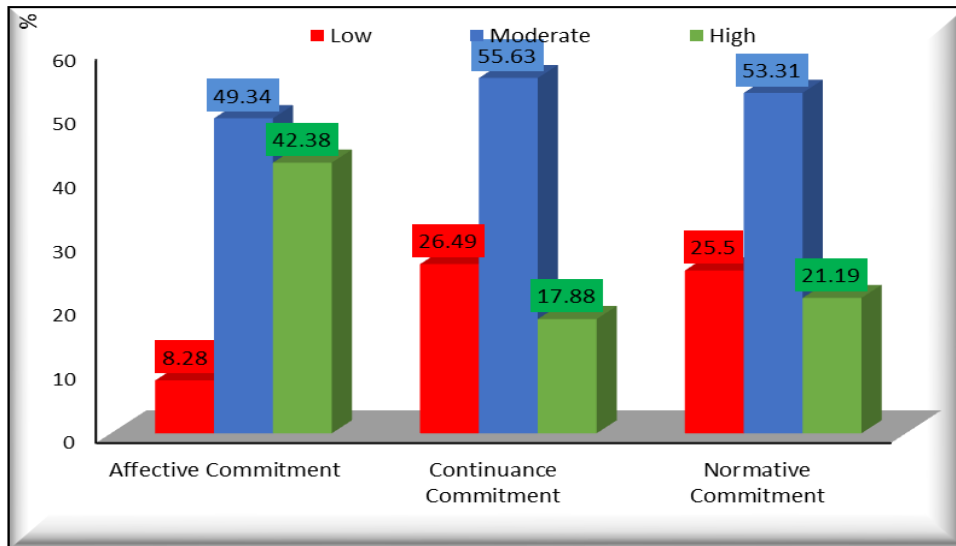


Figure (2): Level of organizational commitment dimensions (n=302).

Table (4): Distribution of staff nurses' mean scores and stander deviation related to organizational commitment dimensions (n=302)

Descriptive Statistics				
	Range	Mean	±	SD
Continuance Commitment	5 - 15	11.053	±	2.109
Affective Commitment	3 - 15	9.560	±	2.278
Normative Commitment	3 - 15	9.917	±	2.068
Total organizational commitment	12 - 45	30.530	±	4.858

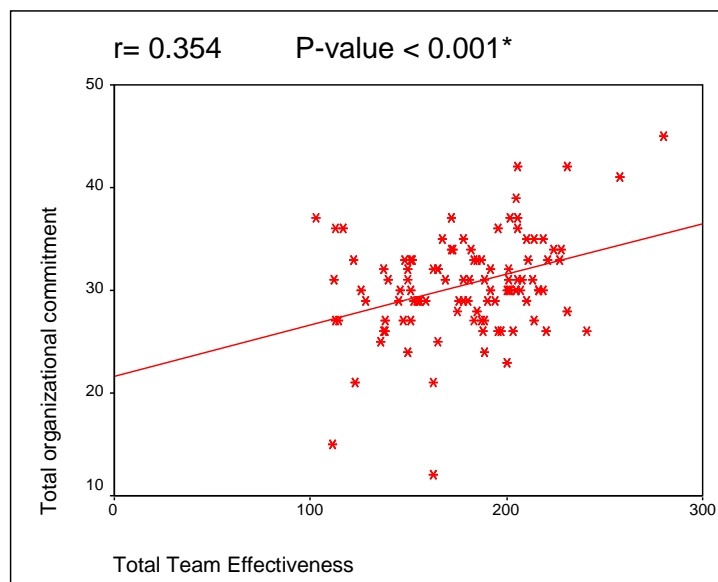


Figure (3): Relation between staff nurses total team work effectiveness and their total organizational commitment (n=302).

Table (5): Relation between total staff nurses team work effectiveness and staff nurses' personal data (n=302).

		Total Team Effectiveness			T-Test or ANOVA	
		N	Mean	± SD	T or F	P-value
Age group	21-30 Years	251	178.566	± 34.838	-0.904	0.367
	31-45 Years	51	183.412	± 35.303		
Gender	Male	32	176.500	± 41.901	-0.494	0.622
	Female	270	179.726	± 34.057		
Marital status	Single	46	162.348	± 41.748	3.669	<0.001*
	Married	256	182.445	± 32.694		
Unit	Neuro	81	183.926	± 34.778	1.863	0.101
	Phy	57	173.316	± 36.234		
	Cardiology	42	190.643	± 33.631		
	Chest	30	176.200	± 21.804		
	Neonatal	59	174.441	± 37.705		
	Medical	33	176.121	± 36.507		
Years of Experience	<5 Years	104	183.452	± 34.639	10.381	<0.001*
	5-10 Years	163	172.454	± 34.984		
	>10 Years	35	199.571	± 24.897		
job Qualification	Bachelor of Nursing	204	174.794	± 35.854	-3.353	0.001*
	Nurse Diploma	98	188.939	± 30.887		

Table (6): Relation between total organizational commitment and staff nurses' personal data (n=302).

		Total organizational commitment			T-Test or ANOVA	
		N	Mean	± SD	T or F	P-value
Age group	21-30 Years	251	30.084	± 4.780	3.611	<0.001*
	31-45 Years	51	32.725	± 4.682		
Gender	Male	32	30.688	± 5.596	0.194	0.846
	Female	270	30.511	± 4.774		
Marital status	Single	46	28.761	± 7.288	2.711	0.007*
	Married	256	30.848	± 4.221		
Unit	Neurological	81	29.963	± 5.038	1.272	0.276
	Psychological	57	31.737	± 5.446		
	Cardiology	42	31.071	± 2.797		
	Chest	30	30.400	± 3.024		
	Neonatal	59	29.847	± 6.147		
	Medical	33	30.485	± 3.890		
Years of Experience	<5 Years	104	29.962	± 4.256	7.485	0.001*
	5-10 Years	163	30.270	± 5.074		
	>10 Years	35	33.429	± 4.629		
Job Qualification	Bachelor of Nursing	204	30.902	± 4.745	1.930	0.055
	Nurse Diploma	98	29.755	± 5.022		

Discussion

Nursing team work effectiveness is a critical facet of every hospital's operation and a fundamental structural component of hospital architecture, particularly in ICUs. Knowing the level of ICU nursing team work effectiveness is important because inefficient ICU nursing teams can prevent a hospital from operating and growing⁽⁴⁾. Today's the health sector, should provide additional weight to nursing team work effectiveness particularly ICU nursing teams. Additionally, management might set up events to strengthen nurses' organizational commitment and improve performance. One of the health services that may be effectively implemented and used to increase nurses' organizational commitment is effective nursing team work⁽²⁾.

Result of existing study discovered that slightly less than half of staff nurses have moderate level of total nursing team work effectiveness. Factually, about half of staff nurses have moderate level of all team effectiveness dimensions including; purpose and goals, roles, team processes, team relationships, intergroup relations, problem solving, commitment and skills and learning

dimensions .As well as little percent of staff nurses represent high level of nursing team work effectiveness.

These finding may be due to difficult to achieve effective team in ICU nursing practice because of the barriers between inter professional nursing groupings. Multiple management levels, perceived status disparities amongst professional nursing groups, and a lack of hospital processes and structures for managing and supporting effective teams are possible further barriers to the development of effective teams. Effective teamwork is challenging to achieve for a variety of reasons, including big team size, lack of familiarity, unstable work force and assignments, lack of shared purpose and future, critical state of ICU patients, and a physically restrictive setting.

Effective ICU nursing team work is essential and required for effective patient management, and an essential part of healthcare's organization for delivering quality care. The Affordable Care Act adds to the rising relevance of teams in the healthcare setting. In reality, successful nursing teams deliver better healthcare than nurse working alone and requires training to

learn how to collaborate and understand their roles and duties.^(24, 25)

The ideal characteristics of effective team members were identified by numerous researchers, such as **Bovee and Thill (2013)**⁽²⁶⁾, **Coole (2009)**⁽²⁷⁾ and **Hakanen** determined the ideal dimensions of effective team members including; clear sense of shared purpose, open and honest communication, focus and decision by consensus, a clearly defined vision, mutual trust and respect, clear roles and responsibilities, also **Cheruvilil et al. (2014)**⁽²⁹⁾ emphasized the importance of team diversity, interpersonal skills, and a clear and specific purpose in creating and maintaining an effective team. He also said that members of effective teams possess the necessary knowledge and abilities and have a common understanding of the team's mission and goals. Effective teams share accountability for and dedication to the primary goal. Clear guidelines, functional decision-making, and efficient problem-solving were also considered as crucial components of an effective team.

Andreatta (2010)⁽³⁰⁾, **West et al.**⁽³¹⁾ support the present study and suggest that, although over ninety percent of

staff report that they work in a team, only just over half of these staff report that their team effective. **Beatrice and Rochman (2018)**⁽³²⁾ do not support the current study and show that nursing teams on acute care patient units have a higher level of teamwork. **Baker et al. (2010)**⁽³³⁾ found improvements in team working processes specifically in relation to better communication and greater intra-team respect.

Result of current study showed that, more than half percent of staff nurses had moderate level of total organizational commitment. Statistically more than half of ICU nursing staff had moderate level regarding continuance, normative and affective commitment. This finding may be due to nurses' role ambiguity, job insecurity, job dissatisfaction and lacked of organizational support. Not surprise that the highest mean score is related to continuance commitment this may be due to Egyptian nursing staff preferred governmental than private work and not looking for to any positions than their work in governmental hospital. In addition, they would find it difficult to leave their hospitals due to the disruption it would make to their daily lives and the dearth of viable alternatives.

Our result is in line with many researchers as **AlHaroon (2020)** ⁽¹⁹⁾, **Salem et al. (2016)** ⁽³⁴⁾, **Saleh et al. (2014)** ⁽³⁵⁾, and **Arbabisarjou et al. (2016)** ⁽³⁶⁾ they revealed that the nurses had a moderate overall organizational commitment level. As well as is consistent with the **AlHaroon and Al-Qahtani (2020)** ⁽¹⁹⁾ and **Saleh (2014)** ⁽³⁵⁾ findings, which presented that nurses had a higher mean score for continuous commitment than affective and normative. It was wonder that the lowest mean score pertained to the affective commitment. Nurse managers should increase the nurses' affective commitment to increase their performances. **McElroy (2001)** ⁽³⁷⁾ pointed out some suggestions to improve staff organizational commitment, including job security, optional payment, autonomous groups and decentralization, proper compensate by organizational performance and reduce position differences.

The present study explored that there is positive significant correlation between ICU staff nurses total team work effectiveness and total organizational commitment. The commitment of nurses is an important issue because it may be used to predict nurses'

performance, absenteeism and other behaviors. Hospitals management staff that demonstrate commitment to nurses will attract and retain them and will ultimately win the battle for the nurses' share.

Edward et al. (2016) ⁽²⁾ stated that teamwork is essential for hospital enhancement. It enhances nurses' commitment to an organization and their job satisfaction. His results show that team work and commitment correlate positively. **Mustafa (2015)** ⁽¹⁴⁾ indicates positive correlation between team work and organizational commitment. Also **Hosseini (2012)** ⁽³⁹⁾ Finding revealed that working team was positively related to the organizational commitment.

The nurse team work effectiveness experiences increase a nurse's sense of loyalty to their hospitals and decrease their propensity to desire to leave it. Through satisfaction, commitment, and perceptions of work overload, nurses' judgments of team performance had a variety of implications on turnover intentions, including a direct and positive impact on commitment to the institution. Increased views of effective teamwork strongly correlated with higher levels of organizational commitment and job satisfaction ⁽¹⁴⁾.

The present study revealed that there is positive significant correlation between nursing staff total team work effectiveness and their personal data regarding years of experience and job qualification. As well as there are significant correlations between total organizational commitment and nurses' personal data regarding age and years of experience.

Mustafa (2016) ⁽¹⁴⁾ support present finding and indicated that elder workers scored higher on organizational commitment and team work. This study demonstrates that team work effectiveness is important to experienced employees since it increases their commitment to the hospital as they gain more experience. A different strategy demonstrates that, depending on experience, the sense of job ownership boosts both commitment and team spirit.

AlHaroon (2020) ⁽¹⁹⁾ revealed that the youngest nurses were the least committed ones. Older nurses seemed more devoted to the institution. The degree of excitement of older persons, which is anticipated to be lower than that of younger nurses, who frequently look for new employment opportunities and find it simple to switch positions and move, may help

to explain this conclusion. Because organizational commitment is strongly correlated with age and experience, organizations prioritize keeping older nurses because they are more committed to their work than younger nurses.

Eleswed (2013) ⁽³⁸⁾ finding revealed that age was demographic factor that affected the level of organizational commitment, However, our results contradict the findings of **Arbabisarjou (2016)** ⁽³⁶⁾ which indicate that there are not significant relationships between organizational commitment and sociodemographic data, such as gender, educational level and working experience.

Conclusion

Based on the findings of this study, it can be concluded that intensive care units staff nurses at Tanta Main University Hospital had moderate level of team work effectiveness and also had moderate level of organizational commitment. There is positive significant correlation between total staff nurses team work effectiveness and total organizational commitment. From the above we can conclude that there is a possibility of enhancing nurse organizational commitment through team work effectiveness.

Recommendation

The current study recommends the following:

For hospital administration

- Adjust hospital policies to focus hospital systems and structures on team – based rather than hierarchal
- Creating continuous assessment and evaluation of team work effectiveness to determine which dimensions of team effectiveness need to be improved

For head nurses

- Training nursing staff for working in teams.
- Allow staff nurses to participate in putting goal and purpose of their team that will incorporate to improve team relationship, intergroup relationships, compassion and commitment to their team and to the hospital as a whole.
- Clearly defined roles for each staff nurse in team composition to improve team effectiveness
- Empower staff nurses to participate in solving problems of their team to increase coherence between them and to the organization as a whole
- Pay attention to heterogeneity of skills between members of team to achieve effectiveness
- Emphasize the importance of team effectiveness and how to make team

effective in continuing education and training programs.

Further research: effect of nursing team effectiveness dimensions on job outcomes.

References

- 1- Nemanja B, Agnes S, Marko A. Relationship between perceived teamwork effectiveness and team performance in banking sector of Serbia. Sustainability. 2020; 12. 8753:1-15. Doi:10.3390/su12208753
- 2- Edward S, Greenberg Patricia B, Sikora L, Grunberg S. Work teams and organizational commitment : Exploring the influence of the team experience on employee attitudes. project working Paper WP-012. Available at: <https://www.scribd.com/document/220194788/oc>
- 3- Jee-In H, Jeonghoon A. Teamwork and clinical error reporting among nurses in Korean hospitals. Asian Nursing Research. 2015; 9(1): 14e20.
- 4- Eduardo S, Marissa L, Shuffler M, Amanda L, Elizabeth H. Understanding and improving teamwork in organizations. A Scientifically Based Practical Guide, Human Resource Management Journal. 2014; 24(4):599-622.

- 5- Penelope F. The meaning of commitment in professional service relationships: Issues in relating theory to practice. 2011 Cranfield University. Available at: <https://www.impgroup.org/uploads/papers/58.pdf>
- 6- Ramón R, Carlos M, Carmen T. Work team effectiveness, a review of research from the last decade. *Psychology in Spain Journal*, 2011; 15 (1): 57-79.
- 7- Ervin J, Kahn J, Cohen T, Weingart L. Team work in the intensive care unit. *American Psychologist Journal*. 2018; 73(4): 468–477.
- 8- Team Effectiveness Questionnaire. Available at: https://www.cu.edu/sites/default/files/Team_effectiveness_questionnaire.
- 9- Mehta A, Mehta N. Knowledge integration and team effectiveness: A team goal orientation approach. *Decision Sciences Institute Journal*. 2018; 49(3): 445-55.
- 10- Todd R, Logan D. Influence of teamwork behaviors on workplace incivility as it applies to nurses. *Creighton Journal of Interdisciplinary Leadership*. 2018; 2(1): 47 – 53.
- 11- Beatrice K, Suzanne M, Begeny S. Improving nursing unit teamwork. *The Journal of Nursing Administration*. 2005; 35(12): 550-556.
- 12- Martina S, Kirti D, Doekhie A, Jeroen D , Van W. Interventions to improve team effectiveness within health care: A systematic review of the past decade. *Human Resources for Health Journal*, 2020; 18(2): 1-3. Available from: <https://doi.org/10.1186/s12960-019-0411-3>
- 13- Evert S, Lars T, Mirko N. Working on working together. A systematic review on how healthcare professionals contribute to inter professional collaboration. *Journal of Inter professional Care*. 2019; ISSN: 1356-1820. Available from: <https://www.tandfonline.com/loi/ijic20>
- 14- Mustafa Z, Abdurrahim E, Mehmet Y. Analysis of teamwork, organizational commitment and organizational performance: A study of health sector in Turkey. *Asian Journal of Business and Management*. 2015 ; 3(02): 173-175
- 15- Lorber M, Skela-Savič B. Factors affecting nurses' organizational commitment. *Obzornik Zdravstvene Nege Journal*. 2014; 48(4): 294– 301.

- 16- Azizollah A , Hamed S , Sadegh D, Hassan R. Organizational commitment in nurses . International Journal of Advanced Biotechnology and Research. 2016; 7 (5): 1841-1846.
- 17- Mwangi G. Factors Influencing Commitment and Engagement of Healthcare Workers at Kkenyatta National Hospital. Published Master Dissertation of Business Administration .University of Nairobi, 2015; 20-25.
- 18- Hakami A, Almutairi H , Al Otaibi R , Al Otaibi T, Al Battal A. Relationship between nurses' job satisfaction and organizational commitment. Health Science Journal. 2020; 14 (1): 692.
- 19- AlHaroon H, Al-Qahtani M. Assessment of organizational commitment among nurses in a major public hospital in Saudi Arabia. Journal of Multidisciplinary Healthcare. 2020;13: 519–526.
- 20- Rentala, S. Basics in Nursing Research and Biostatistics. 1st Ed, London: Jaypee Brothers Medical Publishers; 2019. 130.
- 21- Boru T. Research Design and Methodology. Chapter Five. Available at://www.researchgate.net/publication/329715052
- 22- Lurie, J, Schultz H, Lamanna, G. Assessing teamwork. Family Medicine Journal. 2011; 43(10): 731-734.
- 23- Meyer J, Allen J. Commitment in the workplace. Thousand Oaks. 1997. CA: SAGE publication:
- 24- Hughes A, Gregory M, Joseph D, Sonesh S, Marlow S, Lacerenza C, et al. Saving lives: A meta-analysis of team training in healthcare. Journal of Applied Psychology, 2016; 101(1): 1266–1304. Doi:10.1037/apl0000120. [PubMed: 27599089]
- 25- Stephen H, Mary K, Stephen M. Organizational leadership for building effective health care teams. Annals of Family Medicine Journal. 2013; 11(3): 279.
- 26- Bovee C, Thill J. Business Communication Essentials. 6th Ed. London. Prentice Hall, 2013.
- 27- Coole S. Building a high performing team. Proven techniques for effective team working. Cambridgeshire: IT Governance Publishing; 2009.
- 28- Hakanen M, Soudunsaari A. Trust in building high-performing teams – conceptual approach. Electronic Journal of Business Ethics and Organization Studies. 2015; 20(2): 43-55.
- 29- Cheruvelil K, Soranno A, Weathers C, Hanson C, Goring J, Filstrup T, and et

- al. Creating and maintaining high-performing collaborative research teams: The importance of diversity and interpersonal skills. *Frontiers in Ecology and the Environment*. 2014; 12(1): 31-38.
- 30- Andreatta B. A typology for health care teams. *Health Care Management Review*. 2010; 35(4): 345–54.
- 31- West A, Alimo-Metcalf B, Dawson F, El Ansari W, Glasby J, Hardy G, et al. Effectiveness of Multi-Professional Team Working (MPTW) in Mental Health Care. Final Report. NIHR Service Delivery and Organization Program; 2012.
- 32- Beatrice J, Rochman R. Nursing staff teamwork and job satisfaction. *Journal of Nursing Management*. 2018; 18(1): 938–47.
- 33- Baker D, and et al. Assessing teamwork attitudes in health care, development of the team. *Quality and Safety in Health Care Journal*. 2010; 19(6): 1–4.
- 34-. Salem O, Baddar F, AL-Mugatti H. Relationship between nurses' job satisfaction and organizational commitment. *J. Nur. Health Sci*. 2016; 5(1): 49–55
- 35- Saleh AM, Darawad MW, Al-Hussami M. Organizational commitment and work satisfaction among Jordanian nurses: A comparative study. *Life Sci J*. 2014; 11(2): 31–36.
- 36- Arbabisarjou A, Hamed S, Sadegh DM, Hassan R. Organizational commitment in nurses. *Int. J. Adv. Biotechnol. Res*. 2016; 7 (5): 1841–1846.
- 37- McELROY JC. Managing workplace commitment by putting people first. *Human Resource Management Review*. JAI. 2001; 11(3): 327–335.
- 38-. Eleswed M, Mohammed F. Job satisfaction and organizational commitment: A correlational study in Bahrain. *Int. J. Bus. Humanit Technol*. 2013; 3(5): 44–53.
- 39- Hosseini M. Analysis of team working on organizational commitment in Safa Industrial Group in Iran. *International Journal of Engineering and Science*. 2012; 1(3): 22-25.