Fact Sheet: The Relationship Between Nurses’ Job Design, Role Performance and Outcome Achievement in Acute Care Settings

The way in which the job is designed can affect nurses’ autonomy and role tension which can influence nurses’ ability to engage in effective role performance.

- **Work autonomy** was defined by Hackman and Oldham as “the characteristics of the job that foster increased feelings of personal responsibility for the work outcomes” (1980, pg. 79).
- Autonomy is an attribute of job design, and includes the extent to which the job permits the individual to decide on his own how to go about doing the work and the opportunity for independence and freedom in how to carry out the work (Hackman & Oldham, 1980).
- Autonomy can influence role performance through its effect on individual motivation and empowerment (Sabiston & Laschinger, 1995).

- **Roles** are positions in organizations which have attached to them a set of expected behaviours (Johns, 1996).
  - Individuals frequently are confronted with situations in which they are required to assume a role which conflicts with their value systems or to assume two or more roles which conflict with each other (Van Sell, Rief, Schuler, 1981).
  - In addition, the single or multiple roles which confront the individual may not be clearly articulated in terms of the behaviours or performance levels expected.
  - Some nursing assignment patterns, such as *functional nursing*, can cause a fragmentation of nurses’ role functions, thus affecting the ability of nurses to engage in effective role performance (Sandhu et al., 1992).
  - In *team nursing*, nurses can have overlapping role responsibilities which can cause role ambiguity.
  - Many contemporary health care organizations are experimenting with new roles such as nurse extenders, multi-skilled workers, and/or the care leader role (McGillis Hall, 1997).

  - These new roles can cause role tension among health care personnel as they negotiate role boundary issues.
  - Role ambiguity and role tension have been linked to nurses’ voluntary turnover, job satisfaction, and performance (Brief & Aldag, 1976; Lyons, 1971).
Relationship Between Job Design and Nurses’ Role Performance

Irvine, Sidani, Keatings, & Doidge (under review) investigated the relationship between nurses’ job design, nurses’ role performance, and patient outcome achievement in a study involving nurses and patients from a large acute care hospital in southern Ontario. The following findings were observed:

- A low nurse-patient ratio (having fewer patients assigned to the nurses’ care), adequate time to provide care, and job autonomy enhanced the quality of nurses’ independent role performance.

- The coordination of patient care was better on units where the job design permitted greater autonomy and where nurses’ experienced less role tension.

- The quality of nurse-to-nurse communication and nurse-to-physician communication was better on units where the job design permitted greater autonomy and where nurses experienced less role tension.

Nurses’ Role Performance Affected Patient Outcome Achievement

- After first controlling for difference in case mix, patient age and education, the patients’ ability to resume self-care at hospital discharge was better on units where nurses provided patient education, where they were assigned fewer patients, and where there was a mix of RNs and other patient care staff on the unit.

- The patients’ satisfaction with nursing care was higher on units where communication was good, where nurses provided education to patients, and where there was a lower use of formal programming (structured) means for coordinating patient care.

Implications of the Study Findings

The study results underscore the importance of:

- designing nursing jobs to reduce role tension and
- promoting autonomy so that nurses can engage in effective role performance.

In this study, having adequate time to provide care, particularly time for documentation, was the strongest factor associated with nurses’ role tension. Autonomy was perceived to be higher on units where there was a mix of RNs and other patient care providers. In other words, the employment of a mix of patient care providers appeared to enhance nurses’ ability to exercise autonomous decisions in their work.

Prepared by Diane Irvine, R.N., Ph.D. References Available Upon Request September 22, 1998
Fact Sheet: The Relationship Between Nurses’ Job Design, Role Performance and Outcome Achievement in Acute Care Settings

References
