- *Basic Research*

Perceived Emerging Organizational Agility behaviour and Psychological Empowerment among Nurse Managers: Correlational Study

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Abstract

Background: Organizational agility competency and psychological empowerment of nurse managers is essential for the application of nursing management process that is directed to the investment of new organizational opportunities to ensure its proficiency and success. **Aim**: the aim of the study was to examine the relationship between organizational agility behavior and psychological empowerment among nurse managers. Design: It was a descriptive correlational research design, and the study was performed at Ain shams University Hospitals. Sample: 98 nurse managers were included in the study. Tools: Organizational Agility Scale and Psychological Empowerment Scale were used for achieving the aim of the study. **Results**: Around two thirds (66.3%) of nurse managers had a moderate perception level of organizational agility, while more than one third (37.8% & 39.8%) of them had a moderate and high levels of psychological empowerment respectively. Conclusion: Among nurse managers who are working at Ain shams University Hospitals, there was a highly statistically significant positive relationship between all dimensions of organizational agility perception and psychological empowerment ones. Recommendations: It is recommended that healthcare organizations and policy makers support organizational agility behavior and ensure psychological empowerment among nurse managers to ensure organizational quality and productivity. Additional research: The relationship between fifth level leadership and organizational agility.

Keywords: Organizational agility, Nurse Managers, psychological empowerment.

Introduction

Agility in healthcare organizations plays an essential role in its success and development to adjust to market changes. It refers to the ability of healthcare professionals to respond to the dynamic changes in healthcare environment to practice according to qualified care standards. Nurse Managers are considered the motivating power toward organizational agility and success *(Akhmad, et al., 2024).* Organizational agility necessitates focusing on client satisfaction, time management, designing for simplicity, motivating and empowering working staff which is the main concern of nurse managers. Four elements are required to achieve organizational ability; leadership agility which centers on the dynamic process of leading ang managing workers while adopting to changes in healthcare system, secondly, cultural agility which concentrates on coaching, communication and organizational commitment. The third element is business agility that cares for business operation flexibility and adaptability. The last one is career agility which is concerned with healthcare workers innovative and career development *(Anggadwita, et al., 2021)*.

Nurses are the First-line soldiers who conducts the majority of primary healthcare services and their managers are of required importance. Nurse mangers are the cornerstone in stressing the implementation of organizational agility which requires them to develop agility knowledge and competencies which encompasses coordination, building trust relationships with healthcare team, support innovative and critical thinking, communication, problem solving and decision making, collaboration and shared decision making *(Badran & Khaled, 2024)*.

Nurse Managers' role to achieve organizational agility relies on their ability to anticipate market dynamics, adopt to them and act to achieve organizational efficiency and effectiveness. They focus on client satisfaction through early and continuous nursing care, responds to rapid changes, recognizes organization's competitive advantages, leads the cross functional team and coordinates its activities, ensures nurses' work engagement and a motivation, and builds a healthy working environment where each nurse is appreciated and respected in order to provides clients' quality care requirements *(Basiony & Ibrahim ,2023).*

Agile approach of nurse leaders enhances the sense of ownership among nurses which motivates and empowers them. Agile best nursing practice relies on simplicity and clearness of nursing workflow operations, preventing multitasking policy among nurses, declaring policies and procedures to all nurses, realizing that client feedback is of an importance, and applying continuous improvement to nursing process as required to ensure quality and productivity *(Hussein, et al., 2022).*

According to *(Llorente-Alonso et al., 2024)*, psychological empowerment was considered the basic concern that ensures motivation in organizational psychology. It was employed as enabling nurses to have control over work resources, access to necessary information, to improve reasoning. According to *(Mohamed et al., 2024)* psychological empowerment portrayed in the perception of four cognitions; meaning that gives value to nursing practice goals, self-efficacy which relies on nurses' belief that their abilities are congruent with required work activities, self-determination pronounced in nurses' ability to initiate and continue nursing process, and impact which reflects nurses' influence on care decisions and work operations results.

In a healthcare settings context, organizational agility and psychological empowerment are urgent for fostering organizational growth and development in response to global healthcare changes. Additionally, several studies have portrayed a strong correlation between the two

variables under study *(Önalan, et al., 2022; Ali et al., 2022; Basiony & Ibrahim, 2023; Brown & Patel, 2023; & Akkaya et al., 2024)*. Thus, the purpose of this study was to examine the association between organizational agility perception and psychological empowerment among nurse managers.

Significance of the Study

According to statistics of healthcare sector, (80%) of client care performed by nurses and nurse managers are responsible and accountable for it. (85%) of these organizations declared that nurse managers' work contributions are the most pronounced drives for organizational agility *(Karafakıoglu & Findikli , 2024; Basiony & Ibrahim ,2023; & Badran & Khaled, 2024).*
Nevertheless, other studies conducted by *(Mahmoud, et al.,2022; Llorente-Alonso et al. ,2024; & Akhmad, et al.,2024)* identified that nurse managers with high levels of psychological empowerment have higher performance ratings (67%), higher decision-making quality ratings (70%), and higher organizational commitment levels (59%).

Additionally, increasing the perception of nurse managers to organizational agility improves their psychological empowerment, leading to job satisfaction and retention which in turn lead to organizational competitive advantage and ability to respond to market changes *(Mohamed et al., 2024).*

Aim of the Study:

This study was performed to examine the relation between perceived organizational agility behavior and psychological empowerment among nurse managers through the following objectives:
1. Identify nurse managers' perception level of organizational agility behavior.
2. Assess nurse managers' level of psychological empowerment.
3. Investigate the relationship between nurse managers perceived organizational agility behavior and psychological empowerment.

Research Questions:

1. What is the level of organizational agility perception among studied nurse managers?
2. What is nurse managers' level of psychological empowerment?
3. Is there a relationship between organizational agility perception and psychological empowerment among studied nurse managers?

Subjects and Methods:
Research design

A descriptive-correlational design was used to achieve aim of the study. Descriptive studies provide a vision of real happening situation. But researchers are going to predict future situations on the basis of current information, correlational research studies should be applied **(Walters, 2019).**

Setting

The study was conducted in "Ain Shams University Hospitals" which are considered educational one and serves all citizens across the country. They are four hospitals; Ain Shams, El-Demerdash, Obstetric and Gynecological and Pediatrics hospitals.

Subjects of the study:

Sampling The G Power software was used to identify the sample size, which had a medium effect size, 0.04 alpha, and 0.97 power. The necessary sample size to carry out the present study was 95 nurse managers and increased to 98 out of 113 for the possibility of attrition with response rate 100%. The sample included nursing director (N=3), nursing supervisors (N=9), and head nurses (N= 86). A convenience sampling technique was used to involve studied nurse managers from the previously mentioned settings.

Sample Criteria: The researcher **included** all nurse managers with at least one year of experience in nursing, of both genders. And **excluded** those who attended previous training about organizational agility or psychological empowerment.

Data collection tools:

First tool: Perceived organizational agility behavior scale
It was developed by ***(Gurbuz, & Hatunoglu, 2022)*** to identify the level of nurse managers' perception of organizational agility. It is a four-dimensional (12) items scale contains two parts:

Part I: Included nurse managers' personal and professional data that encompasses age, gender, marital status, years of nursing experience, their educational level, and work setting.

Part II: Organizational Agility scale: Contained four dimensions, each one has three items that are; pro-activeness, radicalness, responsiveness, and adaptiveness.

Scoring System: Nurse managers responses were examined by utilizing a five-point Likert scale ranging from "1" strongly disagree to "5" strongly agree, which was transformed into three points as follows: Scores were calculated by adding and average the items in each dimension, and they varied from 15 to 45, with a 60 percent = 27 cut point. Scores that reflect the level of organizational agility was categorized as the following: "High level" if the percent $\geq$ 75% that equals $\geq$ 34 points, "Moderate level" from 60% to less than 75% equals 27 - < 34 points, and "Low level" < 60 % those equals to < 27 points.

Second tool: Psychological Empowerment Scale**:** developed by ***(Sun et al., 2010).*** It consisted of 12 items under four dimensions each one consisted of three items namely: meaning, self-determination, competence and impact.

Scoring system:

        Nurse Managers' responses were measured on a 5-point Likert scale ranging from "1 = strongly disagree, 2 = disagree, 3 = neutral, 4 = agree, 5 = strongly agree". All points were summed up and the mean was estimated. The overall average psychological empowerment was between (16-80). Participants had low level if total score ranged from (16-36), or was less than (60%), While it was moderate if score ranged from (<36-58), or ranged from (60-75%), and it was high if total score ranged from (<58-80), or was more than (75%).

Tools validity: A group of panels examined tools' validity in terms of their face and content. Experts was composed of three academics from the Ain Shams University, Helwan University, and Cairo Faculty of Nursing. They were specialists in Nursing administration and psychiatric Nursing. The jury group examined the instruments in-depth in order to assess their clarity, precision, and comprehensiveness. Researcher asked them for their opinions on the instrument's elements, design, and scoring system.

Tools Reliability: The reliability of the data collection tools was assessed by computing their internal consistency using the Cronbach's Alpha Coefficient Test. The organizational agility questionnaire and the psychological empowerment Scale yielded scores of (0.93) and (0.89), respectively.

Pilot study: Ten nurse managers representing 10% of the total study sample participated in a pilot study. Examining the tools' application, language clarity, practicality, and appropriateness was the aim of the pilot study. It also estimates how long time required for each participant to complete the forms. Filling the tools took about twenty to thirty minutes. September 2023 marked the completion of the pilot research. The pilot study participants were carried over into the full research group without any modifications.

Administrative design and ethical considerations: The necessary authorities' approval was obtained before the study was carried out, The Research Ethics Committee (REC) at the Faculty of Nursing, Modern University for Technology and Information (MTI), granted approval for the study (Formal approval number: FAN/112/2023), its date was August/21/ 2023. Also, an official letter outlining the study's title and objectives was sent from the Dean of the Faculty of Nursing to the directors of Ain Shams University Hospitals to secure authorization from the hospital administrators for data collection and in order to get their permission and ask for their help, the researcher briefed the hospital's medical and nursing directors on the aim of the study and its implications before starting it. Hospital directors also gave their approvals. Study subjects had freedom to participate, refuse, or withdraw at any time and without mentioning causes. Collected data was treated confidential.

Fieldwork: The study's data collection began from September 2023 to February 2024. The researcher introduced herself to nurse managers, explained aim of the study and the elements of the questionnaires, distributed the sheets to them at work settings at various times, and remain present while the study participants fill out the questionnaires to address any questions and clarify any ambiguity. Data were gathered three times a week throughout various shifts. Every week, the researcher gathered between 12 and 16 completed sheets. Each completed document was reviewed by researcher to guarantee accuracy.

Statistical Design: The statistical software for social sciences (SPSS) version 24.0 was used to analyze the data for this study. For parametric numerical data, means, standard deviations (+ SD) were used, and for non-numerical data, frequencies and percentages. The Cronbach's Alpha coefficient test was calculated to assess the internal consistency of the instruments and ascertain their reliability. The best-fitting multiple linear regression model was used when the anticipated count was less than 5 in more than 20% of the cells, however the chi square test was still used to examine the relationship between two variables. The Pearson's correlation coefficient test (r) was used to create the correlation matrix. Statistical significance was assessed at P-values 0.05 and 0.001, with P-value 0.001 being considered very statistically significant.

Results:

   Table (1) portrays the personal data of the nurse managers under study**.** Less than three quarters (71.4%) of them were in the age from more than 35 to 45years, with a mean age of (26.7 + 5.2). In addition, about the years of experience held by nurse managers, less than two thirds (61.2%) had more than 15 to 30 years, with a mean (26.2 +5.3). As far as work hospital go, Ain shams Hospital made up the highest percent 37.8%.

Figure (1) Indicate that more than two thirds (70%) of nurse managers had a bachelor degree of nursing.

Table (2) and Figure (2) Verifies that, with a mean ± SD (15.04±3.90) for organizational agility perception, around two thirds (66.3%) of nurse managers had a moderate perception level, around quarter (25.5%) had high level, and only 8.2% had a low level.

Table (3) and Figure (3) identifies that, with a mean ± SD (11.34±2.49) for psychological empowerment, less than two fifths (37.8% & 39.8%) of nurse managers had a moderate and high levels respectively and more than one fifth 22.4% had a low level.

Table (4) & Table (5) Confirms that among nurse managers under study, there was a highly statistically significant strong positive association (r = 0.851 & P = 0.000) between all-organizational agility perceptions dimensions and all psychological empowerment measures.

Figure (4) explains that among nurse managers under study, there was a highly statistically significant positive strong correlation between organizational agility perception and overall psychological empowerment.

Part I: Personal data of nurse managers.

Table (1): Personal data of studied nurse managers (n= 98).

Personal data items	No	%
Age in years		
25-35	18	18.4
>35- 45	70	71.4
>45	10	10.2
Mean + SD **26.7 + 5.2**		
Years of experience in nursing		
1-15	27	27.6
>15- 30	60	61.2
>30	11	11.2
Mean + SD **26.2 +5.3**		
Work hospital		
Ain Shams Hospital	37	37.8
El-demerdash Hospital	32	32.7
Pediatrics Hospital	14	14.3
Obstetrics Hospital	15	15.3

Nurse Managers' Qualifications

- Diploma
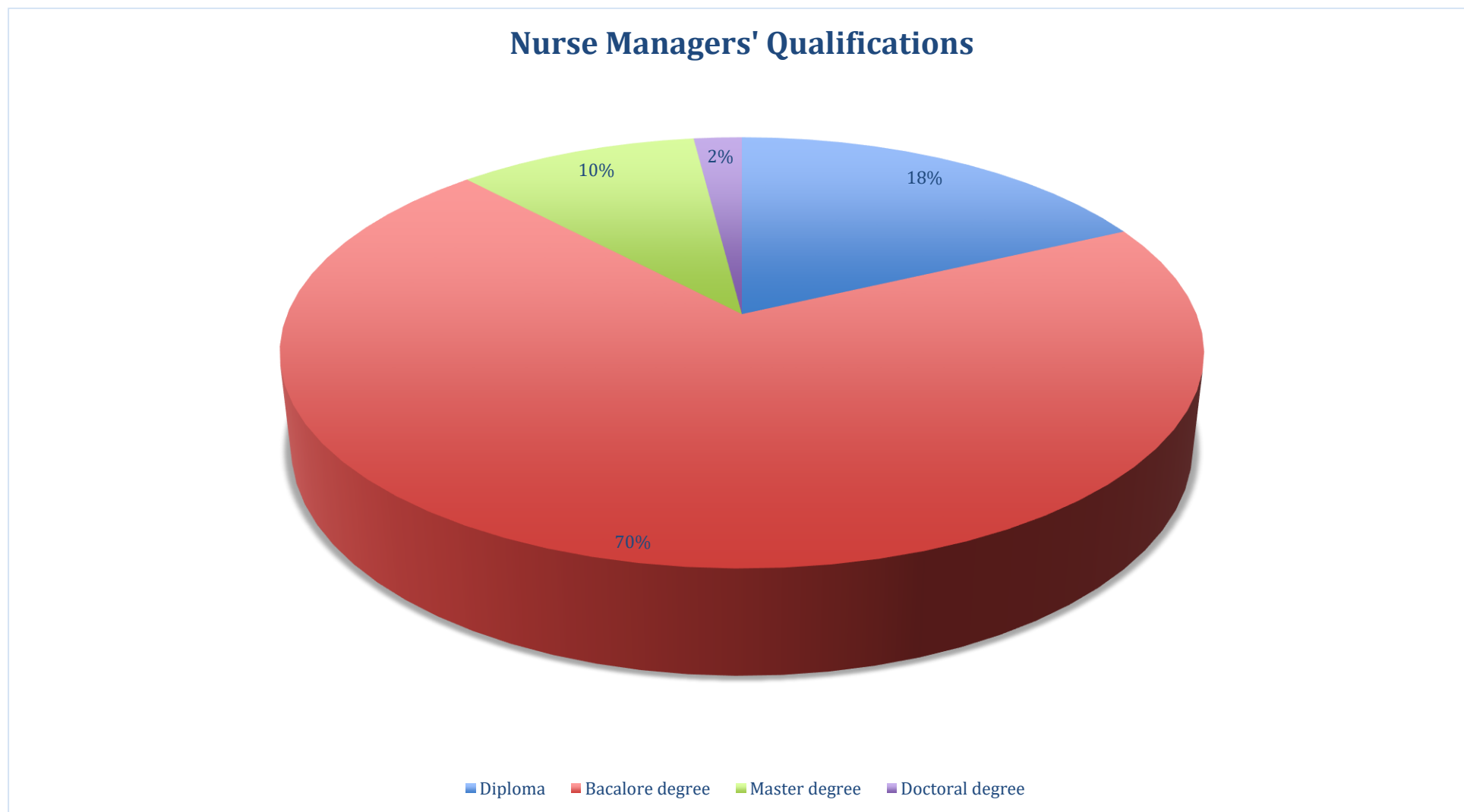- Bacalore degree
- Master degree
- Doctoral degree

Figure (1) Distribution of studied nurse managers according to their level of education (n=98).

Part II: Nurse managers' organizational agility behavior perception level.

Table (2): Total level of organizational agility behavior perception among nurse managers (n= 98)

| Organizational agility dimensions	Low <60%		Moderate 60-75 %		High > 75%		Mean	SD
	No.	%	No.	%	No.	%		
A. **Pro activeness**								
1.Our organization anticipates new business opportunities	13	13.3	54	55.1	31	31.63	15.82	2.95
2.Our organization seeks new business opportunities	7	7.1	76	77.6	15	15.3	16.38	3.93
3.Our organization seeks novel approaches to future market needs	6	6.1	76	77.6	16	16.3	15.55	1.97
B. **Radicalness**								
4.Our organization seeks high-risk projects with chances of high return.	3	3.1	69	70.4	26	26.53	14.11	3.79
5.Our organization supports business experimentation despite uncertain returns.	6	6.1	60	61.2	32	32.7	13.87	2.99
6.Our organization commits resources to radical changes that can potentially transform markets and competition.	6	6.1	61	62.2	31	31.6	15.87	1.99
C. **Responsiveness**								
7.Our organization rapidly reacts to emerging opportunities in customer needs	14	14.3	53	54.1	31	31.63	15.87	1.99
8. Our organization rapidly reacts to emerging opportunities in markets	14	14.3	74	75.5	10	10.2	15.82	2.95
9. Our organization rapidly reacts to emerging environmental opportunities	9	9.2	75	76.5	14	14.3	16.38	3.93
D. **Adaptiveness**								
10. Our organization adapts existing business models	5	5.1	56	57.1	37	37.8	11.11	3.79
11. Our organization adapts the existing business process	3	3.1	69	70.4	26	26.53	14.11	3.79
12. Our organization quickly adopts best practices used by others	6	6.1	60	61.2	32	32.7	13.87	2.99
Total	**8**	**8.2**	**65**	**66.3**	**25**	**25.5**	**15.04**	**3.90**
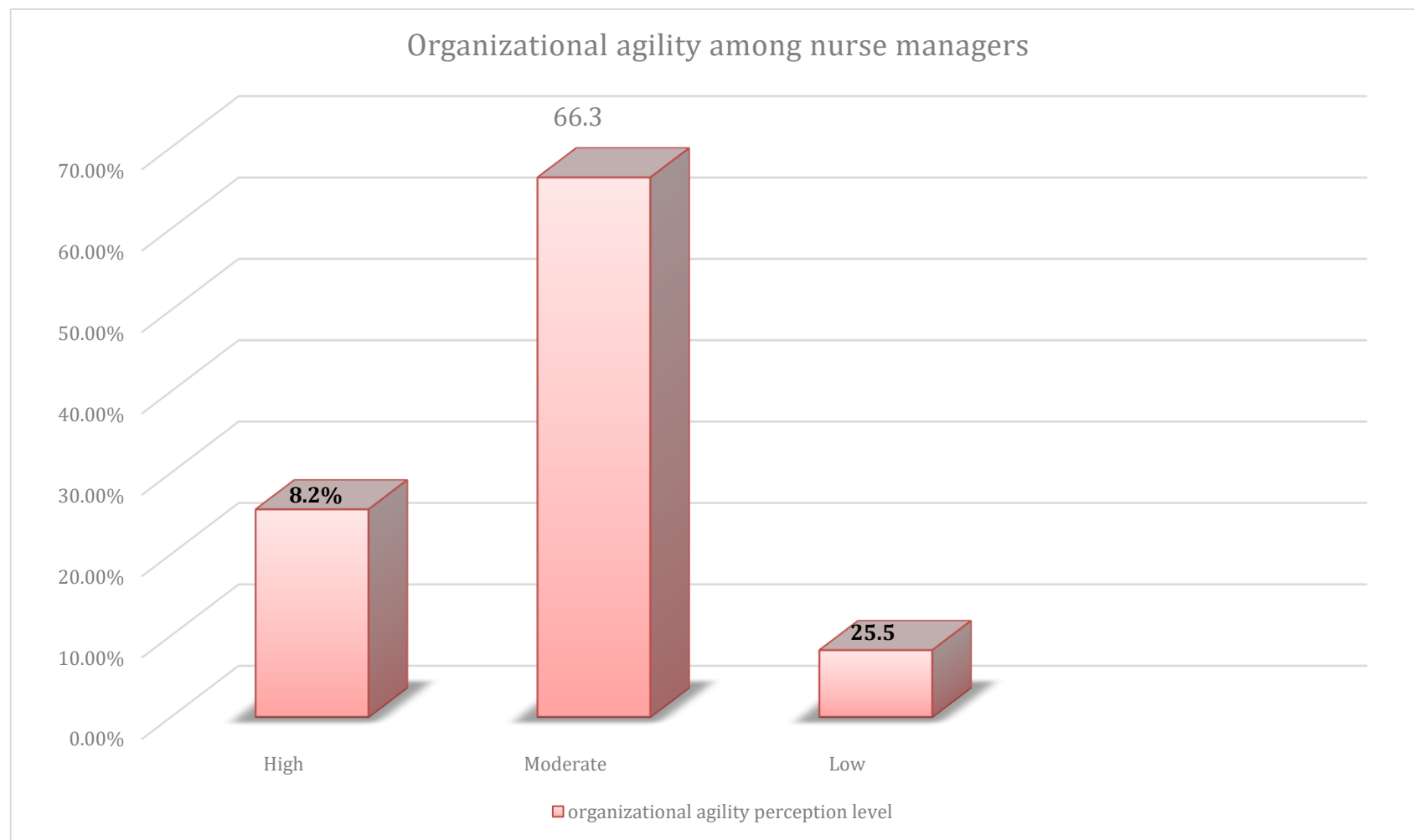
Figure (2): Total organizational agility perception level of nurse managers (n=98).

Part III: Nurse managers' psychological empowerment level.

  Table (3): Total level of psychological empowerment among nurse managers (n=98)

| Psychological empowerment dimensions	Low <60%		Moderate 60-75 %		High > 75%		Mean	SD
	No.	%	No.	%	No.	%		
A. Meaning.								
1. The work I do is very important to me.	30	30.6	60	61.2	8	8.2	10.38	3.93
2. My job activities are personally meaningful to me.	24	24.5	53	54.1	21	21.4	11.55	1.97
3. The work I do is meaningful to me.	26	26.5	60	61.2	12	12.2	10.71	4.25
B. Self-determination								
4. I have significant autonomy in determining how I do my job.	28	28.6	32	32.7	38	38.8	19.87	2.99
5. I can decide on my own how to go about doing my work.	25	25.5	20	20.4	53	54.1	15.87	1.99
6. I have a considerable opportunity for independence and freedom in how I do my job.	28	28.6	19	19.4	51	52.0	16.82	2.95
C. Competence								
7. I am confident about my ability to do my job	10	10.2	60	61.2	28	28.6	9.87	3.99
8. I am self-assured about my capabilities to perform my work activities.	15	15.3	32	32.7	51	52.0	10.47	1.99
9. I have mastered the skills necessary for my job	13	13.3	20	20.4	65	66.3	8.82	0.95
D. Impact								
10. My impact on what happens in my department is large	25	25.5	33	33.7	40	72.7	9.87	1.99
11. I have a great deal of control over what happens in my department.	8	8.2	38	69.1	52	53.0	10.80	1.99
12. I have significant influence over what happens in my department	30	30.6	22	40	33	33.7	11.82	0.95
Total	22	22.4	37	37.8	39	39.8	11.34	2.49
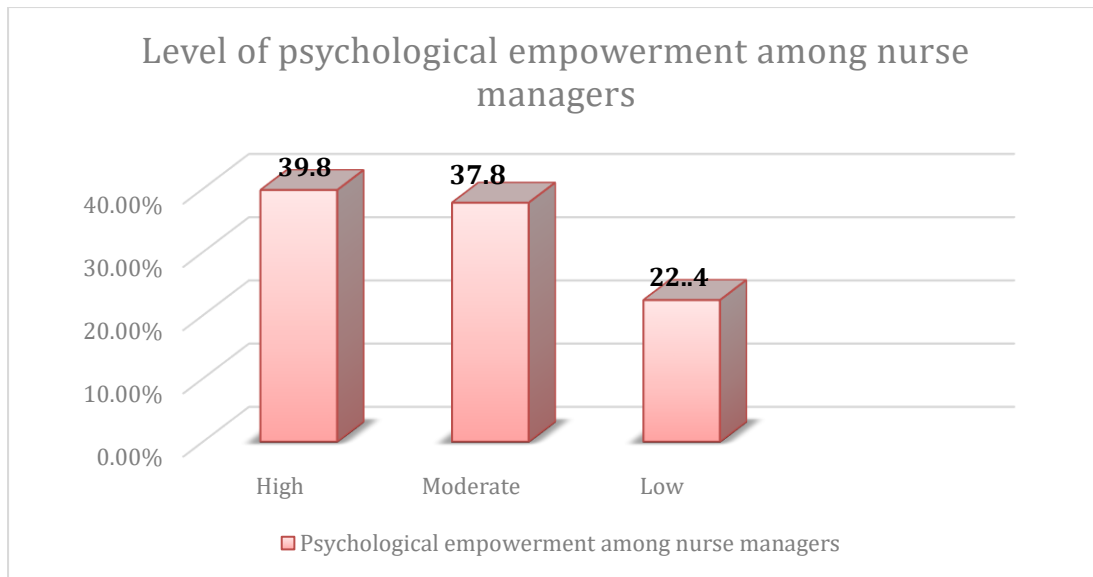
Figure (3): Total psychological empowerment level among nurse managers (n=98).

Part III: Correlation between studied variables:

Table (4): Correlation between organizational agility perception and psychological empowerment among nurse managers (n=98).

Organizational agility items		Psychological empowerment dimensions				
		Meaning	**Self-determination**	**Competence**	**Impact**	**Total**
1. Proactiveness	R	0.749	0.751	0.761	0.851	0.757
	P	0.000**	0.000**	0.000**	0.000**	0.000**
2. Radicalness	R	0.890	0.532	0.842	0.848	0.821
	P	0.000**	0.000**	0.000**	0.000**	0.000**
3. Responsiveness	R	0.761	0.709	0.853	0.829	0.783
	P	0.000**	0.000**	0.000**	0.000**	0.000**
4. Adaptiveness	R	0.816	0.806	0.787	0.801	0.700
	P	0.000**	0.000**	0.000**	0.000**	0.000**

r Pearson Correlation

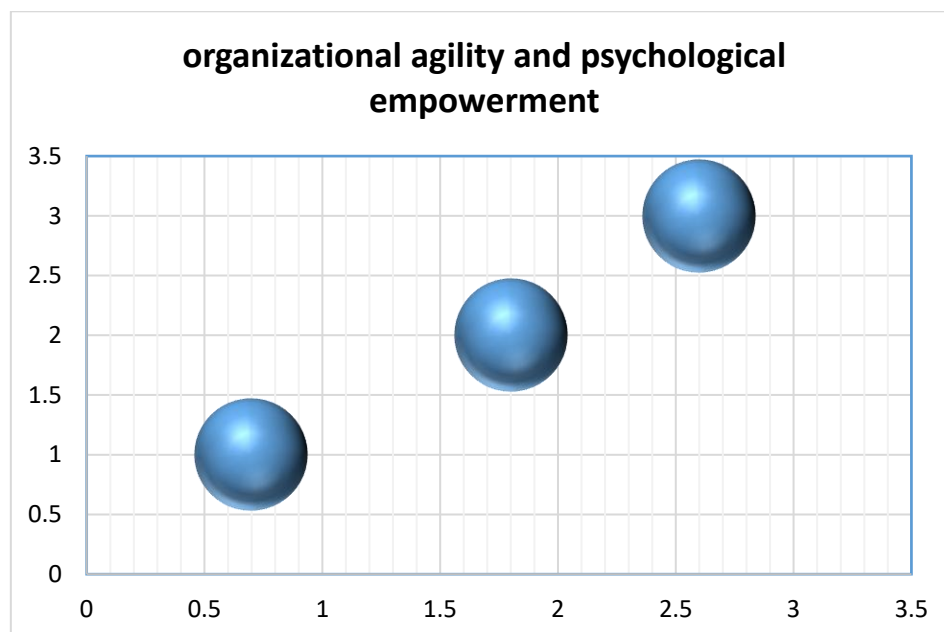* Statistically significant at P≤0.05

** Highly statistically significant at P≤0.

Table (5): Correlation between total organizational agility perception of studied nurse managers and their total psychological empowerment (n = 98).

	Total psychological empowerment	
	R	P
Total organizational agility	0.851	**0.000****

r: Pearson coefficient (**) Highly significant at p<0.01.

Figure (4): Scatter plot correlation between organizational agility and psychological empowerment among nurse managers (n= 98).

Discussion:

Organizational agility and psychological empowerment are considered important factors to organizational success. This study sample was composed of 98 nurse managers. Less than three quarters (71.4%) of them were in the age from more than 35 to 45years according to study findings, these results were the same of the study conducted by *(Basiony & Ibrahim, 2023)* entitled "Organizational agility and its relation with nursing Manpower Teamwork attitude at Beni-Suef University Hospital". About the years of experience held by nurse managers, present results indicated that, less than two thirds (61.2%) had more than 15 to 30 years, with a mean (26.2 ±5.3) , these results were on the same line of the results of *(Abdulla et al.,2021)*in their study about " Agile Leadership Behaviors and Their Role in Promoting Workplace Spirituality". They found that two thirds 66.4% of study sample had more than 15 to 30 years of experience in nursing profession.

As for level of education of studied nurse managers, present results indicated that more than two thirds (70%) of nurse managers had a bachelor degree of nursing. These results were supported by the results of *(Ali et al.,2022)* who performed a study about " Organizational agility: the pathway to career aspirations among staff nurses at selected hospitals" and found that 71% of study participants were graduated from Faculty of nursing and had a bachelor of nursing. Researchers *(Atalla, et al.,2024)* expressed disagreement with present study results in their study entitled "The influence of organizational agility on nurses` career planning: nurses` grit as a mediating factor" who found that high percent (69%) of study sample had diploma degree, those who were graduated from technical secondary nursing school. Also,

(Akkaya et al., 2024) who examined "The role of leader nurse managers in organizational agility and innovation in perspective of job satisfaction: an empirical study in healthcare organizations" discovered that most participants (86%) held a diploma degree, with only 2.9% holding a master's degree or higher.

Present study results verify that, with a mean ± SD (15.04±3.90) for organizational agility perception, around two thirds (66.3%) of nurse managers had a moderate perception level, around quarter (25.5%) had high level, and only 8.2% had a low level. From the researcher's point of view, these results may be related to nurse managers' experience in the same hospital setting and stability in their positions feeling safe and supported as the organization performs efforts for nurse managers retention and promotes shared decision making.

These results were corporate by the results of *(Akkaya et al., 2024)* who declared that high percent (70%) of nurse managers portrayed a moderate level of perception of organizational agility, but with a mean ± SD (33.07±0.88). The study by *(Brown, 2022)* entitled "Building Resilience: The Role of Spirituality in Agile Leadership" was on the same line of present study results and found that (25.3%) of nurse managers had a high perception level of organizational agility and mentioned that these results are due to high spiritual leadership levels. Additionally, the study by *(Brown & Patel, 2023)* entitled "Cultivating Spiritual Values in Agile Leadership: A Pathway to Organizational Flourishing" supported present results and found that (61.9%) of nurse managers had a moderate organizational agility perception level.

Present study results identified that, with a mean ± SD (11.34±2.49) for psychological empowerment, less than two fifths (37.8% & 39.8%) of nurse managers had a moderate and high levels respectively and more than one fifth 22.4% had a low level. From the researcher's opinion, these results may be related to high level of organizational support, access to resources, participated decision making, decentralization, flexible work schedules, and fair performance appraisal. According to the study conducted by *(Llorente-Alonso et al. ,2024)* entitled " A meta-analysis of psychological empowerment: Antecedents, organizational outcomes, and moderating variables" more than one third 34% of participants had moderate psychological empowerment level, and around quarter 25.9% had high level while (40.1%) had low level with a mean ± SD (12.01±0.89).

Present results confirm that among nurse managers under study, there was a highly statistically significant strong positive association (r = 0.851 & P = 0.000) between all-organizational agility perceptions dimensions and all psychological empowerment measures. *(Muduli et al.,2018)* who studied "Psychological Empowerment and Workforce Agility" supported present study results and reported that psychological empowerment must be considered as an important aspect of an organization's effort to foster workforce agility. Further, from among the psychological empowerment variables, impact is the most influential variable followed by self-determination, meaning and competence on workforce agility. On the same line *(Naqach, & Chaouki, 2023)* who studied 'Exploring the power of psychological empowerment in boosting workforce agility" reported that a significant positive relationship between the dimensions of competence and meaning in psychological empowerment and workforce agility. But contrasted present results when found that the dimensions of impact and self-determination do not exhibit a strong relationship with workforce agility.

The study findings clarified the level of nurse managers' perception to organizational agility, their level of psychological empowerment, and determined the relationship between nurse managers' organizational agility perception and psychological empowerment. So,the study results answered research questions and achieved aim of the study.

Conclusion:

According to the study's findings, around two thirds (66.3%) of nurse managers had a moderate organizational agility perception, less than two fifths (37.8% & 39.8%) of them had a moderate and high psychological empowerment levels respectively. Additionally, there was a highly statistically significant strong positive correlation (r = 0.851 & P = 0.000) between organizational agility perception and psychological empowerment among study participants.

Recommendations
The following recommendations were suggested based on the current study results,

- ✔ **Healthcare organizations can:** support organizational agility competencies for nurse managers and psychological empowerment by continuous training and development programs. And support nurse managers with resources and required authority.
- ✔ **Nurse managers** attend seminars, workshops, and scientific conferences about organizational agility and psychological empowerment.

- ✔ **Faculties of Nursing** should introduce organizational agility and psychological empowerment into undergraduate nursing education.
   Furthers studies:
- - The effect of nurse managers' leadership style on organizational agility.
- - Organizational agility educational program effect on organizational commitment among nurses.

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الملخص العربي

سلوك المرونة التنظيمية الناشئة المدرك والتمكين النفسي لدى مديري التمريض: دراسة ارتباطية

مقدمه: تعد كفاءة المرونة التنظيمية والتمكين النفسي لمديري التمريض أمرًا ضروريًا لتطبيق عملية إدارة التمريض الموجهة نحو استثمار الفرص التنظيمية الجديدة لضمان كفاءتها ونجاحها.

الهدف: كان الهدف من الدراسة هو فحص العلاقة بين سلوك المرونة التنظيمية والتمكين النفسي بين مديري التمريض.

التصميم: تم استخدام تصميم البحث الارتباطي الوصفي، وأجريت الدراسة في مستشفيات جامعة عين شمس.

العينة: كان تصميم البحث الارتباطي الوصفي، وأجريت الدراسة في مستشفيات جامعة عين شمس.

الأدوات: تم استخدام أداتين: تم استخدام مقياس المرونة التنظيمية ومقياس التمكين النفسي لتحقيق الهدف من الدراسة.

النتائج: كان حوالي ثلثي (66.3٪) من مديري التمريض مستوى إدراك متوسط للمرونة التنظيمية، في حين كان أقل من خمسيهم (37.8٪ و39.8٪) منهم مستويات متوسطة وعالية من التمكين النفسي على التوالي.

الخلاصة: من بين مديري التمريض العاملين في مستشفيات جامعة عين شمس، كانت هناك علاقة إيجابية ذات دلالة إحصائية عالية بين جميع أبعاد إدراك المرونة التنظيمية وأبعاد التمكين النفسي.

التوصيات: يوصى بأن يدعم أصحاب المصلحة وصناع السياسات والقرارات في مجال الرعاية الصحية سلوك المرونة التنظيمية وضمان التمكين النفسي بين مديري التمريض لضمان جودة المنظمة والإنتاجية.