

Relationship between Organizational Support and Nurses' Perceived Citizenship and Innovation

Sally Mohammed Farghaly Abd El-Aliem¹, Ghada Mohamed Hamouda²

¹ Lecturer of Nursing Administration, Faculty of Nursing, Alexandria University, Alexandria, Egypt- Assistant Professor of Nursing Management and Education, College of Nursing- Princess Nourah Bint Abdulrahman University, Riyadh, Saudi Arabia

² Assistant Professor of Nursing Administration, Faculty of Nursing, Alexandria University, Alexandria, Egypt- Assistant Prof. of Nursing Administration, King Abdul-Aziz University

Abstract: Background: Profession of nursing reacts with patients in healthcare organizations, so effective organizational support is required. Nurses should demonstrate high level of organizational citizenship behavior as they are the most active health care providers and area of innovation to intervene high quality of care.

Research purpose: This research explored the relationship between organizational support and nurses' perceived citizenship and innovation. **Methods:** A descriptive correlational study design was utilized in carrying out this study, it was executed in all In-patient medical, surgical and intensive care units and its specialties at Alexandria Main University Hospital. It is a teaching hospital equipped with 1724 beds. The organizational support scale that was used to measure organizational support, while Organizational Citizenship Behaviors Rotated Component Matrix was used to measure citizenship behavior of nurses. As well as, Individual Innovativeness Scale was utilized to measure nurses' innovation. **Results:** The study results found that 44% of staff nurses had moderate level of organizational support. Meanwhile, 34% of them had low level, and 22% of them had high level of organizational support. Also, the results indicated that 46% of staff nurses had moderate level of organizational citizenship behavior while, 31% of them had low level. In Addition, 23% of staff nurses had high level. In relation to innovation, 42.5% of staff nurses had moderate level of it, 38.3% of them had low level of it, and 19.2% of staff nurses had high level of innovation. **Conclusions:** The current study revealed that there was highly statistically significant positive correlation between organizational support, nurses' perceived organizational citizenship and innovation. **Recommendation:** Hospital management should concentrate a great concern on continues evaluation of organizational support and citizenship behaviors through providing opportunities for promotion, rewarding the good performance, encouraging competitive spirit among nursing staff, valuing the nurses contribution to its wellbeing, caring about staff satisfaction at work, and enhancing the nurses' innovation through encouraging trying new ideas and new ways to do things, giving opportunities to take leadership responsibilities among groups.

Keywords: Organizational support, citizenship behavior, innovation.

Date of Submission: 10-01-2020

Date of acceptance: 27-01-2020

I. Introduction:

Organizational support is characterized by the degree to which nurses recognized that how the organization appreciates their participation and maintain their wellbeing, which satisfy nurses' emotional and social needs. In addition, healthcare organizations challenge to market themselves as a benchmark partner to affect on their nurses' through social exchange processes, while nurses generally build their relation with the organization based on recognition and organizational commitment (Labrague et al., 2018).

Organizational support help nurses to minimize their workplace related stressors depression, excitement, and exhaustion. On the other hand, positive work environment is considered as the most important factor for nurses' job satisfaction and enhancing their readiness for innovation that affects positively maintenance of manpower and magnetism in the organization, as well as patient care services (Poikkeus et al., 2018).

Profession of nursing reacts with patients in healthcare organizations, so effective organizational support is required, so it need teamwork, effective communication and healthcare members' collaboration. In the line of this, organizational citizenship behavior increases the tendency towards promoting sense of responsibility, sharing information, motivation, and satisfaction within the organization among patients and health care providers (Reed & Shearer, 2017).

Organizational citizenship behavior includes nurse behaviors that are not observable but it reflects organizational attitude. Also OCB indicates nurses' willingness to behave in relation toward work related

specifications formally, while informal behaviors of nurses' voluntary engagement constitute the large attribution of organizational citizenship that contribute to the whole organizational wellbeing (Jang, 2017).

Innovation is defined as the generation of new ideas or application of existing ideas to a new ways resulting in improvement in organization. American Nurse Association is mastered in constructing the culture of nursing innovation. Nurses are acting as an innovator and a change agent for challenging and resolving difficult situations daily among patients and workplace. American Nurse Association provide resources for nurses to be proactive in their performance to attain improvement in the health care system (Weberg et al., 2019).

Fleabite of nurses are missing their voices to be effective in innovative-technological roles. In spite of this, nurses have a vital role toward patient advocacy and workflow improvement. In addition, applying nurses knowledge and leadership skills have a remarkable effect on patient health care experience (Caputi, 2017).

Despite a plethora of literature on organizational climate for innovation and the persuasive arguments establishing its link to perceived organizational support, few studies hitherto have explored innovative work behavior of managers. Specifically, limited attention has been paid to explaining how organizations perceive the importance of stimulating innovative work environments. Nurses play a critical role in delivering exemplary health care. For nurses to perform at their best, they need to experience high engagement, which can be achieved by providing them necessary organizational support, innovative work behavior and proper working environment (Wishart et al., 2019).

Research Question:

- Is there a relationship between organizational support and nurses' perceived citizenship and innovation?

Material and Methods

Research purpose: This research explore the relationship between organizational support and nurses' perceived citizenship and innovation.

Research design:

Descriptive correlational design was utilized in carrying out this study.

Setting

The study was executed in all In-patient medical, surgical and intensive care units and its specialties at Alexandria Main University Hospital. It is a teaching hospital equipped with 1724 beds. The capacity of Medical units was 951, 773 beds in surgical units and 100 beds in intensive care units with a wide range of ambulatory care services such as Out-Patient, Pharmacy, Emergency, X-ray, Physiotherapy, Teaching Center; and Paramedical Services as Dietary, Laundry, and Maintenance. It is a non-paying hospital for all departments except the 6th floor which is private for medical and surgical inpatients. The number of inpatient units included in the study was 44 units: 23 medical, 15 surgical, and 6 intensive care units.

Subjects

The subject composed of 261 staff nurses who worked at the previous mentioned settings. The study subjects was selected based on the following inclusion criteria: staff nurses who had more than one year of experience, giving direct care to the patient, including both male and female nurses. The exclusion criteria include nurses' who are working in managerial positions as nurse educator, infection control staff nurse, and quality coordinator staff nurse.

Sample size:

The estimated sample size is 261 nurses, at confidence level 95% and precision rate at 0.05 by using Steven equation, 2012. Since the total number of them is 670 nurses.

Tools:

The data were gathered using self-administered questionnaire including four major parts:

Part I:

This part included questions related to demographic characteristics of studied staff nurses including age, gender, marital status, qualification and years of experiences.

Part II:

The organizational support scale that was developed by Trybou et al., 2014 and was used to measure perceived nurses' organizational support. The instrument consists of 16 items "The organization cares about my general satisfaction at work, if given the opportunity, the organization would take advantage of me, my supervisor shows very little concern for me, and my supervisor cares about my opinions. Responses were evaluated on a 5-point Likert rating scale items were anchored from (1) strongly disagree to (5) strongly agree

for positive statement while items number 2,3,5,6,9,13 were scored as a reversed statements. The total score ranged from 16 to 90. The higher scores means higher organizational support. These scores were summed and were converted into a percent score. The scoring was classified into 3 levels as high if scores > 60%, moderate if scores from 50-60%, and low if scores < 50%.

Part III:

Organizational Citizenship Behaviors Rotated Component Matrix was developed by **Bilgin et al., 2015** and was used to measure nurses' perception of organizational citizenship behavior. The instrument consists of 23 statements "My present job provides good opportunities for promotion. I have been rewarded for my good performance, my opportunity for promotion is unlimited in my present workplace, and my present organization has help me to pursue my professional goal". Responses were evaluated on a 3-point Likert rating scale, items were anchored from (1) Never, (2) sometimes to (3) Always. The total score ranged from 23 to 69. The higher scores means higher perception of nurses' citizenship. These scores were summed and were converted into a percent score. The scoring was classified 3 levels as high if scores > 60%, moderate if scores from 50-60% and low if scores < 50%.

Part IV:

Individual Innovativeness Scale was utilized to measure perceived nurses' innovation. The scale consists of 20 items as "I tend to feel that the old way of living and doing things is the best way, I am challenged by ambiguities and unsolved problem, I must see other people using new innovations before I will consider them." these items were assessed with the scale developed by **Yigit&Aksay, (2015)**. Responses were measured on a 5-point Likert rating scale items were anchored from (1) strongly disagree to (5) strongly agree for positive statement and vice versa for negative statement (items number: 4, 6, 7, 10, 13-16, 19, 20). The total score ranged from 20 to 100. The higher scores means higher level of innovation. These scores were summed and were converted into a percent score. The scoring system was classified into 3 levels as high if scores > 60%, moderate if scores from 50-60%, and low if scores < 50%.

Methods

- Hospital approval was obtained to collect the study data from the identified setting, after elucidating the purpose of the study to ensure their full cooperation.
- The study tools were translated into Arabic to suit the Egyptian culture and tested for content validity along with the fluency of the translation by five experts in the field of study (four Professors and a Lecturer from Nursing Administration Department). Accordingly, some statements were modified for more clarity.
- Tools were tested for internal reliability using the Cronbach's Alpha correlation coefficient, revealing a good reliability for organizational support, organizational citizenship and individual innovativeness (α 0.788, 0.829, and 0.749), respectively.
- The pilot study was carried out on 26 nurses those represent 10% of nurses at the previous mentioned setting in order to test the applicability of the constructed tools and the clarity of the included tools. The pilot has also served to estimate the time needed for each subject to fill in the questionnaire, and modifications were done.

Fieldwork

An approval was obtained from the previous mentioned setting affiliated Alexandria Main University Hospital. A letter was issued to them from the Faculty of Nursing, explaining the aim of the study in order to obtain their permission and cooperation. Data were collected in three months, from the beginning of May 2019 to the end of June 2019.

The researcher first met with the nurses worked at the previously mentioned settings, explained the purpose of the study after introducing himself. The researcher was visiting the study setting 2days / week at morning shift (8a.m-2p.m) and afternoon shift (2pm-8pm) to collect data. The questionnaire was filled by nursing staff which take 25-35 minutes.

Ethical Considerations

The research approval was obtained from the Faculty Ethical Committee before starting the study.

The ethical research considerations include the following:

- The researcher was clarified the aim of the study to nurses included in the study before starting
- Verbal approval was obtained from the nurses before inclusion in the study; a clear and simple explanation was given according to their level of understanding. They secured that all the gathered data was confidential and used for research purpose only.

- The researcher was assuring maintaining anonymity and confidentiality of subjects' data included in the study
- The nurses were informed that they are allowed to choose to participate or not in the study and they have the right to withdrawal from the study at any time.

Statistical Analysis

Data were coded by the researchers and statistically analyzed utilizing SPSS version 22. Frequency and percentages were used for describing demographic and work-related characteristics. Descriptive statistics (means and standard deviations) and inferential statistics (Pearson correlation coefficient and Regression analysis [R2]) were used to analyze the results of the study. All statistical analyses were done utilizing an alpha error of 0.05. Regarding P value, it was considered that: non-significant (NS) if $P > 0.05$, Significant (S) if $P < 0.05$, Highly Significant (HS) if $P < 0.01$. Pearson correlation coefficient values indicated as follow: $r = 0.1$ weak; $r = 0.3$ moderate; and $r = 0.5$ strong relationship.

II. Results

Table (1) revealed that, 26.8% of the studied nurses their age ranged between 25 – <30 years, the mean age of them 35.63 ± 7.88 year. As regard to gender and marital status, 62.8% and 76.6% of the studied nurses were female and married, respectively. In relation to the educational level of nurses under study, it was found that, 43.7% of them had technical nursing degree. Also, 53.3% of the nurses had years of experience ranged between 5<15 years, with mean 13.7 ± 7.92 years.

Table (2) illustrated that, the mean score of nurses regarding their supervisor shows very little concern for them was 6.17 ± 0.84 . Also, the mean scores of them related that, if the organization could hire someone to replace them at a lower salary it would do so and the organization takes pride in their accomplishments at work were 5.31 ± 1.38 and 5.28 ± 1.37 , respectively. While, the mean scores of nurses regarding organization fails to appreciate any extra effort from them and if given the opportunity, the organization would ignore any complaint from them were 3.56 ± 1.71 and 3.91 ± 1.28 , respectively. Also, the mean score of nurses regarding total organizational support was 79.55 ± 14.65 . The mean score of nurses regarding organizational reward and job condition was 42.55 ± 8.20 . While, the mean scores of nurses regarding fairness and supervisor support were 16.98 ± 3.67 and 18.64 ± 4.69 , respectively. Finally, the mean score of nurses regarding total organizational support was 92.37 ± 11.67 .

Figure (1) showed that 44% of studied nurses had moderate level, 34% of them had low level, while 22% of them had high level.

Table (3) found that, the mean score of nurses regarding that, the organization has a high degree of loyalty to them was 2.59 ± 0.27 . Also, the mean scores of them related to amenities that used in present workplace is clean and their job was compatible with their experience were 2.57 ± 0.46 and 2.56 ± 0.26 , respectively. While, the mean scores of them regarding organization has help them to pursue their professional goal and immediate supervisor uses positive feedback with staff were 1.17 ± 0.04 and 1.17 ± 0.34 , respectively. Finally, the mean score of nurses regarding total organizational citizenship behavior was 48.41 ± 8.23 .

Figure (2) clarified that, (46%) of studied nurses had moderate level of total organizational citizenship behavior. Meanwhile, (31%) of them had low level. While, (23%) of them had high level.

Table (4) showed that, the mean score of nurses regarding receptive to new ideas was 4.28 ± 0.41 . Also, the mean scores of them related to skeptical of new ideas and beware of accepting new ideas were 4.34 ± 0.26 and 4.17 ± 1.10 , respectively. While, the mean scores of them regarding acceptance of new something and feel that their influential member of their peer group were 1.92 ± 0.85 and 2.58 ± 1.27 , respectively. Finally, the mean score of nurses regarding total innovation was 69.41 ± 11.43 .

Figure (3) reported that, (42.5%) of studied nurses had moderate level of total innovation. Meanwhile, (38.3%) of them had low level. While, (19.2%) of them had high level.

Table (5) illustrated that, there were highly statistical significant relation between total organizational support of the staff nurses and their age, gender, marital status, qualification and years of experience as $P = (.011, .014, .000, .013, \text{ and } .017)$, respectively. As well As, there were highly statistical significant relation between total organizational citizenship of the staff nurses and their age, qualification and years of experience as $P = (.021, .001, \text{ and } .009)$, respectively. On the other hand, there were no statistically significant relation with their gender and marital status. Furthermore, the results showed that, there were highly statistical significant

relation between total innovation of the staff nurses and their age, gender and marital status where P= (.002, .000, and .004), respectively. Also, there were statistical significant relation with their qualification and years of experience where P= (.011, and .014), respectively.

Table (6) revealed that a highly significant positive correlation was found between organizational support and organizational citizenship ($r = .873, P = .002$). On the other hand, a significant positive correlation was found between organizational support and innovation ($r = .988, P = .001$). As well as, a highly significant positive correlation was found between organizational citizenship and innovation ($r = .817, P = .003$).

Table (1): Distribution of Staff Nurses according to their demographic and work related characteristics at Main University Hospital (N= 261).

Demographic & work related characteristics	No	%
Age		
20 - <25	65	24.9
25 - <30	70	26.8
30 - < 35	58	22.2
35 or more	68	26.1
\bar{x} S.D	35.63±7.88	
Gender		
Male	97	37.2
Female	164	62.8
Marital Status		
Married	200	76.6
Not Married	61	23.4
Educational Qualification		
Secondary nursing degree	77	29.5
Technical nursing degree	114	43.7
Bachelor nursing degree	51	19.5
Others	19	7.3
Years of Experience		
5<15 years	139	53.3
15 - <25 years	69	26.4
>25 years	53	20.3
\bar{x} S.D	13.7±7.92	

Table (2): Mean scores of perceived nurses' Organizational support at Main University Hospital (N= 261).

Organizational Support		Mean ±SD
1	If the organization could hire someone to replace me at a lower salary it would do so.	5.31±1.38
2	The organization disregards my best interests when it makes decisions that affect me.	4.28±1.37
3	Help is available from the organization when I have a problem.	5.17±1.04
4	Even if I did the best job possible, the organization would fail to notice.	4.98±1.37
Total Fairness		16.98±3.67
5	My supervisor strongly considers my goals and values.	4.17±2.04
6	My supervisor really cares about my well-being.	4.57±1.46
7	My supervisor shows very little concern for me.	6.17±0.84
8	My supervisor cares about my opinions.	4.17±2.04
Total Supervisor Support		18.64±4.69
9	The organization would ignore any complaint from me.	3.91±1.28
10	The organization values my contribution to its well-being.	4.41±1.27
11	The organization fails to appreciate any extra effort from me.	3.56±1.71
12	The organization is willing to help me when I need a special favor.	4.76±1.95
13	The organization cares about my general satisfaction at work.	5.18±1.31
14	If given the opportunity, the organization would take advantage of me.	3.99±2.06
15	The organization takes pride in my accomplishments at work.	5.28±1.37
16	The organization tries to make my job as interesting as possible.	4.57±1.13
Total Organizational Reward and Job Condition		42.55±8.20
Total Organizational Support		79.55±14.65



Figure (1): Percentage distribution of nurses' perceived Organizational support level at Main University Hospital (N=261).

Table (3): Mean scores of perceived nurses' Organizational Citizenship Behavior at Main University Hospital (N= 261).



Figure (2): Percentage distribution of perceived nurses' Organizational Citizenship Behavior level at Main University Hospital (N=261).

Table (4): Mean scores of perceived nurses' innovation at Main University Hospital (N= 261).

Innovation	Mean ±SD
1 My peers often ask me for advice or information	3.41±0.97
2 I enjoy trying new ideas	3.56±0.71
3 I seek out new ways to do things.	2.44±0.82
4 I am generally cautious about accepting new ideas.	4.17±1.10
5 I frequently improvise methods for solving a problem when an answer is not apparent.	2.48±0.97
6 I am suspicious of new inventions and new ways of thinking	3.90±0.46
7 I rarely trust new ideas until I can see whether the vast majority of people around me accept them.	3.29±0.89
8 I feel that I am an influential member of my peer group	2.58±1.27
9 I consider myself to be creative and original in my thinking and behavior.	2.77±1.31
10 I am aware that I am usually one of the last people in my group to accept something new	1.92±0.85
11 I am an inventive kind of person.	3.30±0.86

Innovation		Mean ±SD
12	I enjoy taking part in the leadership responsibilities of the group I belong to.	4.11±1.00
13	I am reluctant about adopting new ways of doing things until I see them working for people around me.	3.17±0.94
14	I find it stimulating to be original in my thinking and behavior.	2.99±0.67
15	I tend to feel that the old way of living and doing things is the best way.	2.57±1.46
16	I am challenged by ambiguities and unsolved problems.	3.29±0.39
17	I must see other people using new innovations before I will consider them.	2.58±0.87
18	I am receptive to new ideas.	4.28±0.41
19	I am challenged by unanswered questions.	2.92±1.47
20	I often find myself skeptical of new ideas.	4.34±0.26
Total		69.41±11.43

Figure (3): Percentage distribution of nurses' perceived innovation level at Main University Hospital (N=261).

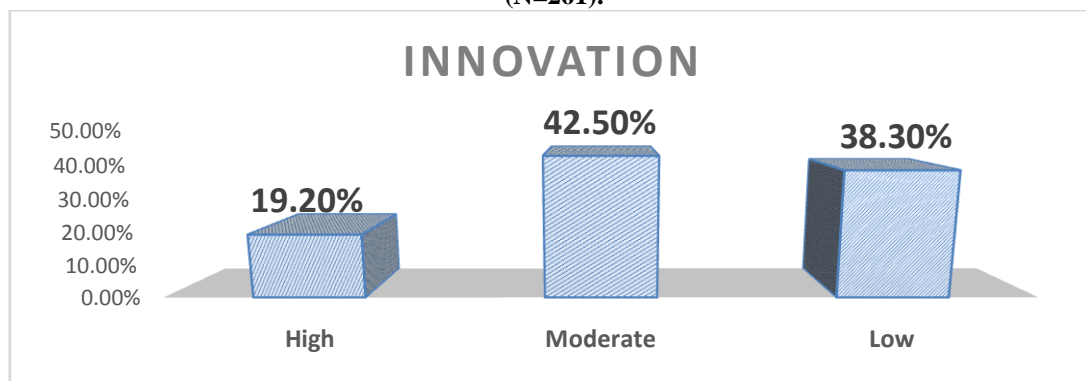


Table (5): Relationship between nurses' demographic & work-related characteristics and their total perception regarding organizational support, organizational citizenship and innovation at Main University Hospital (N=261).

Nurses' demographic & work-related characteristics		Organizational support						Organizational citizenship						Innovation					
		High (N=58)		Moderate (N=116)		Low (N=87)		High (N=60)		Moderate (N=120)		Low (N=81)		High (N=50)		Moderate (N=111)		Low (N=100)	
		No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Age	20 -<25	6	10.3	31	26.7	28	32.2	5	8.3	31	25.8	29	35.8	35	70	25	22.5	5	5
	25 -<30	9	15.5	36	31	25	28.7	10	16.7	37	30.8	24	29.6	9	18	46	41.5	15	15
	30 -<35	14	24.2	24	20.7	20	23	17	28.3	22	18.4	18	22.2	4	8	20	18	34	34
	≥35	29	50	25	21.6	14	16.1	28	46.7	30	25	10	12.4	2	4	20	18	46	46
χ^2 Calculated		4.142						4.913						10.614					
P-Value		.011*						.021*						.002**					
Gender	Male	20	34.5	40	34.5	37	42.5	23	38.3	43	35.8	31	38.3	10	20	19	17.1	68	68
	Female	38	65.5	76	65.5	50	57.5	37	61.7	77	64.2	50	61.7	40	80	92	82.9	32	32
χ^2 Calculated		8.014						1.989						11.357					
P-Value		.014*						.061						.000**					
Marital status	Married	36	62	87	75	77	88.5	42	70	90	75	68	84	45	90	96	86.5	59	59
	Not Married	22	38	29	25	10	11.5	18	30	30	25	13	16	5	10	15	13.5	41	41
χ^2 Calculated		13.062						1.456						9.264					
P-Value		.000**						.068						.004**					
Educational Level	Secondary school	31	53.4	29	25	17	19.5	2	3.3	37	30.8	38	46.9	1	2	17	15.3	59	59
	Diploma	19	32.8	72	62	23	26.5	8	13.3	69	57.5	37	45.7	4	8	75	67.6	35	35
	Bachelor degree	5	8.6	13	11.3	33	37.9	35	58.4	10	8.3	6	7.4	27	54	18	16.2	6	6
χ^2 Calculated		6.376						12.029						7.614					
P-Value		.013*						.001**						.011*					
Years of Experience	< 15	5	8.6	65	56	69	79.3	8	13.3	66	55	65	80.2	28	56	81	73	30	30
	15 -<25	16	27.6	39	33.6	14	16.1	14	23.3	41	34.2	14	17.3	20	40	19	17.1	30	30
	≥25 years	37	63.8	12	10.4	4	4.6	38	63.4	13	10.8	2	2.5	2	4	11	9.9	40	40
χ^2 Calculated		8.108						9.110						6.550					
P-Value		.017*						.009*						.014*					

*Significant at P<0.05; **highly significant at P<0.01

Table (6): Correlation matrix between nurses' demographic & work-related characteristics and their total perception regarding organizational support, organizational citizenship and innovation at Main University Hospital (N=261).

Variables	Organizational support	Organizational Citizenship	Innovation
Organizational support		R .873 p. value .002**	R .988 p.value .001**
Organizational Citizenship	R .873 p. value .002**		R.817 p.value .003**
Innovation	R .988 p.value .001**	R.817 p. value .003**	

III. Discussion

In the changing world, the most important characteristic that all healthcare sectors and organizations need and require in individuals is innovativeness. Innovation considered as a new organizational method for organizational support and citizenship.

In relation to organizational support, the current study showed that mean score of nurses regarding total organizational support was 79.55±14.65 and one third of them had low level of total organizational support. While, only less than one quarter of them had high level of total organizational support. This results may due to Lack of supportive role of the hospital management to nurses and backfires pressure resulting from the views of the media without any response from nursing leaders. This results supported with the study performed by **Abou Hashish, 2017** titled in Relationship between ethical work climate and nurses' perception of organizational support, commitment, job satisfaction and turnover intent, who reported that less than one third had high level of support and around half had moderate level of organizational support.

Regarding the relation between characteristics of nurses and organizational citizens behavior, the current study revealed that there were highly statistically significant relation between total citizens behavior of the studied nurses and their qualification and years of experience at (P= < 0.01). Also, there were statistically significant relation with their age at (P= < 0.05). On the other hand, there were no statistically significant relation with their gender and marital status. This results may due to, nurses who had higher education, had high citizenship behavior, while nurses who had more nursing experience, had high level of citizenship behavior than nurses who had low nursing experiences. This results supported with the study performed by **Issever et al., 2016** titled in Organizational citizenship behavior of the nurses working in public hospitals, who reported that there were highly statistically significant relation between citizens' behavior and their nurses' experience and education level.

Regarding the relation between characteristics of nurses and organizational support, the current study revealed there were highly statistically significant relation between total organizational support of the studied nurses and their marital status at (P= < 0.01). Also, there were statistically significant relation with their age, gender, qualification and years of experience at (P= < 0.05). This results supported with the study performed by **Gupta et al., 2016** titled in The relationships between perceived organizational support, affective commitment, psychological contract breach, organizational citizenship behavior and work engagement, who reported that there was relation between characteristics of nurses and organizational support.

According to characteristics of studied nurses, the current study revealed that, the mean age of them was 35.63±7.88 years and mean years' experience was 13.7±7.92 years. This results supported with the study performed by **Pohl et al., 2017** titled in Human resources practices as predictors of organizational citizenship behavior: The role of job breadth and organizational support, who found that the mean age of studied nurses was 36.21±6.9 years and mean years' experience was 12.77±8.01 years. On the other hand, this results in contrast with the study performed by **Haider et al., 2017** titled in Organizational citizenship behavior and implementation of evidence-based practice, who found that mean age of studied nurses was 9.24±3.29 years.

According to qualification of studied nurses, the current study revealed that, one quarter of them had bachelor and higher education, while less than half had technical nursing education. This results may due to the nurses are busy all the time at work and at home and there is no approval for vacations to study. This results in contrast with the study performed by **Islam et al., 2017** titled in Nurses' reciprocation of perceived organizational support: the moderating role of psychological contract breach, who reported that the majority of studied nurses had bachelor degree.

Regarding to Organizational citizenship, the current study showed that the mean scores of nurses regarding Organizational Citizenship Behavior was 48.41±8.23 and slightly less than half of studied nurses had moderate level of total organizational citizenship behavior. While, only less than one quarter of them had high level. This results may due to absence of a clear job description of the nurses and the absence of the role of the head of nursing as a defender of the rights of nurses and physicians' superiority in dealing with nurses. This results in contrast with the study performed by **Liu et al., 2017** titled in The Relationship among job satisfaction,

work engagement and organizational citizenship behavior of nurses, who reported that more than two thirds of studied nurses had satisfactory level of organizational citizenship.

Regarding innovation scale, the current study showed that the Mean scores of nurses perception regarding innovation was 69.41 ± 11.43 . Also, the mean score of nurses regarding receptive to new ideas was 4.28 ± 0.41 . Also, the mean scores of them related to skeptical of new ideas and beware of accepting new ideas were 4.34 ± 0.26 and 4.17 ± 1.10 , respectively. This results may due to Healthcare workers have high-stress jobs and often work long hours, Healthcare culture and Misconceptions about what constitutes innovation. This result disagreement with the study performed by **Bagheri & Akbari, 2018** titled in the impact of entrepreneurial leadership on nurses' innovation behavior, who reported that mean scores of nurses regarding innovation was 84.91 ± 8.6 scores. This results supported with the study performed by **Krontoft et al., 2018** titled in Innovation activity among nurses: The translation and preliminary validation of the Bricolage Measure—a mixed-method study, who reported mean score of innovative was 65.22 scores.

According to Percentage distribution of nurses regarding total innovation, the current study showed that less than half of studied nurses had moderate level of total innovation. Meanwhile, more than one third of them had low level. While, around one fifth of them had high level. This results may due to weak personal skills, poor self-awareness, fear to failure and organizational culture blame. This results in contrast with the study performed by **Fang et al., 2018** titled in Correlation between perceived professional benefits and innovation behavior of oncology nurses and study performed by **Marshall & McGrew, 2017** titled in Creativity and innovation in health care: opening a hospital makerspace, who reported that more than half had high level of innovation.

Regarding the relation between nurses' characteristics and total innovation scale, the current study showed that there were highly statistically significant relation between total innovation of the studied nurses and their age, gender and marital status at ($P = < 0.01$). Also, there were statistically significant relation with their qualification and years of experience at ($P = < 0.05$). This results may due to Female, married nurses with higher education had high level innovation than male, not married and had low education level. This results agreement with the study performed by **Fay et al., 2019** titled in Differential effects of workplace stressors on innovation, who reported that characteristics of nurses and environment had positive effect on innovation.

Regarding the correlation between studied variable, the current study showed that there was highly statistically significant positive correlation between total innovation of the studied nurses and total organizational support and total organizational citizenship. This study supported with the study performed by **Abdulrab et al., 2018** titled in the role of psychological empowerment as a mediating variable between perceived organizational support and organizational citizenship behavior in Malaysian higher education institutions, who reported that there was positive correlation between organizational support and organizational citizenship. This study agreement with the study performed by **Nazir et al., 2018** titled in influence of social exchange relationships on affective commitment and innovative behavior: role of perceived organizational support, who reported there was correlation between organizational support and innovation behavior.

IV. Conclusion:

The current study concluded that there was highly statistically significant positive correlation between organizational support, nurses' perceived organizational citizenship and innovation.

Recommendations:

According to the results of current study, the following recommendation are suggested:

• **Hospital administrators should:**

- Adopt strategies that facilitate nurses' innovation and enhance their professional performance.
- Positively support nurses' work climate, trust, teamwork, proactive management, future-oriented system thinking and health care professionals' dedication at work.
- Continuous evaluation of organizational support and citizenship behavior to avoid nurses' turnover.
- Conducting educational program for enhance citizenship behaviors between staff nurses.
- Preparing of continuous awareness workshop about nurses' innovation.

• **Nurses should:**

- Recognize the opportunities and best solutions to support their innovation through self-development.
- Employ different activities, expected performance and approaches to improve their organizational support and citizenship.

Further researchers, about relationship between organizational support, citizenship behavior and innovations with increasing sample size and different settings, to correlate the relationship between organizational support and nurses' engagement and commitment.

References:

- [1]. Abdulrab, M., Zumrah, A. R., Almaamari, Q., Al-Tahtah, A. N., Isaac, O., & Ameen, A. (2018). The role of psychological empowerment as a mediating variable between perceived organizational support and organizational citizenship behaviour in Malaysian higher education institutions. *International Journal of Management and Human Science*, 2(3), 1-14.
- [2]. Abou Hashish, E. A. (2017). Relationship between ethical work climate and nurses' perception of organizational support, commitment, job satisfaction and turnover intent. *Nursing ethics*, 24(2), 151-166.
- [3]. Bagheri, A., & Akbari, M. (2018). The impact of entrepreneurial leadership on nurses' innovation behavior. *Journal of Nursing Scholarship*, 50(1), 28-35.
- [4]. Bilgin, N., Kuzey, C., Torlak, G., & Uyar, A. (2015). An investigation of antecedents of organizational citizenship behavior in the Turkish hospitality industry: a structural equation approach. *International Journal of Culture, Tourism and Hospitality Research*, 9(2), 200-222.
- [5]. Caputi, L. J. (2017). Innovation in nursing education revisited. *Nursing Education Perspectives*, 38(3), 112.
- [6]. Chang, C. S. (2014). Moderating Effects of Nurses' Organizational Justice Between Organizational Support and Organizational Citizenship Behaviors for Evidence-Based Practice. *Worldviews on Evidence-Based Nursing*, 11(5), 332-340.
- [7]. Fang, H., Meng, A., Zhu, P., Zhi, X., Dong, G., Cheng, F., ... & Cheng, L. I. (2018). Correlation between perceived professional benefits and innovation behavior of oncology nurses. *Chinese Journal of Practical Nursing*, 34(29), 2250-2256.
- [8]. Fay, D., Bagotyriute, R., Urbach, T., West, M. A., & Dawson, J. (2019). Differential effects of workplace stressors on innovation: An integrated perspective of cybernetics and coping. *International Journal of Stress Management*, 26(1), 11.
- [9]. Gupta, V., Agarwal, U. A., & Khatri, N. (2016). The relationships between perceived organizational support, affective commitment, psychological contract breach, organizational citizenship behaviour and work engagement. *Journal of advanced nursing*, 72(11), 2806-2817.
- [10]. Haider, S., Fernandez-Ortiz, A., & de PablosHeredero, C. (2017). Organizational citizenship behavior and implementation of evidence-based practice: Moderating role of senior management's support. *Health Systems*, 6(3), 226-241.
- [11]. Islam, T., Khan, M. M., Khawaja, F. N., & Ahmad, Z. (2017). Nurses' reciprocation of perceived organizational support: the moderating role of psychological contract breach. *International Journal of Human Rights in Healthcare*, 10(2), 123-131.
- [12]. Issever, H., Soyuk, S., & Sengun, H. (2016). P147 Organisational citizenship behaviour of the nurses working in public hospitals.
- [13]. Jang, B. Y. (2017). Infection prevention management organization Convergence research on citizenship behavior: Focusing on the Moderating Effect of Organizational Trust. *Journal of the Korea Convergence Society*, 8(10), 147-153.
- [14]. Krantoft, A., Fuglsang, L., & Kronborg, H. (2018). Innovation activity among nurses: The translation and preliminary validation of the Bricolage Measure—a mixed-method study. *Nordic Journal of Nursing Research*, 38(3), 151-159.
- [15]. Labrague, L. J., McEnroe Petite, D. M., Leocadio, M. C., Van Bogaert, P., & Tsaras, K. (2018, July). Perceptions of organizational support and its impact on nurses' job outcomes. In *Nursing forum* (Vol. 53, No. 3, pp. 339-347).
- [16]. Liu, Z., Wei, W., Wang, L., Cui, H., Yingying, L. I., & Zhang, F. (2017). The Relationship among job satisfaction, work engagement and organizational citizenship behavior of nurses. *Chinese Journal of Behavioral Medicine and Brain Science*, 26(8), 747-750.
- [17]. Marshall, D. R., & McGrew, D. A. (2017). Creativity and innovation in health care: opening a hospital makerspace. *Nurse Leader*, 15(1), 56-58.
- [18]. Nazir, S., Qun, W., Hui, L., & Shafi, A. (2018). Influence of Social Exchange Relationships on Affective Commitment and Innovative Behavior: Role of Perceived Organizational Support. *Sustainability*, 10(12), 4418.
- [19]. Pohl, S., Vonthron, A. M., & Closon, C. (2017). Human resources practices as predictors of organizational citizenship behaviour: The role of job breadth and organizational support. *Journal of Management & Organization*, 1-15.
- [20]. Poikkeus, T., Suhonen, R., Katajisto, J., & Leino-Kilpi, H. (2018). Relationships between organizational and individual support, nurses' ethical competence, ethical safety, and work satisfaction. *Health care management review*.
- [21]. Reed, P. G., & Shearer, N. B. C. (2017). *Nursing knowledge and theory innovation: advancing the science of practice*. Springer Publishing Company.
- [22]. Trybou, J., Gemmel, P., Pauwels, Y., Henninck, C., & Clays, E. (2014). The impact of organizational support and leader-member exchange on the work-related behaviour of nursing professionals: The moderating effect of professional and organizational identification. *Journal of Advanced Nursing*, 70(2), 373-382.
- [23]. Weberg, D., Davidson, S., Porter-O'Grady, T., & Malloch, K. (2019). *Leadership for evidence-based innovation in nursing and health professions*. Jones & Bartlett Publishers.
- [24]. Wishart, D., Rowland, B., & Somoray, K. (2019). Safety Citizenship Behavior: A Complementary Paradigm to Improving Safety Culture Within the Organizational Driving Setting. In *Traffic Safety Culture: Definition, Foundation, and Application* (pp. 145-171). Emerald Publishing Limited.
- [25]. Yigit, S., & Aksay, K. (2015). A comparison between generation X and generation Y in terms of individual innovativeness behavior: the case of Turkish health professionals. *International Journal of Business Administration*, 6(2), 106.

Sally Mohammed Farghaly Abd El-Aliem, et.al. "Relationship between Organizational Support and Nurses' Perceived Citizenship and Innovation". *IOSR Journal of Nursing and Health Science (IOSR-JNHS)*, 9(01), 2020, pp. 01-10.