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Factors affecting time management and nurses' performance in Hebron Hospitals

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Factors affecting time management and nurses' performance in Hebron Hospitals

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Declaration

The work contained in this dissertation has not been previously submitted for a degree at any

other tertiary education institution. To the best of my knowledge and belief, the thesis

contains no material previously published or written by another person, except where due

reference is made.

Signed:....

Mohammad Taha Mohammed Qteat

Date: 20/4/2014

IV

Dedication

To all who gave me help and support including my teachers, colleagues and friends.

To my mother, father, wife and family, brothers, sisters, friends and all who gave me help and support throughout my life.

Acknowledgment

I would like to express my great thanks and gratitude to all people who contributed to the success of this endeavor toward Master degree, without their support this work would not have been possible.

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Abbreviations:

MOH Ministry of health

NGO Non Governmental Organization

PBCS Palestinian Central Bureau of Statistics

ANOVA Analysis of Variances.

BA Bachelor

Abstract

Nursing is a demanding job and it can often feel as though there are not enough hours in the day to complete all of tasks required. Unlike other jobs, priorities can change rapidly when a patient is in urgent need for attention.

The purpose of this study was to investigate the factors affecting time management(personal, and administration obstacles) and nurses performance in Hebron hospitals.

The study used a quantitative descriptive design and stratified random sampling approach to select 181 nurses working in Hebron district Hospitals in the West Bank. The data was collected through questionnaire which consisted demographic variable, and 57 statements divided into four dimensions to examine the effectiveness of time management on nurses' performance. These dimensions are; time management(Analyzing time, follow-up, planning time, and time commitment), personal as (uses phone, fear from mistakes) and administrative obstacles of time management as(lack priorities or plans daily, Lack of incentives, Procrastination), and nursing performance in Hebron hospitals.

The total number of responders was 181 nurses distributed among five hospitals in Hebron government and non government hospitals in the West Bank. The governmental hospitals included: Alia Hospital, 65 nurses and Abu Al-Hassan hospital18 nurses; while the non-governmental hospitals included: Al Ahli Hospital 60 nurses, Al-Mizan hospital 20 nurses, and Red Crescent hospital 18 nurses. The majority of the responders were young with age less than 39 years old, with less than ten years of experience, and 60% of them had a bachelor degree or more. Time management in Hebron hospital was high with rate 69.5% and there were two major factors affecting to time management for nurses including personal obstacles with a rate less than 50%, and administrative and organizational obstacles with a rate of 69.3%. There was a positive significant correlation between time management and nurses performance ($\alpha \le 0.05$). There was also a significant correlation between time management obstacles and nurses performance ($\alpha \le 0.05$). However, there was no significant correlation between gender, academic degree, experience or qualification of participants and time management or nurses' performance with $\alpha \le 0.05$.

Attention is needed to address the obstacles of time management within governmental hospitals. More studies about obstacles of time management among nurses are needed to expand the concepts of interest, and the meaning of scientific and technical methods to manage time.

العوامل المؤثرة على إدارة الوقت وأداء الممرضين في مستشفيات الخليل

إعداد: محمد طه قطيط

إشراف: د. سمية صايج

ملخص الدراسة

التمريض مهنة شاقة وذات متطلبات عالية وغالبا ما نشعر إن ساعات اليوم وحدها غير كافية لإتمام جميع المهام الموكلة إليك, و ذلك بعكس الأعمال الأخرى, تتغير الأولويات بشكل سريع عندما يكون المريض بحالة طارئة وبحاجة للتدخل وتتبدل المهام بشكل سريع.

تهدف هذه الدراسة إلى التعرف على العوامل المؤثرة على إدارة الوقت و أداء التمريض في مستشفيات الخليل الحكومية والغير حكومية

هذه الدراسة هي دراسة وصفية تحليله لعينة من الممرضين والممرضات الذين يعملون في مستشفيات الخليل الحكومية والغير حكومية.

تكونت العينة من 181 ممرض وممرضة الذين يعملون في المستشفيات الخليل الحكومية الغير حكومية, وهي عينة عشوائية طبقية.

تم جمع العينة من خلال استبيانه تحتوى على مجموعة من المعطيات الشخصية, بالإضافة إلى 57 عبارة مقسمة إلى أربعة إبعاد, أولها معرفة واقع إدارة الوقت (التخطيط, التحليل, المتابعة, و الالتزام), المعوقات الشخصية (مثل الخوف من ارتكاب الأخطاء, واستعمال الهاتف والانترنت), والمعوقات الإدارية (مثل نقص التخطيط, والعمل الأولويات, والتسويف), وأداء الممرضين والممرضات.

واستخدم برنامج الإحصائي SPSS وتم اختبار النتائج باستخدام اختبارات إحصائية مثل SPSS و T- Test . واختبار ANOVA واختبار SPSS وكذلك تحليل العوامل.

لقد بينت الدراسة إن هناك أراء متباينة من قبل المشتركين في العينة, وأظهرت العينة إن واقع إدارة الوقت عالى لدى الممرضين والممرضات وكانت النتيجة 69.5%, المعوقات الشخصية لإدارة الوقت

وكان اقل من 50%, المعوقات الإدارية لإدارة الوقت 69.4%. هناك علاقة بين إدارة الوقت وأداء التمريض وعلاقة بين معيقات إدارة الوقت وأداء التمريض, لا يوجد علاقة بين إدارة الوقت والمتغيرات الشخصية, لا يوجد علاقة بين المعوقات الإدارية و نوع المستشفى حكومي أو غير حكومي.

وأظهرت العينة وكانت النتيجة 96 ممرضا, 85 ممرضة, وكان المؤهل العلمي بكالوريوس 60% من المشاركين, وكان معظم المشاركين خبرتهم اقل من 10 سنوات, وأعمر هم كانت اقل من 39 سنة

وكان الفرضيات التي لها علاقة النوع, المؤهل العلمي الخبرة, كان ليس هناك تأثير على الأداء. وكان هناك علاقة تربط بين معيقات إدارة الوقت والأداء. وكذلك كانت علاقة تربط بين معيقات إدارة الوقت والأداء.

وخلصت الدراسة أن واقع إدارة الوقت عالي في مستشفيات الخليل الحكومية والغير حكومية, المعيقات الشخصية قليلة, والمعيقات الإدارية عالية والأداء عالي.

وبناء على نتائج هذه الدراسة هناك بعض التوصيات والاقتراحات التي من الممكن أن تحسن أداء الممرضين والممرضات وتقال من معيقات إدارة الوقت في مستشفيات الخليل. من خلال الاهتمام بمعيقات إدارة الوقت الإدارية والشخصية وتغير العادات التي تؤدي إلى المعيقات الشخصية والإدارية والاهتمام بعمل دراسات مماثلة على مستشفيات أخرى ونشر الوعي لمدراء بضرورة الاهتمام بالإدارة الوقت والتوضيح لهم بالمعيقات الإدارية الموجودة في المستشفيات لتجنبها والعمل على حلها.

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Chapter one

Introduction:

Time management is the act or process of exercising conscious control over the amount of time spent on specific activities, especially to increase efficiency or productivity (Hassanzabeh and Ebadi, (2007). Time management may be aided by a range of skills, tools, and techniques used to manage time when accomplishing specific tasks, projects and goals. This process encompasses a wide scope of activities, including: planning, setting goals, delegation, analysis of time spent, monitoring, organizing, scheduling, and prioritizing. Initially, time management referred to just business or work activities, but eventually the term broadened to include personal activities as well Adams, (1997).

Pearce (2007) said that good time management for nurses can help them become more productive, more creative, can save money, improve patient health, and avoid working hours without benefit. Consequently, time management can greatly increase the chances of success in work.

Roe (1999) commented that Performance management is one of the most important and critical functions of human resources management, it is seen as a way of establishing mechanisms for reviewing the performance of staff, and helping them to effectively contribute towards the achievement of organizational objectives. Consequently, for optimum performance, the workforce needs to be regularly motivated and encouraged through incentives, which can be economic, material and psychological in nature. Increase the number of patients cause problems when many nurses of frustration, inability to work and generates poor performance. Based on observation in Hebron government hospital, Nurse-patient ratio is one nurse work with 10 patient, this will lead nurses to be overloaded and to have difficulty in managing their time.

Nurses make 60% of the health services offered to patients within the Palestinian health care system. And nurses are 33% of all ministry of health employee (MOH, report 2012). Nurses

shortage is noticed by health professional, and according to UNRWA own estimates, there are 29 nurses per 100,000 refugee inhabitants (UNRWA Annual Health Report 2004), which is considered to be one of the lowest nursing-ratio worldwide. In another comparative study, the ratio of nurses and midwives for every 10,000 inhabitants in Palestine is estimated to be 13.3, as compared to 27.5 in Jordan and 28.4 in Egypt (The Palestinian National Strategic Plan for Higher Education, 2005).

Compared with the International Council of Nurses (ICN, 2009), nurse-to-patient ratios should be 1:1 in the Operating Room and 1:2 in the intensive care, critical care, and neonatal intensive care units, as well as in post-anesthesia recovery and labor and delivery, 1:4 in ante-partum (before delivery), post-partum (after delivery), pediatric care, and in the emergency room and other specialty care units and 1:5 in general medical-surgical units (regular hospital units). Such figures indicates that Palestinian nurses are overloaded during their work and their performance may be disrupted.

Hospitals are the main providers for healthcare services in the Hebron city; hospitals in general can be divided into two categories depending on the source of financing the hospital. They are: government, those are managed by the government services, and financed from MOH, the second category is nongovernmental hospitals which can be a private, or managed by public charitable or cooperative society.

Hebron is the largest city in the West Bank and have a population of around 641.000 (PBCS report, 2012). These people are the target centers of the service offered by the hospitals operating in Hebron. In Hebron, there are governmental and non government hospitals that operates at high capacity to meet the population demands. In congruence with minimal nurse patient ratio coupled with large demands and overloaded hospitals are all factors assumed to disrupt nurses' performance and their management for time.

The study goal was to examine factor time management practices among nurses working in Hebron hospitals and to analyze the effectiveness time management practices and nursing performance.

1.1 Problem statement

Time is a necessity for every organization in achieving its goals and objectives. The attempt to accomplish the desired goal poses a great threat to the organization. The hospitals on Hebron operate at the limits of their effective capacity or even they operate over capacity in some of the hospital departments. Alia and Abu Hassan Hospital is the most crowded in Palestine, operating at 97.9%, and 96% average occupancy rate in 2011, Such a strong persistent demand of hospital care services in Hebron needs higher skilled staff (MOH, annual report, 2012).

Issues of time and timing have become more and more essential to managers and employees. In the last two decades, as a result of expanding global competition and increased demands for immediate availability of products and services, the temporal dimension of work has become more important (Barling et al., 1996). Furthermore, Garhammer (2002) noticed that people report an increased pace of life is expressed in doing things faster (acceleration), contracting time expenditure (e.g., eat faster, sleep less) and compressing actions (making a phone call while having lunch).

The quality of health care delivered to patients and the outcomes of the overall hospital services as a result of the work overload pressure among the hospital staff is an important indicator to assess their time management processes. Nurses' work overload all the time will not allow them to have sufficient time to provide quality care where very high working efficiency is needed to achieve the minimum health care requirements in Hebron Hospitals.

Time management is an essential work element for all nurses, consequences related to ineffective time management such as deterioration in the quality of care, job dissatisfaction, stress and burnout, role overload, and role ambiguity are potentially serious, not only for nurses and nurse managers, but also their clients, colleagues, families and the entire organizations where they are employed, (Ahamd, 2012).

Nurses have a lot of things they are responsible for and to make quick decisions about patient care and well-being. Improving time management plans can make the nurse much more

efficient nurse, one that will be able to attend to the needs of more patients in less time, (Rosario, 2012)

Time Management is the method which used to organize our time, so each decision we make regarding that is useful, constructive and the most beneficial to our life's structures, (Hashemzadeh, 2011).

Time management in nursing also is important so nurses feel less stressed, when nurses know what they need to do and have a plan for doing it along with the necessary room in their schedule to deal with unexpected crises they will feel more positive about their extremely important jobs., nurses who feel less stress are better able to take care of themselves and their patients (Katty, el, 2006).

Abu Shika (1991) found that time obstacles represent a basic problem facing the management system of all organization, they hinder the achievement of defined objectives, which require effective utilization of time.

Obstacles of the time management in the organization can lead to poor management, that can lead to time loss for employees, and poor performance (Al-Zahrani, 2006).

Health care systems changing rapidly causing fundamental transformations that has an impact on employee well-being and organizational goals. Many health care workers are not coping with their personal and work-related demands. These problems are seriously impacting patient care and employee productivity (MOH Health Report, 2011).

In contrast to the large amount of literature on the philosophical aspects of time, there has been a relative lack of scientific literature on effectiveness of time management and nursing performance in health care organizations (Bluedorn, 2002).

However, the study aims to investigate time management in order to understand and explain how individuals deal with their time during work and to know the personal, and administration obstacles. From a practical perspective, this knowledge may be used to design effective time management interventions, such as training programs, to teach people how to increase their

work performance and effectiveness in order to deal with the demands of the current work situation.

1.2 Justification of the study

The city of Hebron is the largest in terms of population, area and number of patients. It was noted that nurses working in government hospitals have complaints and criticism due to stress and excess work that is reflected on their poor job satisfaction. For that the quality outcomes of the services delivered in these hospitals needs to be studied for time management and its effectiveness on their performance.

Hebron hospitals have essential and distinct role in the provision of health care affecting Hebron population. According to MOH health report (2011), hospitals in Hebron operate at the limits of their effective capacity or even they operate over capacity in some hospital departments. For example Alia Government hospital is the most crowded one in Palestine operating at 97.9% average occupancy rate in 2011 (MOH, 2011). Within these hospitals, nurses are the workforce and the productive power to have a significant impact compared with other health professional. These hospitals as other Palestinian institutions suffer from political legal constraints and low economic condition. Given these circumstances, the idea to improve the investment of time among employees will help them to provide a better service for their clients, ad contribute to the development of the health sector.

The researcher's anecdotal observation and his own personal experience as an employee at a governmental hospital in Hebron gave his notice of frequent professional nurses complains, criticism, and stress amongst many other sign of poor job satisfaction amongst them.

Proper planning and good organization of time with the proper implementation of the plans and positive disposition towards wasting time gives a successful and effective management of time for nursing, (Said, 2013)

Recognizing the importance of time management among nurses and its impact on their performance which should be reflected on their satisfaction and thus on the productivity of health institutions they are working with. The human element is the most important thing, and the most important productive and distinctive resource to have a distinct competitiveness if the hospitals' management knew how to exploit these human elements.

There are numerous factors that affect nurses performance, of these; stress, low patient satisfaction, health problems, lack of communication, disorder in the organizational structure and in application of job description, (Armstrong,2001). According to Flanagan and Hernery (1994) stress and satisfaction, healthy working environment, immediate feedback and clear job descriptions are factors that affect job performance. Brigitte further (2007) found time management training enhance time management skills and influence the outcomes of job performance.

There are clearly many challenges to be faced as the Palestinian Ministry of Health works to reform and develop its health sector. It is important to note, however, that Palestinian health professional, particularly nurses, are eager to learn and improve their skills and overall services to better serve the health care needs of the Palestinian people (MOH Health Report (2011).

Knowledge of the effects of time management on the performance of nurses may enhance the chances for success and means to strengthen the development of nursing profession.

Knowing of the constraints particularly the lack of time management in Hebron hospitals and working on reducing these constraints the efficiency of nurses performance to be increased, and strengthen both regulatory and planning activities, and the overall administrative process in general.

This study is one of the few studies done in this area of nursing in Palestine and in Hebron hospitals in specific. Thus, the study is a pioneer to reveal the reality of time management and its effectiveness on nursing performance.

The study is the first of its type, it will allow the health care administrators to have closer look to human resources management practices within their organization, and such management indicators will allow them to provide efforts to improve the quality of care by changing employee engagement satisfactions and loyalty.

1.3 Goal and objectives

The study goal was to examine time management practices among nurses working in Hebron hospitals and to analyze the relationships between time management practices and nursing performance. To achieve this goal the following objectives are set:

- 1. To assess the effect of nurses demographic variables (qualification, experience, age, gender) on time management.
- 2. To identify nurse perception of time management.
- 3. To correlate the effectiveness of time management on nurses performance.
- 4. To identify obstacles affecting nurses time management.

1.4 Research questions of the study:

The main research question

"What is the effect of time management on nursing performance in Hebron hospitals?"

1.5 Study hypotheses:

- 1. There are no significant differences at a level of ($\alpha \le 0.05$), between the means of time management effectiveness on nurses' performance attributed to gender.
- 2. There are no significant differences at a level of ($\alpha \le 0.05$), between the means of time management effectiveness on nurses performance attributed to type of hospitals
- 3. There are no significant differences at a level of ($\alpha \le 0.05$), between the means of time management effectiveness on nurses performance attributed to qualification variables.
- 4. There are no significant differences at a level of ($\alpha \le 0.05$), between the means of time management effectiveness on nurses' performance attributed to experience
- 5. There are no significant differences at a level of ($\alpha \le 0.05$), between the means of time management effectiveness on nurses' performance attributed to age
- 6. There are no significant differences at a level of ($\alpha \le 0.05$), between the means of obstacles of time management and nursing performance.
- 7. There are no significant differences at a level of ($\alpha \le 0.05$), between the means of time management effectiveness on nurses' performance attributed time management.

Chapter two

Literature review

Introduction

This chapter reviewed the literature and studies related to the study concepts; effectiveness of time management on nurses' performance in Hebron Hospitals. Moreover, the literature review used internet search in the study, studies, journal, theses and textbooks.

2.1**Time management**

According to North (2004), time management is the organization of tasks or events by first estimating how much time a task will take to be completed, when it must be completed, and then adjusting events that would interfere with its completion is reached in the appropriate amount of time.

Time management is a method for managers to increase work performance effectiveness Claessens, Roe, Rutte (2009). Time management is probably not as easy as what it is imagined and expected to be. Hence, authors differ in the way in which they define time management. In their study on, "time management: effectiveness, logic and challenges", Claessens, el (2009) have noted that the term time management means different things to different people.

The problem of how to manage time was previously discussed in the 1950s and 1960s, and several authors proposed methods on how to handle time issues on the job (Drucker 1967; Lakein, 1974; MacKenzie, 1954; McCay, 1959). They suggested simple remedies such as writing work plans down on paper (so-called to-do lists) in order to increase one's job performance. At the same time, some authors recognized that planning tasks and activities does not always lead to the completion of planned work, especially when time pressure is high (Drucker, 1967).

According to Orlikowsky and Yates (2002), the temporal dimension of work has become more important because of expanding global competition and increased demands for immediate

availability of products and services. Garhammer (2002) pointed at the increased pace of life which displays by doing things faster (acceleration), contracting time expenditure (e.g., eat faster, sleep less), and compressing actions (making a phone call while having lunch). Several studies acknowledged experienced time pressure among employees (e.g., Jackson & Martin, 1996; Major, Klein, & Ehrhart, 2002; Teuchmann, Totterdell, & Parker, 1999).

Mackenzie (1954) developed a concept for a time management training, which is still being used, time management training programs are aimed at giving insight into time-consuming activities, changing time expenditure, and increasing workday efficiency by teaching people how to make a daily planning, how to prioritize tasks, and how to handle unexpected tasks. Books, articles, and time management training programs that were initially developed for managers have been made available to everyone.

According to Lakein (1973), time management refers to the use of particular techniques such as 'to-do' lists or planning activities, or to participate in training with the purpose of learning how to master and use such a technique. In general sense.

According to drucker (1982), "time obstacles condition are: meetings beyond reasonable limits; inadequate information and communication systems; unnecessary phone. reading newspaper; over- employment; bad management and inefficient organization; unexpected visits, hesitation in decision -making, fear of making mistakes, unsound delegation; wrong order of priorities, interruption during work; social interaction and entertainment within the organization; starting to implement tasks without prior thinking and planning, moving to anew task before accomplishing a present one; obsession with less important routine matter".

Schriber and Gutek (1987) found a serious relationship between overall job performance and time management,. Ghaith study (1990) investigated a sample of employees in the government sector in the Saudi Arabia Kingdom, under the title "productivity in the public sector", and found that 57% of the sample expressed that the time available is not sufficient to meet the needs of the work assigned.

Asfour (1991) studied the level of governmental agencies in the Saudi Arabia Kingdom how the manager use her time in government sectors, the most important obstacles time per week were as follows:

- Delays in the morning on official business (61.8) minutes
- Calls for special purposes (35.4) minutes
- Reading magazines related to work (49.4) minutes
- Tea and coffee (46.6) minutes
- Hospitals review (75.5) minutes
- Leave the office before the end of the day (42.5) minutes
- Other wasting (132.5) minutes.

Booyens (1996) states that meeting the needs of patients in a health care institution depends on how planning is done, it is, therefore, essential that nurses plan for patient care focusing on how time can be managed during execution of patient care procedures. This calls for the allocation of time for each nursing procedure to be done.

Norrie (1997) study in North America about how Intensive Care Nurses use their work time, the study sample consisted of 36 nurses, the finding indicated that nurses spent 41% of their time in direct nursing care, 22% in patient assessment, 19% in clerical duties, 11% in time outside the unit and 7% in non-nursing duties. These findings were compared with the North American studies where similarities of the results were found giving some support to the reliability and validity of the tool used.

Hanna, (1998) studied time management among chairpersons of academic department in the West Bank universities. The participants' socio-demographic variables that included sex, age, academic degree, year of experience in administrative work were correlated with their time management skills. The study finding indicated that; participants attitudes toward importance of time was high (79%), degree of obstacles in time management was very low (47%), unexploited time was (67.2%) and degree of achievement of presented proposal for time management improvement was high (71%). Furthermore, time management was influenced

by; age in favor for those 50 years old and above, sex in favor for females, and experience in favor for those with 5 years and above.

Al-Zahrani (2006), Sufyani (2001), Drucker (1992), and Abu Sheikha (1991) reiterated that obstacles of the time is the poor management of the organization and that mismanagement leads to the loss of time for many of its employees. They further found many causes of obstacles; the excessive number of meetings, communication system, unplanned visits, fears of taking decisions and of making mistakes and procrastination

Al-Zahrani (2006), Shamrani (2000), Abu Sheikha (1991) and (Asfour, 1991) commented that personal obstacles lead to the loss of time and this can be identified in; reading newspapers and magazines during working, follow-up on own personal needs, the use telephone and the Internet for personal matters and without control, receive planned or unplanned visitors, delay the work starting time and leave the work early.

Ajayi (2007) Olaniyi (1998), submitted that procrastination may occur as a result of poor utilization, lack of concentration, fear and anxiety and personal problems among others. It is imperative for lecturers to identify the various causes and reasons for procrastination and plan to overcome them by disciplining themselves on how best to use time wisely, set priorities and perform their duties according to schedule so as to always meet deadlines.

Ajayi (2007) reiterated the personal time analysis chart will help individuals to study the use of their time and on the basis prepare a more useful personal time tables for their activities during the day and each week and it will also allow individual to identify their time wasters.

Time management is important and affects any organization by planning and achieving its goals. Fitsimmons (2008) conducted a study entitled "Time management a planning tool for setting goals," the purpose of the study was to identify the quality of leadership to time management, the study has provided planning as an essential element of good time management, and then determined how to set goals in the planning process, which in turn

covers the development of business goals and objectives of subordinates (Working). The study revealed that the development of career goals (professional) can be used effectively as a tool for planning time in order to help achieve the objectives of administrative units and of the organization as well, and staff can achieve business goals more efficiently and effectively.

Effective time management does not come naturally for many of us, but to avoid working ridiculous hours and greatly increase the chances of success in business, it is an area that needs attention (Steven, 2009). Futhremore, Claessens et. al (2009) elaborated on that time management is a method for managers to increase work performance effectiveness.

Jons (2012), mentioned some tips for time management which include: (1) Arrive early to plan your work (that way you will never be late), (2) list activities that need to bed one (his allows you to transfer tasks from your mind into a paper, then your brain space becomes available for something else), (3) priorities these activities (prioritize patient care using categories, write everything down, cross items off as you complete them, and re-prioritize as events unfold throughout the day), (4) estimate the time needed for each, (5)be conscious of the amount of time spent on different tasks, (6) allow time for unscheduled activities or errors (if not the time will be wasted), (7) learn to say no, finally; (8) organize your home life; prioritize and delegate tasks at home to reduce stress, make relaxation a must do in your life.

Ahamd (2012), studied time management challenges among Jordanian nurse managers, the study aimed to find out problematic areas among nurse managers in Jordan across various managerial levels (first, middle, and top-level managers) and explore any relationship between the sample's demographics and their abilities to manage time effectively, the study method quantitative, descriptive, cross-sectional research design was utilized to meet the goals of this study, the sample 171 nurse managers at various managerial levels who agreed to participate in the study from selected governmental and private hospitals in Amman and Zarqa, Jordan constituted the study sample..the results nurse managers had a satisfactory mean score ($M \ge 1.5$) in all of the questionnaire's dimensions, except top-line-managers only in the technique dimension with a mean score of (M=1. 40). Leaving tasks uncompleted, telephone conversations that stopped work and difficulties to finish work-related conversation were the major identified time management problems for top-level managers (M=1.12; M=1.25;

M=1.38 respectively). All of the study sample demographic characteristics showed no significant statistical differences except for the type of hospital in favor of private hospitals' managers (P=0.006 & M=2.24; 2.14). Conclusion: The current study concluded that top level managers lacked the technical skills for time.

Catherine (2013), strategies that used by nurses; plan your day out in advance, focus on the most important time management activities first, don't let interruptions disrupt your day, keep yourself and your workspace organized, learn to delegate tasks

2.2 Nursing performance and time management

According to Bargogliotti (1999), performance is used to focus attention on the total behavior of person including his or her organization, the use of specialized knowledge, attitude acquired through training, as well as organization and integration of practice. A Delphi technique study conducted by Zaher, et. al. (2008) to identify specific competencies of the nurse performance, these competencies included: quality standards, work habits, supervision/leadership, staff relations and interpersonal skills, attendance and punctuality, problem solving, oral communication, productivity results, coordination, innovation and record keeping. These criteria for appraisal were chosen based on qualitative interviews with nurses about what they thought the most important duties of their jobs were.

Effective time management by nurses can increase their productivity and save their sanity. Job and personal responsibilities are the important key area in time management, where most people believe they know how to spend their time, but they do not. Assessing how the time is spent will help in determining areas needing improvement. According to Ulrich (1985), the easiest assessment method is a time log, areas that fall into the "too much time for too little results" category are prime targets for time management efforts, time log is a quick assessment tool but not an in-depth, minute-by-minute exercise.

Job performance and job related stress of nurses was examined on 463 nurses working rotating shift. The study revealed that the overall job performance was highest for nurses on day shift followed by the night, afternoon, and rotating shifts. Rotating shift nurses experienced the most job related stress, followed in turn by the afternoon day and night shift nurses (Coffey, et al, 1998).

Schriber & Gutek, (1987) found a significant relationship between job performance and time management. They asserted that management of time is key to managerial performance.

Whittington,(2000) explored the proportion of work time psychiatric nurses spend in potentially psychotherapeutic one-to-one communication with patients. Twenty staff nurses from three acute admission wards in a psychiatric hospital in Northern Ireland were observed. The time spent in a selection of routine activities was recorded using a specially developed observation system Nurses' Daily Activity Recording System (NURDARS). The main findings were: (i) less than half of the working day (42.7%) was spent in patient contact, and (ii) the proportion of work time which was devoted to potentially psychotherapeutic interaction with patients was very small (6.75%). The implications and limitations of the study are discussed and suggestions are made for the management and practice of psychiatric nursing, for the education of psychiatric nurses, and for further research.

Time management is complex, with nurses using a range of time management strategies and a repertoire of actions. Two of these strategies, namely routinization and prioritizing, are discussed, including their implications for understanding time management by nurses in clinical practice (Waterworth, 2003). According to Webb (2006), time management at work is critical for the success of any organization. He asserted that the biggest mistake people in the job is not realizing how much time is lost due to poor time management at work which directly affects employees' performance and the company's bottom line. Time has to be analyzed and used wisely in the workplace. Time has to be set aside each day to review and prioritize demands on the time. Time is costly and individual employees and departments are accountable for the use of their time. Goals are defined and should be clearly stated, divided

into long and short term which has to broke down into weekly and daily action plans. Workloads have to be controlled and more time to focus on most important aspects of the job (Heller & Hindle, 1998).

Bowers (2001) study was on how nurses manage their time and work in long-term care facilities. The aim of the study was to better understand how work conditions, including time management and staffing are affecting nurses performance and the quality of care they provide in long-term care facilities. In 1995 and 1996, interviews and participant observation were used to examine how 18 licensed nurses employed in two long-term care facilities in the Midwestern United States experience their day-to-day work. Time was an extremely salient work condition for the nurses interviewed, as a result of too little time and many interruptions, nurses compensated by developing strategies to keep up the minimal required working conditions. These strategies included minimizing the time spent doing required tasks, creating new time and redefining work responsibilities. Although these strategies allowed nurses to complete the tasks for which they were accountable, there were adverse consequences for nurses and residents. Nurses realized that time demands often made it impossible to provide care of high quality. They expressed their ideas about quality care as the notion of forced them to forego the 'should do' work. In effect, time pressures Increased 'should do' work to complete the 'must do' work staffing could improve the quality of care in long-term care facilities.

Khodam (2009) explained that time management skills are considered as determinant factor of managers' success. Promoting abilities and performance of nurses are demands of human resource improvement in health sectors. The study aimed at investigating the training time management skills application of head nurses on university hospitals in Golestan province. The study indicated that most of participants were female (70.1%), married (85.7%), with bachelor degree in nursing and mean age of 37.45 years. Average of professional experience and employment as a head nurse were 13.7 years Participants were using goal setting (91.8%) and organization skills (98.4%), time mechanic (5%) and control on time (19.4%) prior to intervention. While the values converted to 91.8%, 98.4% and 32.3% for goal setting, organization and control on time, respectively after the intervention. No significant difference

was found between skill of time mechanic before and after the education. Applying the skills before and after the intervention was just significantly different in control on time and organization (P<0.05). Conclusion: Considering the results and importance of time management skills' application in nursing management, teaching such skills through continuous education programs could be contributed in improving head nurses' performance.

Oluseyi (2009) investigated the influence of work motivation, leadership effectiveness and time management on employees' performance in some selected industries in Ibadan, Oyo State Nigeria. 300 participants were selected through stratified random sampling from the population of staff of the organizations. The study employed exposit facto design; data were collected through Work Motivation Behavior Profile ($\alpha = 0.89$), Leadership Behavior Rating scale ($\alpha = 0.88$) and Time management Behavior Inventory ($\alpha = 0.90$) adapted from Workers' Behavior Assessment Battery. Three research questions were answered at a significance level of (0.05). The data were analyzed using multiple regression statistical method and correlation matrix. The findings revealed that the three independent variables (work motivation, leadership effectiveness and time management) accounts for 27.2% variance in employees' performance (R2 adjusted = 0.272). Each of the independent variables contributed to employees' performance. In terms of magnitude of the contribution, leadership effectiveness was the most potent contributor to employees' performance ($\beta = 0.521$, t = 7.11, P < 0.05), followed by work motivation ($\beta = 0.289$, t = 5.42, P < 0.05) while time management was the least contributor to employees' performance ($\beta = 0.190$, t = 2.43, P < 0.05). Based on the findings of this study, it was recommended that employers, human resource managers and other leaders in organizations are encouraged to show greater interest in the welfare of workers to make them more valuable contributors to the success of the organization.

De Lucia (2010) concluded, "The profession of nursing as a whole is over loaded because there is a nursing shortage. Individual nurses are overloaded. They are overloaded by the number of patients they oversee. They are overloaded by the number of tasks they perform. They work under cognitive overload, engaging in multitasking and encountering frequent interruption. They work under perpetual overload, engaging in multitasking and encountering

frequent interruptions. They work perceptual overload, due to medical devices that do not meet perceptual requirements, insufficient lighting, illegible handwriting, and poor labeling designs (Salawu, 2004). Nevertheless, already overloaded nurse should not be given more tasks to perform.

Alexander study, (2010) on "time management training and perceived control of time at work" was to examine the effects of time management training, which was based on psychological theory and research, on perceived control of time, perceived stress, and performance at work. The authors randomly assigned 71 employees to a training group (n = 35) or a waiting-list control group (n = 36). As hypothesized, time management training led to an increase in perceived control of time and a decrease in perceived stress. In particular, the authors explored the use and the perceived usefulness of the techniques taught. Participants judged the taught techniques as useful, but there were large differences concerning the actual use of the various techniques.

Yusu ,elt, (2012), The Relationship between Time Management and Job Performance in Event Management, The purpose to determine the relationship of time management on the job performance among Malaysian event management crew, disrupted 100 questionnaires distributed only 65 returned. The research findings show, that the employee's job performance in the organization were affected by their time management in completing the tasks during an event, and shows that there was a significant relationship between time management and job performance. Although the relationship is moderate, there are significant between them, mostly the employees said that time management can affect their job performance, by not having enough time to manage all their work when the work is more than they can handle

Chapter three

Introduction:

Conceptual and operational definition

This chapter presents the description of the research variables; time management and nursing performance. Polit and Beck (2004) defined conceptual framework as "theories which deal with abstraction (concept) that are assembled by virtue of their relevance to a common theme" (p: 115). The definition describes an understanding of the phenomenon of interest and reflects the assumption and philosophic views of the models designer (Polit and Beck, 2004).

3.1 Time management

3.1.1 Definition and meaning of time

According to Merriam Webster online dictionary, time is referred to as a measurable period during which an action, process or condition occurs. Also time can be measured in units such as centuries, decades, years, months, days, hours, minutes and seconds. Not only that but also time can be measured in terms of events which successfully occurred from past through present to future. On the other hand time can be regarded as a season within which specific features occur. For instance summer season, it is a period of time in a year whereby the there is a huge rise in temperature or in other words it is the hottest season of the year which is classified by time in terms of months (Webster, M online, 2009).

The concept of time has been viewed differently through ages. Different cultures and different individual in these cultures attach different meaning to time; in fact the concept of time is an integral part of one personality and culture (Gupta 2001, p 80).

3.1.2 The concept of time management

Time management refers to a process constituted of a series of steps in which it involves the analysis of our time habits, clarification of our objectives, establishment of our priorities, planning for appropriate results, commitment, and taking positive action against time wasters (Gupta 2001, 82-83).

Time is a unique personal concept and learning to manage time is an effective way for living. For many of us this is easier than done, our approach is governed by the assumptions we hold about the nature of our jobs and the nature of events around us.

Mullins (2002) stated that "Good time management has always been an important skill but it is arguably now more essential than ever. Factors such as widespread corporate restructuring, accelerating change information overload and the need to balance priority and working lives have put the squeeze on managers. Time management is about effectiveness and efficiency of what you do and how you do it" (p. 737)

3.1.3 Principle of effective time management

As for many people see time management as a rather narrow or single issue, however, time management is multidimensional thus reaches into every aspect of our daily lives. No matter how hectic or tight is our daily schedule still time has to be managed effectively.

According to European Journal of scientific research (2008), the following are principles for effective time management

- 1. Analyzing time use: Discover what is happening and what should be changed.
- 2. Follow-up of time
- 3. Planning time: Make sure that activities land to the stated objectives.
- 4. Time commitment.

3.1.4 Obstacles and Types of Time Management

McKenzie, (1995) and Richard, (2002) defined obstacles of time as "all that prevents you from achieving your goals effectively" such as telephone use, paperwork, poor planning and poor communication. Melhem (2010) classified types of time management obstacles as; Personal and administration and organization obstacles.

3.1.4.1 Personal Obstacles

Al-Zahrani (2006), Sufyani (2001), Drucker (1992) and Abu Sheikha (1991) agreed that obstacles of the time management is a result of the organization poor management, leading to time loss for many of its employees. They further reiterated on the causes of obstacles could be due to; Increase the number of meetings and communication systems, unplanned visits and meetings, fear to take decisions and fear of making mistakes.

Of the factors that lead to constraint for doing the job on time during working hours as been noted by the study investigator is employees' irresponsibility. Of these constraints; the employees' follow-up matters and personal transactions, use the telephone and the Internet for personal matters without control and talk with colleagues about matters that does not belong to the work. In addition, many are disorganized and spend too much time looking for lost items prior to performing any procedure related to his work.

The lack of planning and priorities; many people never get anything accomplished because they don't know where to begin or how to proceed once started. It is important that you keep schedule. List your priorities in order of importance. If needed, discuss the priorities with your boss or coworkers. Make a schedule that starts at the beginning, and incorporates all of your priorities into the schedule with goals for completion dates. List every hour and what you should be working on for that hour.

The number of employee inflation; increasing the number of employees that cause time obstacles, because the people like to meet with each other, and make visits and conversations, and Drucker, (1992) said; the manager spends more than (10%) of his time in solving problems and conflicts as a result of human relations between the employees, initiation of a task without thinking and planning, moving to a new task before completion of previous task and attention to matters of low importance are factors that may increase the tension and block the work if it happen. While Sufyani (2001) added to the mentioned above, that time constraints can also arise due to weak means of communication between management and the various departments.

3.1.4.2 Administration and organizational obstacles

The obstacles that prevent the optimal use of time were indicated by Al-Sulmain (1992) and briefly listed by Al-Zahrani (2006) in more details as time obstacles to permeate the various administrative processes are as follows: Planning, organization, employment, direction, control, communication, and decision making.

3.1.4 Advantages of time management;

According to Adeojo (2012) time management helps to take control of many areas of your life, increases productivity, time management makes you become more organized, helps you to utilize time effectively, and time management also helps you gain time for yourself to relax and do the things you enjoy doing.

3.2 Nursing performance

Today organization seeking to raise the level of performance to ensure the continuity in work by searching for factors that affect performance

3.2.1 Nurses: A person trained to care for patients, especially in the hospitals, nursing is a dynamic, independent profession, in correction, the nurse is frequently employed in an isolated environment where there is constant pressure to expand his or her scope of practice to meet new need aid demand. this unique environment be stressful and antagonistic, and it may limit the range of available intervention, it may also require nurses to acknowledge their responsibility for providing only those service that fall within their legal practice parameters (ANA, 2011).

3.2.2 Definition of performance

Performance: Nursing Performance is described, a competent level of nursing behavior in the professional role, including activities related to quality of care, performance appraisal,

education, collegiality, collaboration, research, and resource utilization (American Nurses Association, 2011).

Performance measurement is the ongoing monitoring and reporting of program accomplishments, particularly progress towards pre established goals; it is typically conducted by program or agency management (Westin, 1998). Performance measurement is the selection and use of quantitative measures of capacities, processes, and outcomes to develop information about critical aspects of activities, including their effect on the public (Perrin, 1999).

3.2.3 Factors affecting performance

Performance is a multidimensional construct that includes many factors that influence it. Factors that affect performance are: 1) personal or individuals factors. 2) Factors that include the quality of team support and encouragement provided by colleagues believed in fellow team members, teamwork and the close relationship between team members. 3) System factor include: working system, working facilities, or infra-structure, organizational processes, and performance in organizational culture, time. 4) Contextual factors (situational) include pressure and internal and external environmental changes and last 5) Demographic factors including age, gender, experience, qualification (Forto, et. al., (2004).

According to Armstrong (2001) element of good performance; cooperative with colleges (peer, client, and manager), problem solving, do work quickly, Perform the job successfully, accuracy in work efficiency, completing the work, accept the changes, Initiative with good ideas, punctuality at work.

3.3 Operational definitions:

Management: is a process whereby work is done through, the manager functions include many interrelated tasks such as planning, organization, directing, and control (Koch, 1996).

Time management: concept of time management can be traced back to the old period. In order to manage time effectively, the need of time study becomes essential in organization.

Time study experts can assist managers and administrators in making better use of time, whereas return in time may become in future as important as success criterion as return on capital (Gupta, 2001, p81).

Time: Time is the continuing progress of existence measured in seconds, minutes and in hours. It is 60 seconds in a minute, 60 minutes in an hour and 24 hours in a day; meaning that there are 86,400 seconds in a day, that is, when a whole day is counted in seconds. Ailamaki & Gehike (2003) defined time as the quality of nature which keeps events from happening all at once.

Performance: Perform means "to carry out, accomplish or fulfill an action or task". It also means "work, function or to do something to a specific standard". Performance is "an action or process of performing a task or function" (Oxford Concise Dictionary 1999: p1060).

Nurses: A person trained to care for patient, and who studied and graduated from an accredited nursing school, and acquired the art and skills of nursing (ANA, 2011).

Governmental hospital: Are hospital governed and authorizing by Ministry of Health (Medical dictionary, 2012)

Non Governmental hospital: A hospital similar to a group hospital except that it is controlled by a single practitioner or by the practitioner and the associates in his or her office (Medical dictionary,2012).

Hebron hospitals: All five hospitals located in Hebron district including governmental, non-governmental hospitals. The government hospital are; Alia hospital with 200 nurse and 216 bed in Hebron city and Abu- Al-Hasan hospital with 56 nurses and 40 bed in Yatta are governmental hospitals run by Ministry of Health (MOH). The non government hospital are; Al- Ahali hospital with 183 bed and 180 nurse and Red Crescent hospital with 75 nurses and 70 beds, and Al-Mizan hospital with 50 beds and 75 nurses.

3.3 The Study Conceptual Framework

Figure (3.3) shows the study of conceptual framework. Conceptual framework developed for the study based on the title of the study, previous literature review, and it included factors related to demographic data, time management and obstacles of time management affecting in nursing performance.

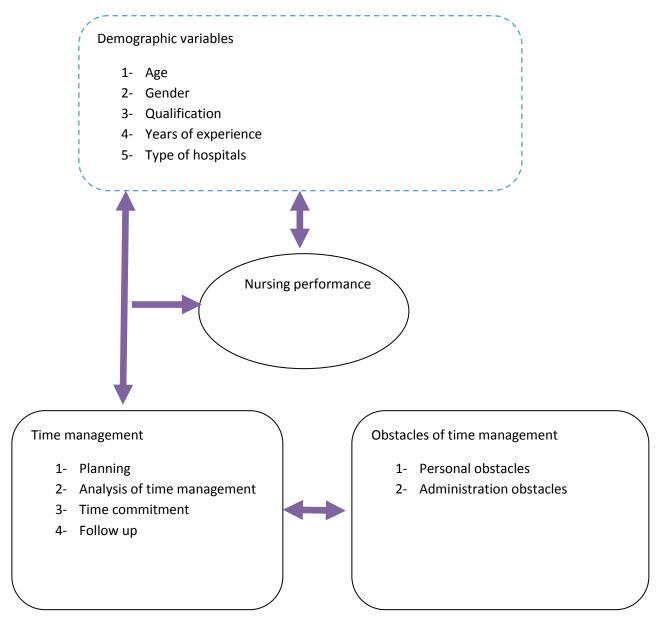


Figure (3.3) the relationship between study variables; Demographic variables, time management and nursing performance

The performance of nursing effect by time management and time management effective by obstacles of time management, (personal, administration and organizational obstacles), and affect by time planning, time commitment, follow-up, and time analysis. And agreed with Schriber and Gutek (1987) found a serious relationship between overall job performance and time management . Woods (2006), time management is critical for the success of any organization and this directly affects employees' performance and the company's bottom line.

According to Britton and Glynn (1989) the time management practices affect by time planning, time attitudes and time follow up, commitment, and time obstacles.

Chapter four

Research Methodology

This chapter includes description of the methods and study design, population and sampling

approaches, study tool development as well as its validity and reliability obtained. Ethical

consideration and accessibility were verified, data collection and data analysis procedures. In

addition to description of the procedure employed by the researcher in executing the study

and the statistical treatment used in data analysis.

4.1 Study design

According to Okezie (2002), research design is defined as a "scientific plan, drawing or

scheme indicating the picture and functioning or workings of the research process before

it is engaged in" while Asika (2000) sees it as "the structuring of investigation aimed at

identifying variables and their relationships to one another."

Polit & Beck, (2004) claimed that quantitative research can be said to be the best positivist

research approach, the appropriate method in data collection will produce a suitable

numerical information. The processes involved in data collection are as follows;

questionnaires, surveys, and coded systematic monitoring.

This study utilized quantitative approach with the aim to examine factor affecting on time

management practices among nurses working in Hebron hospitals and to analyze the

difference between time management practices and nursing performance.

4.2 Variables of the study

Independent variables: time management

Dependent: nursing performance

27

4.3 Construction of data collection Instrument

The study questionnaire was designed by the study investigator after scanning related studies and literature, about time management and performance, and supported by previous studies (Melham, 2010; Alzharaina ,2006.).the questionnaire Content validity was ensured through an intensive literature review of article, and by discussion with many specialists in this field.

The questionnaires were constructed in Arabic language; questions were framed in a way that it was easy to understand using simple Arabic expressions. Difficult technical terms were avoided in the preparation of the questionnaire.

the questionnaire was developed into two main sections covering; the demographic information (gender, type of hospital, qualification, years of experience, and age). There was 57 items in the questionnaire that are related to time management and effectiveness on nurses' performance divided into four subsections: the first 16 items covered the most effective methods on time management in the workplace, the second 9 items covered personal obstacles to time management, the third 21 items covered the administrative and organizational obstacles to time management and the fourth 11 items covered nursing performance in the workplace (annex 1).

The questionnaires items were arranged into five points Lickert Scale format from strongly agree to strongly disagree. The responses were rated for strongly agree (5) points, for agree (4) points, for neutral (3) points, for disagree (2) points and for strongly disagree (1) point

4.4 Validity and Reliability of the tool

4.4.1 Validity:

Validity refers to the degree to which an instrument has an appropriate sample of items for the construct being measured and adequately covers the construct domain (Polit & Beck 2004). The instrument used in this study was constructed by the study investigator after reading studies literature. Content validity refers to how relevant the questions are to the subject under study.

The instrument used in this study was constructed by the study investigator, and supported by

previous studies (Melham, 2010; Alzharaina ,2006.). Content validity refers to how relevant the questions are to the subject under study. In this study, the content validity of instruments was censured including all the key concepts relevant to the research topic. The questions were formulated to cover time management and nursing performance

This instrument was approved and evaluated by different experts including, researcher, nursing educators and other experts in the faculty of educational sciences to evaluate initial contents for validity (annex 3), and the researcher's thesis adviser also assesses the instrument for wording, adequacy, and coverage of items of the standard of nursing performance. After revising the items in questionnaire and summarizing the expert's suggestions, modifications were made in wording and content. Some items were added but some others were dropped.

4.4.2 Reliability:

According to Polit & Beck (2004), reliability of an instrument can be equated to clarity, stability, consistency and accuracy of a measuring tool; it is the major criterion for assessing its quality and adequacy. Reliability of the questionnaire ensured by pilot study and measured by using Coefficient alpha (or Cronbach's alpha), the normal range between (0.00 and 1.00) where the higher value reflect a higher internal consistency of the questioner items (Polit & Beck, 2012). The Cronbach alpha reliability obtained for overall scale was (0.85), indicating a high consistency among study items. All subscales of the questionnaire rated high as; the reality of time management was (0.85), the personal obstacles (0.83), the administrative organizational obstacles (0.90) and nursing performance scale (0.77) and it is good in all scales and satisfy the purpose of the study.

4.4.3 Pilot Study

A pilot study was conducted to determine the reliability and the validity of the questionnaire. The study was conducted through 1/5/2012 to 9/5/2012. The pilot study aimed to: Estimate the time required for the data collection, determine the reliability of questionnaires, obtain clarity and adequacy of the questionnaire and identify the barriers that may count during the data collection process.

The pilot testing of the instrument was carried out on 15 nurses from the targeted hospitals. All Ahli hospital, from one ward to decrease the effect of participation to other nurses, take this hospital from target sample because all the hospital in Hebron target. The results indicated that alpha correlation coefficient was (0.85) for reliability of the questionnaire and the answers showed consistency in understanding the questions where no changes or modification is needed.

4.5 Study setting

This study was conducted in the Hebron hospitals south of West Bank. These hospitals were; governmental (Hebron government hospitals - Alia, Abu Al-Hassan hospital), non government hospitals (Al Ahli Hospital, Al-Mizan hospital and Red Crescent hospital).

4.6 Study population and Sample approach

The MOH report (2012), indicated there are 272 nurses in government hospitals (Alia and Abu Hassan), 337 nurses in the NGO hospitals (72 nurses in the non government hospital (Al-Mizan) making a total of 609 nurses working in Hebron hospitals.

According to Polit and Beck (2012) stratified sampling designs subdivide the population into homogenous groups from which an appropriate number of elements are selected randomly. The sample size was determined using Raosoft Sample Size Calculator.

According to the above equation, the sample of the study consisted of (181) nurses with response rate 97% who were selected as a stratified random sample from the whole population (609). To have a sufficient representative randomly selected sample, the researcher and the statistician agreed to target (30%) of the study population of all nurses in Hebron hospital and this was implied in each target hospital setting. (excluding those on leave)

The population under study is by virtue divided into five strata and sample selection represented (30%) of nurses in Hebron hospitals making (181) nurses. To ensure that the sample represents key strata of the population, a separate simple random sampling technique for each stratum was used to select nurses working there, then all combined together to form the full sample (please refer to table 4.5.1).

The selection process utilized a fish ball sampling technique, nurses' names were taken from the director of Nursing at each stratum and so each name of them was recorded on a paper, then put in a bowl where shuffling of papers done and finally random sample was withdrawn.

Table (4.5.1) Number of Nurses And Percentage Randomly Selected From Each Hospital

#	Hospital	No of nurses	No of sample	Percent
1	Hebron Governmental Hospital "Alia	215	65	31%
2	Abu Al Hassan Governmental Hospital	57	18	32%
3	Al Ahli Hospital	200	60	30%
4	Red Crescent Hospital	65	18	28%
5	Al Mizan Private Hospital	72	20	28%
	Total	609	181	30%

4.7 Data collection procedures

The data was self administered questionnaire given to each randomly selected nurse in the targeted hospitals during the morning and evening shifts and under the supervision of the study investigator. The researcher explained the purpose of the study and discussed their right to answer or not. The data were collected in 2 months (from August first- to end of September 2012). Some of nurses did not cooperate to fill in the questionnaire, for that choose another nurse.

4.8 Ethical consideration and accessibility

Strydom (2005) explains ethics as a set of moral principles which is suggested by an individual or group and widely accepted. Ethics offer rules and behavioral expectations about the most correct conduct towards all role players. The title and research methods were approved by the Higher Studies Committee at the Faculty of Health Professions at Al-Quds University. Permission obtained to access the MOH hospitals when approval by the director of

hospital services. While for Al-Ahli, Al-Mizan and Red Crescent hospitals, permission to conduct the study was granted from each hospital administration.

The study participant were informed through a consent form (attached with the questionnaire), and received thorough explanation about purpose of the study, confidentially and sponsorship was ensured. In addition, they were informed about his/her right to refuse or to withdraw at any time during the study through the informed consent attached with each questionnaire.

4.9 Data analysis procedure

Kruger, et.al (2005) stated that the purpose of analysis is to reduce data to an intelligible and interpretable form so that the relations of research problems can be studied and tested and conclusions can be dawn. Polit and Beck (2012), the t-test and analysis of variance (ANOVA), are both parametric tests which are used to test the significance of the difference between group means; t- test is used for two group and ANOVA is used for more than two groups. Parametric test is used of interval or ratio- level data, and assumption of normally distributed variables. The chi-squared test is used to compare the observed results with the expected results. If expected and observed values are equal then chi-squared will be equal to zero. If chi-squared is equal to zero or very small, then the expected and observed values are close. Calculating the chi-squared value allows one to determine if there is a statistical significance between the observed and expected values.

After data collection, the compiled data was refined, entered and analyzed using the Statistical Package for Social Science program (computer soft ware SPSS V.17) for descriptive and inferential statistics. Frequencies were used to present the distribution of study variables. Means and standard deviation were computed for continuous numeric variables. An independent t- test and one-way ANOVA statistical test were also used, and Chi square . In this study, the researcher and statistician used Cronbach's Alpha, to measure the questionnaire reliability and to test the data collection instrument for reliability. Prior to analysis data were cleaned and questionnaires were coded. Complex comparisons involve contrasts of more than two means at a time. The researcher and statistician agreed on the following statistical analysis

- 1. Means, frequencies, percentages, and standard deviations to estimate the nurses responses towards the study statements.
- 2. T-Test for Independent samples to test the hypothesis related to gender.
- 3. One-Way Analysis of Variance (ANOVA) to test the hypotheses related to age, workplace, years of experience and academic degree.
- 4. chi square

4.9 Limitation of study

The study faced a number of limitations which can be summarized as the following:

- 1- Lack of Palestinian resources on time management in health field, for that take article national related to subject.
- 2- Difficult accessibility to all targeted nurses because nursing attends three shift (A 7-2, B 2-9, C 9-7). efforts to come back and delayed time to collect the assigned number of participants.
- 3- Lack of cooperation from some nurses to fill the questionnaire, So it was replaced every nurse not cooperative for that taking more time to collect the sample. some of the nurses, justified this by the workload they have leaving them with inadequate time to fill the questionnaire and other showed lack of interest.
- 4- Financial limitation the study self funded, and the researcher face financial problem.
- 5- Piloting in the same hospital of the study, for that pilot study taken from one ward.

Chapter five

Result of the study

Introduction

This chapter presents analysis and finding of the data results, descriptive statistics for Frequencies and Percentages, mean, standard deviation for time management for nursing, and personal and administration obstacles, and inferential statistic utilized the Independent Sample T-Test, One way ANOVA, chi – square to measure Effective time management for nurses/in the Hebron hospitals according to gender, type of hospital, qualification, experience, age, and nursing performance The items presented into tables for each section of the questionnaire. The purpose of this study was to measure the time management and its effectiveness on

Research question

What is the effect of time management on nurses' performance in Hebron hospitals?

To answer this question, the researcher calculate the mean, standard deviation, percentage of time management personal obstacles, administration obstacles and nursing performance in Hebron hospitals.

5.1 Description of demographic data

nurses' performance in the Hebron hospitals.

This paragraph presented demographic data that included; sex, age, education and work experience (please refer to table 5.1). The study participants were; 53.0% males and 47.0% female with more than 54.1% of them were working in the 3 nongovernmental hospitals and 45.9% in the governmental hospitals

Regarding their work experience; more than 50.6% were educated at a bachelor degree in nursing, 37.4% diploma, 8% with high diploma, and 4% with master degree,

There is 21.5% have a work experience for more than 10 years, 48.1% work experience ranged from 5 to 10 years, 29.8% worked for less than 5 years and 21.5% for more than 10 years. It

was noted that most of nurses are young with 44.8% with an age less than 30 years, followed by 43% with an age ranged 30 to 39 years and 12.2% were for 39 years and older group.

Table 5.1 Frequency of socio-demographic

	Percent	frequency
Type of hospital		
Governmental hospital	46.1%	84
Non government hospital	53.9%	97
Gender		
Male	53.3%	96
Female	46.7%	85
Qualification		
Diploma	37.4%	71
BA	50.6%	91
High diploma	8%	14
Master	4%	8
Age		
less than 30	44.4%	80
Between 30-39	43.3%	78
More than 39	12.2%	23
Experience		
Less than 5	29.8%	54
From 5-10	48.6%	88
More than 10	21.7%	39

Section two; 5 subcategories of the questionnaire are analyzed through different statistical procedures Lickert scale from Bruce(1994)

Scale	Descriptive
1- 1.79	strongly disagree (very low)
1.8- 2.59	Disagree (low)
2.6- 3.39	Neutral (medium)
3.4- 4.19	Agree (high)
4.2- 5	strongly agree (very high)

5.2.1Time management for nursing in Hebron hospitals

Time management among nurses was measured by sixteen items in questionnaire distributed over four categories as table (5.2.1); analysis of time, planning, follow-up and time commitment. Mean, standard deviation, and percentage to measure nurses use of time.

The overall mean of the time management items was 3.47 indicating is high. Nurses analyses of time was measured with mean of 3.908 is indicating high, then the planning the second mean 3.4 on the third follow-up mean 3.4 the last time commitment mean 3.12 that's from sample all nurses 181. Generally the time management is high for nursing in Hebron hospital.

Tables (5.2.1) below shows the result of the question

Time management variables	Number of	Mean	standard deviation	percent
	question			
Analyses of time	6+7	3.9081	.94941	78.2%
Planning	1+2+3+4+5+12	3.4272	.95651	68.5%
Follow-up	8-11	3.4175	.96219	68.4%
Time commitment	13-16	3.129	1.0910	62.6%
Total		3.4702	.98977	69.5%

5.2.2 Personal obstacles in Hebron hospitals

This section consist of eight items, mean, standard deviation, and percentage analysis was used to measure the personal obstacles form annex (2) the personal obstacles 48.4% its low the statement (22, 23, 24) achieve high level 63.1%.

5.2.3 Administrative and organizational obstacles to time management in Hebron hospitals

This section consist of twenty items, the statistician used mean, standard deviation, and percentage to measure the administer and organizational obstacles, from annex (2) the 69.73%, its high in the statement (36) achieve very high level 82.54%.

5.2.4 Nursing performance in Hebron hospitals

this section consist of eleven items, the statistician used mean, standard deviation, and percentage to measure, from annex (2) the 72.34% its high in statement (57) achieve 57.3%.

Table (5.2.2) total score of obstacles and nursing performance

Variables	Mean	Standard deviations	Sample	Percent
Personal obstacles to time management	2.4208	1.0128	181	48.4%
Administrative and organizational obstacles to time management	3.4865	1.0248	181	69.73%
Nursing performance	3.6171	.82896	181	72.3%

Compression between government and non government

Type of hospital time management and personal, administration obstacles and nursing performance table (5.1.3)

This part consist of eleven items, the statistician used mean, and percentage to measure, from table (5.1.3) time management in government hospitals 64.45 is medium in nongovernmental hospital 71.12% its high.

personal obstacles to time management in government 55.5% in non government 53.8%, Administrative and organizational obstacles to time management in government 70%, in non government 68.3%, nursing performance in the workplace in government 71%, in non government 71.83%.

Table (5.1.3) Type of hospital and effectiveness time management and personal, administration obstacles and nursing performance

Section of questionnaire	governmental	Non governmental
Time management in Hebron hospitals	64.45%	71.12%
Personal obstacles to time management	55.5%	53.8%
Administrative and organizational obstacles	71%	68.3
to time management		
Nursing performance in the workplace	71%	71.83%

5.3 Hypotheses Analysis

5.3.1 Hypothesis 1

There are no significant differences at a level of ($\alpha \le 0.05$), between the means of time management effectiveness on nurses' performance attributed to gender.

We use Independent Sample T-Test in the variable of the gender because compares the means between two unrelated groups on the same continuous, and the table below shows the result of the test.

Table5.3.1 Independent Sample T-Test For gender Variable

There are no statistically significant differences, in the significance level 0.05, of Effective time management for nurses/in the Hebron hospitals according to gender

	Gender	N	Mean	Std. Deviation	df	t	Sig value
Time management in your workplace	Male	96	3.4434	.54724	179	1.213	.894
	Female	85	3.3619	.53274			
	Gender	N	Mean	Std. Deviation	df	Т	Sig value
Personal obstacles	Male	96	2.8458	.72072	179	2.363	.629
	Female	85	2.6016	.66213			
	Gender	N	Mean	Std. Deviation	df	T	Sig value
Administration obstacles	Male	96	3.5358	.61002	179	1.749	.221
	Female	85	3.3718	.65117			
	Gender	N	Mean	Std. Deviation	df	T	Sig value
nursing performance	Male		3.6170	.45879	179	1.474	.900
	Female	85	3.5189	.43359			
	Gender	N	Mean	Std. Deviation	df	Т	Sig value
Total	Male	96	3.4308	.34097	179	2.536	.684
	Female	85	3.3024	.33906			

^{*} Significance level 0.05

Since the total level of significance for the all section 0.684 is bigger than 0.05, so we accept the hypothesis and conclude that " There is no statistically significant differences, in the significance level 0.05, of Effective time management for nurses/in the Hebron hospitals according to gender". So the hypothesis is accepted.

5.3.2 Result_of the second Hypothesis:

Hypothesis 2

There are no significant differences at a level of ($\alpha \le 0.05$), between the means of time management effectiveness on nurses performance attributed to hospitals type.

In order to study the truth of the hypotheses "There is no statistically significant differences, in the significance level 0.05, of effective time management for nurses/in the Hebron hospitals according to type of hospital." We use Independent Sample T-Test in the variable of the type of hospital because compares the means between two unrelated groups on the same continuous and the table below shows the result of the test.

Table (5.3.2) Independent Sample T-Test For type of hospital

There are no statistically significant differences, at $\alpha \le 0.05$, of effective time management

	Type of hospital	N	Mean	Std. Deviation	df	t	Sig value		
The most effective	governmental	83	3.2225	.52866					
methods in time management in your workplace	Non governmental	98	3.5598	.50318	179	3.229	.475		
	Type of hospital	N	Mean	Std. Deviation	df	t	Sig value		
personal obstacles	governmental	83	2.7791	.67904	170	170 2 6	179 3.631		.460
	Non governmental	98	2.6905	.72295	1/9	3.031	.400		
Administrative and	Type of hospital	N	Mean	Std. Deviation	df	t	Sig value		
organizational obstacles	governmental	83	3.5095	.58239	170	2.294	.108		
Obstacies	Non governmental	98	3.4158	.67332	1/9	2.234	.106		
nursing performance in the	Type of hospital	N	Mean	Std. Deviation	df	t	Sig value		
workplace	governmental	83	3.5463	.47684	170 2	179 2.763		.096	
wor kprace	Non governmental	98	3.5918	.41430	1/9	2.703	.090		
	Type of hospital	N	Mean	Std. Deviation	df	t	Sig value		
Total	governmental	83	3.3278	.27967	179	.927	.198		
	Non governmental	98	3.4067	.34531	1/9	.741	.190		

for nurses/in the Hebron hospitals according to type of hospital.

^{*} significance level 0.05,

Since the total level of significance for the all section 0.198 is bigger than 0.05, so we accept the hypothesis and conclude that " There is no statistically significant differences, in the significance level 0.05, of Effective time management for nurses/in the Hebron hospitals according to type of hospital.

5.3.3 Result of the third Hypothesis:

Hypothesis 3: There are no significant differences at a level of ($\alpha \le 0.05$), between the means of time management effectiveness on nurses performance attributed to qualification.

In order to study the truth of the hypotheses "There is no statistically significant differences, in the significance level 0.05, of Effective time management for nurses/in the Hebron hospitals according to qualification." We use one way ANOVA in the variable of the section the table below shows the result of the test.

There is different between the means of these variables, and to test if these differences reach to significant value we used one way ANOVA test (see table 5.2.3).

Table (5.3.3)One way ANOVA Test effective time management for nurses/in the Hebron hospitals according to qualification

The scale		Sum of Squares	df	Mean Square	F	Sig.
	Between Groups	.430	3	.143	.486	.692
The most effective methods in time management in your workplace	Within Groups	52.159	177	.295		
	Total	52.589	180			
	Between Groups	.458	3	.153	.306	.821
Personal obstacles	Within Groups	88.402	177	.499		
	Total	88.861	180			
	Between Groups	2.444	3	.815	2.067	.106
Administrate and organizational obstacles	Within Groups	69.739	177	.394		
obstacles	Total	72.183	180			
	Between Groups	1.164	3	.388	1.959	.122
nursing performance	Within Groups	35.059	177	.198		
	Total	36.223	180			
	Between Groups	.314	3	.105	.876	.455
Total	Within Groups	21.131	177	.119		
	Total	21.445	180			

According to table Since the total level of significance for the all section 0.455 is bigger than 0.05, so we accept the hypothesis and conclude that "There is no statistically significant differences, in the significance level 0.05, of Effective time management for nurses/in the Hebron hospitals according to qualification".

..

5.3.4 Result of the fourth Hypothesis:

Hypothesis 4 : There are no significant differences at a level of $(\alpha \le 0.05)$, between the means of effectiveness time management on nurses' performance attributed to experience.

In order to study the truth of the hypotheses "There is no statistically significant differences, in the significance level 0.05, of effective time management for nurses/in the Hebron hospitals according to years of experience." We use one way ANOVA in the variable of the qualification the table (5.2.3) below shows the result of the test.

Table (5.3.4) One way ANOVA Test effective time management for nurses/in the Hebron hospitals according to years of experience.

		Sum of Squares	df	Mean Square	F	Sig.
	Between Groups	.662	2	.331	1.131	.325
The most effective methods in time management in your workplace	Within Groups	51.770	177	.292		
	Total	52.432	179			
	Between Groups	1.658	2	.829	1.684	.189
Personal obstacles	Within Groups	87.120	177	.492		
	Total	88.778	179			
	Between Groups	.240	2	.120	.296	.744
Administrate and organizational obstacles	Within Groups	71.739	177	.405		
	Total	71.979	179			
	Between Groups	.088	2	.044	.215	.807
nursing performance in the workplace	Within Groups	36.133	177	.204		
	Total	36.221	179			
	Between Groups	.240	2	.120	1.002	.369
Total	Within Groups	21.188	177	.120		
	Total	21.428	179			

^{*}significance level 0.05

There is different between the means of this variables, and to test if these differences reach to significant value we use one way ANOVA test and the table bellows show the results. Table (5.2.3) one way ANOVA Test of the Effective time management for nurses/in the Hebron hospitals according to years of experience.

Since the total level of significance for the all section 0.369 is bigger than 0.05, so we accept the hypothesis and conclude that " There is no statistically significant differences, in the significance level 0.05, of Effective time management for nurses/in the Hebron hospitals according to years of experience "

5.3.5 Result of the fifth Hypothesis:

Hypothesis 5: There are no significant differences at a level of ($\alpha \le 0.05$), between the means of time management effectiveness on nurses' performance attributed to age variables.

In order to study the truth of the hypotheses "There is no statistically significant differences, in the significance level 0.05, of Effective time management for nurses/in the Hebron hospitals according to age." We use one way ANOVA in the variable of the age the table below shows the result of the test.

Table below there is different between the means of this variables, and to test if these differences reach to significant value we use one way ANOVA test and the table bellows show the results.

Table (5.3.5)One way ANOVA Test of the Effective time management for nurses/in the Hebron hospitals according to age.

		Sum of Squares	df	Mean Square	F	Sig.
	Between Groups	1.294	2	.647	2.245	.109
time management in your workplace	Within Groups	51.295	178	.288		
	Total	52.589	180			
Personal obstacles	Between Groups	.417	2	.209	.420	.658
	Within Groups	88.443	178	.497		
	Total	88.861	180			
Administrate and organizational obstacles	Between Groups	.088	2	.044	.109	.897
	Within Groups	72.095	178	.405		
	Total	72.183	180			
nursing performance in the workplace	Between Groups	.107	2	.053	.263	.769
	Within Groups	36.116	178	.203		
	Total	36.223	180			
Total	Between Groups	.225	2	.113	.944	.391
Total	Within Groups	21.220	178	.119		
	Total	21.445	180			

^{*}significance level 0.05

Since the total level of significance for the all section 0.391 is bigger than 0.05, so we accept the hypothesis and conclude that "There are no statistically significant differences, in the significance level 0.05, of Effective time management for nurses/in the Hebron hospitals according to age "

5.3.6 The result of sixth hypothesis

Hypothesis 6: There are no significant differences at a level of ($\alpha \le 0.05$), between the means of obstacles of time management and nursing performance.

In order to study the truth of the hypotheses "There exists no significant difference, in the significant level 0.05, between time management and nursing 'performance." We use Pearson chi square test, the tables below show the result of the test.

table(5.3.6) The frequency and percentages of time management and nursing 'performance

	Value	Df	Asymp. Sig. (2-sided)
Pearson Chi-Square	2222.554(a)	2070	.010
Likelihood Ratio	709.172	2070	1.000
Linear-by-Linear Association	8.573	1	.003
N of Valid Cases	181		

Since the level of significance (0.010) is lesser 0.05, we reject the hypothesis and conclude that "There exists significant difference, in the significant level 0.05, between time management and nursing 'performance.

5.3.7 The result of seventh hypothesis

Hypotheses 7: There are no significant differences at a level of $(\alpha \le 0.05)$, between the means of time management effectiveness on nurses' performance attributed time management.

In order to study the truth of the hypotheses "There exists no significant difference, in the significant level 0.05, between the obstacles of time management and nursing performance." We use Pearson chi square test, the tables below show the result of the test.

Table(5.3.7) The frequency and percentages of the obstacles of time management and nursing performance

	Value	Df	Asymp. Sig. (2-sided)
Pearson Chi-Square	6993.817(a)	6716	.009
Likelihood Ratio	1182.591	6716	1.000
Linear-by-Linear Association	35.314	1	.000
N of Valid Cases	181		

Since the level of significance (0.009) is lesser 0.05, we reject the hypothesis and conclude that "There exists significant difference, in the significant level 0.05, between the obstacles of time management and nursing performance

Chapter six

Discussion and conclusion

Introduction

This chapter discussed the study finding correlated with other studies, time management effectiveness on nursing performance in Hebron hospitals.

The finding begin with socio- demographic data, discussion of the time management in Hebron hospitals, personal obstacles, administration obstacles in Hebron hospitals.

6-1 Discussions of socio-demographic data

As aforementioned, the participant were 181 nurses distributed among five hospitals in Hebron in west bank. The study population was heterogeneous in terms of age, gender, years of experience and qualification, and type of hospital.

This paragraph presented demographic data that included; sex, age, education and work experience (please refer to table 5.1). The study participants were; 53.0% males and 47.0% female with more than 54.1% of them were working in the 3 nongovernmental hospitals and 45.9% in the governmental hospitals

Regarding their work experience; more than 50.6% were educated at a bachelor degree in nursing, 37.4% diploma, 8% with high diploma, and 4% with master degree,

There is 21.5% have a work experience for more than 10 years, 48.1% work experience ranged from 5 to 10 years, 29.8% worked for less than 5 years and 21.5% for more than 10 years. It was noted that most of nurses are young with 44.8% with an age less than 30 years, followed by 43% with an age ranged 30 to 39 years and 12.2% were for 39 years and older group.

6.2 Time management effectiveness and nursing performance

To study the factor affecting time management and nursing performance in Hebron hospitals, questionnaire items distributed first the time management in Hebron hospitals, second the obstacles personal, obstacles administration and organization third measure nursing performance.

6.2.1 Time management in Hebron hospitals

Nurses typically have an extremely busy and complex job with multiple, competing demands and many patients for whom to care. They must be able to manage their time if they are to be effective. No day is ever the same in the field of nursing, and nurses must be prepared to handle emergencies and contingencies as they arise. Having a clear idea of the responsibilities and tasks ahead of them each day will help nurses immensely in successfully completing them. Time management in nursing is vital to getting all required tasks completed, managing patient caseloads and feeling less stressed. There are numerous tasks that nurses must complete in a typical shift, including checking several times on each of their patients, managing medication for patients, answering calls from patients, completing required paperwork and updating patient charts. The safety, health and security of patients depend on nurses being able to manage the numerous tasks assigned to them.

This subcategory consist of 16 items related to time management in Hebron hospitals planning, analysis of time, follow up and time commitment according to table (6.2)

Time management variables	Number of	Mean	standard deviation	percent
	question			
Analyses of time	6+7	3.9081	.94941	78.2%
Planning	1+2+3+4+5+12	3.4272	.95651	68.5%
Follow-up	8-11	3.4175	.96219	68.4%
Time commitment	13-16	3.129	1.0910	62.6%
Total		3.4702	.98977	69.5%

From this table the time variables, analyses of time the first 78% then planning, follow-up, and time commitment, time management experts say that setting goals that needs to be done accurately and clearly, one of the most important elements of effective and successful management of time as study alwazany (2006). and accept with the study of Bowers (2001) nursing organize our time on hospital most works is depended on time as medication.

The time variables are high (69.5%), which indicate nurses describe good skills for time analyses, planning, follow-up and commitment. From researcher opinion refer more than 60% of participant BA have studies management theory and to be aware of important of time, and more than 83% of participant are young and age less than 39 years it gives them motivation and strength to work and prove, and commitment. Oluchukwu (2003) use of personal time analysis which will show the various activities spend their time on; apart from the general schedule of activities for realizing the objectives, Good time management involves keeping a schedule of the tasks and activities important. Nursing work need to use time skills. Keeping a calendar, daily planner to be helpful to stay on the task, however, self-discipline is also required. Adeojo, (2012), the key to successful time management is planning and protecting the planned time, which often involves reconditioning your environment, and particularly the re-conditioning the expectation of others. Said (2012) planning and analyze of time with the proper implementation of the plans and positive disposition towards obstacles of time gives us a successful and effective management of time.

When asked about There is a training courses for nurses on the importance of time and ways to manage, result 45% describe low, from researcher opinion that the managers not interested time management and its importance to organization, according to Mackenzie (1954) developed a concept for a time management training, which is still being used, time management training programs are aimed at giving insight into time-consuming activities, changing time expenditure, and increasing workday efficiency by teaching people how to make planning, how to prioritize tasks, and how to handle unexpected tasks. Books, articles, and time management training programs that were initially developed for managers have been made available to everyone. Brigitte further (2007) found time management training enhance time management skills and influence the outcomes of job performance.

Nursing work long hours at least 7 hours for that need break time, according to Healthy working lives (2013) a right to an in-work rest break of at least 20 minutes if the working day is longer than six hours.

6.2.2 Personal obstacles to time management.

Time management by nurses can be affect by personal obstacles. Personal obstacles to time management that reduce our productivity.

This subcategory consist of eight items related to personal obstacles to time management in Hebron hospitals table (5.1.2), indicate that percent 48.4% its low.

This mean nurses is more attention to personal obstacles for time management, and you know how to deals with personal obstacles. Effective nurse use successful strategies for time management. Often nurse allow minutes and hours to be obstacles on nonessential tasks such as opening mail, filing, and responding to noncritical requests from others, effective nurse use self-discipline to organize these tasks and assign priority to projects that produce results, Stephen Covey (1998). Drucker, (1992); the manager spends more than (10%) of his time in solving problems and conflicts as a result of human relations between the employees, initiation of a task without thinking and planning, moving to a new task before completion of previous task and attention to matters of low importance are factors that may increase the tension and block the work if it happen. Good time management is essential for coping with the pressures of modern life without experiencing too much stress. Whether it's in your job or your lifestyle as a whole, learning how to manage your time effectively will help you feel more relaxed, focused and in control (NHS,ND). According to Donaldson (2011), "the aim of good time management is to achieve the lifestyle balance you want". Good time at work means doing high quality work, not high quantity.

In the lack of reasonable use of time, they will not be able to meet expectations leads to disruption of the works. This interconnected chain endangers the goals of the organization and healthcare of the entire society. In hospitals, the majority of head nurses' time is spent on boring chores including answering unnecessary phone calls, reviewing health records,

ineffective delegation, attendance in useless meetings, useless conversation with staff, patients and their relatives (Hackworth, 2008)

The fear from mistake, move to anew task before the pervious task is done, and do the work more than once because not done right from the first time, according to Krueger GP(1994), the medical error affect on performance and make obstacles and crises the health take back steps, culture of fear that permeates the healthcare system effectively blocks open communication, and collaboration that is necessary to resolve conflict, and provide the safe working environment necessary for quality healthcare.

According to researcher opinion the nurse work to be different than other career because it work with life saving and patient, and nurses in Hebron hospitals work more to give good impressions our manager ,53% from nurses works in non government hospitals, more control, and There are numerous tasks that nurses must complete in a shift, including checking several times on each of their patients, managing medication for patients, answering calls from patients, completing required paperwork and updating patient charts. Nurses in Hebron hospitals teach how to deal with personal obstacles from himself, and commitment nursing for our job, the situation on the west bank occupation, economy status give more responsibility on work.

6.2.3 The administrative and organizational obstacles

This subcategory consist of 20 items related to administration and organizational obstacles to time management in Hebron hospitals table (5.1.2), indicate that percent 69.73% its high.

Administration obstacles increase the stress, effect on performance. Avoiding obstacles of time and learning time controlling may increase managerial ability, preserve human resources, reduce stress, increase satisfaction and improve mental health of managers (Gran Moravec & Hughes, 2005)

The Eleanor(2010), most common time management obstacles for nurses are interruptions such as unscheduled visitors, telephone calls, or crises attendance at inefficient meetings; other activities such as failure to delegate routine tasks; and lack of a daily or weekly plan.

Drop-in visitors, waiting for others, and an inability to say no are other sources of wasted time.

The participants when asked there is mismanagement and inadequate administration in hospital 72% are high according to researcher opinion mismanagement lead to loss of time nurses and recurrence of crises due to lack of clarity of the functions of each person and lack of a quick solving. According to Baggs JG (1988), Collaboration in health care is defined as health care professionals assuming complementary roles and cooperatively working together, sharing responsibility for problem-solving and making decisions to formulate and carry out plans for patient care.

In hospital characterized by a hierarchical culture, physicians are at the top of that hierarchy. According to Coles C(1995), they may feel that the environment is collaborative and that communication is open while nurses and other direct care staff perceive communication problems, hierarchy differences can come into play and diminish the collaborative interactions necessary to ensure that the proper treatments are delivered appropriately. when hierarchy differences exist, people on the lower end of the hierarchy tend to be uncomfortable speaking up about problems or concerns, intimidating behavior by individuals at the top of a hierarchy can hinder communication and give mismanagement

There is a lack of goals or priorities or plans daily 71% is high according to researcher opinion this mean lack of planning in the hospital about needs and how to development the nursing. According to Munyisia EN ,(2011) nurses do plan their day will find that they get more done with less stress, is difficult to plan your day because your environment can change rapidly, and much of your day is spent responding to the needs of patients.

When asked, lack of specific dates for ending tasks 70% is high, Nurses have to deal with many interruptions. According to researcher opinion is due nursing work depend on the patient and the situation of is change rapidly, according to Rosero (2012,) nursing work nurses work not only have tons of things to get done, an specific time to end our work but also forced to make some decisions. For that the importance of time management started.

Lohrey (2013), interruptions are a fact of life with nurses, regardless of how well they plan, a strategy for dealing with and managing interruptions is essential for keeping the day on track, in a non-emergency situation, an approach in which nurses evaluate interruptions by determining the likely consequences of dealing with this situation now versus later and whether the task can be delegated can allow a nurse to quickly prioritize an interruption and take the appropriate action.

Question, about there are multiple subordinates for the nurse 69% is high according to opinion nursing work with many health worker, and this result confirms the frustrations of nurses are due to a range of structural and ideological features which conspire to limit the professional autonomy of the nurse at the bedside and is a clear case of medical dominance (Turner, 1986)

There is a lack of clear responsibilities and authorities, nursing product care for patient, and do planning for care, physician draw treatment for patient for that responsibility un clear who is the first responsible according to Claire M el(2001), the nurses are often in role ambiguity in spite of changes in health care and practice settings, and lack of role delineation has led to nurse-physician conflicts.

Statement, there are few nurses in work 74% high, negative effects of the nursing shortage the nursing shortage affords opportunity, but there are consequences, too. Nurses often need to work long hours under stressful conditions, which can result in fatigue, injury, and job dissatisfaction. Nurses suffering in these environments are more prone to making mistakes and medical errors. Patient quality can suffer. For these reasons, and more, ANA is dedicated to improving the workplace safety for nurses around the nation ANA (2013).

lack of incentives by the administration for those interested in working 82.5% is high from opinion the manager not study management, internal law not encourage the satisfaction, Gupta & Joshi (2008), concluded in their study that Job satisfaction is an important technique used to motivate the employees to work harder. It had often said that, a happy employee who is a productive employee. Job satisfaction is very important because most of the people spend a major of their life at their work place.

There is no coordination between the administration and nurses 72% is high from opinion manager of hospital always physician not nurse for that physician take decision and nursing implanted.

Weakness of the means of communication between the hospital administration and its various departments, nursing deal with all health team, bad coordination between health is obstacles of time, this manly appear in government hospital. According Reilly JB (2013) Standardizing the communication process between inpatient and outpatient dialysis reduce adverse events related to poor communication and improve patient care.

Nursing can be a demanding career. (Pearce, 2007) Most nurses have a lot of things they are responsible for and to make quick decisions about patient care and well-being. Improving time management plans can make the nurse much more efficient nurse, one that will be able to attend to the needs of more patients in less time. In some cases, it may give the nurse more time to speak with and to know those that he is caring for, in others, knowing how to do things quickly could mean saving a life. Of course, better time management doesn't just help patients, it can also be a big stress relief for those working in advanced environment, knowing how to prioritize the tasks each shift can make a big difference in lowering stress and helping to manage the nurse work, less stress can also help you arrive to spend time relaxing or socializing with the family without feeling completely exhaustion and nervous

Procrastination in decision-making, According to Piers Steel (2013), 95 percent of the population procrastinates in some way," and students often end up procrastinating either due to a lack of motivation, or simply as the result of being unorganized. According to Fitsimmons (2008), procrastination due to poor time management, overload of tasks at a specific time, an inability to priorities, feeling overwhelmed by the task.

Ajayi (2007) Olaniyi (1998), submitted that procrastination may occur as a result of poor utilization, lack of concentration, fear and anxiety and personal problems among others. It is imperative for lecturers to identify the various causes and reasons for procrastination and plan to overcome them by disciplining themselves on how best to use time wisely, set priorities and perform their duties according to schedule so as to always meet deadlines

The administrative, organizational obstacles due to customs and traditions and nurses themselves and also due to the negligence of law enforcement market agreed with the study Asfoor, (1991) confirmed that the obstacles time are always in the life of the Arab world, And also agreed with the study Abu Sheikha, (1991) and Zahrani, (2006) where the uncovered studies behavioral patterns unwanted exercise during working hours can have a negative impact on the efficiency of time and use, what study Al Nase,(2003) to negligence in the application of laws and regulations that provide for respect for the official working hours, a study Brigitte,(2007) revealed that the pressures of work possible to operate a waste of time. As well as in the study Asfoor,(1991) showed that the delay for the start of your shift and leave before finishing, and make phone calls private use, the personal and administration obstacles.

6.2.4 Nursing performance

This subcategory consist of ten items related to nursing performance in Hebron hospitals table (5.1.2), indicate that percent 73.3% its high.

The nursing performance high from researcher opinion that for nursing commitment, and nursing dealing with patient, and critical case and intervention for that performance of nursing good.

When asked, complete the duties entrusted to him to the fullest point, 75% high from opinion the nurse complete duties because its affecting on patient. According to Ahmad and Orany (2010,)nursing commitment as 'essentially about their duties, attitude and behavior towards shared goals of a group or organization'. committed nurses might feel that there are future advantages in working as nurses for the job. If nurses cannot do their job in a time manner, then they would not be able to meet all the expectations that disrupt patient care that is hospitals main goal. It can, also, cause adverse effects including increased duration of hospitalization, hospital bed occupancy, treatment costs, violation of patient rights and finally disrupting other teams' function. This interconnected chain not only endangers organization's goals but also will affect entire community (Hackworth, 2008)

Committed to attend to work in time its 77% high, reward good for nursing from opinion nursing in Hebron are committed to hospitals official attendance and time and attendance due to the administration where it punishes Late and technological system used fingerprint.

Nursing follows the procedures work accurately 72% high. According to Lakein (1973), time management refers to the use of particular techniques such as 'to-do' lists or planning activities, or to participate in training with the purpose of learning how to master and use such a technique. In general sense.

Nursing resolves problems and directing work pressures, 76% high, nursing contact with patient and relative of patient more than health team for that its teach how solve problem alone, and this refer the nursing understanding how the hospital work. According Tucker and Edmondson (2002) actually investigated problem solving by nurses in the hospital environment. They found that nurses utilized problem-solving skills multiple times throughout a day to the point that problem solving was actually a routine aspect of a nurse's day.

Initiation with new ideas high 71% from opinion the nursing in working and face problem and product new idea. Roux Halstead (2009:475) regard nurses as knowledge workers, 'taking information from many sources and combining it in meaningful ways'. These skills are essential for improving the quality of care, supervising students and providing in-service training to address the skills gap in the clinical wards.

The nurses organize the work and use scientific steps in nursing such as planning and evaluation, nursing use the process to get result, scientific and patient is centered of process According to Lakein (1973), time management refers to the use of particular techniques such as 'to-do' lists or planning activities, or to participate in training with the purpose of learning how to master and use such a technique. In general sense.

6.3 Correlation between time management and nursing performance

Schreiber & Gutek, (1987) found a significant relationship between job performance and time management. They asserted that management of time is key to managerial performance.

This means the planning time, commitment, follow-up, and analysis have a positive impact on performance, now keep time management encourages nursing to work within something planned, and followed up, and adherence Planning leads to speed of work and analysis leads to perseverance nurses to work and commitment lead to accurate performance and commitment needed nurses to hear from the manager not many of one becomes the fastest and most reliable performance and improves performance, Otaibi,(1992), Rama,(1991).

Summary

In this study, the researcher targeted 30% of nurses of each hospital, the total number of responder was 181 nurses distributed among five hospital in Hebron government and non government hospital West Bank governmental (Hebron government hospitals - Alia, Abu 65 nurses, Al-Hassan hospital)18 nurses , non government hospitals (Al Ahli Hospital 60 nurses, Al-Mizan hospital 20 nurses and Red Crescent hospital 18 nurses).. The study aims to examine the time management effectiveness in nursing performance in Hebron hospital. The result responder male 96, female 84, most of responder qualification 60% bachelor or more, majority of responder age less than 39 years, and experience less than 10 years. The hypotheses correlated with gender, academic degree, experience and qualification of participate with time management and nursing performance was not significant at the level of $\alpha \leq 0.05$. The hypotheses correlated between time management and nursing performance at a level ($\alpha \leq 0.05$), there significant relationship between time management and nursing performance. The hypotheses correlated between obstacles of time management and nursing performance at a level ($\alpha \leq 0.05$) there exists significant between the obstacles of time management and nursing performance.

The result time management in Hebron hospitals 71% high, and the personal obstacles 55% medium, administrative obstacles 68% high, and nursing performance 71%, the demographic variables not effect in time management and nursing performance, and the study give more result. Time management in non government hospital is better than government hospital.

Conclusion

This study examines the effective time management practice and its effect on nursing performance. And finding time management high on Hebron hospitals, and personal obstacles low, and administration obstacles high on Hebron hospitals.

Time management and obstacles time management affect on nursing performance, on Hebron hospitals. And appear no difference between time management and demographic variables (gender, age, experience, qualification, hospital type).

Result of study

- 1. Hebron hospitals interest for time management (time analysis, time committed, time planning, Follow-up of time) the result high.
- 2. Personal obstacles: the results of the statistical analysis of the study sample, low in Hebron hospitals due to respect and understanding of the meaning of nurses work and it's there to know to personal obstacles time management.
- 3. Administration and organizational obstacles high 69.3%.
- 4. No significant difference level 0.05, between the time management according to demographic variable .
- 5. A significant difference, in the significant level 0.05, between time management and nursing 'performance.
- 6. A significant difference, in the significant level 0.05, between the obstacles of time management and nursing performance.

Recommendation

Nursing on Hebron hospitals realize the importance of time management and how to deal with obstacles. Time management affected on nursing performances in Hebron hospitals it is recommended hospitals adhere strictly to effective time management in order to provide quality services to their patient. The following time management tips are also recommended.

The recommendation related to

- 1. Give attention to the obstacles of time management, personal and organizational
- 2. Raise awareness and attention for nursing manager to time management obstacles to avoid during work
- 3. More studies about obstacles of time management for nursing.
- 4. To expand the concepts of interest, and the meaning of scientific and technical methods to manage time.
- 5. Training on changing habits and behaviors that lead to obstacles of time.
- 6. Further similar studies, particularly on the hospital in other hospitals.

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جامعة القدس كلية الدراسات العليا تخصص إدارة تمريض

تحية طيبة وبعد:

يقوم الباحث بدراسة حول (العوامل المؤثرة على إدارة الوقت تأثيرها على أداء الممرضين/ات في مستشفيات الخليل) وذلك لإتمام مشروع ألتخرج من أجل الحصول على درجة الماجستير في الإدارة التمريضية. إن تعاونك في الاستجابة على فقرات الاستبانة يسهم في تطوير البحث العلمي وهو موضع الشكر والتقدير علما بان المعلومات سرية و ستستخدم لإغراض البحث العلمي فقط.

مع وافر الاحترام لكم ،،، الباحث محمد قطبط إشراف د. سمية صايج القسم ألأول المعلومات الشخصية أولا: يرجي وضع إشارة (X) في المربع الذي ينطبق عليك: مستشفى غير حكومي مستشفى حكومي 1.نوع المستشفي أنثى اً ذکر 2- الجنس اقل من بكالوريوس كالوريوس دبلوم عالي 3. المؤهل ألعلمي 10-5 4. سنوات الخبرة: اقل من 5 سنوات

ا اکثر من 39	من 30 إلى 39 سنة	أقل من 30 سنة	5. العمر :
			سنة

القسم الثاني : يرجي وضع (x) في المربع الذي يتفق مع رأيك , وذلك أمام كل فقرة من الفقرات الآتية أولا :واقع إدارة الوقت من وجهة نظر الممرضين/ات

غير موافق بشدة	غیر موافق	محايد	موافق	موافق بشدة	المجال ألأول: أهم الأساليب الفعالة و واقع إدارة الوقت للممرض/ت في المستشفيات	الرقم
					يقوم التمريض بتحديد الأهداف الدقيقة المراد إنجازها	1
					أهداف التمريض واقعية وممكن تحقيقها	2
					المهام المطلوب مني محددة حسب أولويتها	3
					هناك خطة زمنية متبعة لتحقيق الأهداف	4
					هناك تقيم لما تم انجاز ه	5
					نتعرف على الأخطاء في العمل في الوقت المناسب لتداركها مستقبلا	6
					يطلب من التمريض إنجاز الكثير من الأعمال في أن واحد	7
					نقوم بتحديد أسباب وجود إلاداء غير الجيد	8
					نعدل الخطط بناء على النتائج	9
					هناك لجان من ذوي الخبرة الفنية والكفاءة العالية لدراسة مشكلة معينة	10
					هناك علاقات حسنة بين الممر ضين/ات	11
					يتوفر دورات لتدريب الممرضين على أهمية الوقت وسبل إدارته	12
					تلقي الأوامر والتعليمات من رئيس واحد	13
					يقوم المسئول بإشراك المرؤوسين في عملية اتخاذ القرار وذلك لإشعار هم بتحمل المسؤولية	14
					التأكد من مقدرة المفوضين على القيام بالمهام التي يتم تفويضهم بها	15
					هناك تخصيص وقت راحة " للممرض أثناء دوامه الرسمي	16

ثانيا :المعيقات الشخصية لإدارة الوقت من وجهة نظر الممرضين/ات

غير موافق بشدة	غیر موافق	محايد	موافق	موافق بشدة	العبارة المعيقات الشخصية للممرض/ت لإدارة الوقت في مكان العمل	الرقم
					يقوم التمريض بقراءة الصحف والمجلات الاجتماعية خلال الدوام	17
					الرسمي	
					يستخدم التمريض/ات المهاتف والإنترنت للأمور الشخصية أثناء الدوام	18
					الرسمي	
					التأخر عن بدء الدوام الرسمي	19
					يغادرون العمل مبكرا قبل انتهاء الدوام	20
					كثرة الإجازات المطلوبة	21
					الخوف من ارتكاب الأخطاء	22
					الانتقال إلى مهمة جديدة قبل انجاز المهمة السابقة	23
					القيام بالعمل أكثر من مرة بسبب عدم إنجازه بشكل الصحيح أول مرة	24
					ضعف روح الفريق بين الممرضين/ات	25

ثالثًا: المعيقات الإدارية والتنظيمية لإدارة الوقت من وجهة نظر الممرضين/ات

غیر موافق بشدة	غیر موافق	محايد	موافق	موافق بشدة	المعيقات الإدارية والتنظيمية لإدارة الوقت من وجهة نظر الممرضين/ات	الرقم
					سوء الإدارة وعدم كفاية التنظيم داخل المستشفى	26
					الافتقار إلى وجود أهداف أو أولويات أو خطط يومية	27
					الافتقار إلى وجود مواعيد محددة لإنهاء المهام	28
					هناك تعدد المرؤوسين للممرض/ات	29
					يوجد عدم وضوح المسؤوليات والسلطات	30
					و جود ممر ضین/ات غیر مدربین	31
					هناك قلة عدد الممر ضين/ات في مكان عملي	32
					هناك كثرة عدد الممر ضين/ات في مكان عملي	33
					يتصرف المسئول بتسلط على التمريض /ات	34
					التفويض غير الفعال (الأشخاص المفوَضون غير مناسبين، عدم تلاؤم	35
					المسؤوليات والصلاحيات).	
					عدم وجود حوافز من قبل الإدارة للمهتمين بالعمل	36
					لا يوجد تنسيق بين الإدارة والممرضين	37

38	هناك النقص في المعلومات التي تخص عمل الممرضين/ات بين الإدارة والممرضين/ات		
39	الإفراط في الرقابة (من قبل من الإدارة)		
40	ضعف وسائل الاتصال بين إدارة المستشفى وأقسامها المختلفة		
41	اتخاذ قرارات متسرعة (من قبل من الإدارة)		
42	التسويف والمماطلة في اتخاذ القرارات		
43	ضعف المعابير الرقابية		
44	لا يوجد وصف وظيفي واضح		
45	بيئة العمل غير ملائمة من حيث المكان،التهوية،والإضاءة		
46	إجراءات روتينية بطيئة لإنجاز المعاملات		

رابعا: قياس الأداء الجيد من وجهة نظر الممرضين بالمستشفيات العامة والخاصة.

غیر موافق بشدة	غیر موافق	محايد	موافق	موافق بشدة	العبارات يتصف أداء التمريض في مكان عملة	الرقم
					يكمل الواجبات الموكلة إلية على أكمل وجهة	47
					يلتزم بالحضور إلى الدوام في وقته	48
					يتبع التمريض الاجرءات العمل بدقة	49
					يقوم التمريض بحل المشاكل ويوجهون ضغوط العمل	50
					المبادرة بأفكار جديدة	51
					يقوم التمريض بتنظيم العمل و استخدام الخطوات العلمية في التمريض مثل التخطيط والتقييم	52
					التمريض يحتاج للرئيس ليحثه على العمل	53
					التمريض قادر على التأقلم مع ظروف العمل وضغوطه	54
					يحتفظ الممرضون بعلاقات طيبة مع الأخرين	55
					تحديد نسبة معينة من ألأخطاء أو العمل غير ألجيد التي يجب ألا يتجاوزها الممرض في عملة	56
					يميل التمريض الى البطء وانتظار التعليمات في العمل	57

لكم ألاحترام

distribution of statement of the questionnaire

	Variables	Number of question	1.
1	time management	16	Time management
	6	1+2+3+4+5+	planning
		+12	
	2	6+7	Time analyses
	4	8-11	Follow-up
	4	13-16	Commitment
2	Obstacles of time	9	Personal
	management	17-25	
	5.	21	Organizational and
		26-46	administration
3	Performance measurement	11	
		47-57	

The mean, std deviation percentage, and Level of agreement of the section of

Annex (2)

interaction enhancement in descending order

The order	No.	The question	Mean	Std deviation	Percentage %	agreement
The fir	st sca	ale: The most effective methods in	time ma	nagement i	n your work	olace
	1	Nursing identifies the precise objectives which need completion	3.8278	.79474	76.5%	High
	2	Nursing goals realistic and achievable	3.9282	.7729	78.4%	High
	3	The tasks required are specified in order of priority	3.8232	.88926	76.4%	High
	4	There is a time plan followed to achieve the goals	3.3923	.96364	67.8%	High
	5	There is an assessment for what has been accomplished	3.350	1.01648	67%	High
Î	6	Recognize the errors at work in a timely manner to address them in the future	3.7845	.93273	75.6%	High
	7	The Nursing are asked to complete a lot of business at the	4.0278	.9655	80.5%	High

	same time				
8	We identify the causes for the non good performance	3.5722	.90332	72.4%	High
9	Modify plans based on results	3.4667	.9359	69.3%	High
10	There are committees with expertise and competence to study a particular problem	2.7459	1.1113	54.9%	Middle
11	There are good relations between nurses	3.8436	.89825	76.8%	High
12	There is a training courses for nurses on the importance of time and ways to manage	2.2486	1.0105	45%	Low
13	The orders and instructions are received from one president	3.1556	1.1177	63.1%	Middle
14	The charge involving subordinates in decision-making process so as to make them feel with responsibility	3.2722	1.0455	65.4%	Middle
15	Ensure the ability of commissioners to carry out the functions that are delegated	3.3333	0.90313	66.6%	Middle
16	There is allocated time off to	2.7348	1.29801	54.6%	Middle

	nurse during the official Eddy				
Second scale	e: Personal Obstacles in Workpla	ice obsta	cles		
17	Nursing reads newspapers and social magazines during working hours	2.2278	1.18572	44.5%	Middle
18	Nursing uses the phone and the Internet for personal matters during office hours	2.3757	1.16536	47.5%	Middle
19	Are late for the start official working hours	2.7514	1.13972	55%	Middle
20	Leaving work early before the end of working hours	2.4144	1.04329	48.3%	Middle
21	Multiple required holiday	2.6556	1.08480	53.2%	Middle
22	There is the fear of making mistakes	3.3481	.96342	67%	High
23	move to a new task before the previous task is done	3.1341	1.08302	62.6%	High
24	Do the work more than once because it has not done right from the first time	3.0166	1.06706	60.3%	High
25	There is a lack of team spirit among nurses	2.6630	1.03398	53.3%	Middle

Third scale	e: Administrate Obstacles in my wo	ork place			
26	There is mismanagement and inadequate administration in hospital	3.6000	1.01166	72%	High
27	There is a lack of goals or priorities or plans daily	3.5500	.94115	71.1%	High
28	Lack of specific dates for ending tasks	3.4917	.98668	69.8%	High
29	There are multiple subordinates for the nurse	3.46969	1.07776	69.38%	High
30	There is a lack of clear responsibilities and authorities	3.4033	.99877	68%	High
31	The presence of untrained nurses	3.4420	1.01821	68.7%	High
32	There are few nurses/in my place of work	3.7444	1.12921	74.88%	High
33	There is a large number of nurses in my work place	2.7006	1.22273	54%	Middle
34	Official acting autocratically to nursing	3.0000	1.15470	60%	High
35	Ineffective delegation (people being inadequate, incompatibility of responsibilities and powers(3.5000	1.07438	70 %	High

36	Lack of incentives by the administration for those interested in working	4.1271	1.02219	82.54%	High
37	There is no coordination between the administration and nurses	3.6077	1.03588	72.15%	High
38	There is a lack of information concerning the work of nurses / s between the administration and nurses	3.5754	.98794	71.5%	High
39	Excessive control (by the administration)	3.4199	1.03840	68.4%	High
40	Weakness of the means of communication between the hospital administration and its various departments	3.3591	1.02105	67%	High
41	Hasty decisions (by the administration(3.6906	1.00187	73.8%	High
42	Procrastination in decision- making	3.7238	.98935	74.46%	High
43	Weakness of regulatory standards	3.4751	1.05182	69.5%	High
44	There are is no clear job descriptions	3.5414	1.13759	70.8%	High

45	The working environment is not suitable in terms of location, ventilation, and lighting		1.2314	61.9%	High
46	Routine procedures are slow to complete transactions	3.6133	1.05654	72.26%	High
	fourth scale: nursing performance in the workplace				
47	Complete the duties entrusted to him to the fullest point	3.7956	.89268	75.8%	High
48	Committed to attend to work in time	3.8508	.84647	77%	High
49	Nursing follows the procedures work accurately	3.6077	.92841	72.15%	High
50	Nursing resolves problems and directing work pressures	3.8232	.85746	76.45%	High
51	Initiation with new ideas	3.5389	.92370	70.7%	High
52	The nurses organize the work and use scientific steps in nursing such as planning and evaluation		.93053	69.8%	High
53	Nursing needs the president to urge him to work	3.4167	1.07212	68.3%	High

	T	1		1	1
54	Nurses are able to adapt to	3.9227	.77788	78.4%	High
	working conditions and pressure nurses keep good relations with				
55	others	3.9224	.71048	78.4%	High
56	Detect the specific percentage of errors or not good work that a nurse must not exceed at work		.91058	70.05%	High
57	Nursing tends to slow and wait for instructions at work	2.8674	1.05654	57.3%	middle
Total averag	ge of the first scale	3.4702	.98977	69.4%	High
Total averag	ge of the second scale	2.4865	1.0128	49.73%	Low
Total avera	ge of the third scale	3.4865	.10248	69.73%	High
Total averag	ge of the fourth scale	3.6171	.82896	72.34%	High
Total avera	nge	3.6171	.33499	72.34%	High

Annex (3)

Name of expertise of questionnaire

Name	Qualification
Dr. Sumaya Sayej	thesis advisor
Dr. Asma Imam	Teacher at Public Health Faculty at Al Quads University
Dr . Hussain Jabreen	Dean of nursing faculty Hebron university
Dr . Basal al Natshi	Teacher at finance and management Faculty at Hebron University

Annex (4)

The time management on demographic variables the means of Effective time management for nurses/in the Hebron hospitals according to qualification

		N	Mean
	less than BA	71	3.4263
	BA	91	3.3675
time management in your workplace	high diploma	14	3.5438
	master degree	5	3.3992
	Total	181	3.4051
	less than BA	71	2.6780
	BA	91	2.7799
Personal obstacles to time management	high diploma	14	2.7143
	master degree or higher	5	2.6444
	Total	181	2.7311
	less than BA	71	3.4113
Administrative and organizational	BA	91	3.5527
obstacles to time management	high diploma	14	3.1494
	master degree or higher	5	3.2909
	Total	181	3.4588
	less than BA	71	3.5611
Nursing performance in the workplace	BA	91	3.6151
reasing performance in the workplace	high diploma	14	3.3095
	master degree or higher	5	3.6381

	Total	181	3.5709
	less than BA	71	3.3553
	BA		3.4022
Total	high diploma	14	3.2500
	master degree or higher	5	3.3479
	Total	181	3.3705

The means of Effective time management for nurses/in the Hebron hospitals according to years of experience

The scale		N	Mean	Std. Deviation
	less than 5 years	54	3.4953	.52018
time management in your	from 5 to 10 years	87	3.3669	.57153
workplace	more than 10 years	39 3.3554	.49570	
	Total	180	3.4029	.54122
	less than 5 years	54	2.7330	.71665
personal obstacles to time	from 5 to 10 years	87	2.8094	.71869
management	more than 10 years	39	2.5613	.63826
	Total	180	2.7327	.70425

	less than 5 years	54	3.4473	.63248
Administrative and organizational obstacles to time	from 5 to 10 years	87	3.4889	.65672
management	more than 10 years	39	3.3958	.59490
	Total	180	3.4563	.63413
	less than 5 years	54	3.5921	.49919
Nursing performance in the	from 5 to 10 years	87	3.5761	.42701
workplace	more than 10 years	39	3.5313	.43664
	Total	180	3.5712	.44983
	less than 5 years	54	3.4024	.34906
Total	from 5 to 10 years	87	3.3796	.33526
	more than 10 years	39	3.3029	.36507
	Total	180	3.3698	.34599

Annex (5) the means of time management for nurses/in the Hebron hospitals according to age

		N	Mean	Std. Deviation
	less than 30 years	81	3.4869	.52321
The most effective methods in time management in your workplace	from 30 to 39 years	78	3.3091	.55788
management in your workplace	more than 39 years	22	3.4443	.50853
	Total	181	3.4051	.54052
Personal obstacles to time management	less than 30 years	81	2.7836	.68486
	from 30 to 39 years	78	2.6948	.73273
	more than 39 years	22	2.6667	.67543
	Total	181	2.7311	.70262
Administrative and organizational obstacles	less than 30 years	81	3.4415	.62236
to time management	from 30 to 39 years	78	3.4839	.63986
	more than 39 years	22	3.4331	.67553
	Total	181	3.4588	.63326
	less than 30 years	81	3.5952	.45685
nursing performance in the workplace	from 30 to 39 years	78	3.5437	.42721
	more than 39 years	22	3.5779	.50551
	Total	181	3.5709	.44859
	less than 30 years	81	3.4076	.33545
Total	from 30 to 39 years	78	3.3323	.33499
	more than 39 years	22	3.3694	.41270
	Total	181	3.3705	.34517

One way ANOVA Test of time management for nurses/in the Hebron hospitals according to qualification

The scale		Sum of Squares	Df	Mean Square	F	Sig.
	Between Groups	.430	3	.143	.486	.692
The time management in your workplace	Within Groups	52.159	177	.295		
	Total	52.589	180			
Demond shots de time	Between Groups	.458	3	.153	.306	.821
Personal obstacles to time management	Within Groups	88.402	177	.499		
management	Total	88.861	180			
Administrative and	Between Groups	2.444	3	.815	2.067	.106
organizational obstacles to	Within Groups	69.739	177	.394		
time management	Total	72.183	180			
	Between Groups	1.164	3	.388	1.959	.122
nursing performance in the workplace	Within Groups	35.059	177	.198		
Workplace	Total	36.223	180			
	Between Groups	.314	3	.105	.876	.455
Total	Within Groups	21.131	177	.119		
	Total	21.445	180			

^{*,} in the significance level 0.05,

Annex (6) Demographic value

	Percent	frequency
Type of hospital		
Governmental hospital	46.1%	83
Non government hospital	53.9%	97
Gender		
Male	53.3%	96
Female	46.7%	84
Qualification		
Diploma	37.4%	71
BA	50.6%	91
High diploma	8%	14
Master	4%	8
Age		
less than 30	44.4%	80
Between 30-39	43.3%	78
More than 39	12.2%	22
Experience		
Less than 5	29.8%	54
From 5-10	48.6%	88
More than 10	21.7%	39