

Supervisor Support and Job Performance among Nurses in Public Hospitals

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Abstract

The aim of this study is to investigate the relationship between supervisor support and job performance among nurses. On the basis of self-reported data from 718 Staff Nurses in Malaysia's public hospitals, this study found that there is no significant relationship between supervisor support and job performance. This finding indicates that the supervisors were not able to provide the necessary support they need and indicates that the support given to each staff may seem not to work well with many staff. Thus, health care institutions must play a better role in coordinating and providing training for nursing supervisors in order for them to give their subordinates great support.

Keywords: Supervisor Support, Job Performance, Nurses, Public Hospitals

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Introduction

Today's hospitals are designed to meet the needs of medical consumers as their experiences have a huge role in evaluating the service provided. Thus, it is vital to ensure and to enhance the level of job performance among nurses because they are the backbone of the healthcare sectors who deal first hand with patients (Al-Homayan, 2013). Job performance among nurses is defined as how effectively nurses are able to carry out roles and responsibilities related to patient care. Low job performance among nurses can hinder the good quality of healthcare delivery.

As an effort to enhance nurses' job performance, great support from a supervisor is needed. Because, nursing tasks require multidisciplinary teamwork in providing care, without proper supervisor support, social relations will be affected and nurses will be in stress. According to Burke et al. (1992), nurses who received a lack of support from the supervisor tend to not dedicate their abilities and efforts to the assigned task, which subsequently lead to poor job performance. This is in line with Billings, Folkman, Acree, and Moskowitz (2000) finding that healthcare workers are able to maintain stable emotional state and experience less job stress if their superior provides continued work support.

Nevertheless, despite of the importance of supervisor support in enhancing job performance among nurses, some studies found that the relationship between these two constructs is insignificant (e.g. Nasurdin, Ling, & Khan, 2018; Koh, Lee, & Kim, 2018). Therefore, in response to these inconsistent findings, this study further examines the role of supervisor support (SS) in enhancing the overall job performance of nurses.

Literature Review and Hypothesis Development

The Relationship between Supervisor Support and Job Performance

Supervisor support refers to the extent to which employees perceive that supervisors offer assistance, concern, and encouragement (Burns, 2016; Burke, Borucki and Hurley, 1992; Babin & Boles, 1996). Supervisor supports may satisfy employees' needs to belong to a group ("sense of belonging") and enable employees to identify with their work, which in turn facilitates outstanding job performance. As pointed out by Bakker et al. (2007) that supportive supervisors tend to enhance the likelihood of employees successfully achieving their work goals. Meanwhile, unsupportive supervisors may fail to clearly communicate the performance expectations and the organization goal to their subordinates (Burke et al., 1992), which simultaneously makes the employees unable to identify their work and have low confidence in performing the assigned task (Ng, 2015). In brief, if a supervisor treats an employee well, the employee will respond by improving their job performance as well as devote greater effort towards helping the supervisor and the organization achieve its goals (Babin, & Boles, 1996; Debrah & Ofori, 2001).

It has consistently been found that supervisor support positively and significantly associated with job performance (Bakker *et al.*, 2007; Edmondson & Boyer, 2013; Gagnon & Michael, 2004; Shanock & Eisenberger, 2006). In nursing context, nurses who have a supportive supervisor tend to have supportive behavior and effective communication that motivates their patients, which in turn, patients satisfied with the

nursing care they receive and provides an evaluation that the nurses have a good job performance. Nevertheless, most of studies that have focused on the relationship between supervisor support and job performance have been carried out in the western countries and very few have been carried out in Malaysia and specifically among healthcare employees. There is also lack of study on the relationship between supervisor support and job performance in the nursing context, particularly among nurses working in government hospitals. For aforementioned reasons, this study investigates the relationship between supervisor support and job performance among nurses in Malaysia. Overall, drawing on the findings mentioned above, this study hypothesized that:

H₁: There is a positive relationship between supervisor support and job performance

Methodology

Descriptive quantitative correlational method is employed in this study. The total of nurses working at public hospitals in Malaysia was the population frame of this study. Anyhow, this study only conducted at public hospitals in Peninsular Malaysia owing to the large number of public sectors, large population of nurses, and the large geographical area to be covered as well as the constraints of manpower, time, and cost. For similar reasons, multistage sampling is employed in this study.

Peninsular Malaysia was divided into 4 regions; hence, 4 hospitals were chosen. Namely, Hospital Sultanah Aminah Johor Bahru (HSAJB) represents Southern Region, Hospital Tengku Ampuan Rahimah (HTAR) represents Central Region, Hospital Pulau Pinang (HPP) represents Northern Region, and Hospital Sultanah Nur Zahirah (HSNZ) represents East Coast. Thus, the target population of this study is about 5562 Staff Nurses. Based on this target population, Krejcie and Morgan (1970) suggested 359 Staff Nurses as the sample.

Nevertheless, considering the non-response bias that would be encountered during the sampling process, scholars suggested that the size of the population should be added at least 50% of the required sample (Kotrlík & Higgins, 2001). Thus, this study added 50% of the required sample (359 multiplied by two), which implies a total of 718 were finally decided for the sample size in this study.

From 718 questionnaires that were distributed to the respondents, the researcher only obtain 691 valid questionnaires. The questionnaire divided into 3 sections. The first section was relating to respondent's demographic information (e.g. age, current ward, length of employment as a nurse). The second section consists of 11 questions set to measure job performance. While the last section consists of 4 questions set to measure supervisor support.

Research Framework

In this study, two variables were identified, which was supervisor support as independent variable and job performance as dependent variable. Therefore, the following framework is proposed in this study (Figure 1).

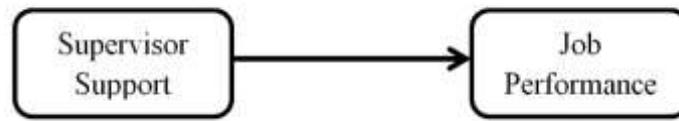


Figure 1: Research Framework

Operational Definition and Measures

Job performance in nursing context is defined as the effectiveness of the person in performing his/her responsibilities and roles in conjunction with direct patient care (Schwirian, 1978) that can be observed and measured against some standard (Mrayyan & Al-Faouri, 2008; McConnell 2003). In term of supervisor support, it refers to the extent to which employees perceive that supervisors offer assistance with job-related problems, concern, and care about their well-being (Burns, 2016).

In assessing job performance, this study adopts the 11 items scale developed by Johari and Hee (2013). In order to measure supervisor support, this study adopts 4 items from Kim et al. (1996). A five-point Likert scale of agreement (“1=Strongly Disagree” to “5=Strongly Agree”) was employed to indicate the level of respondents’ agreement or disagreement on supervisor support. While In term of job performance, respondents rated their degree of agreement with the job performance statements based on a five-point scale ranging from '1' "never" to '5' "always".

Data Analysis

In analyzing data, SPSS and Smart-PLS software was utilized in this study. Thru Smart-PLS, the evaluation of outer model (measurement model) and inner model (structural model) is performed. The evaluation of outer model involves confirmation of validity and reliability of measurement constructs. In Smart-PLS, Confirmation Factor Analysis (CFA) was used to test the construct validity and the accuracy of the questions related to the variables. Table 1 provides the results of CFA of all constructs before deletion.

Table 1: Loadings and Cross Loadings (Before Deletion) (Original Model)

Items		JP	SS
<i>Job Performance (JP)</i>			
<i>JP1:</i>	I help patients by fulfilling their needs	0.716	0.118
<i>JP2:</i>	I achieve my goals by satisfying patients	0.796	0.256
<i>JP3:</i>	I have the patient’s best interest in mind	0.718	0.091
<i>JP4:</i>	I get patients to discuss their needs	0.773	0.207
<i>JP5:</i>	I influence patients with information rather than pressure	0.764	0.165
<i>JP6:</i>	I offer nursing care best suited to the patients’ needs	0.807	0.184

<i>JP7:</i>	I find out nursing care that most helpful to the patients	0.792	0.155
<i>JP8:</i>	I answer patient's question about nursing care correctly	0.764	0.168
<i>JP9:</i>	I use nursing care to solve patient's problem	0.723	0.315
<i>JP10:</i>	I give patients an accurate expectation of nursing care	0.723	0.301
<i>JP11:</i>	I figure out patient's needs	0.643	0.154
<i>Supervisor Support (SS)</i>			
<i>SS1:</i>	My immediate supervisor is willing to listen to my job-related problems	0.242	0.910
<i>SS2:</i>	My immediate supervisor shows a lot of concern for me on my job	0.232	0.915
<i>SS3:</i>	My immediate supervisor can be relied on when things get though on my job	0.296	0.947
<i>SS4:</i>	My immediate supervisor care about my well-being	0.229	0.922

Accordingly, there was 1 deleted loading (bolded in Table 1) the loading was lower than 0.70 (JP11). After deleting this item, all the remaining items that measured a particular construct loaded highly on that construct and loaded lower on the other constructs, thus confirming construct validity. The results of CFA of all constructs after deletion are summarized in Table 2 as follow.

Table 2: Factor Loadings and Reliability Analysis (After Deletion)

Constructs	Items	Loadings	AVE	Cronbach's alpha	Composite Reliability
Job Performance	JP1	0.733	0.579	0.919	0.932
	JP2	0.806			
	JP3	0.729			
	JP4	0.779			
	JP5	0.770			
	JP6	0.819			
	JP7	0.790			
	JP8	0.769			
	JP9	0.705			
	JP10	0.702			
Supervisor Support	SS1	0.911	0.853	0.943	0.959
	SS2	0.912			
	SS3	0.948			
	SS4	0.923			

Reliability of measurement constructs can be seen by looking at the Cronbach's alpha and composite reliability values that should be higher than 0.70 (Hair, Ringle, & Sarstedt, 2011). The values of average variance extracted (AVE), Cronbach's alpha, and composite reliability of constructs in this study was demonstrated in Table 2. It is evident that all

constructs exceeded the recommended value of 0.70. Hence, it indicates that the constructs of this study have strong reliability.

The AVE measures the variance encapsulated by the indicators relative to measurement error and this should be higher than 0.50 to justify the use of the construct (Hair *et al.*, 2011). In table 2, it shows that both job performance and supervisor support have AVE value higher than 0.50 (0.579 and 0.853 respectively). In a nutshell, it indicates that the constructs of this study have strong convergent validity.

Besides reliability analysis, the descriptive analysis also conducted in this study. This study found that job performance has the mean value of 4.40 with the standard deviation 0.510, and the variance of 0.260. In term of supervisor support, it has the mean value of 3.78 with the standard deviation 0.818, and the variance of 0.669. The minimum and the maximum values are reported as 3 and 5 for job performance, as well as 1 and 5 for supervisor support. The following Table 3 summarized the findings of the descriptive statistics of this study.

Table 3: Descriptive Statistics

Variable	N	Minimum	Maximum	Mean	Standard Deviation	Variance
Job Performance	718	3	5	4.40	0.510	0.260
Supervisor Support	718	1	5	3.78	0.818	0.669

After analyzing the outer model, the evaluation of the inner model is conducted. It begins with the evaluation of the level of R^2 values, assessment of effect size (f^2), predictive relevance (Q^2) and the q^2 effect size, and goodness of fit (GoF) of the overall model. The following Table 5 summarized the evaluation of the inner model (structural model).

Table 4: Evaluation of Inner Model

	R^2	Q^2	f^2	Effect Size Rating	GoF
Job Performance	0.305	0.162			$GoF = \sqrt{R^2 \times AVE}$
Supervisor Support			0.004	Very small effect	GoF = 0.364

Table 4 shows that the R^2 value of job performance is 0.305 suggesting that the variance of job performance can be explained by supervisor support as much as 30.5%. In term of effect size (f^2), there was a very small effect of supervisor support on job performance with f^2 value of 0.004. The obtained cross validated redundancy value [predictive relevance (Q^2) and the q^2 effect size] for job performance was found to be 0.162 which implies the adequate predictive capabilities and qualities of the model (Hair

et al., 2011). Last but not least, Table 4 shows that the goodness of fit (GoF) of the overall model is 0.364 which reflect and confirm the fitness of the structural model.

Hypothesis Testing

The significance of the path coefficients and bootstrapping in Smart-PLS is employed in this study in order to test significance of the hypothesis. Bootstrapping is conducted by running the data using 5000 bootstrapped samples which is bigger than the actual sample size of this study, thus meeting the condition suggested by Hair *et al.* (2013). The results of t-statistics, path coefficient (beta or β), and the decision taken for the hypothesis is summarized in the Table 5 as follow.

Table 5: Summary of the Results of Hypothesis Testing

<i>Hypothesis 1</i>					
Relationship	B	Standard error	t-value	P value	Decision
SS → JP	0.052	0.033	1.565	0.118	Not Supported
<i>Notes:</i> t-values > 1.65* (*p < 0.10) (two-tailed test) SS: Supervisor Support JP: Job Performance					

The critical t-values (T-statistics) for a two-tailed test are 1.65 at 0.10 level of significance. This implies that the absolute and significant value of t-value must be 1.65 or higher (Hair *et al.*, 2010). Thus, based on this criterion and the results shown in Table 5, it can be concluded that the relationship between supervisor support is negative and insignificant ($\beta = 0.052$, $t = 1.565$). This indicates that the hypothesis 1 is rejected and not supported.

Discussion, Conclusion, and Recommendation

The hypothesis test of this study shows that the t-value was 1.565, below than the boundary value ($p < 0.10$; two tailed). The hypothesis test also shows that the standard path coefficient was 0.052 which indicated the negative effect of supervisor support on job performance. Hence, the effect of social support on job performance was insignificant and rejected. The finding of this study not being in agreement with social exchange theory and JD-R literatures that stated that job resources (social support, feedback, etc.) are able to enhance various work outcomes of an individual (e.g. job performance, work engagement, etc.) because job resources tend to be motivating (Llorens *et al.*, 2006; Hakanen *et al.*, 2006; Schaufeli & Bakker, 2004). The finding also inconsistent with past studies that found positive relationship between supervisor support and job performance (e.g. Simpson, 2000; Ismail *et al.*, 2010; Ng, 2015; Mansor, Fontaine, & Chong, 2003) that stated that perceived support from supervisors plays a significant role in enhancing individual job performance.

The finding of this study is inconsistent with previous studies possibly due to that nurse perceived supervisors were not the first resource person to get help in regards to jobs. For them, perceived social support from coworkers is more needed in enhancing job performance compared to perceptions of social support from supervisors. Since, supervisors were not always round the clock in the ward for immediate assistance. Besides, the supervisor's leadership style and communication skills may not be suitable for all staff which in turn inhibits effective communication that leads to misunderstanding.

Throughout the study, this study found several limitations. First, this study only focused on nurses in public hospitals, which limits the scope of generalization. Thus, it is suggested that future studies conduct the study in private hospitals, university hospitals, or other industries, as different results might be obtained. Future studies may also involve hospital workforce from other discipline such as doctors, clinical laboratory scientists, medical officers, and so forth. Since this study conducted in Malaysia, future studies may consider the applicability of similar studies in other Southeast Asia countries or beyond. Overall, owing to inconsistent findings mentioned earlier, the relationship between these two constructs need further investigation as the quality of the supervisor-subordinate relationship has crucial impacts on job performance (Kuvaas & Dysvik, 2010; Shanock & Eisenberger, 2006).

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