

**Effective Communication and Job Satisfaction among Staff Nurses Working in Pediatric Intensive Care Units**Manal M. Ibrahim<sup>1</sup>, Sahar M. El-Khedr<sup>2</sup> and Laura J. Nosek<sup>3</sup><sup>1</sup>Department of Nursing Administration, Faculty of Nursing, Menofia University, Umm Al-Qura University<sup>2</sup>Department of Pediatric Nursing, Faculty of Nursing, Tanta University, Umm Al-Qura University &<sup>3</sup>Frances Payne Bolton School of Nursing, Case Western Reserve University, Cleveland/Ohio- USA, Nursing Informatics[mmmoussa66@yahoo.com](mailto:mmmoussa66@yahoo.com)

**Abstract: Background:** Pediatric Intensive care units (PICUs) are recognized as stressful areas for nursing staff. The PICUs nurse is confronted not only by the impending crises of patients and families, but also by the demand for technologic excellence. Nurse working in PICUs assume an ever-increasing responsibility for good communication. Effective Communication is the richness of the art and process of creating and sharing ideas. Effective communication is more crucial, and often more complicated with children, than it is with adult patients. It has been an issues of concern in Job satisfaction. Job satisfaction can be defined a positive affective orientation towards employment. This study **Aimed** to investigate staff nurses' effective communication and its relevance to job satisfaction in PICUs. A descriptive correlational **design** was used. The study was conducted at Menofia University Hospital at Pediatric & Neonatal Intensive Care units. A convenient sample of 87 staff nurses were recruited in the study. Two **instruments** were used for data collection; the first instrument consists of two parts, socio-demographic data and communication satisfaction questionnaire. The second instrument is the Job Satisfaction Scale. **The results** of this study revealed that, Most of the nurses are dissatisfied with their communication within work climate, with children and with their supervisors and co-workers. Significant correlations were observed between the total communication and both supervision and work environment which are subcategories of job satisfaction. It is **recommended** to develop an effective communication program for all nurses especially those working in PICUs.

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**Key words:** Communication satisfaction, Job satisfaction, Pediatric Intensive Care Units, Staff nurse.

**1. Introduction**

Communication is an interchange of information between two or more people. A transmission of feelings or personal and social interaction between people is also exchange through communication. It is a basic component of human relationships especially for nurses.<sup>(1)</sup> In the context of nurse-patient interaction, each perceives the other in the situation and, through communication, sets goals, and agrees on means to achieve these goals.<sup>(2)</sup> However, communication is complex and is often neither linear nor accurate due to varying human responses.<sup>(3)</sup>

Good communication is an art that is so far acquired, developed and improved by experience. However, it can also be taught, and assessed, by means of structured programs. Communication skills training are not easily available to nurses in jobs or practice, Nurses can improve their communication skills with some personal efforts. This will lead to better nurses, patients, & parents' satisfaction and enhance clinical outcomes.<sup>(4)</sup>

The PICUs are recognized as stressful areas for nursing staff. It is a specialized section of a hospital that provides comprehensive & continuous care for children who are critically ill.<sup>(5)</sup> Nurses working in

PICUs assume an ever-increasing responsibility for the management of patient care. In this expanding role, the ICU nurse is confronted not only by the impending crises of patients and families, but also by the demand for technologic excellence.<sup>(6&7)</sup>

Pediatric nurses need not only, the nursing skills to do their jobs but good communication and personal skills as well. They have to deal with pediatric patients who can't effectively communicate about their conditions and may not recognize or express symptoms or pain. Pediatric nurses sometimes have to deal with infants or children who are too young to verbalize effectively what hurts, such as newborn, premature babies and critically ill children. PICU is an intimidating place and even more stressful for children and their families, when children are unable to communicate their needs.<sup>(6)</sup>

The PICU is a unique, unfamiliar and frightening environment. Children often have limited information and a high degree of uncertainty about what they are experiencing. In addition, they may have difficulty processing information because of their condition, medical or nursing interventions and/or medications. Children who are communication vulnerable are at high risk for misunderstanding or misinterpreting their

conditions. Also, if they are unable to speak, their attempts to communicate may be misinterpreted as inappropriate behavior. A clear example of misinterpretation is when a child who is intubated tries to communicate thirst by pointing to his/her mouth, the nurse may interpret this as an attempt at self-extubation and restrains the child's hand.<sup>(9&10)</sup>

Pediatric nurses must have the skills to communicate and read children's behavior for clues such as ear pulling, clutching at the stomach and other ways that children communicate their discomfort. She must have effective ways of communication especially the ability to communicate with children and talk with parents. Listening is an essential part of the communication process. They must have the ability to explain the child's illness and its treatment and establish a relationship with both parents and children. Job satisfaction is influenced by professional and social factors. Communication and interaction with other people are considered the largest source of work enforcement. At least, half of nursing errors happen during the transition of patient responsibility and through ineffective communication.<sup>(8 & 11)</sup>

Job satisfaction is a sign that human expectations are parallel to their job rewards. Often, traditional models discussing job satisfaction focus on the individual's feeling toward his/her job. However, what causes job satisfaction is not the nature of that job but the expectations someone has from it. Job satisfaction is an important organizational factor requiring special attention in health care systems. The factors which increase or decrease job satisfaction in hospitals need to be evaluated.<sup>(12 - 17)</sup>

Nurses' job satisfaction, either directly or indirectly, has a positive correlation with the quality of care and a reverse correlation with job withdrawal. When nurses are dissatisfied with their job, they tend to withdraw from their patients, nursing tasks and conscience. Job satisfaction is directly related to nurses' performance and retention. It is necessary for the nurses to be satisfied with their work and career. Communication has a direct effect on nurses' satisfaction, by communicating effectively with others and providing ways for them to communicate effectively this will be going a long way toward improving organizational performance and job satisfaction.<sup>(18-22)</sup>

Job satisfaction making a better working environment. Also, working on increasing job satisfaction has been shown to correlate to financial success for organizations. Clearly, good communication skills are essential to all employees; therefore the relationship between communication and satisfaction should be a something employers concentrate on more with employees in the workplace. There is a relationship between communication and

satisfaction that needs to be of a greater importance for organizations to achieve a higher success. Effective communication is critical to the provision of quality nursing care. It increases satisfaction with nursing care and improving knowledge and health care skills.<sup>(23&24)</sup>

#### **Aim of the study:**

This study aimed to investigate effective communication and job satisfaction among nurses working in PICUs.

#### **Research questions**

The research question for the present study is:

- Is there a relation between effective communication and job satisfaction among staff nurses working in PICUs?

#### **2. Subjects and methods:**

##### **Study design:**

A descriptive correlational design was used for this study; correlation is a procedure for quantifying the relationship between two or more variables. It measures the strength and indicates the direction of the relationship. (25)

##### **Setting:**

The study was conducted at Menofia University Hospital, Egypt in Pediatrics and Neonatal intensive care units.

##### **Sampling:**

A convenient sample of 87 staff nurses with minimally one year's experience in their current position will be recruited in the study.

##### **Data collection instruments:**

The following instruments were utilized in the present study:

**The first instrument** is composed of two parts; part "1" a questionnaire sheet covering socio-demographic data about staff nurses. Part "2" communication satisfaction developed by **Downs & Hazen (1977)**. **Pincus (1986)** has pointed out that the Downs & Hazen communication satisfaction questionnaire is the most frequently used to measure effective communication. The 40 likert-type communication satisfaction items are scored from one (very dissatisfied) to five (very satisfied). The nurse is considered communication satisfied if the percent score is 60% or more, and dissatisfied if the percent score is less than 60%.<sup>(26,27)</sup> Communication satisfaction scale was classified into three categories. Communication within work climate that include (18) items. Communication with children (8 items), and communication with supervisors and staff (14 items).

**The second instrument** is the Job Satisfaction Scale; this scale is aimed at measuring job satisfaction among staff nurses. It was developed by **Swansburg (1996)** and consists of 30 items categorized under five main factors. Factors are: work itself (6 items), benefit & salary (6 items), promotion (6 items), supervision (6 items) and work environment (6 items). The 30 likert-

type job satisfaction items are scored from one (strongly disagree) to five (strongly agree). The nurse is considered satisfied if the percent score is 60% or more, and dissatisfied if the percent score is less than 60%.<sup>(28)</sup>

#### Data management & Statistical analysis

Data were coded for entry and analysis using SPSS statistical software package version 17. Data will be presented using descriptive statistics in the form of numbers and percentages. Quantitative variables are presented in the form of means and standard deviations. Pearson's r will be used to test correlations between variables. Statistical significance will be considered at p-value  $\leq 0.05$  & at  $\leq 0.01$  levels.

#### Ethical considerations and procedure

Once the permission was granted to proceed with the prepared research from the hospital directors and the subjects of the study. The purpose of the study was explained to them before distributing questionnaire sheets. The two questionnaires will be handed to each staff nurse individually in the meeting room, and then they will be asked to answer it. The set of the study questionnaires will take 30-40 minutes to be completed by the respondents.

#### 3. Results:

As regards in table (1) slightly more than two thirds of the nurses (67.81%) aged from 25 - > 30 years. The mean age is  $25.72 \pm 3.96$ . Fifty eight point sixty two were married. Most of the nurses 86.21% had diploma in nursing. Regarding the years of experience 67.81 % were 5-10 years of experience, with a mean of  $6 \pm 2.82$ . Slightly more than half of the nurses (52.87%) working in PICU and the rest were working in Neonatal Intensive Care Unit (NICU).

Communication satisfaction within work climate was illustrated in table (2). As regards, most of the nurses are dissatisfied with their communication within work climate. Nearly three quarters of the nurses are dissatisfied with staff and general policies (75.8% and 73.5%) respectively. The majority of the nurses (85.1%, 80.5% and 83.9%) are dissatisfied with taxes, financial mode and incentives respectively. Mostly half of the nurses (57.5%) and 56.3%) were dissatisfied with leaflets and flexibility of communication respectively.

Table (3) shows nurses' communication satisfaction with children. As regards, the majority of the nurses are dissatisfied with their communication with children. Eighty two point seven of the nurses are dissatisfied with the investigations, policies and objectives in the area of child health nursing. Dissatisfaction with feedback needed for work improvement is reported by 81.6% of the nurses. Eighty seven point three percent of the nurses were dissatisfied with the level of services in dealing with children's mothers. Dissatisfaction with supervisors

looking for new ideas in children's care and clarity of notes received from other nurses are mentioned by 85.1% and 80.4% respectively.

Communication satisfaction with supervisors and staff nurse was illustrated in table (4). As seen, most of the nurses are dissatisfied in their communication with supervisors. Equal percent of 70.1% of the nurses are dissatisfied with supervisors' attention/ listening and handling existing conflict. Eighty one point six percent of them are not satisfied with supervisors dealing with rumors. Nearly half of the nurses (56.3%, 58.6% and 51.8%) are satisfied with supervisors solving work related problems, communication with co-workers and initiative staff working under their supervision respectively.

Figure (1) shows, the highest percent of nurses (90.8%, 80.5% and 70.11%) was communication dissatisfied with supervisors / staff, children and in work climate respectively. While, 9.2%, 19.5% and 29.89%, of the nurses were satisfied regarding their communication with supervisors / staff, children and in work climate respectively.

Job dissatisfaction was observed in Figure (2). Dissatisfaction in work itself was reported by 70.11% of the nurses. Slightly more than half of the sample (52.9%) was dissatisfied with their benefit/promotion compared to 47.1% who were satisfied. Seventy point eleven of the nurses were dissatisfied with incentives and promotion. Dissatisfaction with supervisors and work environment were reported by 56.3% and 69% of the nurses respectively.

Correlations between effective communication and job satisfaction are demonstrated in Table (5). As regards, there was no correlation between effective communication subcategories and total communication and work itself, benefits/ salary and promotion. Statistical significant correlation is observed between supervision and communication subcategories (communication within work environment, with children and communication with supervisors). Statistical significant correlation also observed between the total communication and both supervision and work environment.

Table (6) shows the correlation between job satisfaction and nurses' age and experience. As regards, there was no statistical significant correlation between job satisfaction subcategories "work itself, benefits& salary, promotions, supervisors and work environment" and total job satisfaction with nurses' age and experience.

Correlation between communication satisfaction and nurses' age and experience are illustrated in table (7). As regards, there is no significant correlation between communication satisfaction subcategories and total communication satisfaction with nurses' age and experience.

**Table (1) Distribution of study nurses according to demographic characteristics (No. =87)**

Demographic characteristics	No	%
<b>Age</b>		
• < 20	12	13.79
• 20- ≤ 25	12	13.79
• 25- ≤ 30	59	67.81
• > 30	4	4.59
Mean ±SD = 25.72 ± 3.96		
<b>Marital Status</b>		
• Single	36	41.37
• Married	51	58.62
<b>Qualification</b>		
• Diploma Nursing	75	86.21
• Technical institute of nursing	6	6.90
• Faculty of nursing	6	6.90
<b>Years of Experience</b>		
• <5	25	28.73
• 5- < 10	59	67.81
• >10	5	3.44
Mean ±SD = 6 ± 2.82		
<b>Work Units</b>		
• PICU	46	52.87
• NICU	41	47.13

**Table (2) Distribution of the study nurses according to communication satisfaction within work climate (No. =87)**

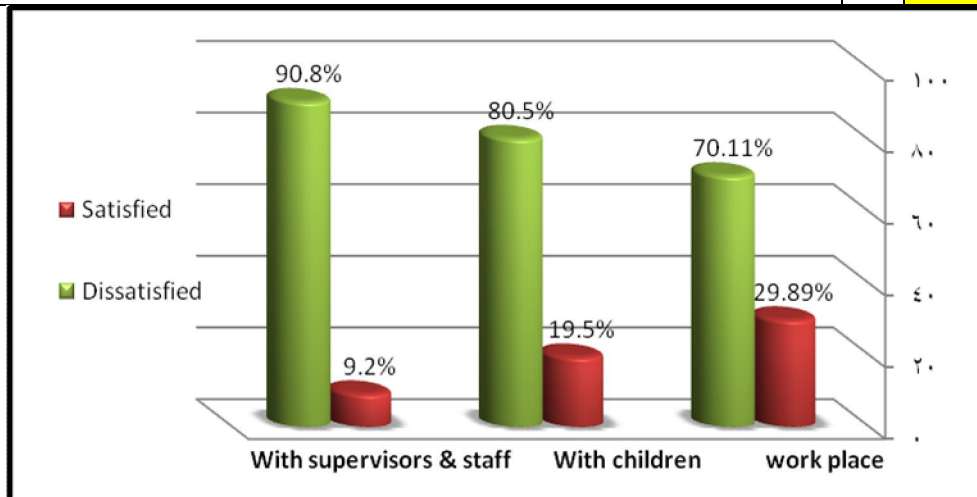
Communication within work climate		Satisfied		Dissatisfied	
		No	%	No	%
1	Progress in work.	35	40.2	52	59.8
2	Staff policies.	21	24.2	66	75.8
3	General policies & objectives.	23	26.5	64	73.5
4	Performance compared to others.	26	29.9	61	70.1
5	Performance evaluation.	37	42.5	50	57.5
6	Estimate my achievements.	22	25.3	65	74.7
7	Taxes & accounts changing.	13	14.9	74	85.1
8	Changing regulations.	25	28.7	62	71.3
9	Financial modes in the hospital.	17	19.5	70	80.5
10	Incentives in the hospital.	14	16.1	73	83.9
11	Feeling of importance in work.	33	37.9	54	62.1
12	Leaflets at workplace.	37	42.5	50	57.5
13	Flexibility of communication.	38	43.7	49	56.3
14	Meeting inside the hospital.	18	20.7	69	79.3
15	General attitudes regarding communication.	24	27.6	63	72.4
16	Accuracy of informal contact.	15	17.2	72	82.8
17	Amount of communication through the hospital.	34	39.1	53	60.9
18	Amount of communication within department.	28	32.2	59	67.8

**Table (3) Percent distribution of the study nurses according to communication satisfaction with children (No. =87)**

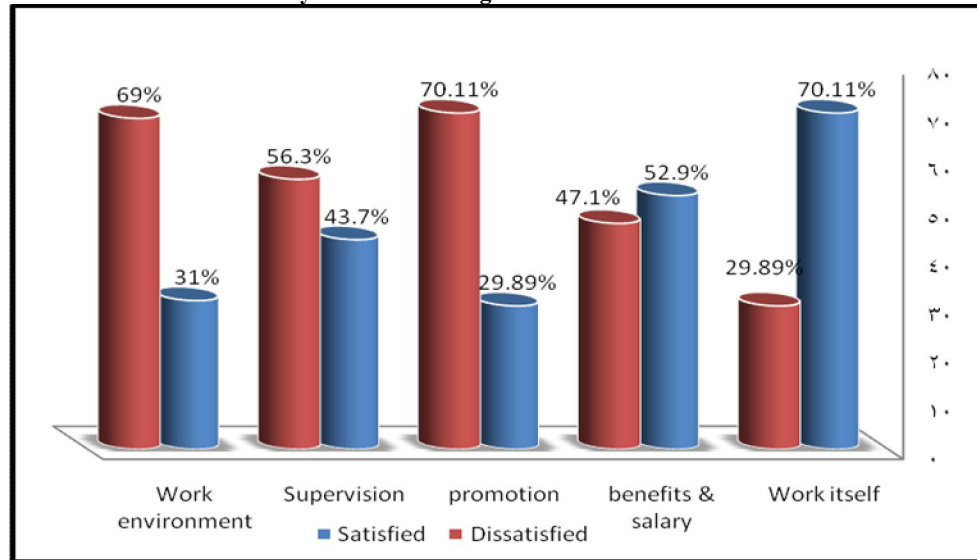
Communication with children Information regarding:		Satisfied		Dissatisfied	
		No	%	No	%
1	Area of investigation, policies and objectives in the field of child health nursing.	15	17.3	72	82.7
2	Expected performance when dealing with children.	18	20.7	69	79.3
3	Feedback needed for practical improvement.	16	18.4	71	81.6
4	Work capability.	33	37.9	54	62.1
5	Level of service in dealing with children's mothers.	11	12.7	76	87.3
6	Time needed to get the information to perform nursing care to sick children.	27	31	60	69
7	Supervisors look for new ideas in children's care.	13	14.9	74	85.1
8	Clarity and brief notes received from other nurses dealing with the same children.	17	19.6	70	80.4

**Table (4) Percent distribution of the study nurses according to communication satisfaction with supervisors and staff (No. =87)**

Communication with supervisors and staff Information regarding:		Satisfied		Dissatisfied	
		No	%	No	%
1	Problems I'm having.	34	9.1	53	60.9
2	Supervisors' attention and listening to me.	26	29.9	61	70.1
3	The ability of the staff to communicate with each other.	31	35.6	56	64.4
4	Supervisors solve work-related problems.	49	56.3	38	43.7
5	Supervisors' confidence on me.	37	42.6	50	57.4
6	Handling of the existing conflicts.	26	29.9	62	70.1
7	Dealing with rumors.	16	18.4	71	81.6
8	Communication with co-workers.	51	58.6	36	41.4
9	Equal ability of other colleagues with me.	27	31.0	60	69.0
10	Supervision I received.	34	39.1	53	60.9
11	The ability of the staff under my supervision to respond and communicate with me.	35	40.3	52	59.7
12	Followers, expectations about my needs of information.	27	31.0	60	69.0
13	Followers' acceptance of evaluation, suggestions & criticism.	36	41.4	51	58.6
14	Initiative subordinate.	45	51.8	42	48.2



**Figure (1) Percent distribution of the study nurses according to communication satisfaction within work climate**



**Figure (2) Percent distribution of the study nurses according to job satisfaction**



**Table (5) Correlation between effective communication and job satisfaction**

Communication Job Satisfaction	Communication within work environment		Communication with children		Communication with supervisors & staff		Total Communication	
	r	p	r	P	r	p	r	p
Work itself	-0.005	0.966	0.146	0.178	0.082	0.449	0.106	0.328
Benefits & salary	-0.005	0.966	0.146	0.178	0.082	0.449	0.106	0.328
Promotion	0.010	0.930	-0.097	0.370	0.110	0.310	0.092	0.395
Supervision	-0.326	0.002**	-0.257	0.016*	0.274	0.010*	0.309	0.004**
Work environment	-0.198	0.066	0.108	0.321	-0.149	0.167	0.505	0.000**
Total Job satisfaction	-0.174	0.106	-0.006	0.958	-0.066	0.541	-0.083	0.445

\*\*Correlation is significant at the  $\leq 0.01$  level.

\*Correlation is significant at the  $\leq 0.05$  level.

**Table (6) Correlation between nurses' job satisfaction and their age and experience.**

Job Satisfaction	Age		Experience	
	r	p	r	p
Work itself	0.030	0.782	0.037	0.735
Benefits & salary	0.030	0.782	0.037	0.735
Promotion	0.083	0.447	0.082	0.448
Supervision	0.161	0.137	0.163	0.131
Work environment	0.097	0.370	0.109	0.316
Total Job Satisfaction	0.125	0.249	0.133	0.220

**Table (7) Correlation between nurses' effective communication and their age and experience.**

Effective communication with:	Age		Experience	
	R	P	r	p
Work environment	-0.060	0.578	-0.073	0.501
Children	-0.124	0.254	-0.143	0.186
Supervisors & staff	0.031	0.775	0.017	0.879
Total	-0.034	0.758	-0.056	0.604

#### 4. Discussion

PICUs are recognized as stressful areas for nursing staff. It is a specialized section of a hospital that provides comprehensive and continuous care for children who are critically ill. Nurse working in pediatric intensive care units assume an ever-increasing responsibility for effective communication.<sup>(5)</sup> Good communication skills are essential to all nurses especially those working with children and their families<sup>(5)</sup>. There is a relationship between effective communication and job satisfaction that needs to be of a greater importance for organizations to achieve a higher success. Job dissatisfaction is reported to be strongly associated with nurse turnover<sup>(29)</sup>, and intent to leave<sup>(30)</sup>. Nurses can improve their communication skills with some

personal efforts. This will lead to better nurses, patients, and parents' satisfaction and enhance job satisfaction.<sup>(4)</sup>

The present study mentioned that, nearly two thirds of the nurses aged from  $25 \leq 30$  years with a mean of  $25.72 \pm 3.96$ . Most of the nurses had diploma in nursing. Slightly more than two thirds of the nurses had were  $5 \leq 10$  years of experience, with a mean of  $6 \pm 2.82$ . These results are concur with the study of **Jie Hu et al., (2004)** who found nurses aged from 25 to 55 years were 69%. Fifty-six percent had worked in a hospital for more than 10 years. The education of participants included secondary nursing education (70%).<sup>(31)</sup>

The findings of this study revealed that, Most of the nurses are dissatisfied with their communication

within work climate. Nearly three quarters of the nurses are dissatisfied with staff communication and general policies. The majority of the nurses are dissatisfied with taxes, financial mode and incentives respectively. Mostly half of the nurses were dissatisfied with leaflets and flexibility of communication. These results are supported by the findings of **Ehlers (2003)** who demonstrates the importance of effective communication in the workplace in relation to being a more satisfied employee.<sup>(32)</sup>

The majority of the nurses in the present study are dissatisfied with their communication with children. Most of the nurses are dissatisfied with feedback needed for work improvement. Nurses were dissatisfied with the level of services in dealing with children's mothers. Dissatisfaction with Supervisors looking for new ideas in children's care and clarity of notes received from other nurses. Nearly half of the nurses are satisfied with supervisors solving work related problems, communication with other staff at the same level and initiative staff working under their supervision. **Cavalheiro et al (2008)** investigated the factors related to nurses stress in intensive care units, they found that the constant demands from superiors and the highly-demanding routines, were the most interpersonal factors related to stress.<sup>(33)</sup>

The findings of this study inconsistent with the findings of **Nordin et al., (2011)** who found a moderately high satisfaction with the supervisory communication and subordinate communication. The employees exhibit high satisfaction with their willingness to send good information upward and to their superiors. The results also indicate that the employees are comfortable to communicate their problems to their superiors.<sup>(34)</sup>

The differences in the findings may occur because Pediatric Intensive Care Units are intimidating place and even more stressful for children and their families when children are unable to communicate their needs. Also, the nature of this PICUs environment that is stressful for nurses. Nurses working in the intensive care units perceived death or expecting death situation. Nurses, uncertainty about treatment, conflict with other nurses, and work load all of these factors affect negatively the communication satisfaction.

This study has revealed that, most of the nurses had job dissatisfaction. This dissatisfaction occurs in all Job satisfaction categories including work itself, benefits / salary, incentives /promotion, supervisors and work environment. These results are congruent with the study of **Ibrahim et al., (2005)** who reported that, the reasons for burnout are dissatisfaction with salary and unsatisfactory communication with supervisors.<sup>(35)</sup> This also, concur

with the study of **Kalisch et al., (2010)** who reported that ICU staff are less satisfied with their occupation than medical/surgical staff members.<sup>(36)</sup>

Nurses' job dissatisfaction in this study may be due to lack of autonomy, poor communication and the nature of the PICU that is stressful for the nurses. This finding is supported by an early and well-known theory (The Job Design Theory) **Kalisch (2010) & Hackman et al., (1975)** This theory suggests that jobs that involve higher autonomy, task significance, task identity and skill variety results in higher levels of satisfaction.<sup>(36&37)</sup>

The present study has illustrated that, statistical significant correlation is observed between supervision and communication subcategories (communication within work climate, with children and communication with supervisors). Statistical significant correlation also observed between the total communication satisfaction and both supervision and work environment. These findings are congruent with the study of **Gray (2004)** who reported that communication satisfaction as a socio-emotional outcome resulting from communication interactions. Communication that provides information and clarifies work tasks and roles may contribute to employee communication satisfaction. Employees seek communication interactions with coworkers and superiors to satisfy interpersonal needs of pleasure and inclusion. When employee needs are met through satisfying communication, employees may be more likely to build effective work relationships.<sup>(38)</sup>

The findings of **Koning et al., (2007)** also support the findings of the present study. He reported that communication satisfaction has also been shown to influence employees' level of satisfaction, commitment and work motivation.<sup>(39)</sup> The study of **Ehlers (2003)** indicated a positive relationship between co-worker communication satisfaction and job satisfaction, since co-workers have to communicate so often.<sup>(32)</sup> Supporting results also found in **Ernst et al. (2004)** study that reported job satisfaction was derived from satisfaction with relationships among nurses.<sup>(40)</sup>

The correlation between communication satisfaction and both supervision and work environment in the present study may be due to the nature of this PICUs environment, meant that those nurses often worked in this climate are vulnerable to stress more than other nurses. Critical cases, unexpected deteriorations and family are stressors that may affect both communication and job satisfaction together. Staff nurses received a lot of criticism from the senior staff. Furthermore, the nurses felt that the work environment of the PICUs was poor and dissatisfaction was obtained from seeing those

pediatric patients critically ill and need intensive nursing care that is more stressful for nurses.

### Conclusion

The research conducted in this study illustrates the importance of effective communication in dealing with pediatric patients and the correlation between effective communication and job satisfaction. Since the majority of the staff nurses work for over half of their life, trying to improve both communication and job satisfaction. Working should not be perceived as being a negative environment. If communication is satisfying, it will lead to the higher job satisfaction of the nurses. There is no effective communication and no job satisfaction among staff nurses working in PICUs.

### Recommendations

1. Effective communication program especially in intensive care units must be designed for all nurses.
2. Continuing education through attending conference and training courses to nursing staff for teamwork collaboration to enhance communication skills within work.
3. Further researches are needed to study the effect of team building on communication, job satisfaction of nursing staff and nurses' autonomy.

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