

Identifying Gaps in Organizational Factors and the Citizenship Behavior of Nurses In-charge and Mediating the Impact of Management Competency

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ABSTRACT

The healthcare sector experiences abrupt changes, complexity, volatility, and turmoil. Nursing services are a crucial element not separate from these changing worldwide needs. This desk study aims to excavate current research gaps in Organizational Factors and the Citizenship Behavior of Nurses In-charge and Mediating Impact of their Management Competency for future systematic empirical investigations. Of 162 articles from the Scopus database were reviewed systematically. VOS viewer bibliographic analysis of 162 records was used to map the study field and identify various significances in the literature. Accordingly, the researchers could identify seven research gaps relating to the constructs; very little research has been done on the effect of organizational factors on citizenship behavior (empirical gap), scarcity of research on management competencies, burnout, work environment, interpersonal relationships, and perceived organizational support on the citizenship behavior(knowledge gap), very few researchers were used mixed methodology, and rarely studies were found on samples of nurses in-charge(methodological gaps), studies into the management competencies of nurses in-charge have been found insignificant in the Asian context and Sri Lanka(practice gaps).Finding research that combines two or three theories to explain in one research model (theoretical gaps) was difficult. Hence, these gaps will help researchers with further studies. Further, nursing discipline will be benefitted the bridging them in the future.

Keywords: Citizenship Behavior, Management Competencies, Organizational Factors, Research Gaps, Sri Lanka

BACKGROUND OF THE STUDY

In health administration, nursing administration is significant. Nurses are the front level and first level, middle level, top level, and nurse executive are different nursing management levels in hospitals. In the medical service sector of public hospitals, there are first-line Nurse Managers (NMs), called Ward Sisters, Ward Managers or Grade I Nursing officers (Sri Lanka Nursing Service Minute, 2013). They thereby oversee the hospital wards or units on a micro level. The job description for a ward manager outlines many jobs and duties. Ward Managers are expected to mentor and appraise performance, staff orientation and welfare management, conduct training programs, collaborate with doctors, patients, and families, and monitor and improve patient care. Ward Managers also represent nurses and are expected to talk to the middle and top management on behalf of the nurses they lead. A Nurse Manager is a registered nurse who manages one or more defined areas within nursing services (American Nurses Association, 2016). Nurse in-charge is professional nurses who are asked to assume frontline leadership roles (Sherman, Schwarzkopf, & Kiger, 2011).

There is a massive shortage of ward managers in Sri Lankan government hospitals for a variety of reasons. As a result, the majority of senior nurses are appointed to this position to perform the ward manager

function known as “Nurses in-charge.” Hence, nurses in-charge are another category of nurses in the Sri Lankan nursing workforce but perform unit-level management. They are more senior with nursing experience and are charged by the hospital administration with running the units and wards. In some countries, the designation has been used interchangeably in the literature as Assisting Nurse Managers (Wiggins, 2018), Nurse Unit Managers (Robinson, Annis, Forman, Krein, Yankey, Duffy, Taylor, & Sales, 2016), Deputy Nurse Managers, Charge nurses (Sherman et al., 2011), and Level 2 nurses (Townsend, Wilkinson, Bamber, & Allan, 2012). Therefore, the nurses in-charge also have vital responsibilities for managing units and filling the ward managers’ positions at nursing management levels because they are the links between middle management levels and staff nurses. Organizations have many differences regarding the nurse manager/ward sister position transition. Nurse Managers are frequently hired without the necessary experience and are expected to learn on the job (Warshawsky, Caramanica, & Cramer, 2020).

The healthcare sector experiences abrupt changes, complexity, volatility, and turmoil. Understanding the essence of the Management Competency of Nurse Managers, and Organizational Factors affecting the Citizenship Behavior (CB) of nurse managers is a major concern in the nursing practice. Nursing services are a crucial element not separate from these changing worldwide needs. The nursing sector must therefore undergo reform and innovation to remain competitive. According to this perspective, the nursing profession needs to change and review its methods to improve the caliber of nursing care. Teamwork is the key to providing healthcare, and the nursing staff is vital to this team. Whether a person is unwell or not, and wherever they are located, nursing encompasses providing autonomous and collaborative care to people of all ages, families, groups, and communities (World Health Organization, 2015).

Thus, it has been determined that the function of NMs is crucial in delivering effective, efficient care in the patient care delivery context (Chase, 2010; McSherry, Pearce, Grimwood, & Mcsherry, 2012). Hence, nursing management and all kinds of NMs are vital for positive outcomes in healthcare organizations. Nurses in-charge or assisting nurse managers are one of the nurse manager categories which contribute tremendous service. Though their unit management competencies are important for the success of hospital units, rare studies could be found related to this category (Wiggins, 2018). On the other hand, the CB of nurses is a much more important concept because, if nurses are doing the job beyond their job description, the health organizations can deliver quality service. CB is an effort to demonstrate voluntary effort and extra-role behavior beyond the standards and job descriptions set for the individual in the working environment (Organ, 1983). Nurses in-charge are also in management positions in the nursing discipline and their CB affects the successful management of the hospital units.

Though there are different factors affecting the CB of nurses and nurse managers (Chang, 2014; Cavus & Develi, 2017; Huang, You, & Tsai, M.-T, 2012), it is difficult to find what organizational factors are affecting on CB of nurses in-charge. Therefore, identifying mostly affecting organizational factors on the CB of nurses in-charge and discussing the impact of their CB is much more important. Though some countries prepare these people for this management position, some countries do not. Hence, there may be a problem with whether they have proper management competencies or any impact of it on the relationship between organizational factors and CB. Therefore, the management competencies, organizational factors, and the CB of nurses in-charge are concepts that scholars have supposed to further study in different aspects. Hence, this study plans to identify the gaps related to the reviewed literature. Hence, this paper endeavors to address the gaps in the areas of management competencies of nurses in-charge, organizational factors, and CB.

Gunawan, Aunguroch, and Fisher (2017) have identified 18 factors under three categories; organizational factors, characteristics and personality traits, and role factors. Organizational factors were defined by these scholars as variables within the organization that could potentially influence the nurse manager’s leadership

or managerial competence. Perceived organizational support and employee development influence citizenship behavior (Jehanzeb, 2020), and burnout, and job satisfaction, affect citizenship behavior (Sesen, Cetin, & Basim, 2011). Nurse Managers can foster a sense of support and dedication among their team members by praising their efforts, and showing concern for their welfare. In addition, providing training that advances employees' professional competencies is also a must requirement (Battistelli, Galletta, Vandenberghe, & Odoardi, 2016). Though there are different factors affecting the CB of nurses and nurse managers (Chang, 2014; Cavus & Develi, 2017; Huang, et al., 2012), it is difficult to find what organizational factors are affecting on CB of nurses in-charge. Furthermore, scholars have recommended conducting further studies to find the relationships and interrelationships between identified organizational factors with nurses' consequences (Gunawan, et al., 2017).

Managerial competence is 'the application of knowledge, attitudes, and skills of first-line nurse managers in specific management functions which are observed and measured as a behavior' (Gunawan et al., 2017). Today's healthcare organizations heavily rely on nursing management, thus, a thorough discussion about nurse managers' leadership and management skills is necessary. Head nurses in hospitals are expected to do administrative duties delegated to them as part of their management responsibilities in addition to their clinical practices. They should be prepared with the necessary skills to complete the assignment successfully (Moghaddam, Jame, Rafiei, Sarem, Ghamchili, & Shafii, 2019).

Using the two prior models as a foundation, Miles (2017) suggested a new model with seven core research gaps that are now known as 1) Evidence gap, 2) Knowledge Gap, 3) Practical-Knowledge Conflict gap, 4) Methodological gap, 5) Empirical gap, 6) Theoretical gap and 7) Population gap (Miles, 2017). In the current study, the researcher identified a few major gaps in the prior research and literature based on the Scopus and Google Scholar databases from 2011-2022 and they can be categorized as Empirical (gap 1) (Iddagoda & Opatha, 2016), knowledge gap (gap 2), methodological gaps (gap 3, gap 4), practice gaps (gap 5, gap 6), and theoretical gap (gap 7) (Iddagoda & Opatha, 2016). The section below describes each briefly.

METHODOLOGY

Research Design

Desk research study has contributed to conducting this study. The overall purpose of this paper is to excavate current research gaps in Organizational Factors and the Citizenship Behavior of Nurses In-charge and Mediating Impact of their Management Competency for future systematic empirical investigations. Seven gaps in the selected constructs have been identified through a desk research study.

Sampling Technique

The databases such as Sage, Taylor and Francis Online, Springer, Elsevier, JSTOR, Wiley Online Library, Academia Edu., PubMed, and Emerald were used when searching articles to collect the data. Researchers took a range of published studies from 2011 to 2022 May for the desk research study. Similarly, some semantic articles were studied in detail. The Zotero reference management system was used to automatically collect the following metadata: article title, abstract, author names and affiliations, journal name, year of publication, volumes, issues, and pages; DOI; additional citations; data analysis tool and method; repositories; databases; keywords; country and city; research method; and unit of analysis. All journal articles were added to this system. Records that were found were then exported to an MS Excel file for additional research. The analysis yielded the following results as outcomes and helped to find the different existing research gaps.

These 162 articles were selected by a systematic literature review and used for the quantitative bibliometric analysis to map the study field and identify various significant trends in the literature. Empirical research

published in “English” in “Journals” was the inclusion criteria for screening the articles. The full articles of potentially useful studies need to be obtained (Kitchenham, 2007). The eligibility assessments were done manually by the authors. It requires assessing methodological quality by setting a minimum acceptable level (Meline, 2006). Therefore, articles that meet the minimum acceptable level are included, while those that do not meet the minimum acceptable level are excluded (Meline, 2006). Accordingly, the minimum acceptable level was “the empirical studies that published in the English language employed related to the constructs.”

Visualizations that display networks between researchers, organizations, years of publications, continents, and countries can be displayed using the VOS viewer program. Additionally, it can be used to investigate a growing number of papers, keywords, research collaborations, and popular study themes (Priyashantha, Dahanayake, & Maduwanthi, 2022a). VOS viewer software version 1.6.18 has been used to implement analytical units and documents. The next step is to use keywords related to organizational factors, organizational citizenship behavior, and management competencies to search for and locate pertinent articles from international researchers worldwide in the Scopus database. This yielded 162 academic documents published between 2011 and 2022 May (Priyashantha, De Alwis, & Welmilla, 2022b).

RESULTS

The previous research has focused primarily on the transformational leadership (Podsakoff, Mac Kenzie, Moorman, & Fetter, 1990), workplace spirituality (Jannah & Santoso, 2017), ethical work climate, and CB (Altuntas, Seren Intepeler, Sokmen, Kantek, Ozturk, & Baykal, 2021), perceived organizational support, and employee development influence (Jehanzeb, 2020), burnout, and job satisfaction (Sesen et al., 2011). Further, scholars have recommended further research on organizational factors, and management competencies of nurse managers, to make the result more general by encompassing the dimensions of CB in the research design (Gunawan et al., 2018). Fewer studies were found related to perceived organizational support and CB, and work environment and CB (Chang, 2014; Mathumbu & Dodd, 2013). Moreover, several research examined the relationships among several constructs such as burnout and CB (Sesen et al., 2011), and work environment and CB (Altuntas et al., 2021; Gunawan et al., 2020). Most existing studies were quantitative (69.13%) and second qualitative (11.73%). Predominantly, the samples of many studies were found to be nurses and nurse managers while fewer samples were found of nurses in-charge as nurse managers. According to the existing facts, the following gaps were identified.

Empirical Gap

Existing scholars have recommended further research on organizational factors, and management competencies of nurse managers, to make the result more general by encompassing the dimensions of CB in the research design (Gunawan et al., 2018). As per Figure 1, the researchers also understood that there are fewer published studies on the relationships between organizational factors and CB and the mediating effect of management competencies of nurses in-charge. Furthermore, there is a lack of rigorous research in the prior literature. Very little research has been done on the effect of organizational factors on CB with the mediating effect of unit management competencies of the nurses in-charge to properly evaluate the problem. Therefore, an investigation of these issues is important in the Sri Lankan context. Because Sri Lankan nurses in-charges are providing great service for the unit management of hospitals but less empirical evidence is present. Hence, an Empirical Gap there.

Gap 1: There is less empirical evidence on the organizational factors affecting citizenship behavior with the mediating effect of management competencies of nurses in-charge in the Asian context.



Fig. 1 The world map of publications

Source: Author developed, 2022

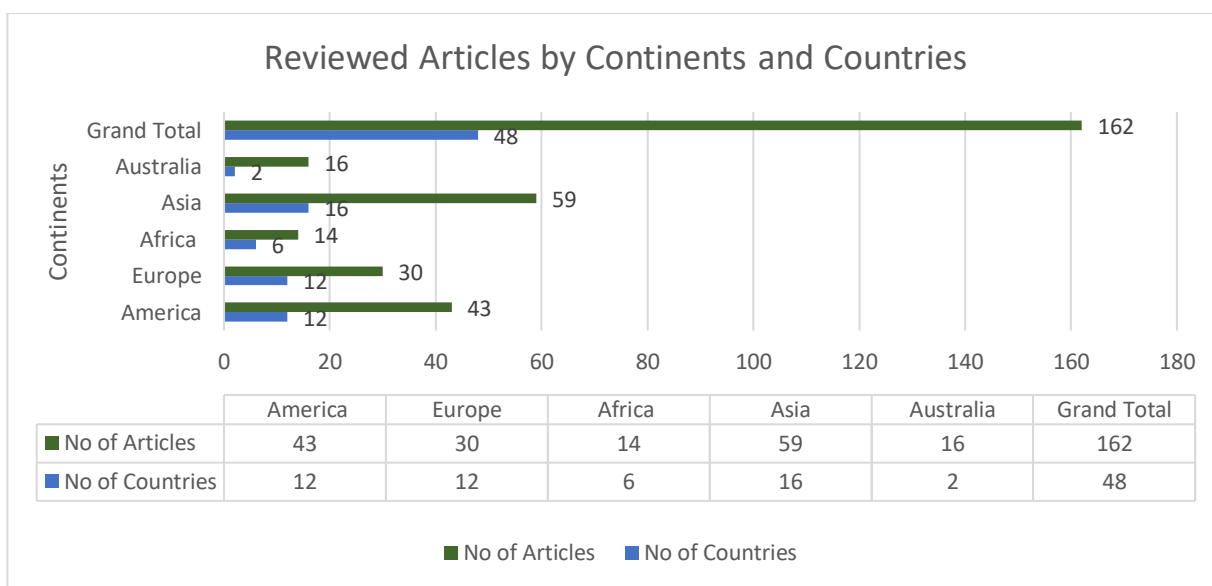


Fig. 2 The reviewed articles by continents with several countries

Source: Author developed, 2022

As per Figure 2, many articles were from the Asian continent, with 56 papers (35.41%). The American continent is the second highest contributor, with 43 articles (26.54%). The Europe continent has 30 papers and is 18.52 percent of the world. The Australian continent has published 16 papers (9.88%). The African content has published 14 papers (8.64%). Indonesia, Iran, and China have published most articles in the Asian context, and India also has contributed four articles. However, no studies from Sri Lanka relating to the mentioned area were found. Figure 2 depicts the graphical presentation of this finding. In addition, scholars have recommended further research on the constructs (Admi & Eilon-Moshe, 2016; Gunawan et al., 2018; Shen, Xu, Staples, & Bolstad, 2014).

Knowledge Gap

The prior research did not address the subject of nurses’ in-charge competency and their influence on the relationship between organizational factors and CB, as well as organizational factors and unit management competency of nurses in-charge. But fewer studies were found related to perceived organizational support and CB, and work environment and CB (Chang, 2014; Mathumbu & Dodd, 2013). As well as, it was difficult to find the relationship between unit management competencies and the CB, especially, relating to the nurses in-charge. The literature review indicated that only a few dimensions of management competencies of nurse managers were examined (e.g., ethical leadership, ethical climate, and CB)

(Aloustani et al., 2020).

Therefore, some of these unexplored aspects of variables in the prior research appear to be important and worthy of investigation in the context of Sri Lanka. Thus, based on the literature review, the knowledge gap is a common weakness in earlier studies. There are two contexts in which a knowledge void might exist. First, theories and literature from related research fields may not reflect knowledge in the field itself. Second, it's possible that the outcome of a study doesn't match expectations (Muller-Bloch & Kranz, 2014). Thus, the results of the literature review indicated that scares of published studies on the relationship between work environment and nurses in-charge CB, interpersonal relationships, nurses' in-charge CB, as well as the overall management competencies of nurses, in-charge and CB. Not only that, there is little research about the link between the overall management competencies of nurses in-charge and different dimensions of CB. Moreover, there are fewer published studies about the mediating effect of management competencies of nurses in-charge. Hence, the knowledge gap can be identified clearly.

Gap 2: Scarcity of research on the impact of management competencies, burnout, work environment, interpersonal relationships, and perceived organizational support on the CB of nurses in-charge.

Methodological Gaps

According to the review of methodologies (figure 3), the majority of articles are quantitative, and fewer the mixed methodology approaches. Among the reviewed articles 69.13% of quantitative studies (Altunta et al., 2021; Jannah & Santoso, 2017; Jehanzeb, 2020; Moreland et al., 2015) are significant and 11.73% are qualitative studies (Clement & Bigby, 2012; Johansen et al., 2021). The mixed methodology followed 2.47% (Liou, Liaw, Chang, Kao, & Feng, 2021; Townsend, Wilkinson, Bamber, & Allan, 2012) and the rest of the articles were literature reviews (2.47%), integrative reviews (1.23%), critical reviews (1.23%), concept analyses (0.62%), and systematic literature reviews (3.08%). The following figure 1.6 depicts this analysis. Therefore, it serves as proof of a methodological gap. Hence, in this study, the researcher seeks to provide a new inquiry into the nurses' in-charge management practices in the Sri Lankan nursing field by addressing the gaps in the literature (Miles, 2017). This presents a methodological gap (Gap 3).

Gap 3: Many scholars adopted quantitative methodology, and very few researchers used a mixed methodology in carrying out their studies.

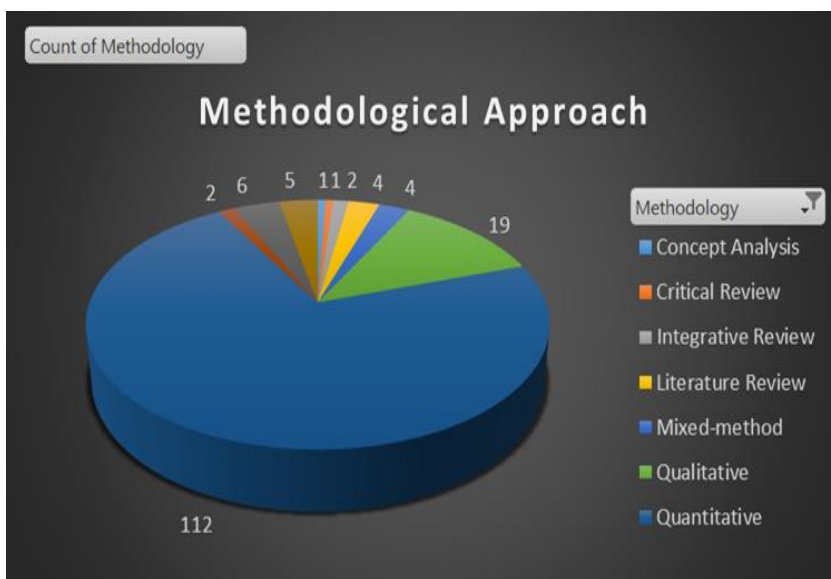


Fig. 3 The methodological approaches of reviewed articles

Source: Author developed, 2022

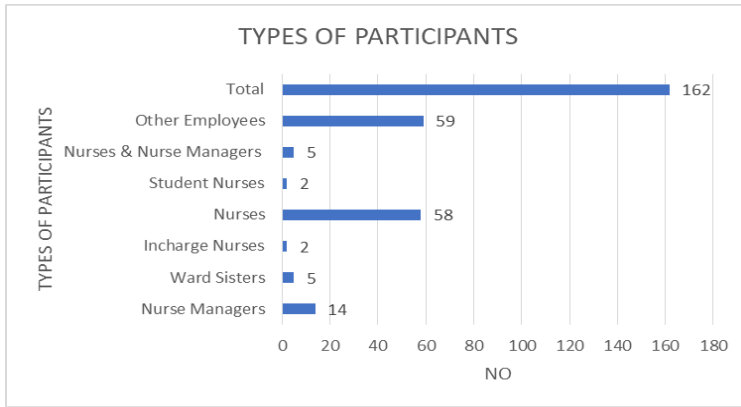


Fig. 4 The participants of the reviewed articles

Source: Author developed, 2022

Most nursing competency literature and research have focused on the roles, competencies, and impact of nurse managers, nurse executives, and patients. Most studies have collected data from nurses (Aghamohammadi-Kalkhoran, Karimollahi, & Abdi, 2011; Al?Faouri, Obaidat, & AbuAlRub, 2021; Alharbi, Wilson, Woods, & Usher, 2016; Torlak, Kuzey, Sait Dinc, & Budur, 2021) and nurse managers (Chen et al., 2021; Chisengantambu, Christine, Guy, & Evans, 2018; Fowler, Robbins, & Lucero, 2021; Labrague, Lorica, Nwafor, & Cummings, 2021; Liou et al., 2021; Setiawan et al., 2021), both nurses and nurse managers (Fowler et al., 2021; Johansen et al., 2021; Lehtonen, Roos, Kantanen, & Soutine, 2018) and nursing directors (Coladonato & Manning, 2017; Kantanen, Kaunonen, Helminen, & Suominen, 2017). However, fewer articles have been written about nurses in-charge (Townsend et al., 2012; Wiggins, 2018). In addition, it was difficult to find studies from the local context. Therefore, this study helps to fill another gap related to the population of the study (Miles, 2017). In addition, figure 4 also clearly depicted fewer samples from the nurses in-charge population when compared to other categories. Hence, this gap can be described as a methodological gap.

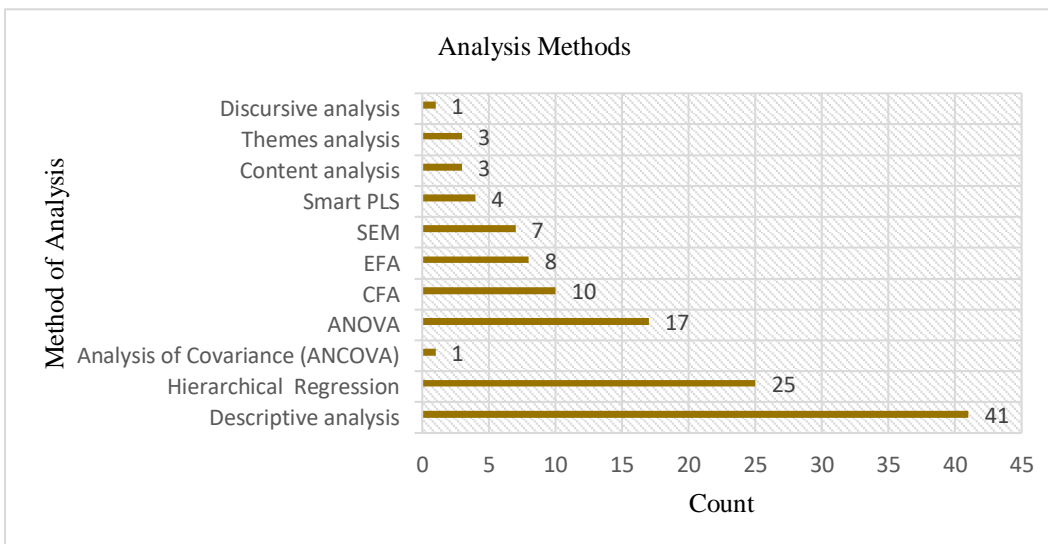


Fig. 5 Data analytical methods of reviewed articles

Source: Author developed, 2022

When examining the data analysis tools majority used regression analysis (25 studies), ANOVA(17 studies), CFA (10 studies), and EFA (8 studies) while the trend of analyzing with Covariance Based Structural Equation Model (CB-SEM) and Smart Partial Least Square (4 studies) methods was found fewer in the quantitative studies. The thematic analysis and content analysis were similarly found in the qualitative studies. Therefore, there is a gap in analytical methods in the reviewed quantitative articles. Figure 5

describes it. Additionally, the study settings of most reviewed literature were teaching hospitals, universities, banks, government, and private hospitals, nursing homes, etc (Daniel & Purwanti, 2015; Rivazet al., 2021) but fewer articles were found from mixed types of hospitals. These factors also further support methodological gaps.

Gap 4: Rarely studies were found on samples of nurses in-charge, data analysis tools, and mixed types of hospitals.

Practice Gaps

Though, the majority of studies have done unit management competencies of ward managers and nurse managers, the studies into the management competencies of nurses in-charge have been found insignificant and both the Asian context and Sri Lanka also (Clement & Bigby, 2012;Gangani, McLean, & Braden, 2006; Gunawan et al., 2020; Gunawan et al., 2022; Kantanen et al., 2017;Karathanasi, Prezerakos, Maria, Siskou, & Kaitelidou, 2014; Lehtonen et al., 2018; Labrague et al., 2021; Liou et al., 2021; Lusiyana, Handiyani, & Pujasari, 2021; Miltner, Jukkala, Dawson, & Patrician, 2015; Sherman, Schwarzkopf, & Kiger, 2011;Setiawan et al., 2021; Warshawsky & Cramer, 2019). Then, there are gaps related to practice.

Gap 5: The majority of publications in other countries have investigated the unit management competencies of ward managers and nurse managers.

Gap 6:Throughout the past decades in the Sri Lankan nursing field, nurses in-charge have played a significant role in filling the shortage of ward managers but there are no studies found on the management competencies of nurses in-charge.

Therefore, based on the studies included in this audit, there are still unanswered questions. This kind of disagreement often serves as an inspiration for fresh research in the field. A practical-knowledge conflict results when a professional behaves differently than what they advocate. In this situation, studies could aim to determine the conflict's extent and uncover its causes (Muller-Bloch & Kranz, 2014).

Theoretical Gap

As well as, fewer studies were found related to explaining the combination of those theories in a single study (Battistelli et al., 2016; Gunawan et al., 2022;Jannah & Santoso, 2017;Warshawsky & Cramer, 2019). For example, organizational support has been described with the help of Organizational Support Theory (Eisenberger, Huntington, & Hutchison, 1986), and organizational citizenship behavior has been examined using Social Exchange Theory (Blau, 1964). Further, several theories and their relationships between organizational factors and CB, and some dimensions of management competencies and CB have been examined (Aghamohammadi-Kalkhoran et al., 2011; Battistelli et al., 2016; Moreland et al., 2015; Parr et al., 2021; Torlak et al., 2021; Warshawsky & Cramer, 2019).

Benner's theory of competency (1985) helps to explain the competencies of nurses and nurse managers' competencies. Even though Benner examined nurses in the 1980s, today's nurses work in a more complex healthcare setting, which could delay their development into competent professionals. The practice of nurse managers' competencies can be developed using Benner's approach. This theory has been used to explain the management competencies of nurses (Warshawsky & Cramer, 2019). Following figure 6 shows the reviewed theories in the published articles.

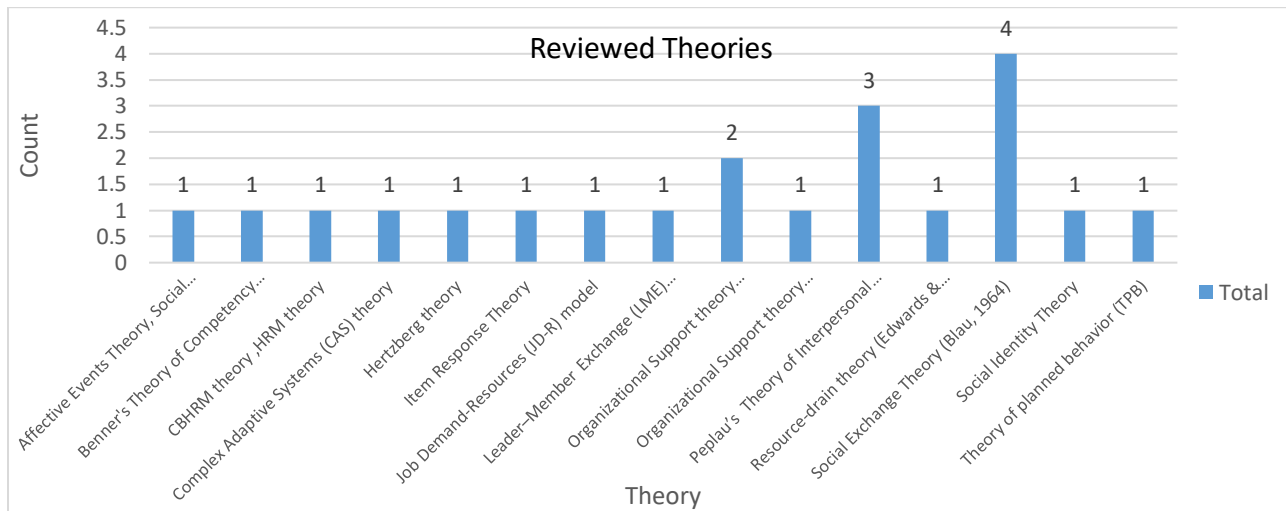


Fig. 6 The reviewed theories in published articles

Source: Author developed, 2022

Few studies have used organizational support theory to describe the constructs (Battistelli et al., 2016; Eisenberger et al., 1986; Kim, Eisenberger, & Baik, 2016) and social exchange theory (Chang, 2014; Parr et al., 2021; Rose, 2012). But it is difficult to find a theory to explain the three constructs. Moreover, it was difficult to find research that combines these two theories or three of these theories to explain in one research model. Hence, it is observed that there is a significant theoretical gap (gap 7) that may bridge by conducting studies. Figure 7 makes it quite clear.

Gap 7: The researcher identified a few theories which scholars have used to explain the relationship between the constructs.

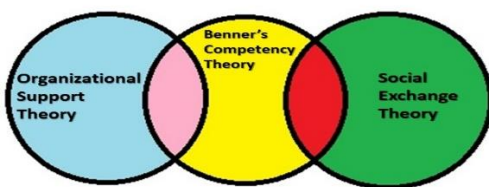


Fig. 7 Theoretical gap identification

Source: Author developed, 2022

CONCLUSION

In this manuscript, the researchers addressed the nurses in-charge population, and the mediating effect of their management competencies, on the organizational factors and CB. All kinds of nurse managers are exemplary role models for nurses, and their CB brings positive outcomes to nurses and hospitals. The quantitative bibliometric analysis was done for 162 articles which were selected systematically from the recommended databases to identify gaps. VOS viewer has been used to implement analytical units and documents. As per the analysis, it was difficult to find studies from Sri Lanka relating to the mentioned area. Scholars have recommended further research on the constructs. In addition, there are fewer published studies on the relationships between organizational factors and CB and the mediating effect of unit management competencies of nurses in-charge. Hence, there found an empirical gap.

Moreover, there are no published studies about the mediating effect of management competencies of nurses in-charge but fewer studies were found related to perceived organizational support, work environment, and

management competencies with CB, especially, relating to the nurses in-charge. The literature review examined only a few dimensions of management competencies of nurse managers (e.g., ethical leadership, ethical climate, and CB). Therefore, there is a knowledge gap relating to these constructs.

Few methodological gaps were identified; fewer mixed-method studies, fewer used analytical tools of CB-SEM and Smart Partial Least Square, fewer studies found nurses in-charge as participants and mixed types of hospitals used for research settings. The studies into the management competencies of nurses in-charge have been found insignificant and both the Asian and local contexts also revealed practice gaps.

Then, it was difficult to find a theory to explain the three constructs in one model. Moreover, it was difficult to find research that combines two or three of these theories to explain a research model. Hence, researchers can be combined two, three, or more theories to explain the relationships among or between the constructs. Or else, researchers can build a theory. Therefore, it is observed that there is a significant theoretical gap that may bridge the constructs. Finally, this article revealed the existing seven research gaps in the related areas of literature and is directing further studies. Different new studies can be implemented to fill these gaps systematically.

IMPLICATION AND FUTURE RESEARCH SUGGESTION

The findings of the study are highly beneficial to the nursing service due to the identified gaps are the most important research aspects. The empirical gap can be filled by conducting studies on the relationships between selected organizational factors and CB and the mediating effect of unit management competencies of nurses in-charge. Since there are no published articles about the mediating effect of management competencies of nurses in-charge and still there are fewer studies found related to perceived organizational support, work environment, and management competencies with CB of nurses in-charge, nurse researchers have more room to initiate studies.

The mixed-method studies can be conducted to disclose the real situation faced by nurses in-charge. To gain a better understanding of the nurses' in-charge overall performance when conducting roles of the ward manager/first-line nurse manager, middle and top-level nurse managers can be participated as immediate supervisors to assess their competencies and CB. These findings will be necessary for nurse executives for initiating training and development programs to enhance nurses' in-charge skills and provide practical ways to increase their productivity. Further, it helps to identify and confirm the associated organizational factors with their competencies and how those factors affect CB. As the Asian context also revealed practice gaps, there is more room for new studies. In addition, addressing the theoretical gap is crucial.

Significantly, NMs working at all types of hospitals get insights into the significance of the function of nurses in-charge as a link to unit management functions at the first management level. To enhance the nurse psychologically secure environments for nurses in-charge. Furthermore, to manage role transition and onboarding of nurses in-charge, nurse executives must take the initiative to adjust organizational policies and procedures. Nurse executives may also consider building both public and private hospital administration gets benefits by having an idea regarding what factors affect nurses CB of in-charge and the competencies needed to develop when recruiting for managerial positions.

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