The Relation between Organizational Learning Culture and Goal Orientation among Staff Nurses

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Abstract

Background: Positive Organizational learning culture can help the staff nurses to improve their existing skills and knowledge and provide opportunities for them to discover better ways of working together in order to become self-directed, independent, and active learner, evidence of staff nurses achievement goals can provide guidelines on how learning settings need to modification so that learning can be adjusted. Aim: This study aimed to assess the relation between organizational learning culture and goal orientation among staff nurses. Design: Descriptive correlational research design was used. Setting: The study conducted in the Medical and Surgical departments at Benha University Hospital. Subjects: Convenient sample of all available staff nurses who are working in the above-mentioned study setting (n=322). Tools of data collection: Two tools were used; Organizational Learning Culture Questionnaire, and Goal Orientation Questionnaire. Results: Showed that the (68.0%) of staff nurses reported that organizational learning culture was high, and (79.9%) of them reported that goal orientation level was moderate. Conclusion: There was a highly positive statistically significant relation between total organizational learning culture level and total goal orientation level. Recommendation: Nursing administrator need to continually look for opportunities to learn and support staff nurses' requests to participate in training courses, collaboration should be maintained between nursing managers and nurses through effective communication and education to effectively enhance organizational learning culture.

Keywords: Goal orientation, Organizational learning, Organizational learning culture, Staff nurses.

Introduction

Learning in organization is the main key and requirement factor for organizations that wants to remain in the economic modern world and competitive environment. Thus, organizations must prepare nursing staff through learning constantly to deal with changes and to have the ability to adapt with changing conditions and modern challenges and must be able to institutionalize learning within the organization. Organizational learning is a strong and powerful organizations because its determinants for success are based on its learning (Gilaninia et al., 2019).

Healthcare organizations are highly knowledge-intensive foundations which need frequent learning for performance improvement. Creating a learning environment is an important matter for them. As the nurses considered the nucleus of the healthcare system, they represent powerful forces for bringing about the change to meet organizational goals. Nursing staff is a significant part in continues learning process to improve their competency level and provide high quality of patient care. Moreover, nursing managers can develop a creative and efficient workplace through learning by adapting effective management tactics that influence
organizational effectiveness such as Organizational learning (Tsui, 2019).

Organizational learning culture for nursing professionals is contributing to the development of professional nurses’ performance. Continuous learning helps nurses adapt to the rapid changes in knowledge as well as nursing and health care considering the important role of organizational learning in these organizations, especially hospitals, implementing and executing organizational learning management in hospitals is of particular importance. A review of literature confirms various studies on learning in educational systems and organizational learning, but little research on the organizational management of nurses (Aghdasi, 2019).

The importance of organizational learning culture in health care systems is to provide the framework for complex interconnected dynamic systems where all operational units have to learn and execute their assigned functions to collectively improve safe patient care. Policies and procedures are developed in healthcare organizations to reduce errors and improve patient safety. Regulated health professional are expected to engage in continuing education to maintain and update knowledge and skills to provide safe patient healthcare as continuing education of health care professionals has shown to be related to improved patient outcomes (Shahabi, 2019).

Organizational learning culture results in technological innovation, process improvement and product enhancement. In fact, organizational learning will lead to a higher level of competiveness and it is considered a panacea for long term organizational success and growth. It has been established that there is a positive relationship between the degree of organizational turbulence and organizational learning. That means that the greater the changes in the external environment of a health care organization, the greater the need for organizational learning. In the absence of organizational learning there will be stagnation and the organization will not be able to adjust to environmental changes (Lau, Lee & Chung, 2019).

Learning organization culture has seven dimensions as follows; Create continuous learning opportunities, promote inquiry and dialogue, encourage collaboration and team learning, establish systems to capture and share learning, empower people toward a collective vision, Connect the organization to its environment and use leaders as role model and support the learning of the staff nurses, team, and organizational levels (Bhattacharya et al., 2019)

Continuous Learning is designed into work so that nurses can learn on the job; opportunities are provided for ongoing education and growth Inquiry and Dialogue nurse gain productive reasoning skills to express their views and the capacity to listen and inquire into the views of others; the culture is changed to support questioning, feedback, and experimentation (Mardani, 2021).

Embedded system both high and low technology systems to share learning are created and integrated with work; access is provided; systems are maintained Empowerment nurses are involved in setting, owning, and implementing a joint vision; responsibility is distributed close to decision making so that people are motivated to learn toward what they are held accountable to do (Yang, 2020).

According to System Connection, nurses are helped to see the effect of their work on the entire enterprise; people scan the environment and use information to adjust work practices; the organization is linked to its communities.
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Strategic Leadership Leaders model, champion, and support learning; leadership uses learning strategically for business results (James, 2019).

According to Al-Juboori et al., (2021), organizational learning promotes its activities in re-building the organizational structure and work system to increase innovation capacity. Moreover, the process where employees of a firm can impact the firm’s development and behaviors through the usage of their shared experience and understanding of new information development would establish through organizational learning.

Goal-orientation refers to nurses’ ability to develop and develop their own abilities by learning new knowledge and mastering new skills. Proving goal-oriented refers to nurses proving their abilities and obtaining positive evaluations from others. Goal orientation refers to the nurse's attitude towards goal achievement, Goal orientation can be defined as nurse's preferences in achievement situation, may influence managerial effectiveness and psychological empowerment in the workplace Goal orientation can be divided into learning goal orientation and proof goal orientation (Fisher & Ford, 2019).

Goal orientation can be categorized into learning (task or mastery) orientation, performance (ego or social) orientation, performance avoidant and work avoidant. Learning goal orientation refers to a desire to develop nurses' competence by acquiring new knowledge and skills and mastering new situations. Those with learning orientations have adaptive response patterns, thus leading to positive outcomes. They also think that ability can be changeable and developed (Bell & Kozlowski, 2019).

Nurses’ goal orientation is related to their perceptions about success, competence, mistakes, and the effort exerted in the learning situation. Nurses can be driven by different goal orientations based on the learning situation. Some nurses pursue mastery goals that focus on learning, skill development, creativity, and quick understanding. Such nurses normally have greater interest in learning and positive attitudes toward it. They look at mistakes as a consequence of lack of correct information rather than deficiencies in their abilities. They exert the due efforts to perform their tasks and persist in the face of challenges (Pintrich & Schunk, 2021).

Significance of the study

The importance of organizational learning culture in health care systems is to provide the framework for complex interconnected dynamic systems where all operational units have to learn and execute their assigned functions to collectively improve safe patient care. Policies and procedures are developed in healthcare organizations to reduce errors and improve patient safety. Regulated health professionals are expected to engage in continuing education to maintain and update knowledge and skills to provide safe patient healthcare as continuing education of health care professionals has shown to be related to improved patient outcomes (Mitchell, 2019).

The delivery of quality patient care and patient safety is dependent on the healthcare system in which care is provided (Watkins, 2020). Nurses who set both professional goals and personal goals and really consider how the two maintain each other’s gain an understanding of their profession as a whole and how they fit into it. Having a list of professional nursing goals is a great way to organize their career path and to figure out exactly what nurses want from their nursing career, it’s also an eye-opening exercise to find out if nurses ready for a new approach. So this study aimed to assess the relation between organizational learning culture and goal orientation among staff nurses.
Aim of the study
The current study aimed to assess the relation between organizational learning culture and goal orientation among staff nurses.

Research Questions:
1. What is the level of organizational learning culture as reported by staff nurses?
2. What is the level of goal orientation as reported by staff nurses?
3. Is there a relation between organizational learning culture and goal orientation among staff nurses?

Subjects and Methods

Research design:
Descriptive correlational design was utilized to conduct this study.

Study setting:
The study was conducted in all medical and surgical departments at Benha University Hospital.

Subjects of the study:
The subjects included in the study consisted of all available staff nurses n=322 who worked at the above-mentioned study setting and accepted to participate in the study.

Tools of data collection:
To achieve the aim of the study the following two tools were used.

Tool I: Organizational Learning Culture Questionnaire:
It included two parts; part (1): included personal data of staff nurses as department, age, gender, educational qualifications, marital status, year of experience, attending training courses at Hospital Training and Continuous Education Center.

Part (2): Organizational learning Culture Questionnaire
It was developed by Marsick & Watkins (2019) and was modified by researchers to assess organizational learning culture as reported by staff nurses. It contained seven dimensions covering 38 items as follows; continuous learning 4 items, dialogue and inquiry 11 items, team learning and collaboration 3 items, embedded system 3 items, empowerment 3 items, system collection 3 items, strategic leadership 11 items.

Scoring system: Nurses' responses were measured by using Three points Likert Scale as follows; Always= (3) Sometimes = (2) and Never = (1). The score of each dimension was summed, and converted into percent score. The total score of organizational learning culture ranged from 38-114. Total level of organizational learning culture was categorized as follows; High level of organizational learning culture if the total score is ≥75% that equals 86-114 points, Moderate level of organizational learning culture if the total score is 60% - < 75% that equals 69-85 points. And Low level of organizational learning culture if the total score is < 60% that equals 38-68 points.

Tool II: Goal Orientation Questionnaire:
It was developed by the researchers based on reviewing related literature; Kaplan et al., (2004), Anderman & Anderman (2020) to assess the level of goal orientation as reported by staff nurses.
- It contained four dimensions covering 45 items as follows; Mastery 15 items, Performance approach 18 items, Performance avoidant 8 items, Work avoidant 4 items.

Scoring system:
Nurses' responses were measured by Three points Likert Scale as follows; Mostly Untrue= 3 points, Somewhat True= 2 points, Somewhat Untrue = 1 point. Total score was ranged from 45-135 points. Total level of goal orientation was categorized as follows; High level of goal orientation...
orientation if the total score is \( \geq 75\% \) that equals 101-135 points, Moderate level if the total score is \( 60\% -< 75\% \) that equals 81-100 points. And Low level if the total score is \(< 60\% \) that equals 45-80.

**Reliability of the tools:**
Reliability was done to check the internal consistency and homogeneity of the used tools by Cronbach’s Alpha test. The reliability of the organizational learning culture questionnaire was (0.911) and the reliability of goal orientation questionnaire was (0.862).

**Validity of the tools:**
The two tools were tested for validity (face and content) through distribution of the tool to a panel of 5 Experts of Nursing Administration as follows; two Professors from Tanta University and two assistant professors from Benha University, and one professor from Menofia University. Modifications were done based on their comments such as modifying some words to give the right meaning of the phrases.

**Pilot Study**
A pilot study was carried out in January 2022 to ascertain the clarity and applicability of the study tools. The pilot study included 32 staff nurses representing 10% of total study subjects. It also served in estimating the time needed for filling the tools. It ranged between 10-20 minutes. No modifications were done. So, the pilot study subjects were included in the main study subjects.

**Data Collection Procedure**
Approval letters getting from the Dean of the Faculty of Nursing were forwarded to the Director of Benha University Hospital to obtain official permission for data collection explaining the aim of the study. The study was carried out from October 2021 to September 2022. Distribution of the questionnaires to staff nurses during work hours after explaining the nature and aim of the study. The researchers organized and arranged the studied subjects in small groups to facilitate their participation according to their units needs and activities, gave instructions about how they fill the tools, and presented with them at the previously mentioned settings two days weekly (Sunday and Wednesday) during data collection for any clarification and revised their completeness to avoid any missing data, took two months from beginning of February to the end of March 2022, the average number collected 35-40 staff nurses per day. The time needed for filling each questionnaire was about 10–15 minutes.

**Ethical considerations:**
Before conducting the study, firstly approval of the ethical committee of scientific research in the faculty to conduct the research was obtained, Confidentiality was assured to all participants and their information was used for scientific purposes only. Each participant has the right to withdraw from the study at any time. The purpose of the study and the method of completing the questionnaire were clearly explained to staff nurses before completing the questionnaire.

**Statistical analysis:**
Data were verified before computerized entry. The Statistical Package for Social Sciences (SPSS version 26.0) was used for that purpose, followed by data analysis and tabulation. Number, frequency, Mean, and standard deviation values were reported to estimate the levels of organizational learning culture and goal orientation among staff nurses. Pearson correlation coefficients(\( r \)) were used to assessing the relationship and correlations among variables. Significance level value was considered when P-value \( \leq 0.05 \) and a highly significance level was considered when P-value \( \leq 0.001 \), while P-value \( > 0.05 \) indicated non-significance results.
**Results:**

**Table (1):** shows that less than two thirds of studied staff nurses (64.6%) were working at medical department and about less than one third of study subjects (31.7%) aged less than 35 years with \( M \pm SD = 34.44 \pm 10.36 \). Regarding gender, most of study subjects (95.7%) were female. Concerning marital status of staff nurses, more than two thirds of them (68.0%) were married. And about half of them (48.1%) had diploma degree in nursing. In relation to their years of experience, slightly less than two fifth of study subjects (38.5%) have less than 5 years of experience with mean \( M \pm SD = 11.28 \pm 9.74 \). Regarding attending training courses at Hospital Training and Continuous Education Center, more than three quarters of study subjects (78.0%) attended training courses, and nearly two thirds of them (64.3%) attended CPR courses.

**Figure (1):** Shows that the total level of organizational learning culture was high as reported by the highest percent (68.0%) of staff nurses. While, less than one quarter (22.4%) of them reported that organizational learning culture level was moderate.

**Table (2):** Shows that total mean score and standard deviation of organizational learning culture level was 89.65\( \pm 12.77 \) that represent 78.6% of the total score. The highest mean score was for “dialogue and inquiry” 28.27\( \pm 4.15 \) that represents 85.7% of total score. While, the lowest mean score was for “system collection” 6.36\( \pm 1.03 \) that represents 70.7% of total score.

**Figure (2)** Displays that more than three quarters 79.9% of studied staff nurses reported that total goal orientation level was moderate, and (18.9%) of them reported that goal orientation level was high.

**Table (3):** Shows that total mean score and SD of goal orientation level was 97.88\( \pm 7.87 \) that represents 72.5% of the total score. The highest mean score was for “Mastery” 34.56\( \pm 4.74 \) that represents 76.8% of the total score. While, the lowest mean score was for “Work avoidant” 9.42\( \pm 1.26 \) that represents 61.8% of the total score.

**Table (4):** Shows that there was highly positive statistical significant relation between total organizational learning culture level and total goal orientation level.
Table (1): Frequency distribution of personal data of studied staff nurses (n=322)

<table>
<thead>
<tr>
<th>Personal data</th>
<th>No</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Department</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Medical</td>
<td>208</td>
<td>64.6</td>
</tr>
<tr>
<td>Surgical</td>
<td>114</td>
<td>35.4</td>
</tr>
<tr>
<td><strong>Age (years)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>&lt;25</td>
<td>87</td>
<td>27.0</td>
</tr>
<tr>
<td>25 : &lt;35</td>
<td>54</td>
<td>16.8</td>
</tr>
<tr>
<td>35 : &lt;45</td>
<td>102</td>
<td>31.7</td>
</tr>
<tr>
<td>45+</td>
<td>79</td>
<td>24.5</td>
</tr>
<tr>
<td><strong>M±SD</strong></td>
<td>34.44±10.36</td>
<td></td>
</tr>
<tr>
<td><strong>Gender</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>14</td>
<td>4.3</td>
</tr>
<tr>
<td>Female</td>
<td>308</td>
<td>95.7</td>
</tr>
<tr>
<td><strong>Educational qualifications</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diploma degree in nursing.</td>
<td>155</td>
<td>48.1</td>
</tr>
<tr>
<td>Associated degree in nursing.</td>
<td>0</td>
<td>0.0</td>
</tr>
<tr>
<td>Bachelor degree of nursing</td>
<td>142</td>
<td>44.1</td>
</tr>
<tr>
<td>Post-graduation studies.</td>
<td>25</td>
<td>7.8</td>
</tr>
<tr>
<td><strong>Marital status</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Married</td>
<td>219</td>
<td>68.0</td>
</tr>
<tr>
<td>Unmarried</td>
<td>103</td>
<td>32.0</td>
</tr>
<tr>
<td><strong>Years of experience</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>&lt;5 year</td>
<td>124</td>
<td>38.5</td>
</tr>
<tr>
<td>5 : &lt;10 year</td>
<td>119</td>
<td>37.0</td>
</tr>
<tr>
<td>10 :&lt;15 year</td>
<td>27</td>
<td>8.4</td>
</tr>
<tr>
<td>&gt; 15 year</td>
<td>52</td>
<td>16.1</td>
</tr>
<tr>
<td><strong>M±SD</strong></td>
<td>11.28±9.74</td>
<td></td>
</tr>
<tr>
<td><strong>Attending training courses</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>251</td>
<td>78.0</td>
</tr>
<tr>
<td>No</td>
<td>71</td>
<td>22.0</td>
</tr>
<tr>
<td><strong>Training courses</strong> (more than one answer)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Quality</td>
<td>43</td>
<td>13.4</td>
</tr>
<tr>
<td>CPR</td>
<td>207</td>
<td>64.3</td>
</tr>
<tr>
<td>Infection control</td>
<td>127</td>
<td>39.4</td>
</tr>
<tr>
<td>Code blue</td>
<td>91</td>
<td>28.3</td>
</tr>
<tr>
<td>Operation</td>
<td>16</td>
<td>5.0</td>
</tr>
</tbody>
</table>
Figure (1): Total levels of organizational learning culture as reported by staff nurses

![Organizational Learning Culture levels](image)

Figure (2): Total levels of goal orientation as reported by staff nurses

![Goal Orientation levels](image)

Table (2): Mean scores and standard deviation regarding total organizational learning culture as reported by staff nurses (n=322)

<table>
<thead>
<tr>
<th>Dimensions</th>
<th>Total score</th>
<th>Minimum</th>
<th>Maximum</th>
<th>M ±SD</th>
<th>Mean percent</th>
<th>Ranking</th>
</tr>
</thead>
<tbody>
<tr>
<td>Continuous learning</td>
<td>12</td>
<td>4</td>
<td>12</td>
<td>8.82±1.87</td>
<td>73.5%</td>
<td>4</td>
</tr>
<tr>
<td>Dialogue and inquiry</td>
<td>33</td>
<td>20</td>
<td>33</td>
<td>28.27±4.15</td>
<td>85.7%</td>
<td>1</td>
</tr>
<tr>
<td>Team learning and collaboration</td>
<td>9</td>
<td>3</td>
<td>8</td>
<td>6.64±1.13</td>
<td>73.8%</td>
<td>3</td>
</tr>
<tr>
<td>Embedded system</td>
<td>9</td>
<td>5</td>
<td>8</td>
<td>6.57±0.81</td>
<td>73.0%</td>
<td>6</td>
</tr>
<tr>
<td>Empowerment</td>
<td>9</td>
<td>4</td>
<td>9</td>
<td>6.59±1.54</td>
<td>73.2%</td>
<td>5</td>
</tr>
<tr>
<td>System collection</td>
<td>9</td>
<td>5</td>
<td>9</td>
<td>6.36±1.03</td>
<td>70.7%</td>
<td>7</td>
</tr>
<tr>
<td>Strategic leadership</td>
<td>33</td>
<td>14</td>
<td>33</td>
<td>26.36±5.39</td>
<td>79.9%</td>
<td>2</td>
</tr>
<tr>
<td>Total organizational learning culture</td>
<td>114</td>
<td>61</td>
<td>112</td>
<td>89.65±12.77</td>
<td>78.6%</td>
<td></td>
</tr>
</tbody>
</table>
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Table (3): Mean scores and standard deviation regarding total goal orientation as reported by staff nurses (n=322)

<table>
<thead>
<tr>
<th>Dimensions</th>
<th>Total score</th>
<th>Minimum</th>
<th>Maximum</th>
<th>M ±SD</th>
<th>%</th>
<th>Ranking</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mastery</td>
<td>45</td>
<td>22</td>
<td>45</td>
<td>34.56±4.74</td>
<td>76.8%</td>
<td>1</td>
</tr>
<tr>
<td>Performance approach</td>
<td>54</td>
<td>32</td>
<td>50</td>
<td>37.87±4.59</td>
<td>70.1%</td>
<td>2</td>
</tr>
<tr>
<td>Performance Avoidant</td>
<td>24</td>
<td>11</td>
<td>19</td>
<td>16.02±2.69</td>
<td>66.75%</td>
<td>3</td>
</tr>
<tr>
<td>Work Avoidant</td>
<td>12</td>
<td>7</td>
<td>11</td>
<td>9.42±1.26</td>
<td>61.8%</td>
<td>4</td>
</tr>
<tr>
<td>Total goal orientation</td>
<td>135</td>
<td>85</td>
<td>117</td>
<td>97.88±7.87</td>
<td>72.5%</td>
<td></td>
</tr>
</tbody>
</table>

Table (4): Relation between total organizational learning culture and total goal orientation

<table>
<thead>
<tr>
<th>Total organizational learning culture</th>
<th>Total goal orientation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>r</td>
</tr>
<tr>
<td></td>
<td>0.236</td>
</tr>
</tbody>
</table>

*Statistically significant at p < 0.05

Discussion:

It becomes critical for health care organizations to develop strategies that aim to design new work practices and to manage knowledge. The introduction of learning organization culture is seen as a promising choice for better knowledge management and continuing professional development in health care. The learning organization culture seemed to affect daily nursing work in a positive manner. These changes were particularly pronounced with respect to knowledge transfer, support for nursing practices that reflect quality of health care (Gagnon et al., 2020).

Achievement of goal orientation represents a critical field within the organizational motivation literature, it has established much attention due to their effective role on nurses' performance. Nurses’ motivation especially achievement of goal orientation, is related to learning strategies, help-seeking behaviors, persistence, and acquisition and utilization of skills and metacognitive thinking (AL-Baddareen, Ghaith, & Akour, 2022)

This study aimed at assessing the relation between organizational learning culture and goal orientation among staff nurses.

Discussion of the study results is presented in the following sequence: The first part concerned with personal data of studied staff nurses, The second part concerned with levels of organizational learning culture as reported by staff nurses, The third part concerned with levels of goal orientation as reported by staff nurses, The fourth part concerned with relation between the study variables
I: Personal data of studied staff nurses

The current study findings indicated that less than two thirds of studied staff nurses were working at medical departments and about less than third of study subjects aged less than 35 years. Regarding gender, most of study subjects were females, regarding marital status more than two thirds of them were married. In relation to the level of education, about half of them had diploma degree in nursing. Regarding to their years of experience, slightly more than two thirds of study subjects had less than 5 years of experience. Regarding attending training course, more than three quarters of study subjects have attended training courses at Hospital Training and Continuous Education Center. And nearly two thirds of them attended CPR courses.

Part II: Levels of Organizational Learning Culture as reported by staff nurses

The findings of the current study revealed that the total level of organizational learning culture was high as reported by staff nurses. From researchers’s point of view this result may be due to most of nurses were attended training courses about continues learning, and may be due to their young age and motivated for continuous learning, leaders gave time for nursing staff for learning ,they are rewarded for their continuous learning ,dialogue and inquiry between nursing leaders and staff leads to working in comfortable and well organized environment that considers the most influential factor that improves organizational learning culture.

This result was in agreement with Elhoseney et al.,(2020) who stated that the majority of staff nurses works at Assiut University Main Hospital reported that total level of learning organization culture was high, also El Desoky (2021) stated that majority of nursing staff have high level of perception about organizational learning culture. In addition to Joo & Park (2019) who find out that the highest percent of staff nurses stated that the level of organizational learning culture was high.

While this result disagreed with Egan, Yang & Bartlett (2019) who stated that nurses reported that the level of organizational learning culture was moderate.

The present study findings showed that the highest domain of organizational learning culture was for “dialogue and inquiry”, followed by strategic leadership. From researchers’s point of view, this result may be explained by the fact that to enhance learning culture among staff nurses, it is important to listen to their point of views and their inquiry and open two ways of communication. Also staff nurses reported that their leader always listen to their opinions during discussion regarding the work

This result was supported with Bhattacharya et al., (2019) who found that “inquiry and dialogue” came out be the key defining factors for learning organization in hospital and healthcare.

These findings were in the same line with Leufvén et al., (2016) who confirmed that the visible progress detected in one or more dimensions needs to be complemented with equal progress in other dimensions to foster a complete effective learning cycle and obtain the overall capabilities of an advanced learning organization culture.

While this result disagreed with Akhtar et al., (2021) which highlighted that system connection achieved the highest mean score among all organizational learning culture domains
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Part III: Total Level of Goal Orientation as reported by staff nurses:

The current study demonstrated that majority of staff nurses reported that the total level of goal orientation was moderate. From researchers’s point of view, continuous learning and training courses which the hospital provides for staff nurses make them motivated to be more excited in work and achieve their goals as they had mastery for their performance. This result was consistent with Jirsea (2021) who stated that level of goal orientation was moderate.

The findings of the current study revealed that the highest domain of goal orientation was “Mastery” followed by performance approach then performance avoidant, finally the lowest domain was “Work avoidant”

From researchers’s point of view, this may be explained as nurses to achieve goal orientation need firstly to have mastery over their performance to recognize their abilities to be able to do challenging work by collaboration with others.

This study was supported by Somuncuoglu & Yildirim, (2020) who found that nurses need to have mastery first over their performance to recognize their abilities.

Part IV: Correlations among study variables

The current study result revealed that there was a positive statistically significant relation between total level of organizational learning culture and total level of goal orientation. From researchers’s point of view, this result may be due to continuous training courses that hospital provides it continuously for staff nurses, rewarded and give them bounce for participating in this training courses, this makes them motivated for work and do the best to achieve their goals.

This result was in the same line with Ames, (2020) who stated that learning goal orientation occurring as an individual difference, a learning goal orientation state can be made salient when value is placed on the process of learning. In addition, Egan, (2021) stated that nurses had higher goal orientation when they perceived that their organization provides a better learning culture.

Conclusion:

Based on the findings of the current study, it can be concluded that Benha University Hospital had a high level of organizational learning culture and moderate level of goal orientation as reported by staff nurses. Also, there was highly statistically significant positive relation between total levels of organizational learning culture and goal orientation.

Recommendations:

1. Nursing managers need to continually look for methods to learn and accept staff nurses' requests to participate in training courses.
2. Learning opportunities should be maintained through effective communication and support to effectively enhance organizational learning culture.
3. Nursing managers need to empower staff nurses to participate in achieving organizational goals.
4. Nursing managers need to allow staff nurses to participate in decision making and solving problems.
5. Continuous assessment of factors that negatively affects nurses' participation in training courses.
6. Ensure an effective learning culture among staff nurses using training programs, knowledge sharing and work team behaviors.
References:


The Relation between Organizational Learning Culture and Goal Orientation among Staff Nurses


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العلاقة بين ثقافة التعلم التنظيمي والتوجه نحو الهدف بين طاقم التمريض

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يمكن للثقافة التعلم التنظيمي الإيجابية أن تساعدهن الممرضات العاملين على تحسين مهاراتهم ومعرفتهم الحالية وتوفير لهم فرصًا للاكتشاف وطرق أفضل للعمل معاً من أجل أن يصبحوا متعلمين موجهاً ذاتياً ومستقلًا ونشطًا، ويمكن أن توفر أدلة على أهداف إنجاز الممرضات للموظفين إرشادات حول كيفية الحاجة إلى تعديل إعدادات التعلم بحيث يمكن تعديل التعليم. لذا هدفت هذه الدراسة إلى تقييم العلاقة بين ثقافة التعلم التنظيمي والتوجه نحو الهدف بين طاقم التمريض.

وتم استخدام التصميم الوصفي الارتباطي. حيث أجريت هذه الدراسة في الأقسام الطبية والجراحية في مستشفى جامعة بنها على عينة مناسبة من جميع الممرضات العاملين المتاحين الذين يعملون في بيئة الدراسة المذكورة أعلاه (العدد = 322). وأوضحت نتائج الدراسة بأن (68.0%) من طاقم التمريض أفادوا بأن ثقافة التعلم المؤسسية كانت عالية وأن (79.9%) منهم أفادوا بأن مستوى التوجه نحو الهدف كان متوسط. كما توجد علاقة ذات دلالة إحصائية موجبة مرتفعة بين المستوى الكلي لثقافة التعلم المؤسسية ومستوى التوجه نحو الهدف.

وأوصت الدراسة بضرورة أن يبحث مسؤول التمريض باستمرار عن فرص التعلم ودعم طلبات الممرضات العاملين للمشاركة في الدورات التدريبية، ويدبح الحفاظ على التعلم بين مديري التمريض والممرضات من خلال التواصل والتعليم الفعال لتحقيق ثقافة التعلم التنظيمي بشكل فعال.