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A STUDY OF PERCEIVED LEADER INTERACTION STYLE AND JOB SATISFACTION OF MASTER'S PREPARED NURSES AT SELECTED HOSPITALS IN THE STATE OF TENNESSEE

A Thesis

Presented for the

Master of Science in Nursing

Degree

The University of Tennessee, Knoxville

Randall L. Nentrup

March 1988

DEDICATION

To the memory of John Christman, who lived well and died so very gracefully, and his wife, Agnes, whose support and inspiration for living sustained me through my studies in nursing.

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I hereby acknowledge with thanks the permission granted by Katherine High to use the LIFO Questionnaires which proved to be of great benefit in completing this project.

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ABSTRACT

This study compared the perceptions of interaction style of administrators of nursing and the Master's prepared nurses working with them at eight hospitals in Tennessee to investigate the relationship of perceptions to job satisfaction, role ambiguity, and role conflict of Master's prepared nurses. A significant difference was found between the measured perceptions of role ambiguity for Master's prepared nurses with perceptual congruence and those with perceptual noncongruence. The findings of this study revealed that perceptual congruence as constructed and operationalized for this study did not relate to the measured job satisfaction of Master's prepared nurses. Additionally, the data revealed higher significant relationships between role ambiguity and conflict and job satisfaction for Master's prepared nurses with perceptual congruence. Higher perceptions of both role ambiguity and role conflict correlated to lower job satisfaction levels, with role ambiguity having the strongest relationship. The significance level was set at $p<.05$.

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CHAPTER I

INTRODUCTION

Statement of the Problem

Although management analysts recognize that communication problems permeate organizational life in today's complex social and economic arena, many authors state that it is an under-researched aspect of organizational functioning (Downs, 1977; Huseman, Logue, & Freshley, 1977; McClure, 1984; Pincus, 1986). This study approaches organizational communication problems from a perceptual perspective to determine the impact differences in perceptions may have on job satisfaction and focuses on the interaction of leader communication behavior and perceptions of that behavior. Differences in interpersonal and intrapersonal perceptions influence the communication behavior of organizational leaders and members (Schneider, Donaghy, & Newman, 1985; Wofferd, Gerloff, & Cummins, 1977).

General organizational research cites effective communication as a determinant of job satisfaction (Downs, 1977; Maslow, 1965; Herzberg, 1966), leadership

effectiveness (Hersey & Blanchard, 1982), and overall organizational performance (Argyris, 1957; Likert, 1961, 1967; March & Simon, 1958; McGregor, 1960, 1967; Ouchi, 1981; Peters & Waterman, 1982; Simon, 1945; Wofferd, Gerloff, & Cummins, 1977). Several respected scholars in the fields of organizational science and health care management (Ceccio & Ceccio, 1982; England, 1985; Flynn, 1987; Hersey & Blanchard, 1982; Lancaster, 1985; Mowry & Korpman, 1986) emphasize that leaders and their management team should direct great effort and strategy to improve all levels of organizational communication. Improving communication behaviors of organizational members contributes to successful team building, enhances member role performance, and leads to greater organizational effectiveness (Argyris, 1962; Beck & Hillmar, 1986; Lawler, 1985; Maslow, 1965; Schneider, Donaghy, & Newman, 1975).

The leader's style of management in general and his/her communication behavior in particular have been shown to influence the overall communication climate in organizations and the job satisfaction of members (Hersey & Blanchard, 1982; Landy & Trumbo, 1976; Lawler & Suttle, 1973; Peters & Waterman, 1982; Vroom, 1976a, 1976b; Stone et al., 1984; Talarico & Swanson, 1982; Wofferd, Gerloff, & Cummins, 1977). Clarity of

communication must be the goal and professional responsibility of every organizational leader (Graen, 1976; Schneider, Donaghy, & Newman, 1975) who strives to achieve greater organizational effectiveness and career success in management. Numerous management experts (Atkins, 1981; Fiedler & Chemers, 1984; Likert, 1967; McGregor, 1967; Maslow, 1965; Peters & Waterman, 1982; Pincus, 1986) infer the relationship of highly successful public and private organizations and leaders who practice innovative communication styles derived from a broad spectrum of related psychological and behavioral concepts.

Purpose of the Study

This study investigates perceptions of leader communication behavior by Master's prepared nurses (MPNs) in eight nursing organizations and examines the relationship of perceptions to their job satisfaction, role ambiguity, and role conflict. Perceptions regarding the communication behavior of administrators of nursing may reveal their ability to establish clarity for management team member role performance. By analyzing perceived role ambiguity, role conflict, and job satisfaction of management team members in relation

to perceived communication behavior of the leader, an accurate appraisal of team building efforts can be made.

Leader communication behavior has been directly linked to perceived role conflict and role ambiguity of subordinates (Kahn, Wolfe, Quinn, & Snoek, 1964; Katz & Kahn, 1966; Vroom, 1976a, 1976b). Several prominent studies have shown that role ambiguity and role conflict correlate negatively to several different measures of perceived job satisfaction (Downs, 1977; Harrison, 1980; House & Rizzo, 1972; Kahn et al., 1964; Keller, 1975; Rizzo, House, & Lirtzman, 1970; Schuler, Aldag, & Brief, 1977). Strategies to enhance the fit of member perceptions with the expectations of the leaders' can be derived after analyzing communication patterns (Johnson & Stinson, 1975; Lawler, 1985; Lawler & Suttle, 1973; Maslow, 1965; Patten, 1981).

The application of systems theory to organizations suggests that organizations with greater congruence between component subsystems more effectively attain their goals (Davis, 1983; Katz & Kahn, 1966; Schuler, 1977). Effective management strategies to improve organizational performance will be achieved as a result of the analysis of organizational communication behavior (Downs, 1977; Fiedler, 1975; Vroom,

1976a, 1976b). Strategies to enhance the match or fit of expectations with perceptions will promote improved member performance (Atkins, 1981; Maslow, 1965; Schein, 1980). The degree to which individuals hold clear or distorted perceptions of their organizations and leaders and the degree to which the leader and managers understand how employees feel about their work may significantly influence the effectiveness of achieving the organizational mission (Raelin, 1986; Schein, 1980; Schneider, Donaghy, & Newman, 1975; Shoemaker & Amer El-Aharaf, 1983).

Nursing administration and management education emphasize the importance of improving communication at all levels within the organization (Ceccio & Ceccio, 1982; Hein & Nicholson, 1986; Lancaster & Lancaster, 1982; McClure, 1984a, 1984b; McFarland, Leonard, & Morris, 1984; Mowry & Korpman, 1986; Rutkowski, 1987; Stone et al., 1984). In hospitals, nursing leaders acknowledge the potential influences of effective communication (Blegen & Mueller, 1987; McDougall, 1987; Sovie, 1987) to enhance collaborative practice in a multidiscipline environment and to improve the job satisfaction of nurses (England, 1985; McClure, 1984b; McFarland, Leonard, & Morris, 1984; Pincus, 1986; Stone et al., 1984). Current economic trends, demands for

increasing autonomy of nursing practice, and the discontinuities of today's complex health care system require nursing managers and leaders to improve their organizational effectiveness through better communication (Baird, 1987; McClure, 1984b; Mowry & Korpman, 1986; Pincus, 1986; Rutkowski, 1987; Sovie, 1987). In summary, the purpose of this study was to examine the perceived role ambiguity, role conflict, and job satisfaction in relation to the perceived communication behavior of the leader.

Importance of the Study

Examining perceptual parameters of interpersonal communication between administrators of nursing and nurse managers, nurse educators, and advanced nursing clinicians contributes to efforts to assess the quality of work life for advanced preparation nurses. Any analysis of supervisory personnel and organizational members' relationships implicitly examines communication and job satisfaction (Downs, 1977; Hershey & Blanchard, 1982). A recent membership poll of American Federation of the State, County and Municipal Employees, the government workers' union, revealed career development as the greatest employee concern. Additionally, job

satisfaction outranked both job security and pay ("Progress on the job", 1988). Previously, American workers ranked job satisfaction third in importance. Examination of job satisfaction, however is not a new endeavor. Hoppock (1935) reported the first modern scientific research to examine job satisfaction and over 3500 investigations of job satisfaction have been completed in the past 50 years, most in the last 20 years (Bonaquist, 1986).

After a 5 year longitudinal study of nurses' attitudes, Baird (1987) suggested that attention to the job satisfaction of nurses in management positions is timely. She cites a relative paucity of job satisfaction studies related to nurses and nurse managers with graduate education. This study recognizes the importance of members of the management team in determining the quality of nursing care and addresses the need to further investigate their job satisfaction. In general, job satisfaction interests the nursing profession due to its relationship to (a) turnover (Blegen & Mueller, 1987; Murray, 1983; Price & Mueller, 1981, 1986; Weissman, Alexander & Chase, 1981); (b) client satisfaction (Morano, 1987; Weissman and Nathanson, 1985), and (c) salience as one of the components of the

psychological contract between employee and employer (Maslow, 1965; Schein, 1980).

Identification of perceptual differences between organizational leaders and members and determining their relationship to job satisfaction enables organizational members, managers, and leaders to clarify their expectations of one another (Atkins, 1981; Beck & Hillmar, 1986; Fiedler, 1975; Fiedler & Chemers, 1984; McDougall, 1987; Patten, 1981). Leaders who value the feedback provided by organizational members strive to facilitate better communication throughout the organization (Baird, 1987; Beck & Hillmar, 1986; Ceccio & Ceccio, 1982; Deegan, 1979; Flynn, 1987; Kirkpatrick, 1982; Patten, 1981; Raelin, 1986). Research regarding the job satisfaction of nurses provides insight into ways nursing leaders can improve their interpersonal communication skills as leaders (Baird, 1987; Bonaquist, 1986; Flynn, 1987) and restructure jobs to match individual capabilities to performance objectives (Roedel & Nystrom, 1988; Stamps & Piedmonte, 1986). The results of this study may provide insight applicable to organizational and leadership development strategies.

Conceptual Framework

Role Theory

This study uses the theory of role dynamics initially developed by Kahn et al. (1964) to examine the impact of role conflict and role ambiguity upon job satisfaction. This conceptual framework has been used extensively to analyze interpersonal communication parameters and role dynamics within organizations (House & Rizzo, 1972; Rizzo, House, & Lirtzman, 1970). Kahn et al. (1964) conceptualized role conflict as inadequate role sending and lack of agreement or coordination between role senders which cause psychological conflict, a negative subjective perception within the psychological environment of the person. Role ambiguity results when information is unavailable or inadequately communicated within the organization (Kahn et al. 1964). The degree to which either role conflict or ambiguity strains individuals differs, but both subjective perceptions are generally stressful and manifest themselves through diminished organizational role performance and coping behaviors (Katz & Kahn, 1966). Role ambiguity and conflict

contribute to personal feelings of job satisfaction toward one's job and are relative to values (Keller, 1975).

Leaders who effectively communicate convey more accurate role expectations to their subordinates and enable subordinates to match their job performance to the leader's expectations (Atkins, 1981; Fiedler & Chemers, 1984). When leaders effectively establish positive organizational communication climate, subordinates receive greater clarity of communicated role expectations (Patten, 1981; Pincus, 1986). Subordinates receive role support from their peers if role perceptions are communicated clearly to other management team members (Katz & Kahn, 1966). This serves as the social process for induction of the role incumbent into the management team (Claus & Bailey, 1977; Beck & Hillmar, 1986; England, 1985; Graen, 1977; Kirkpatrick, 1982; McDougall, 1987). Professional peers, including managers and professional staff, provide psychological support and social reinforcement of role behavior through collegial interactions (Johnson & Stinson, 1975; Lancaster; 1985; Lawler, 1985; Maslow, 1965). The communication climate established by leaders and interpersonal relations between subordinates and supervisory personnel have the highest correlations with

job satisfaction (Hershey and Blanchard, 1982). Herzberg (1966) and Maslow (1954, 1965) both included a communication factor in their early work on motivation, job satisfaction and work psychology. Management literature since then highlights the significance of communication to job satisfaction and human resource management within a systems framework.

Definitions

1. Administrator of Nursing (AON) is the top-ranked administrator responsible for nursing decision making regardless of their exact title. An AON is considered to be a leader. Selection criteria for participation in this study required the AONs to hold a minimum of a Master's degree.

2. Communication Behavior refers to individual gestures, mannerisms, actions, or expressions, both verbal and non-verbal, unconscious and conscious, which convey messages, signals, or cues to transfer information, attitudes, or beliefs to another person. Communication behavior requires interpersonal interaction with another person.

3. Interaction Style refers to one of four distinct methods or manners in which AONs relate to other persons as identified by the LIFO questionnaire (Atkins, 1981).

4. Job Satisfaction is a subjective feeling or self perception of specific and general contentment regarding one's work effort. Extrinsic Job Satisfaction is a subjective feeling or self-perception regarding aspects of the work environment or milieu which are rewarding (Lofquist & Dawis, 1969). When an individual has extrinsic job satisfaction, she/he can state, "I like my job and the place I work." Intrinsic Job Satisfaction is a subjective feeling or self-perception regarding the work itself and represents the individual's appraisal of the extent to which the work itself is satisfying (Lofquist & Dawis, 1969). When an individual has intrinsic job satisfaction, she/he can state, "I like the work I do." For purposes of this thesis, feelings of job satisfaction were determined by the scores obtained from the Minnesota Job Satisfaction Questionnaire (MSQ).

5. A Leader is the top-ranked administrator responsible for evaluating, planning, directing, and controlling the activities of an organization as the primary and formal decision making authority. AONs are considered leaders in this study.

6. Management Team refers to organizational members who by virtue of their position, education, experience, and other attributes or abilities provide significant information via communication behavior to the leader.

7. A Master's Prepared Nurse (MPN) is a nurse with a graduate degree. The sample included MPNs with graduate degrees in disciplines other than nursing. Selection for participation required that the MPNs hold positions other than staff nurse.

8. Perceptual Congruence is agreement between the self-perceptions of AONs and perceptions of MPNs working with them in regards to the AON's interaction style. Perceptual Noncongruence is the lack of agreement between the self-perceptions of AONs and the MPNs working with them in regards to the AONs' interaction style. For purposes of this study, this construct was operationalized using LIFO questionnaire scores.

9. A Role is a set of shared expectations focused upon a particular position. These expectations include beliefs about the goals or values the position incumbent is to pursue and the norms that will govern his behavior (Scott, 1970). Role Ambiguity is the lack of clarity of expectations regarding appropriate behavior for an assigned position and the absence of consistent and predictable responses to one's behavior when attempting to meet expectations for a particular position (Kahn et al., 1964). Role Conflict is incongruity or incompatibility of values or expectations associated with one's assigned duties or functions in relation to a particular position (Kahn et al., 1964). For purposes of this study, role perceptions were determined by the score derived from the questionnaire developed by Rizzo, House and Lirtzman (1970) to measure role ambiguity and role conflict. For this study, the Role Ambiguity-Role Conflict questionnaire was titled "The Way Your Job is Designed" to provide the context for the MPN's perceptions (See Appendix C.).

The Research Questions

This study investigated the following questions:

1. Does perceptual congruence between Master's prepared nurses (MPNs) and administrators of nursing (AONs) regarding the administrator's interaction style relate to job satisfaction of Master's prepared nurses (MPNs)?

2. Does perceptual congruence between AONs and Master's prepared nurses (MPNs) regarding their administrator's interaction style relate to perceived role ambiguity and role conflict of Master's prepared nurses (MPNs)?

3. Are role ambiguity and role conflict related to the job satisfaction of Master's prepared nurses (MPNs)?

Scope of the Study

This study identified MPNs with congruent and noncongruent perceptions of their AON's interaction style. The identification of differences in perceptions can be used to promote organic and synergistic

communication behaviors which contribute to improved job satisfaction and organizational performance (Beck & Hillmar, 1986; Ceccio & Ceccio, 1982; Deegan, 1979; Fiedler & Chemers, 1984; Maslow, 1965; Wofferd, Gerloff, & Cummins, 1977).

Assumptions

Assumptions of this study include:

1. The respondents answered the questionnaires truthfully and attempted to convey their perceptions accurately.

2. Individuals aspire to achieve job satisfaction.

3. Administrators of nursing (AONs) and Master's prepared nurses (MPNs) maintain ongoing professional and interpersonal interactions, both formally and informally.

4. Master's prepared nurses (MPNs) are more likely to be employed at hospitals with greater than 200 beds.

5. Master's prepared nurses (MPNs) who do not work in staff nurse positions are likely to be members of the management team, formally or informally, by virtue of their advanced educational preparation and professional responsibilities.

Organization of Thesis

This thesis is divided into four chapters. Chapter I has introduced the study's topic, delineated its scope and assumptions, and defined significant terms. Chapter II reviews literature related to theories of role, leader and organizational behavior, communication, and job satisfaction. Chapter III identifies the subjects, explains data collection and analyses, and describes the instruments used to collect the data. Chapter IV reports and interprets the findings, summarizes the study, discusses the conclusions, and identifies implications for further research.

CHAPTER II

REVIEW OF THE LITERATURE

This review delineates pertinent aspects of role, leader and organizational behavior, and communication theories important to the job satisfaction of Master's prepared nurses (MPNs). Analyses of satisfaction research varies greatly across studies as evidenced by investigations into specific types of jobs, organizations, and tasks. Differing conceptualizations of job satisfaction make it difficult to compare research results. This study focused on perceived job satisfaction as a multidimensional variable. Since a subjective psychological mindset determines a person's satisfaction with their job, this review considered other cognitive subjective perceptions which influence perceived job satisfaction: role conflict, role ambiguity, and perceptions of leader interaction style.

Role Theory

The theory development and research regarding organizational role dynamics by Kahn et al. (1964)

provides the major theoretical foundation for the present study. Katz & Kahn (1966) proposed role theory as the framework for examining the behavior of individuals in organizations. They suggested that role concepts are "the major means for linking the individual and organizational levels of research and theory; it is at once the building block of social systems and the summation of the requirements with which such systems confront their members" (Katz & Kahn, 1966, p. 197). Their pioneering work with role theory has provided many researchers with a framework to examine job performance and satisfaction in organizational settings with diverse emphases. This study contributes to earlier efforts by identifying yet another model of analysis using their framework.

Roles serve as boundaries between individuals and an organization and represent the individual and organizational expectations (Schuler, Aldag, & Brief, 1977). The consequences of dysfunctional organizational role performance include tension, turnover, dissatisfaction, anxiety, and lower performance (Kahn et al., 1964; Katz & Kahn, 1966; Price & Mueller, 1981). Role clarity contributes to positive functional role performance and results in an organizational atmosphere characterized by acceptable stress and perceived job satisfaction

levels leading to higher retention rates (Rizzo, House, & Lirtzman, 1970; Schuler, 1977).

Kahn et al. (1964) defined role conflict as the degree of incongruity, incompatibility, and/or inconsistency of expectations associated with a role. Rizzo, House and Lirtzman (1970) operationalized role conflict as incongruence, incompatibility, and inconsistency of role expectations in relation to (a) standards or values, (b) time, resources, or capabilities, (c) multiple competitive role proscriptions, and (d) policies, rules, cues, gestures, or other communication conveying sanctions. Katz and Kahn (1966) and Kahn et al. (1964) linked the consequences of role conflict to significant disruptions in interpersonal relations (trust, liking, respect) and communication.

Although not elaborately defined in the literature previously, Kahn et al. (1964) defined role ambiguity as the lack of clarity or information related to expectations of appropriate behaviors and the predictability of responses to one's behavior resulting from a lack of information available to a given organizational incumbent. Kahn et al. (1964) stressed that lack of specific and contextual information regarding expected role behaviors for organizational incumbents related directly to role ambiguity. Subjectively, role

ambiguity is a direct function of the difference between the incumbent's actual state of knowledge and that which would provide adequate satisfaction of his/her personal needs and values (Keller, 1977). Kahn et al. (1964) asserted that role ambiguity results from organizational size and complexity which exceed the individual's span of comprehension, accelerated rates of socioeconomic and technological change, and managerial philosophies which restrict communication within the organization.

Katz and Kahn (1966) and Kahn et al. (1964) identified mistakes committed by leaders which contribute to role ambiguity. The primary management error identified by Kahn et al. (1964) and Katz and Kahn (1966) involved restriction of information, both formal and informal, due to the leader's preference concerning what subordinates need to know and what they would like to know. Leaders acknowledge the logical requirements for information, but often deny psychological requirements. Consequently, both leaders and organizational members restrict and alter communication processes. This represents potential misuse of leader position power. Such leader communication behavior is self-defeating; frequently subordinates deliberately

restrict upward information flow, one of the few techniques available to them to influence superiors.

Kahn et al. (1964) expressed the opinion that most organizations have rather restricted channels of communication due to leader/manager insensitivity to the desire of members for information which could affect their perspective toward the organization's or individuals' goals. Restricted communication irrespective of organizational structure increases role ambiguity (Kahn et al., 1964). The Japanese management model, with its emphasis on organic matrix intraorganizational relationships, has demonstrated the economic advantages of unrestricted information processes and openness by eliminating overlapping tiers of the management hierarchy and enhancing managerial effectiveness and employee dedication to the organization (Flynn, 1987; Ouchi, 1981; Pascale & Athos, 1981; Strader, 1987).

According to Kahn's et al. (1964) theory of role dynamics within organizations, role expectations proscribe and prescribe behavior of the members. A member's role set includes all persons directly or indirectly related to the role holder and encompasses formal as well as informal interpersonal relations with peers, superiors, and subordinates. The organizational leader communicates role expectations to subordinates

through members of the management team via the chain of command. Due to the power and influence of organizational leaders in sanctioning member role performance, both informally and formally, the role expectations sent to subordinates by the organizational leader determine the degree of pressure, or psychological coercion perceived by management team members and their subordinates (Kahn et al., 1964). Such role pressures, in turn, influence role performance to conform to leader expectations.

Organizational Theory

The literature suggests that administrative support exerts the greatest influence on subordinates' job performance (Baird, 1987; Beck & Hillmar, 1986; Claus & Bailey, 1977; Sovie, 1987; Wolf, 1986). The degree of perceived support projected by organizational leaders depends upon their communication style's effectiveness in representing their support (Blake, 1987; Stone et al., 1984). The importance of effective communication skills for leaders (Wofferd, Gerloff, & Cummins, 1977), leads one to conclude that effective communication may more accurately indicate effective role performance by leaders than leadership style (Pincus, 1986; Wolf,

1986). Leader communication behavior as a component of leadership style can be analyzed to determine clarity in transmitting role expectations to subordinates by leaders, particularly to members of the management team who serve as extensions for the leader in establishing the subjective psychological climate of the organization.

The conception of leadership as a personality characteristic has often been oversimplified (Hersey & Blanchard, 1982; Vroom, 1976a, 1976b). Individual leadership ability is unpredictable and has not been measured precisely. Stable and situationally consistent personality characteristics which distinguish effective leaders from less effective ones have not been identified (Hersey & Blanchard, 1982; Likert, 1961; Vroom; 1976a, 1976b). In contrast to personality attributes, behavioral correlates (Fiedler & Chemers, 1984; Reilly, 1980) provide greater insight into leader performance and development.

Vroom's contingency (1976a, 1976b) model and Fiedler's (1975) theory of leadership effectiveness provide frameworks to measure a leader's ability to meet situational contingencies. Such analysis, however, would not be useful to select leaders due to the unpredictability of leader role behavior (Fiedler,

1975). Congruence between leaders and their subordinates' perceptions of the leader's behavior provides a measure of leader communication effectiveness (Atkins, 1981; Ceccio & Ceccio, 1982; Lawler, 1985; Likert, 1967; MaQuire, 1986; Talarico & Swanson, 1982) and interpersonal competence (Argyris, 1962). Even when disregarding the actual content of communication exchanges, the subjective perceptions of leadership behavior by subordinates may influence their perceptions of role conflict and ambiguity and correlate with their job satisfaction.

Kahn et al. (1964) found both role conflict and ambiguity to be clearly associated with low job satisfaction and dysfunctional behavior from the stress and anxiety of role pressures. Later research (Johnson & Stinson, 1975; Keller, 1975) generally supports the hypothesis that role conflict and role ambiguity negatively influence job satisfaction. Further, the researchers demonstrated stronger negative relationships overall between role ambiguity and job satisfaction measures than between role conflict and the same satisfaction measures. House and Rizzo (1972) confirmed role ambiguity to be the more powerful variable related to job satisfaction measures. Two separate studies using different methodologies (Tosi & Tosi, 1970; Tosi,

1971) concluded that although role conflict related to low overall job satisfaction, role ambiguity did not. However, conflicting findings are also found in the literature. All of these studies used salaried technicians, researchers, engineers, or managers from complex organizations as subjects.

In a related study, Green and Organ (1973) investigated the relationship of role accuracy (i.e. lack of role ambiguity and conflict) to job satisfaction. They measured role accuracy by identifying the degree of agreement between a superior's role expectations for subordinates with the subordinate's understanding of the expectations. The degree of compliance with the superior's expectations served to measure role accuracy. This study, however, did not consider the effects of role conflict on job satisfaction and only solicited perceptions of overall satisfaction. Data analyses showed that both role accuracy and role compliance have significant, positive correlations with a global measure of satisfaction. In a later study, the same investigators (Organ and Green, 1974) examined role ambiguity and locus of control in relation to work satisfaction. They discovered, not surprisingly, that employees with external loci of control felt greater role ambiguity and

less job satisfaction than individuals with internal loci of control.

In a study of 88 professional employees of an applied science department in a large government research and development organization, Keller (1975) compared role conflict and ambiguity to job satisfaction and values. He found that role conflict related to extrinsic dimensions of satisfaction while role ambiguity related to the intrinsic satisfaction dimensions of the work itself. He concluded that the pattern of relationships hinged on factors which are specific to a given work setting.

Although most of these researchers used the Rizzo, House, and Lirtzman (1970) scales to measure role ambiguity and conflict, the multiple and sometimes contradictory findings of these researchers probably results from using a variety of organizational settings and disparate employment fields. The specific type of work and organization undoubtedly influence the relative importance of the variables. One must be familiar with the content of role expectations in a specific profession and organizational setting to understand the relationships between role conflict and ambiguity and the different dimensions of job satisfaction (Keller, 1975).

Studies of role ambiguity and role conflict within nursing have not yet examined perceptual congruence as defined in this thesis. Generally, the studies of role ambiguity and role conflict have been bivariate and have examined role conflict and role ambiguity as independent variables. The treatment of role conflict and role ambiguity as dependent variables has been limited (Schuler, 1977). A recent study of nurses by Ellis (1986) compared role perceptions to job satisfaction. She used the path-goal theory of leadership to examine the role ambiguity of hospital head nurses and found role ambiguity of head nurses to be prevalent, but perceptions of role conflict and role ambiguity varied from nurse to nurse. Further, she could not identify a leadership style which minimized role ambiguity. Rickard (1986) explored role ambiguity and job satisfaction of clinical nurse specialists. An analysis of her data revealed that a low degree of role ambiguity positively correlated with a high level of job satisfaction. Neither Ellis (1986) nor Rickard (1986) considered role conflict.

Schuler, Aldag, and Brief (1977) conducted a factor analysis of the role ambiguity and role conflict scales developed by Rizzo, House, and Lirtzman (1970) using 374 nursing personnel from a Midwestern hospital as one of

6 samples. The sample included all levels of personnel from nursing aides to head nurses. They compared role ambiguity and conflict to satisfaction with the work itself (intrinsic satisfaction) and to satisfaction with pay, co-workers, supervision, and promotions (extrinsic satisfaction). They also found role conflict and ambiguity to be associated with negatively valued states for all 6 samples. They considered tension, absenteeism, low job satisfaction, low job involvement, low expectancies and tasks with low motivating potential as negatively valued states. In this thesis, perceptions of role ambiguity and conflict correlated the most negatively to supervision (Schuler, Aldag, & Brief, 1977).

The obvious pervasive emphasis on communication behaviors of supervisory personnel throughout management literature highlights the need to enhance communication competencies of all nurses, particularly those in middle management who interface with top management to attain organizational goals (Baird, 1987; Beck & Hillmar, 1986; Blegen & Mueller, 1987; Ceccio & Ceccio, 1982; Flynn, 1987; Lancaster, 1985; McDougall, 1987; Patten, 1981; Pincus, 1986; Rutkowski, 1987; Stone, et al., 1984; Strader, 1987; Wofferd, Gerloff, & Cummins, 1977). These studies indicate that increasing

clarity of role expectations enhances job satisfaction and, indirectly, improves patient care. The mandate for management to clarify roles and role expectations permeates current organizational literature (Beck & Hillmar, 1986; Deegan, 1979; Kirkpatrick, 1982; McDougall, 1987; Ouchi, 1981; Pascale & Athos, 1981; Patten, 1981; Shultz & Johnson, 1983).

Kahn et al. (1964) and later Schuler (1977) hypothesized that role conflict and ambiguity may be a function of the task or position of the task in the organization. According to this view, tasks with greater boundary-spanning activities produce more role conflict and ambiguity. Boundary-spanning activities characterize nursing as a profession because nurses coordinate the efforts of multiple ancillary and primary care givers. Therefore, nurses must become experts in collaboration and negotiation to provide linkage between health care professionals and managers (England, 1985; Mowry & Korpman, 1986; Raelin, 1986). The acquisition of requisite organizational communication skills will further demonstrate nurses' autonomy and enhance their professionalism.

MPNs working in multiplex hierarchical organizations in hospitals represent educators, managers, and clinical specialists. Due to the nature of health

care delivery and the professional responsibilities of MPNs their jobs involve boundary spanning activities. McFarland's (1978) study of selected factors related to job satisfaction of clinical nurse specialists identified a need for more dialogue with nursing administration to reduce role ambiguity and conflict. She believed that greater dialogue within nursing organizations would decrease the lack of agreement among health team members about expectations for clinical specialists. In addition, clinical specialists perform boundary-spanning professional roles within nursing organizations and are often prone to role ambiguity due to their relatively new professional identity (McDougall, 1987). Because clinical specialists are all MPNs, she recommended, based upon her findings, that all nursing Master's programs include experiences and theoretical course content related to: (a) communication, (b) role, (c) conflict resolution and negotiation, (d) group dynamics, (e) organizational theory, and (f) power. She also recommended sensitivity groups to increase self-awareness and accurate behavioral perceptions of others for failure to recognize differences between the work culture of those who deliver direct patient care and those responsible for managing health

care delivery, greatly contributes to potential role conflict and ambiguity (Raelin, 1986).

Organizational structure also influences the degree of perceived role conflict and ambiguity (House & Rizzo, 1972; Kahn, et al., 1964). Although restricted communication increases role ambiguity and conflict, studies contrasting organic and mechanistic organizational structure revealed the presence of less role conflict and ambiguity in mechanistic organizations than in organic organizations (House & Rizzo, 1972; Schuler, 1977). The typical hospital organizational structure and technology fits the definition of a mechanistic system, as does the administration of nursing services imbedded within the hospital bureaucracy. However, the nursing implicit professional goals, intergroup cooperation, and horizontal communication avenues (Stone et al., 1984), meet many criteria of organic structure and process. Nursing's proactive, eclectic, and holistic interactions with and on behalf of patients provides the foundation for successful organic organizational processes. Just as trust and rapport significantly affect nurse-patient relationships, they also influence the organizational climate within which managers/leaders interface with subordinates (England, 1985; Lancaster, 1985; McClure, 1984a; McFarland, Leonard, & Morris,

1984). Organizational leaders must take responsibility for establishing the level of trust, cooperation, and communication within their organization (Hersey & Blanchard, 1982; Maslow, 1965), therefore nursing leaders must promote organic organizational processes and practices within nursing and in the hospital bureaucracy (Bonaquist, 1986; Ceccio & Ceccio, 1982; Rutkowski, 1987; Stone et al.,1984). Current management practices in hospital management, nursing, and other fields promote the evolution of more organic forms of organization (Hersey & Blanchard, 1982; Lancaster, 1985; Mowry & Korpman, 1986; Peters & Waterman, 1981; Pincus, 1986; Rutkowski, 1987; Schultz & Johnson, 1983; Sovie, 1987; Stone, et al, 1984; Wofferd, Gerloff, & Cummins, 1977). Matrix communication processes via decentralization and collaboration emphasizing effective interaction between nurses and their environment characterize current nursing management recommendations as well (Beck & Hillmar, 1986; England, 1985; McFarland, Leonard & Morris, 1984; Patten, 1981; Rutkowski, 1987; Shoemaker & Amer El-Aharaf, 1983).

Raelin (1986) identified nursing as a professional occupation in his book, The Clash of Cultures: Managers and Professionals. He indicated that recognition of differences between the work culture of managers and

professionals provides a framework to interpret role parameters and minimize dysfunctional communication between and within health care professionals. Methods of achieving overall objectives, however, may conflict due to differences in perspective; managers and professionals must improve their communication behavior to differentiate role perceptions and negotiate for appropriate autonomy (Raelin, 1986). He, also, indicated the art of managing professionals requires special talent. As novice organizational managers and former professional clinicians, respectively, MPNs and AONs, as nurse leaders, often experience difficulty balancing subordinate nurses' professional autonomy over work processes (means) with control over their results (ends) and alienate their professional peers particularly in matrix-type organizations (Raelin, 1986). Therefore, greater emphasis must be placed on clarifying role perceptions and management's expectations and objectives.

Matrix forms of organization require an extraordinary amount of communication and collaboration (Beck & Hillmar, 1986; Maslow, 1965; McDougall, 1987; Raelin, 1986; Strader, 1987). Rewards in such systems tend to accrue to those who can solve problems through consensus, and power goes to those who can prove the

value of their contributions (Raelin, 1986). Management in nursing therefore needs to direct efforts to accurately validate self-perceptions and focus on organizational development activities to positively effect leader-manager and manager-professional relations (McDougall, 1987). Promoting self-actualization of individuals in addition to achieving organizational goals provides incentive to organizational members, regardless of their rank or position (Maslow, 1965). Management theorists now assume that improved communication between leaders and their management team improves the role performance and communication behaviors of both parties and correlates positively with job satisfaction and organizational effectiveness (Argyris, 1962; Claus & Bailey, 1977; Dawis, Lofquist, & Weiss, 1968; Hein & Nicholson, 1986; Hersey & Blanchard, 1982; Huseman, Logue, & Freshley, 1976; Vroom, 1976a, 1976b).

Organizational Communication and Job Satisfaction

Early theorists (Taylor, 1911) emphasized formal communication avenues and linked them to span of control, authority, and coordination problems within the formal organizational structure. In their view,

communications using formal pathways efficiently would eliminate communication problems. Today the classical principles of the structural theorists lack applicability to organizational communication and job satisfaction due to their generality and broad scope. Additionally, they do not address the degree of complexity and rapidity of socioeconomic and technological change resulting from improved information management systems characteristic of modern organizations (Davis, 1983; Semprevivo, 1982). Although the behavioral decision theorists (Cyert & March, 1963; Simon, 1945; March & Simon, 1958) developed greater complexity regarding the organization than did the classical structuralists, they directed little attention to the broad range of human behavior. Neither of these early theories encompassing organizational communication stressed the need to examine the influence of individual behavior on communication in organizations nor did they give attention to individual job satisfaction as contributing to organizational effectiveness.

McGregor (1960, 1967), Argyris (1957, 1962) and Likert (1961, 1967) illustrate human relations approaches to organizational communication. They reacted against the classical structuralists and behavioral decision theorists by focusing upon group

interactions and informal communication systems in organizations. McGregor (1960), in his early work, ignored the pervasive role of communication processes in developing his oppositional Theory Y and Theory X to characterize organizational interactions, processes, and structure. However, he later acknowledged communication as the means by which organizations exercise their power and through which members develop mutual understanding of one another (McGregor, 1967).

Although not focusing directly on organizational communication, Argyris (1957, 1962) emphasized that the conflicts between the needs of individuals and the formal needs of organizations lead to adaptive behaviors which hinder communication between members of the organization and diminish productive effort. He also identified informal interactions as being potentially disruptive to the functioning of the organization, whereas Likert (1961, 1967) specifically advocated using informal networks to create healthier communication atmospheres within organizations. Likert (1967) devoted an entire chapter of his book to problems related to organizational communication. He discussed group interactions, management systems, and leader behavior. Likert's (1967) Causal Sequence Model identifies communication as an intervening variable between

independent causal variables and dependent end result variables. Figure 1 illustrates the centrality of communication for organizations, its significance to members and their performance as employees, and the impact it has upon employee job satisfaction and the effectiveness of the organization.

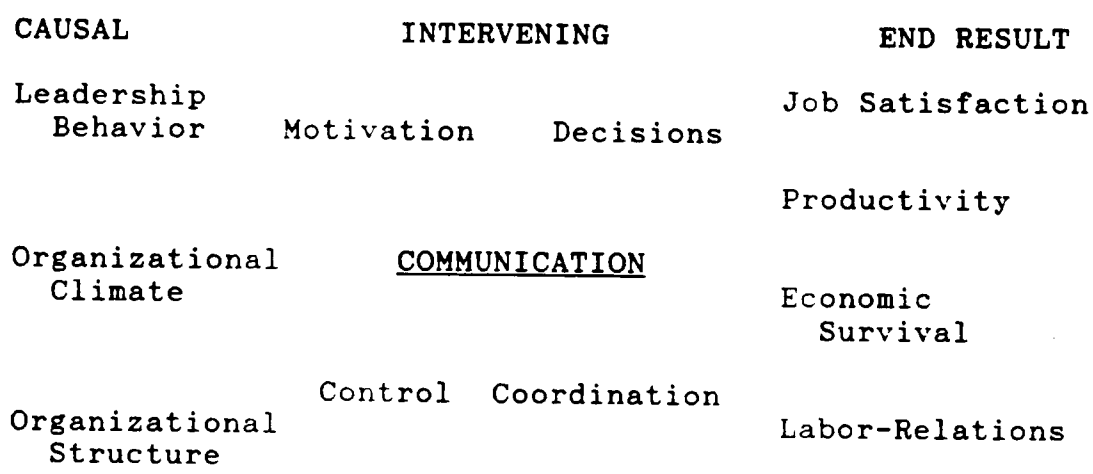

Figure 1. Centrality of Communication to Organizational Functioning

Source: Adapted from Likert's Causal Sequence Model (1967).

Progressing from Likert's work, the systems theorists (Katz & Kahn, 1966; Thompson, 1967; Weick, 1969) specifically addressed organizational communication by presenting it as a multivariate and dynamic determinant within the organization. The emphasis on developing a cooperative and collaborative organizational climate within the present technology for

advanced data management systems challenges managers to develop expertise in change theory as innovators, expanders, refiners, stabilizers, and revolutionists (Lancaster & Lancaster, 1982; Rutkowski, 1987). Innovative leadership behaviors require nurse managers and administrators to evolve refined human relations and communication skills based in organizational theory, behavioral psychology, and job satisfaction research (Bonaquist, 1986; Ceccio & Ceccio, 1982; Flynn, 1987; McClure, 1984b; Morana, 1987; Roedel & Nystrom, 1988; Stamps & Piedmonte, 1986).

Systems theory continues to dominate current organizational theory and is increasing its influence due to the information management technologies available (Davis, 1983; Semprevivo, 1982). Unlike older management philosophies, more recent approaches focus on the role of management to value the individual's contribution to the organization (Flynn, 1987; Ouchi, 1981; Pascale & Athos, 1981; Peters & Waterman, 1982). Much of organizational research of the 70's and 80's, prompted by the increasing complexity of managing rapidly changing organizations, focused on leadership correlates but with indeterminate findings (Hersey & Blanchard, 1982).

Many current management analysts praise the Japanese Management Model for its innovative application of organic matrix-communication processes to improve organizational performance and job satisfaction of members (Flynn, 1987; Ouchi, 1981; Peters & Waterman, 1982). Although organizational communication has not always been considered relevant to organizational effectiveness (Downs, 1977), important theoretical tributaries connect communication to job satisfaction, and therefore to organizational effectiveness.

Although early need theories have been discarded, Maslow's (1954) Hierarchical Need System still provides explanations as to why peoples' motivation about their jobs varies and why a person's level of job satisfaction may vary over time. Roberts, Walter and Miles (1971) conducted one of the most relevant findings connecting communication to job satisfaction. In studying Maslow's need classification, a new factor emerged which they called "in the know" which exists separately from other needs. They proposed "in the know" as a unique dimension of job satisfaction. Maslow (1965) implicitly supports the existence of "in the know" in his writings concerning the synergistic components of personality and superior managers. In addition. Herzberg (1966) also supported the relationship of communication and job

satisfaction by including communication as one of his original job satisfaction factors.

Summary of the Literature

The literature in organizational psychology, development, communication, and management focuses on the pervasive influence of communication on leader and member role performance. Due to rapidity of change in organizational environments, specifically in health care systems, the ability of leaders and members to adapt to changes and to anticipate change requires organic forms of communication. Without mutual insight of leaders and subordinates into both roles, neither can take advantage of the efficiencies provided by technology for improving the flow of information. With greater access to personnel information, manpower demands and needs, and changing socioeconomic trends in the health care delivery system, leaders and their managers have the means to pursue improvements in administrative performance and organizational communication.

It is particularly timely that professional nurses as leaders and managers become expert in the art of organizational communication behaviors. Health care delivery systems can benefit from their contribution to

greater efficiencies in communication and information management and nurses will gain greater autonomy, power and influence. Moreover, as patient advocates, nurses have the requisite leverage to influence the overall organizational communication atmosphere to become more organic and effective in pursuing organizational as well as professional goals.

In conclusion, to substantiate their contributions, nurses need to conduct research within nursing settings to provide an appropriate frame of reference within which to interpret findings. This study addresses the need to further investigate perceptions of role conflict and ambiguity which interact with leader communication behavior and perceptions of job satisfaction of nurses. Only a few nursing studies have previously examined role conflict and role ambiguity. The centrality of communication justifies exploring perceptions between AONs and MPNs.

CHAPTER III

METHODOLOGY AND PROCEDURES

This study compared the perceptions of interaction styles of administrators of nursing (AONs), as management team leaders, and the Master's prepared nurses (MPNs) working with them at eight hospitals in Tennessee to investigate the relationship of congruency of interaction style perceptions with job satisfaction, role ambiguity, and role conflict of the Master's prepared nurse. Interactions between MPNs and AONs represent a large component of the interactions within the management team of a nursing service organization. This chapter presents the procedures used in the thesis.

Subjects

Administrators of Nursing (AONs): Leaders

As leaders in nursing management, the AONs for 45 Tennessee hospitals with more than 200 beds were contacted and invited to participate in the study. Of the 25 administrators who responded, six indicated that

agency policy prohibited them from participating in the study. Five AONs reported that their agencies did not employ MPNs. Five of the administrators did not hold Master's degrees and listed fewer than three MPNs employed at their facility. Criteria for participation in the study limited subjects to Master's prepared administrators who had MPNs employed at their agencies. As a result, nine Master's prepared administrators of nursing in hospitals employing four or more MPNs agreed to participate in the study.

During the course of data collection, one AON resigned. Data for the study consisted of the responses of the remaining eight AONs eligible to participate and who agreed to participate in the study. This represents 18% of nursing administrators in the state of Tennessee employed at hospitals with over 200 beds.

Titles of the AONs included two chief nurses, three directors of nursing, one vice-president of nursing, and one associate and one assistant administrator for nursing. These eight individuals held the highest administrative rank for nursing in their respective hospitals. The eight AONs demonstrated their voluntary consent to participate in the study by returning a list of MPNs employed at their agencies and granting permission for the investigator to contact them at their

respective agencies. The AONs also completed the LIFO-Self (Atkins, 1981) questionnaire which assessed their self-perceived interaction style. Appendix A includes the initial contact letter sent to the AONs.

Master's Prepared Nurses (MPNs)

The MPNs canvassed to participate in this study were contacted at their place of employment. The position held by each MPN was included on the list of names provided by the eight nursing administrators. Graduate preparation was not limited to graduate degrees in nursing due to the prevalence of Master's prepared nurses with graduate preparation in other fields on management teams. This investigator concluded that limiting participation to nurses with graduate preparation in nursing would eliminate an important segment of the present sample from consideration.

The AONs identified 100 MPNs. Ten of the respondents were eliminated from the study because they worked as staff nurses. Four potential subjects terminated their employment prior to being contacted. Of the remaining 86 nurses contacted, 65, or 76% responded; however 12 questionnaires could not be used due to errors made in completing the questionnaires.

Therefore, a total of 53, or 62% of the eligible MPNs participated in the study. Respondents indicated their consent to participate by returning the questionnaires. The respondents were informed of the general purpose of the study and advised of the confidentiality of their responses. Appendix B includes the initial contact letter sent to the MPNs.

Design of the Study

This study was a descriptive correlational investigation of the construct of perceptual congruence and its influence on the job satisfaction, role ambiguity, and role conflict of MPNs. The categorical independent variable of perceptual congruence, previously defined as agreement or disagreement between perceptions of AONs' interactional style by the AONs and MPNs employed at their agencies, was analyzed for its relationship to job satisfaction, role ambiguity, and role conflict of MPNs. The relationship between job satisfaction measures and role ambiguity and role conflict measures for MPNs was also examined.

Instruments

Life Orientations Questionnaires (LIFO)

The Life Orientations Questionnaires (LIFO) developed by Stuart Atkins (1981) measured perceptual congruency of the AON's interaction style. The LIFO categorization of interactional styles was considered to be appropriate for this study because of its design. It ascertains communication preferences and behavior characteristics within defined categories of interactional styles. Due to the sensitivity of investigating relationships within the management team, this investigator considered the LIFO questionnaires to be particularly non-threatening and non-judgmental. The LIFO questionnaires have been used to improve communication behavior awareness at various organizational levels. Dr. Atkins claims theoretical support for Life Orientations from psychoanalysis, self-actualization theory, client-centered therapy, and group dynamics. Estimated internal consistency reliability for the LIFO scales (Cronbach alpha) is .90. The LIFO questionnaires have no established norms (Atkins, 1981).

The LIFO questionnaires originally developed as a research effort have been adapted to commercial applications for organizational development programing. Dr. Atkins acknowledges theoretical credit for LIFO to psychologist Carl Rogers whose client-centered approach bases communication on unconditional positive regard. He also claims LIFO to be rooted in A. Maslow's emphasis on improving and reinforcing healthy behavior to enable individuals to further self-actualize.

LIFO classifies four interactional styles as: (a) Supporting/Giving, (b) Controlling/Taking, (c) Conserving/Holding, and (d) Adapting/Dealing. A summary of Atkins' (1981) descriptions of each interactional style illuminates their content:

1. Supportive/Giving individuals believe that success comes from hard work and the pursuit of excellence. Such persons are generally thoughtful, trusting, idealistic, and loyal. They consistently try to do their best and set high standards for themselves and others.

2. Controlling/Taking individuals believe that success comes from seizing opportunities and being competent. They are results oriented, energetic, act quickly, and serve as catalysts for others. They

demonstrate self-confidence, persuasiveness, and competitiveness.

3. Conserving/Holding individuals believe that success comes from making the best of what you have through analysis and good judgment. Although reserved they are methodical, logical, precise, tenacious, and ultimately practical.

4. Adaptive/Dealing individuals believe that success comes from pleasing others by meeting their needs. They enjoy social interaction, readily empathize with diverse types of people, and seek consensus. Adaptive/Dealing persons are characterized as flexible, enthusiastic, tactful, inspiring, and charming.

LIFO uses common terminology which enables people to discuss their similarities and differences of interactional style. The questionnaires have been used to assess communications in organizations (McFarland, Leonard, & Morris, 1984) and facilitate communication behaviors and perceptual awareness between organizational members. Life Orientations explicitly addresses communication from a developmental perspective with application to individuals in organizations who must interact with others. Atkins (1981) reports that over 5,000 organizations have used LIFO to increase individual and organizational effectiveness.

The AONs completed LIFO-Self and the MPNs completed LIFO-Another Person. Copies of these questionnaires are not provided in this report due to copyright law. Dr. K. High, a certified LIFO trainer, granted permission to use the LIFO questionnaires, provided the questionnaires used in this study, and assisted with their scoring.

For this study, LIFO served to operationalize the concept of perceptual congruence. The numerical scoring method of the LIFO questionnaires permitted rank-ordering of perceived interactional styles. Therefore, the rank-ordering of the AON's self-perceived interactional style was visually matched to the rank-ordering of the AON's interactional style perceived by the MPNs after deriving numerical scores for each interactional style. Perceptual congruence was operationalized as agreement between the perceived interactional style receiving the highest numerical score by both the AONs and MPNs. In one case an AON obtained equal scores for two interactional styles. In this case, if the MPNs scored either style the highest numerically, perceptual congruence was recorded. Likewise, four MPNs scored their AON equally on two styles. In these cases, perceptual congruence was determined if either style matched their AON's highest scored style.

Minnesota Job Satisfaction Questionnaire (MSQ)

The Minnesota Job Satisfaction Questionnaire measures aspects of the work environment. Weiss, Dawis, England and Lofquist (1964) derived the MSQ from their Theory of Work Aadjustment, a systems approach based upon the concept of correspondence between individuals and their environment. Work represents a major environment to which most individuals must relate. Their Theory of Work Adjustment assumes that individuals seek to achieve and maintain mutual responsiveness with their environment. Correspondence between individuals and their environment implies conditions that can be described as harmonious, congruent, compatible, consonant, balanced, and complementary. Operationally, correspondence exists when an individual fulfills the requirements of the work environment and the work environment fulfills the requirements of the individual. The continuous and dynamic process whereby individuals seek to achieve and maintain correspondence is termed work adjustment (Lofquist & Dawis, 1969).

The MSQ tests the Theory of Work Adjustment by measuring the satisfaction of individuals' needs through work (Weiss, Dawis, England, & Lofquist, 1967). The

MSQ, an easy to read questionnaire, requires about 10 minutes to complete. The MSQ, using Likert-type response categories, measures general job satisfaction with 20 different aspects of the work environment; two subscales measure intrinsic and extrinsic job satisfaction. Five response alternatives are presented for each of the 20 items with a score selection of 1 to 5 indicating low satisfaction to high satisfaction, respectively. Scores can range from 20 to 100 on the general satisfaction scale.

The 20 variables measured by the MSQ and the questions asked are: On my present job, this is how I feel about: (The underlined variable is not identified for the subjects but is included here to clarify the design of the questionnaire.)

1. Activity: Being able to keep busy all the time.

2. Independence: The chance to work alone on the job.

3. Variety: The chance to do different things once in awhile.

4. Social Status: The chance to be "somebody" in the organization.

5. Supervision-Human Relations: The way my boss handles the staff.

6. Supervision-Technical: The competence of my supervisor in making decisions.

7. Moral Values: Being able to do things that don't go against my values.

8. Security: The way my job provides for steady employment.

9. Social Service: The chance to do things for other people.

10. Authority: The chance to tell people what to do.

11. Ability Utilization: The chance to make use of my abilities.

12. Company Policies and Practices: The way agency policies are implemented.

13. Compensation: My pay and the amount of work I do.

14. Advancement: The chance for advancement on the job.

15. Responsibility: The freedom to use my own judgment.

16. Creativity: The chance to try my own methods.

17. Working Conditions: The working conditions.

18. Co-workers: The way my co-workers get along together.

19. Recognition: The praise I get for doing my job.

20. Achievement: The feeling of accomplishment I get from my job.

Questions 17 and 18 are specific to the general satisfaction measure. The extrinsic measures include variables (3) variety, (8) security, (10) authority,

(12) company policies and practices, (15) responsibility, and (19) recognition. The remainder of the variables (1, 2, 4, 5, 6, 7, 9, 11, 13, 14, 16, 20) measure intrinsic job satisfaction. Scores range from 6 to 30 for extrinsic satisfaction and 12 to 60 for intrinsic satisfaction.

Weiss, Dawis, England, & Lofquist (1967) report median internal consistency coefficients of .86 for intrinsic satisfaction, .80 for extrinsic satisfaction, and .90 for general satisfaction for the MSQ. Validity for the MSQ short form is inferred from validity established for the long form. The short form of the MSQ has been normed on: (a) professional, technical, and managerial employees represented by engineers, (b) clerical and sales persons represented by salesmen and clerks, (c) service personnel represented by janitors, (d) machine tradesmen represented by machinists, and (e) bench workers represented by assemblers.

Role Conflict and Ambiguity Questionnaires

This study used the scales developed by Rizzo, House, and Lirtzman (1970) to measure the self-perceptions of role conflict and ambiguity of the MPNs. These scales implicitly address communication

within organizations by providing a method to interpret selected perceptions. The factorially independent scales which measure role conflict and ambiguity were developed to identify management development needs and barriers to effective implementation of a planned management development program in complex organizations (Rizzo, House, & Lirtzman, 1970). These scales have been used extensively in previously discussed research to analyze aspects of organizational communication behavior and perceptions (House & Rizzo, 1972; Keller, 1975; Organ & Green, 1974; Schuler, 1977; Schuler, Aldag, & Brief, 1977; Tosi, 1971; Tosi & Tosi, 1970).

Rizzo, House and Lirtzman (1970) operationalized role conflict as incongruence, incompatibility, and inconsistency of role expectations in relation to (a) standards or values, (b) time, resources, or capabilities, (c) multiple competitive role proscriptions, and (d) policies, evaluation standards, rules, cues, gestures, or other communication of sanctions. Kahn et al. (1964) elaborated on concepts of person-role conflict, intersender conflict, intrarole, and interrole conflict to emphasize perceived incompatible role expectations.

Kahn et al. (1964) defined <u>role ambiguity</u> as the lack of clarity or information related to expectations

of appropriate behaviors and the predictability of responses to one's behavior resulting from a lack of information available to an incumbent. Kahn et al. (1964) stressed that lack of specific and contextual information regarding expected role behaviors for incumbents related directly to role ambiguity. In developing the role ambiguity scale, Rizzo, House, and Lirtzman (1970) designed their questionnaire to reflect certainty about duties, authority, allocation of time, relationships with others; clarity or existence of guides, directives, policies; and ability to predict sanctions as outcomes of behavior.

The Role Ambiguity/Role Conflict scales consist of 14 questions; 8 measure role conflict and 6 measure role ambiguity (see Appendix C). Questions 1, 2, 4, 6, 9, and 13 measure role ambiguity and questions 3, 5, 7, 8, 10, 11, 12, and 14 measure role conflict. The questions have a 7-point scale ranging from "very false" to "very true". Scores for the measure of role ambiguity can range from 6 to 42. Scores for the measure of role conflict can range from 8 to 56.

High scores for items related to role conflict indicate increased levels of perceived role conflict. The role ambiguity scale was reverse scored, therefore, low scores for role ambiguity indicate increased

levels of role ambiguity (Rizzo, House, & Lirtzman, 1970). A complete psychometric evaluation of these scales can be reviewed in Schuler, Aldag, and Brief (1977). After an extensive review of studies using the role ambiguity and role conflict scales, they concluded that consistent support for their use is justified. Estimated internal consistency (Cronbach alpha) is .82 for role conflict and .87 for role ambiguity.

Procedures

To initiate this study, hospitals likely to employ MPNs were identified (Southeastern Hospitals: 1986 Directory). Therefore, all 45 AONs at Tennessee hospitals with more than 200 beds were invited to participate in this study by providing the names of all MPNs employed at their facility and completing the LIFO-Self and demographic questionnaires. Each of the MPNs identified by the AONs was contacted and requested to complete the LIFO-AP, MSQ, Role Ambiguity/Role Conflict questionnaires and provide demographic data regarding their age and length of time in their present position. Three weeks after the initial mailing, a postcard was sent to all MPNs who had not responded to the initial contact. Fifteen additional MPNs responded.

Two respondents requested and were sent another set of questionnaires. Participation in the study was voluntary. All participants requested a summary of the results of the study.

Data Analysis

Data were analyzed to make comparisons and discover relationships between perceptions of leader interaction style, job satisfaction, role ambiguity, role conflict, and demographic characteristics. The Statistical Graphics System (1985) software for personal computers was used to compute and analyze the data. This computer software permitted computations of summary statistics, two-tailed *t*-tests to differentiate categorized subgroups, and multiple correlations using the Pearson Product Moment Correlation Coefficient to determine relationships between perceptual congruence of leader interaction style, job satisfaction, role ambiguity, role conflict, and demographic data. The level of significance was set at $p<.05$.

CHAPTER IV

FINDINGS AND DISCUSSION

Subjects

Administrators of Nursing (AONs)

The age of the AONs who participated in this study ranged from 37 through 62 years with 50 years of age being the mean. AONs had been in their positions from 2.5 years to 16 years with the average length of time being 8 years. All eight AONs held at least a Master's degree in nursing.

Master's Prepared Nurses (MPNs)

The number of MPNs at each hospital ranged from 4 to 23 with an average of 12 MPNs at each hospital. Their ages ranged from 29 through 56 years with the average being 39 years. Experience in their present positions ranged from 1 to 9 years and averaged 3.38 years. Forty-two, or 79% of the MPNs held graduate degrees in nursing, and 11, or 21%, held graduate degrees in education or public health administration.

All of the MPNs held positions as managers, educators, or clinical specialists.

Distributions of the Data

An examination of the distribution of scores obtained from the 53 subjects for the questionnaires used in this study revealed acceptable univariate distributions. The ranges, kurtosis, and skewness for measured scores for general job satisfaction, role ambiguity, and role conflict were within acceptable limits. The measured scores for intrinsic and extrinsic job satisfaction were derived from the scores for general job satisfaction. The age distribution for the subjects in this sample was also normally distributed. There was no apparent reason to conclude that the data collected was not representative of MPNs employed by hospitals in the state of Tennessee. However, due to the small number of AONs participating in this study, generalizations should be made with caution, if at all.

Job Satisfaction

The 53 MPNs were categorized by the construct of perceptual congruence into two subgroups: (a) a subset of 25 (47%) MPNs with congruent perceptions of their

AON's interactional style and (b) a subset of 28 (53%) MPNs with noncongruent perceptions of their administrator's interactional style. Means of the three job satisfaction measures for each subgroup of MPNs are shown in Table I. Although the MPNs with perceptual noncongruence scored higher job satisfaction levels, the t-Test was not significant at the $p < .05$ level for any of the three job satisfaction measures.

The scores for general job satisfaction scores for all of the MPNs were similar to the general job satisfaction scores of full-time professional nurses (75.40) and supervisor nurses (75.38) obtained by Weiss, Dawis, England and Lofquist (1967) when they initially normed the long form of the MSQ. However, in 1967, few nurses were Master's prepared, so comparisons to the normed values must be made with caution.

The norm established for managers by Weiss, Dawis, England and Lofquist (1967) was 82.37 and may be more relevant for comparison to job content. However, the norms established for engineers for the short form MSQ: (77.88 for general job satisfaction level, 48.53 for intrinsic job satisfaction level, and 21.32 for extrinsic job satisfaction level) may have greater comparability to educational investment and technical components of the subjects in this thesis. The general

Table I

Comparison of Means for Job Satisfaction Scores and Perceptions of Interaction Style

	Non-Congruent (n=28)	Congruent (n=25)	All MPNs (N=53)
General Job Satisfaction			
Mean =	77.46	72.28	75.09
p =	.136 (NS)		
t =	1.56		
Intrinsic Job Satisfaction			
Mean =	49.32	46.28	47.89
p =	.164 (NS)		
t =	1.411		
Extrinsic Job Satisfaction			
Mean =	20.04	18.36	19.25
p =	.257 (NS)		
t =	1.15		

NS = Not Significant

job satisfaction values obtained for the all 53 MPNs (75.09) who participated in this investigation appear to be similar to the norm scores for engineers, supervisory nurses, and full-time professional nurses, but are lower than for managers. Without current norm scores on

larger samples of similar subjects, comparisons between scores, and generalizations regarding the job satisfaction of MPNs may not be appropriate.

Role Ambiguity and Role Conflict

Table II displays the role ambiguity and role conflict mean values for MPNs with perceptual congruency and for those with perceptual noncongruence. The higher the role conflict score, the higher the perceived role conflict. The mean score for the 25 MPNs with perceptual congruency reveals slightly higher measured perceptions of both role ambiguity and role conflict than for the MPNs with perceptual noncongruency. Due to reverse scoring of the role ambiguity scales, the lower the role ambiguity score, the higher the perceived role ambiguity. The difference in means is not significant at the $p < .05$ level for the role conflict measures, but the t-Test revealed a significant difference between the mean scores of measured role ambiguity between MPNs with perceptual congruence and perceptual nonongruence. The MPNs with perceptual congruence paradoxically measure greater role ambiguity (reverse scored) as revealed by a lower mean score of 26.52 as compared to 30.86 for the MPNs with non-congruent perceptions.

Table II

Role Ambiguity and Role Conflict

	Non-Congruent (n=28)	Congruent (n=25)	All MPNs (N=53)
Role Ambiguity			
Mean =	30.86	26.52	28.81
p =	.048*		
t =	2.02		
Role Conflict			
Mean =	31.29	35.24	33.15
p =	.158		
t =	-1.433		

*p <.05

Relationships Between Perceptions

In order to further investigate the nature of the relationships between the measured perceptions of role ambiguity, role conflict, job satisfaction, and perceptual congruence, Pearson Product Moment correlations were computed. Perceptions of interactional style were not related to role ambiguity, role conflict, or any of the three components of job satisfaction. However, to further examine the interplay of perceptions, an

analysis of correlations within the subgroups of MPNs with positive and negative congruence was conducted.

Table III shows that for all 53 MPNs, role ambiguity is highly correlated positively to all three measures of job satisfaction while role conflict is negatively correlated, but less powerfully than role ambiguity. The relative strength of the correlations between role ambiguity and the three job satisfaction measures can be interpreted to mean that higher

Table III

Relationships between Satisfaction, Role Perceptions and Perceptual Congruence

N=53

	Role Ambiguity	Role Conflict	Congruence of Perception
General Job Satisfaction	.70*	-.52*	-.21
Intrinsic Job Satisfaction	.56*	-.45*	-.19
Extrinsic Job Satisfaction	.63*	-.41*	-.16
Role Ambiguity			-.27
Role Conflict			.20

* $p < .05$

perceptions of MPN role ambiguity (low score = higher role ambiguity) correspond to lower levels of job satisfaction. Consequently, higher measured scores for perceptions of role ambiguity, or less perceived role ambiguity, correlate with higher levels of job satisfaction.

The relationships revealed are significant as shown by the correlation coefficients exceeding the critical values of r. This finding corresponds with previous studies concerning perceptions of role ambiguity and role conflict related to job satisfaction measures. In this case, the degree of perceived role ambiguity is a better predictor of job satisfaction levels than the perceived degree of role conflict.

Correlation coefficients of measured role conflict and job satisfaction for all 53 MPNs are included in Table III. Role conflict correlates negatively to all job satisfaction measures. As measured perceptions of role conflict increase, job satisfaction decreases. The relationship is significant as shown by the coefficients exceeding the critical value of r, but the relationships are not as strong as for role ambiguity.

The correlations in Table III reveal differences in the ranking of correlations for intrinsic (satisfaction with the work itself) and extrinsic (satisfaction with

the work environment) job satisfaction in relation to perceptions of role ambiguity and role conflict. Role conflict correlates more negatively to intrinsic job satisfaction than to extrinsic job satisfaction (-.45 vs. -.41). Therefore, greater role conflict results from demands made on MPNs in relation to the work itself. Role ambiguity correlates more positively to extrinsic job satisfaction than to intrinsic job satisfaction (.63 vs. .56). This means that role ambiguity is more likely related to aspects of the work environment than to the work itself. Perceptions of role ambiguity have a relatively stronger relationship to measured perceptions of extrinsic job satisfaction while perceptions of role conflict are relatively stronger in relation to perceptions of intrinsic job satisfaction. The same is true for role conflict. Higher perceptions of role conflict correlate more negatively to intrinsic satisfaction (the work itself) than to extrinsic (the work environment) satisfaction levels.

To obtain yet another perspective on these measures, the correlations between role ambiguity and role conflict and all three job satisfaction measures within the subgroups of MPNs with perceptual congruence and noncongruence were compared. Table IV presents the

Table IV

Relationships of Role Perceptions and Job Satisfaction for MPNS with Congruent and Noncongruent Perceptions of AONs' Interaction Style

N=53

I. Perceptual Noncongruence (n = 28)	Role Ambiguity	Role Conflict
General Job Satisfaction	.50*	-.49*
Intrinsic Job Satisfaction	.36	-.33
Extrinsic Job Satisfaction	.38*	-.43*

II. Perceptual Congruence (n = 25)	Role Ambiguity	Role Conflict
General Job Satisfaction	.79*	-.51*
Intrinsic Job Satisfaction	.62*	-.49*
Extrinsic Job Satisfaction	.74*	-.37

*p <.05

correlations for the MPNs with perceptual congruence and noncongruence. Strikingly, MPNs with perceptual congruence show considerably higher significant correlation coefficients for role ambiguity than the MPNs with perceptual noncongruence. Although for the most part, role conflict correlates similarly for both groups, intrinsic satisfaction with the work itself notably correlates more negatively to role conflict for the MPNs with perceptual congruence than for the MPNs with perceptual noncongruence (-.49 vs. -.33). Likewise, extrinsic satisfaction with work environment correlates more negatively to role conflict for the subjects with perceptual noncongruence (-.42 vs. -.37) than for subjects with perceptual congruence.

Summary of Findings

Question 1: Perceptual congruence and job satisfaction. Does perceptual congruence between MPNs and AONs (AONs) regarding the adminstrator's interaction style relate to job satisfaction of MPNs? The findings of this study revealed that perceptual congruence, as constructed and operationalized for this study was not related to the job satisfaction of the subjects in this study.

Question 2: Perceptual congruence and role conflict and role ambiguity. Does perceptual congruence between AONs and MPNs regarding the AON's interaction style relate to perceived role ambiguity and role conflict of MPNs? A significant difference was found between the measured perceptions of role ambiguity for MPNs with perceptual congruence and those with perceptual noncongruence. MPNs with perceptual congruence had significantly higher levels of role ambiguity, but no significant difference in levels of role conflict were revealed by the data for MPNs with perceptual congruence and those with perceptual noncongruence. The data tended to support a stronger relationship between role ambiguity and role conflict and job satisfaction for MPNs with perceptual congruence.

Question 3: Role ambiguity and role conflict and job satisfaction. Are role conflict and role ambiguity related to the job satisfaction of MPNs? Higher measured perceptions of both role ambiguity and role conflict correlated with lower job satisfaction levels; role ambiguity had the strongest relationship.

Conclusions

Significant findings of this study reveal that congruent perceptions of interaction style of their AONs by MPNs are associated with higher perceptions of role ambiguity. Differences in perceptions of role conflict were not significant between MPNs with perceptual congruence and noncongruence. Additionally, higher job satisfaction levels of MPNs correspond to lower perceptions of role ambiguity and conflict. Data indicated role ambiguity to be more closely associated with job satisfaction levels than role conflict.

Relationship to the Literature

The significant findings of this study conform to several prior investigations which compared perceptions of role ambiguity and role conflict to job satisfaction. Similar to this study, prior investigations found lower perceptions of role ambiguity and role conflict consistently corresponded with higher levels of job satisfaction in prior research. Role ambiguity as the salient predictor of job satisfaction also conforms to prior findings (House & Rizzo, 1972; Johnson & Stinson,

1975; Kahn et. al., 1964; Katz & Kahn, 1966; Keller, 1975; Murray, 1983; Organ & Green, 1974; Rickard, 1986; Rizzo, House, & Lirtzman, 1970; Schuler, Aldag, & Brief, 1977).

Perceptual congruence corresponded significantly to higher perceptions of role ambiguity. This finding is paradoxical in relation to job satisfaction correlations showing high correspondence between low role ambiguity levels and high job satisfaction levels. Because the construct of perceptual congruence for this study differs from previously developed variables related to role perceptions and job satisfaction, comparisons to prior research is tentative at best. However, since lower role ambiguity corresponded to higher job satisfaction levels for MPNs with perceptual congruence, it can be concluded that improving congruency of perceptions via better communication is supported. The literature supports any management attempt to improve communication processes in organizations. Without further analysis of the data and a broader investigation, further suppositions are not warranted. Increasing educational levels of the workforce, particularly in nursing management and leadership mandates

continued research to support the professional goals and responsibilities nurses have in the health care delivery system.

Implications

Research such as the present study increases the paths of analyses for interactional relationships and perceptions of important aspects of behavior by nurses in management and leadership roles. Studies which provide insight into attitude and behaviors give managers information upon which to evaluate their own behavior and leadership strategies to improve the quality of work life for organizational members. This study provides managers with information regarding perceptions which may be helpful in examining their communication behavior. By surveying their management team's perceptions of role ambiguity, role conflict, job satisfaction, and perceptions of communication patterns, AONs can identify individuals who could benefit from more communication-focused attention. AONs could then direct their attention to the communication needs of particular individuals personally or recruit other management team members to purposefully interact with

targeted individuals. If members of particular organizational subunits scored high for perceptions of role ambiguity or conflict, the AON could direct the subunit's managers to improve their communication skills and ultimately clarify their expectations for specific roles. Feedback to the leader regarding concepts presented in this study serve to enhance their insight and ability to evaluate aspects of their leadership behavior in relation to member needs.

Any one of the instruments used for this study could be adapted and incorporated into organizational development programs to benefit communication processes. Findings of this study will contribute to the knowledge available to make comparisons of job satisfaction, role perceptions, and interactional style. Open and forthright approaches by leaders to support team building initiatives by management team members promotes transformations of the organization's communication processes (Beck & Hillmar, 1986; Deegan, 1979; Ceccio & Ceccio, 1982; England, 1985; Raelin, 1986). The personal risks for leaders of such an approach involves their ability and/or limitations to meet organizational members' expectations (Lawler & Suttle, 1973). Core improvements in organizational processes, member behavior, and attitudes must evolve to enable members to meet contin-

gencies (Lancaster & Lancaster, 1982). The goal of formal leaders should be to achieve a workable correspondence for their organizational members between job satisfaction, job design, and role perceptions to improve their organization's performance. Through development of refined communication processes, leaders can influence the functions of their organizations and improve its effectiveness. Communication provides a pathway to implement management's responsibility.

Interventions by leaders to improve any aspect of organizational communication can justifiably be considered "team building". Such interventions require behaviors characteristic of leaders of many successful organizations in modern socioeconomic systems (Baird, 1987; Beck & Hillmar, 1986; Bonaquist, 1986; Flynn, 1987; Lancaster, 1985; Maslow, 1965; Pascale & Athos, 1981; Peters & Waterman, 1982). Leaders and managers with sophisticated communication behaviors have demonstrated that meeting the information needs of subordinates enhances their job satisfaction, their members' satisfaction, and the organization's effectiveness. Improving communication and information networks within and between organizations serves to catalyze progress toward more organic and synergistic person-centered organizational processes.

Recommendations for Further Analysis and Research

Alternative research designs may contribute to further analysis and comparison with prior research. Communication satisfaction may be a more appropriate measure to investigate role perceptions and leader behavior (Downs, 1977). Completion of LIFO-Self (Atkins, 1981) by MPNs in this study would allow application of attribution theory to determine whether they perceived their AON's interaction style similarly to perceptions of their own interaction style (Bartunek, 1979).

Additional opportunities exist to investigate communication in organizations using a variety of methodologies such as social system analyses, ethnographic identification of communication behaviors, and utilization of updated instruments to measure job satisfaction (Stamps & Piedmonte, 1986). A case study of a matrix nursing organization could provide insight into problems concerning multiple functional responsibilities and overlapping authority characteristic of boundary-spanning professional roles. For nurses, the conflict of professional values with management values and with traditional characteristics of the work

environment applies to current nursing practice (Raelin, 1986). As health care in America becomes increasingly complex and costly, nurses have an opportunity through their strategic responsibilities and professional leadership to guide organizational processes toward greater balance and effectiveness. Nurses must influence their peers in nursing and other health care providers to progressively collaborate in health care delivery organizations and gain recognition for nursing's valuable contributions.

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APPENDIXES

APPENDIX A

Administrator of Nursing Contact Letter

July 25, 1987

(Adminstrator of Nursing)
(Hospital)

Dear (Adminsitrator of Nursing):

I am initiating a research study to describe and explore the role performance and leadership behavior of nurses who hold Master's degrees. In order to contact individual nurses at your facility who hold graduate degrees, I am seeking your assistance to provide a list of their names and your permission to solicit their participation in this study.

The employing facility and all data collected from nurses who participate will be kept confidential and will be known by this writer. All data will be summarized as aggregate data for any presentations or publications that arise from the research.

Returning a list of graduate prepared nurses on your staff will idicate your voluntary consent for me to request their participation in this study. A summary of the results of this study will be offered to all participants and their administrators of nursing.

Enclosed in this mailing you will also find the LIFO-SELF questionnaire with instructions for completion. This instrument will be scored with the assistance of a certified LIFO Trainer. The results of this questionnaire will be coded after scoring and only aggregate data will be used for comparisons and analyses. The original questionnaire will be kept in a locked file cabinet. Your anonymity will be strictly guarded. For purposes of publications or presentations, only aggregate data will be used and neither individuals nor institutions will be identified.

Your collaboration in this research effort will be greatly appreciated. A summary of the result of this study will be sent to you.

Sincerely,

Randall Nentrup
Graduate Nursing Student

APPENDIX B

Master's Prepared Nurse Contact Letter

(Master's Prepared Nurse)
(Employing Facility)

Dear Master's Prepared Nurse:

I an conducting a study for my thesis in which self-perceptions of interpersonal interactional style of your nursing administrator will be compared to your perceptions of his/her communication style using the enclosed LIFO instrument. I will be examining the effect that congruence or dissonance of perceptions has on job satisfaction. Your administrator has completed the self-perception instrument and provided me with your name and permission to solicit your participation in this study.

Enclosed in this mailing you will find the LIFO-AP questionnaire with instructions for completion. This instrument will be scored with the assistance of a certified LIFO Trainer. The results of this questionnaire will be coded after scoring and only aggregate data will be used for comparisons and analyses. The original questionnaire will be kept in a locked file cabinet. Your anonymity will be strictly guarded. For purposes of publications or presentations, only aggregate data will be used and neither individuals nor institutions will be identified.

Two additional questionnaires are provided. "The Way Your Job is Designed" will be used to describe certain aspects of your professional work perceptions and the Minnesota Job Satisfaction questionnaire will provide information related to your job satisfaction. Instructions are included on each questionnaire.

The total time needed to complete these instruments is about an hour. I know how valuable your time is and greatly appreciate your participation. Enclosed is a pre-addressed and stamped envelope for your convenience. Please return all items enclosed even if you decide not to complete the questionnaires. Again, I wish to thank you for the time you have given to participate in this study and hope you have not been inconvenienced.

If you wish to receive a summary of the results of this study, please check below.

Sincerely,

Randall Nentrup

_____ Please provide me with a summary of the results.

APPENDIX C

Role Ambiguity and Conflict Questionnaire*

The following questions concern certain aspects of your job. Please circle a number for each item depending on how true your think the statement is. There is no "right answer", so please respond according to how you see your job at the present time. A value of one (1) signifies that the statement is very false, while a value of seven (7) indicates that the statement is very true.

		Very False						Very True
1.	I feel certain about how much authority I have.	1	2	3	4	5	6	7
2.	Clear, Planned goals and objectives exist for my job.	1	2	3	4	5	6	7
3.	I have to do things that should be done differently	1	2	3	4	5	6	7
4.	I know that I have divided my time properly.	1	2	3	4	5	6	7
5.	I receive an assignment without the manpower to complete it.	1	2	3	4	5	6	7
6.	I know what my responsibilities are.	1	2	3	4	5	6	7
7.	I have to buck a rule or policy to in order to carry out an assignment.	1	2	3	4	5	6	7

*Retitled "The Way Your Job is Designed" for this thesis.

8.	I work with two or more groups who operate quite differently.	1	2	3	4	5	6	7
9.	I know exactly what is expected of me.	1	2	3	4	5	6	7
10.	I receive incompatible requests from two or more people.	1	2	3	4	5	6	7
11.	I do things that are apt to be accepted by one person and not accepted by others.	1	2	3	4	5	6	7
12.	I receive an assignment without adequate resources and materials to execute it.	1	2	3	4	5	6	7
13.	Explanations are clear of what has to be done.	1	2	3	4	5	6	7
14.	I work on unnecessary things.	1	2	3	4	5	6	7

VITA

Randall Nentrup was born in Bloomington, Indiana. He graduated from Indiana University in 1975 with a Bachelor of Arts in Political Science. While working as an Adult Probation Officer, he completed degree requirements for a Master's in Public Administration from the University of Dayton, Dayton, Ohio in 1984. He continues to study management theory while practicing as a professional nurse.