

## Organizational Support and Leader Member Exchange as Perceived by Staff Nurses

Hanaa Mahmoud Moustafa , Rabab mahmoud Hassan, Fawzia mohammed Badran

Nursing administration department, Faculty of Nursing, Ain Shams University.

### Abstract

**Background:** Supporting employees in health care sectors plays an important role as employees are the backbone of the hospital .This support from organization or supervisor will help achieving both organizational and employees goals. **Aim of the study:** assess the relationship between organizational support and leader member exchange. **Design:** A descriptive correlational design was used in carrying out the study. **Setting:** The study was conducted at Menoufia University Specialized Hospital which affiliated to Menoufia University hospitals. **Subjects:** (219) staff nurses out of (500) who were eligible to participate in this study using simple random sample technique. **Tools:** organizational support questionnaire and leader member exchange questionnaire. **Results:** Majority of staff nurses had low perception toward organizational support and sixty percent of staff nurses had moderate perception toward leader member exchange. **Conclusions:** About more than three quarters of staff nurses had low perception regarding organizational support, less than two thirds of staff nurses had moderate perception toward leader member exchange and there is a statistically positive correlation between organizational support and leader member exchange. **Recommendations:** hospital manager have to Consider employees values, interests and discuss staff complains and problems, recognize and appreciate the creative ideas and support it , Conduct an orientation programs to newly staff to explain their rights and responsibilities , the hospital mission and objectives .

**Key words:** leader member exchange - Organizational support -staff nurses.

### Introduction

In any organization employees need acknowledgement and support at all levels; employees are viewed as one of the most important assets because high productivity and high performance of any organization could not be realized without employees support and their contribution. Employees are partially responsible for development of strategy and the achievement of organizational goals (Colakoglu *et al.*, 2010). When individuals perceive that the organization is valuing their contribution and viewing concern about their interests, the individual will be obliged to be committed to the organization through work efforts (Khattak *et al.*, 2014).

Perceived organizational support (POS ) is defined as a general belief in which employees feel that their organization values their contributions and cares about

their well being (Krishnan and Mary, 2012). Perceived organizational support is the beliefs of employees in regards to the extent to which the organization meets their socio-emotional needs, and how the organization responds to increased efforts at work (Baran *et al.*, 2012). Perceived organizational support develops as a result of social exchange relationships with the organization and instills a sense of obligation that leads to positive attitudes toward the organization and performance (Baran *et al.*, 2012).

There are three general categories of favorable organizational support received by employees in the organization. The first is fairness, the second supervisors support, third rewards and job conditions, In addition to, access to information, training, trust, access to opportunity to learn and develop, organization size and leadership style. Perceived Organizational Support is higher

when rewards are fair, employees are involved in decision making, and supervisors are seen as supportive (*Mathumbu, 2012*).

Leader member exchange (LMX) is a factor affects employees perception about different aspects of their organization. LMX affects Perception of organizational support, good relationships should be established between managers and followers to achieve competitive advantages. Furthermore, supervisor and subordinate should set mutual work related goals which will develop a higher quality relationship between supervisor and subordinates (*Ahmadai et al., 2014*).

Exchange relationship, demonstrates the relationship between supervisors and subordinates during their work (*Bhatti et al., 2013*). LMX can be defined as the relation in which supervisors employ a social exchange framework in which varying types of relationships are established with subordinates that range on a continuum from lower to higher quality exchanges (*Kang et al., 2011*). The vertical link between a leader and a follower is varied within a work unit and is dependent on many factors. There are different types of relationships between leaders and followers predicated on roles and social and economic exchanges influenced by leader behaviors and follower outcomes (*Chou et al., 2011*). Leaders have an important effect on employees' attitudes and behaviors, both positive and negative employee outcomes (*Agarwal et al., 2012*). Employee who perceives high LMX from superior and safety environment in organization may feel obligation to work with high performance (*Cho et al., 2014*).

### **Significance of the study**

The researcher as a head nurse in the study setting observed that there is a conflict between nurse manager and their subordinates which affect their relationship. Nurse manager give no attention to their subordinates, there is no appreciation for

their efforts, give them no chance to participate in decisions making , not value their contribution, ignore any complain from them, not cares about their general satisfaction at work, the employees have no rights but duties.

All these factors will affect staff nurses attitude toward their supervisor and the hospital they work in. Building a good relations and supervisor support is the only way to make the worker feel that his goals are aligned with the goals of the organization. They will be obliged to do their best for achieving organizational definite success. SO, it is important to finding out the relationship between perceived organizational support and leader member exchange among staff nurses.

### **Aim of the Study**

This study aims to explore the relationship between perceived organizational support and leader member exchange .

### **Research Question**

- Is there a relationship between organizational support and leader member exchange as perceived by staff nurses?

### **Research design**

A descriptive correlational design was used to carry out this study.

### **Setting**

The study was conducted at Menoufia University Specialized Hospital this hospital is one of Menoufia University hospitals.

### **Subjects**

(219) staff nurses out from (500) were eligible to participate in this study by using simple random technique for selection.

### **Data collection tools**

Two tools were used for data collection namely perceived organizational support survey and leader member exchange survey.

### First tool: perceived organizational support (POS) survey .

It consist of 2 parts:

#### Part (1) Demographic data:-

This part was intended to data pertaining to demographic characteristics of the study subjects. Including age, gender, marital status, experience, qualification attending training courses , years of experience in nursing , experience in current unit.

#### Part (2)

This part aimed at assessing staff nurses perception about organizational support. It was developed by (*Eisenberger et al., 1990*), and adopted from (*Ali, 2013*) It consists of (12) statements.

#### ❖ Scoring system:

- Subjects responses were based on five points likert scale ranging from :

Strongly agree = 5, Agree = 4, Neutral = 3, Disagree =2, strongly disagree = 1 . Negative statements were number 3,5,6,8,11,12; so the scoring system was reversed. Item scores are added together to get a dimension score for every participant; then a mean score is calculated for each dimension. The minimum possible total score was (12) and the maximum possible total score was (60). Participant score of perceived organizational support is considered low if it is less than (50.0%). The participant had moderate perception if the score ranges from (50.0%-75.0%). If the score is more than (75.0%), the participant had high perception level . (*Mohamed and El-shaer, 2013; Elsabahy et al., 2013*).

### Second tool: - Leader Member Exchange Survey

It aimed to assess staff nurses' perception about leader member exchange. This tool was developed by *Liden & Maslyn (1998)* and adopted from (*Hazare, 2015*) and was modified by the researcher. It consists of four dimensions: Affect (10

items), Loyalty (10 items), Contribution (9 items) and Professional respect (10 items).

#### ❖ Scoring system

Study subject responses were\_ based on five points likert scale ranging from Strongly agree = 5, Agree = 4, Neutral = 3, Disagree =2, strongly disagree =1 , Item scores are added together to get a dimension score for every participant; then a mean score is calculated for each dimension.

A mean % score is calculated for each dimension by dividing the total dimension score by the number of items in the dimension \*5 (max. score).Study subject considered low if it is less than ( 46 % ) , and considered moderate perception if the score ranges from ( 46.0- 63.9 % ) and considered to be high if the score ranges from (64-100 %) (*Hazar,2015*).

#### Preparatory phase:

This phase started from November 2017 till January 2018 , the researcher reviewed the national and international related literature concerning the topic of the study, the material in textbooks &scientific journals were used in the study.

#### Pilot study:

A pilot study was was carried out on 10 % of total study subject, include (30) of staff nurses and they are included in study sample , to examine feasibility, practicability, applicability of the tool, clarity of the language and estimate the time needed to fill the sheets. The time taken to fill in the sheet ranged from (30 - 45) minutes. Based on the findings of the pilot study, necessary modifications and clarifications of some questions were done.

#### Field work:

The field work of the study took ( 3 ) months started from beginning of March 2018 and completed at the end of May 2018. The researcher met head nurse to take a permission for collecting needed data and introduced herself to staff nurses , then the components of questionnaire sheets were explained to the

participants. The researcher distributed the questionnaire sheet to staff nurses in their work settings at different times and returned at the end of day or another day to collect the sheets because they are not available all the time. And also the researcher arranged with the shift coordinators for facilitating choosing the suitable time to collect the data. The data was collected 5 days per week, 4 sheets per day. The researcher checked each questionnaire sheet to ensure the completion of all information.

#### **Tools validity**

The tool was tested for face and content validity by jury group this group consisted of five Professors specified in Nursing Administration from various faculties of nursing. One assistant professor from Ain Shams University, two Assistant professors from Cairo University and two Assistant professors from Menoufia University. No modifications were done after finishing jury.

#### **Tools reliability :**

Tools reliability was tested using Cronbach's alpha reliability coefficient. Test of reliability for organizational support survey showed (0.76), Leader Member Exchange Survey showed 0.78).

#### **Ethical consideration:**

Ethical approval was obtained from the Scientific Research Ethical Committee of the Faculty of Nursing at Ain Shams University. The subjects were informed about their right to withdraw from the study at any time without giving any reason and that the collected data will be kept confidential. Informal consent was obtained from each participant in the study.

#### **Results:**

**Table (1):** Shows that (52.1%) had age between 30-40 years old with a mean age of  $35.67 \pm 5.08$ . 83.1% and 93.2% of them were females and married respectively. (52.1%) of study sample had nursing diploma, (96.8%) had training courses,

(59.4%) had years of experience in nursing between 15-25 years; with a mean years of experience in nursing  $15.88 \pm 5.99$ ; (58.0%) had experience in the current unit between 15-25 years; with a mean experience in current unit  $13.43 \pm 4.92$ .

**Table (2):** Shows that most of studied staff nurses had low perception regarding most of the items reflecting organizational support while all of them had low perception toward two items of support (The hospital strongly considers my goals and values, The hospital really cares about my wellbeing).

**Figure (1):** This figure shows that more than three quarters of staff nurses (92.7%) had low perception toward organizational support.

**Table (3):** indicates that majority of staff nurses (96.3%) had low perception toward most of items reflecting affect dimension as (Supervisor is eager to promote teamwork and spread the spirit of cooperation among nurses, Supervisor constantly follow up with new staff guiding them to cope with problems they might encounter at work, Supervisor utilize previous experiences to positively affect and promote nurses).

**Table (4):** Describes that the majority of staff nurses (97.3%) had low perception toward items (I find harmony between the hospital's goals and my own & (96.8%) had low perception toward item (the hospital is keen on providing a work environment that is convenient for employees), respectively.

**Table (5):** shows that the majority of staff nurses had low perception toward items reflecting contribution dimension (98.6%) as (supervisor gives powers to skilled and experienced subordinates" & (96.8%) had low perception

toward item ( hospital highlights colle moderate perception toward loyalty performance through the formation of work tea dimension and more than two thirds had respectively . moderate perception toward affect dimension .

**Table (6):** Shows that 59.4% of staff nurses had moderate perception toward items (I can reach the decision-makers and easily express my opinion , ( 60.3 %) had moderate perception( My direct supervisor stimulates me to get greater responsibility ) , respectively , while majority of them had low perception toward most of the items reflecting respect dimension as (My direct supervisor appreciates my efforts at work , My supervisor makes me feel the importance of my job as a vital part of the organization) .

**Table (7):** Describes that all of staff nurses had low perception toward professional respect dimension, while more than three quarter of them (79%) had

**Figure (2):** Shows that (60.7%) slight more than three fifth of studied staff nurses had moderate perception toward leader member exchange.

**Table (8):** Shows that there were a highly statistically significant correlations between organizational support & leader member exchange dimensions.

**Table (9):** Describes that there is a highly statistically significant correlation between organizational support & leader member exchange.

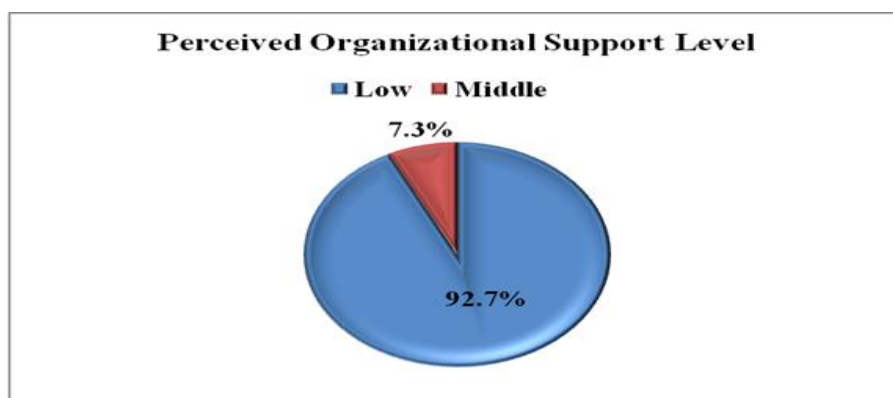
**Table (1):** Sociodemographic characteristics of staff nurses in the study sample (n=219).

Variables	No.	%
Age	Less than 30 years	87 39.7%
	30-40 years	114 52.1%
	More than 40 years	18 8.2%
Age (Mean ± SD)	35.67±5.08	
Gender	Male	37 16.9%
	Female	182 83.1%
	Single	15 6.8%
Marital status	Married	204 93.2%
	Divorced	0 0.0%
	Widowed	0 0.0%
Nursing Qualification	Diploma	114 52.1%
	High average diploma	86 39.3%
	Bachelor degree	19 8.7%
Attending training courses	No	7 3.2%
	Yes	212 96.8%
Years of Experience in nursing	Less than 15 years	73 33.3%
	15-25 years	130 59.4%
	More than 25 years	16 7.3%
Years of Experience in nursing	Mean ± SD 15.88±5.99	
Experience in current unit	Less than 15 years	76 34.7%
	15-25 years	127 58.0%
	More than 25 years	16 7.3%
Experience in current unit	Mean ±SD 13.43±4.92	

## . Part II

**Table (2):** Staff nurses perception regarding organizational support (n=219).

Organizational support Items	Low (<50%)		Moderate (50%-75%)		High (>75%)	
	No.	%	No.	%	No.	%
1. The hospital strongly considers my goals and values	219	100.0%	0	0.0%	0	0.0%
2. The hospital really cares about my wellbeing.	219	100.0%	0	0.0%	0	0.0%
3. The hospital disregards my best interests when it makes decisions that affect me (*).	215	98.2%	2	0.9%	2	0.9%
4. The hospital takes pride in my accomplishments at work.	129	58.9%	89	40.6%	1	0.5%
5. Even if I did the best job possible, the hospital would fail to notice (*).	187	85.4%	15	6.8%	17	7.8%
6. If given the opportunity, hospital would take unfair advantage of me (*).	195	89.0%	10	4.6%	14	6.4%
7. The hospital is willing to help me if I need a special favor.	213	97.3%	5	2.3%	1	0.5%
8. The hospital would ignore any complaint from me (*).	212	96.8%	2	0.9%	5	2.3%
9. The hospital values my contributions to its well-being.	199	90.9%	19	8.7%	1	0.5%
10. The hospital would grant a reasonable request for a change in my working conditions.	113	51.6%	105	47.9%	1	0.5%
11. The hospital shows little concern for me (*)	212	96.8%	1	0.5%	6	2.7%
12. If hospital could hire someone to replace me at training or travel abroad it would do so (*)	163	74.4%	50	22.8%	6	2.7%

**Figure (1):** Staff nurses total perception level regarding organizational support (n=219).

## Part III

**Table (3):** Staff nurses perception level regarding Affect Dimension (n=219).

Items	Low <46.0%		Moderate 46.0%-63.9%		High 64.0%-100.0%	
	No.	%	No.	%	No.	%
1. Supervisor give me the ability to change some procedures at work.	94	42.9%	123	56.2%	2	0.9%
2. Supervisor instruct me to perform job instructions.	65	29.7%	152	69.4%	2	0.9%
3. Supervisor is eager to promote teamwork and spread the spirit of cooperation among nurses.	209	95.4%	9	4.1%	1	0.5%
4. Supervisor delegate some tasks for me & my colleges	42	19.2%	161	73.5%	16	7.3%
5. Supervisor constantly follow up with new staff guiding them to cope with problems they might encounter at work.	211	96.3%	6	2.7%	2	0.9%
6. Supervisor gained extensive experience form previous work positions in dealing with nurses.	209	95.4%	10	4.6%	0	0.0%
7. Supervisor utilize previous experiences to positively affect and promote nurses.	207	94.5%	8	3.7%	4	1.8%
8. Supervisor communicate with me continuously.	76	34.7%	142	64.8%	1	0.5%
9. I positively influenced by my supervisor personality.	65	29.7%	154	70.3%	0	0.0%
10. Supervisor respect my opinion at work.	206	94.1%	13	5.9%	0	0.0%

**Table (4):** Staff nurses perception regarding Loyalty Dimension (n=219).

Items	Low <46.0%		Moderate 46.0%-63.9%		High 64.0%-100.0%	
	No.	%	No.	%	No.	%
11. I reflect a perfect image of the hospital to others.	75	34.2%	143	65.3%	1	0.5%
12. I implement any tasks assigned to me with complete satisfaction and loyalty to the hospital.	47	21.5%	163	74.4%	9	4.1%
13. I find harmony between the hospital's goals and my own.	213	97.3%	4	1.8%	2	0.9%
14. My personal values match the hospital's norms.	208	95.0%	4	1.8%	7	3.2%
15. I consider my hospital as one of the distinguished national hospitals.	173	79.0%	36	16.4%	10	4.6%
16. I exchange advice and meaningful guidance with my colleagues at work.	83	37.9%	129	58.9%	7	3.2%
17. Cooperation and participation are available among members regarding professional tasks implementation.	73	33.3%	135	61.6%	11	5.0%
18. The hospital motivates me financially and morally to provide the best performance at my work.	206	94.1%	7	3.2%	6	2.7%
19. The hospital is keen on providing a work environment that is convenient for employees.	212	96.8%	6	2.7%	1	0.5%
20. I do outstanding efforts towards success of the hospital	199	90.9%	16	7.3%	4	1.8%

**Table (5):** Staff nurses Perception regarding contribution Dimension (n=219).

Items	Low <46.0%		Moderate 46.0%-63.9%		High 64.0%-100.0%	
	No.	%	No.	%	No.	%
21. Atmosphere of cooperation is available between supervisor and his/her Subordinates within the hospital.	196	89.5%	21	9.6%	2	0.9%
22. Hospital highlights collective performance through the formation of work teams.	212	96.8%	5	2.3%	2	0.9%
23. Trust prevails among staff in the hospital.	211	96.3%	7	3.2%	1	0.5%
24. Supervisor allows subordinates to participate in decision-making regarding the work progress.	210	95.9%	2	0.9%	7	3.2%
25. Supervisor encourages subordinates to exercise leadership roles in their careers.	208	95.0%	9	4.1%	2	0.9%
26. Supervisor has confidence in my ability to accomplish tasks entrusted to me.	69	31.5%	148	67.6%	2	0.9%
27. Supervisor gives powers to skilled and experienced subordinates.	216	98.6%	3	1.4%	0	0.0%
28. Supervisor provides sufficient flexibility to subordinates to carry out their work.	90	41.1%	129	58.9%	0	0.0%
29. Supervisor takes staff's feedback into consideration and adopts good proposals.	205	93.6%	14	6.4%	0	0.0%

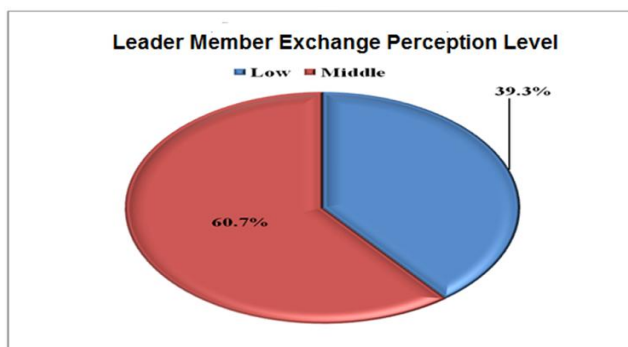
**Table (6):** Staff nurses perception regarding Professional Respect Dimension (n=219).

Items	Low <46.0%		Moderate 46.0%-63.9%	
	No.	%	No.	%
30. My direct supervisor appreciates my efforts at work.	219	100.0%	0	0.0%
31. Organization's Management allocates sufficient funds for the implementation of new creative ideas.	218	99.5%	1	0.5%
32. My supervisor makes me feel the importance of my job as a vital part of the organization.	216	98.6%	3	1.4%
33. Organization gives me a sense of security and stability.	218	99.5%	1	0.5%
34. I can reach the decision-makers and easily express my opinion.	89	40.6%	130	59.4%
35. My direct supervisor stimulates me to get greater responsibility.	87	39.7%	132	60.3%
36. Applicable incentive system achieves equity for all nurses.	218	99.5%	1	0.5%
37. Appreciation for my efforts by my direct supervisor is a real incentive for further achievements.	147	67.1%	72	32.9%
38. Supervisors appreciate and cherish efforts of nurses.	219	100.0%	0	0.0%
39. Supervisors have great confidence in capabilities of nurses.	219	100.0%	0	0.0%



**Table (7):** Staff nurses perception regarding Leader Member Exchange (n=219).

Leader member exchange Dimensions	Low <46.0%		Moderate 46.0%-63.9%	
	No.	%	No.	%
Affect	69	31.5%	150	68.5%
Loyalty	46	21.0%	173	79.0%
Contribution	207	94.5%	12	5.5%
Professional Respect	219	100.0%	0	0.0%

**Figure (2):** Staff nurses total perception level regarding Leader Member Exchange (n=219).

## Part VI

**Table (8):** Correlation between organizational support and dimensions of Leader member exchange.

Variables	Organizational Support	
	R	P-value
Affect	0.241	0.000**
Loyalty	0.408	0.000**
Contribution	0.158	0.020*
Professional Respect	0.244	0.000**

(\*) Statistically significant at P&lt;0.0

(\*\*) Highly statistically significant at P&lt;0.01

**Table (9):** Correlation between organizational support and Leader member exchange.

Variables	Organizational Support	
	R	P-value
Leader Member Exchange	0.338	0.000**

(\*\*) Highly statistically significant at P&lt;0.01

## Discussion

In healthcare field nurses play a critical role in delivering exemplary health care. For nurses to perform at their best, they need to experience high engagement, which can be achieved by providing them necessary organizational support and proper working environment, they are the corner

stone for any hospital. Therefore, motivating and appreciating them is very important, they will have higher job satisfaction, loyalty and commitment. This represent organizational role in supporting, valuing and considering their needs. Supervisors also as representatives of organization have their role in leading, motivating, delegating responsibilities, participating in decision

making and involve them in all activities. After that employees will be obligated to work harder as they are appreciated and valued along (*Jaiswal and Dhar, 2016*).

A perceived organizational support system plays a significant role in generating a mutually comprehensive and healthy working environment, which ultimately plays a significant role for leading nursing sector. The supportive work environment which includes human resource practices also provides opportunities for participation and skills development which further enhance the motivation level of nursing staff and that feeling appreciated is a key driver of positive organizational outcomes (*Rodwell et al., 2017*).

This study aimed at assessing the level of organizational support and the level of leader member exchange .

The present study showed that majority of studied staff nurses had low perception toward organizational support, as they don't agreed upon most of perceived organizational support items. The most obvious differences in their perception that the hospital strongly considers their goals and values, the hospital really cares about their wellbeing, the hospital would ignore any complain from them and that the hospital shows little concern for them. In line with this, *kwak et al., (2017)* in his study relationship of job satisfaction with perceived organizational support , that conducted on nurses in South Korea, organizational support was investigated and revealed low perceived organizational support among most of nurses.

Regarding dimensions of leader member exchange, first dimension is affect, the current study revealed that more than three quarters of staff nurses had low perception toward items reflecting affect dimension, as supervisor constantly follow up with new staff guiding them to cope with problems they might encounter at work and supervisor respect their opinion at work. This is in agreement with *Rosen et al.,*

(*2017*) who reported in his study ( workplace politics and performance appraisal ) that when conducting performance appraisal, employees showed low perception toward affect dimension that is related directly to their relation with their supervisors and how they perform tasks delegated to them showing that work is shaped by the way that supervisors affect their subordinates positively or negatively.

Concerning the loyalty dimension of leader member exchange this study showed that the majority of staff nurses had low perception toward items reflecting loyalty dimension, the item (I do outstanding efforts towards success of the hospital and I find harmony between the hospital's goals and my own, respectively exchange advice and meaningful guidance with my colleagues at work and I implement any tasks assigned to me with complete satisfaction and loyalty to the hospital respectively), this is consistent with *Rodwell et al., (2017)* on his study ( the impact of characteristics of nurses relationship with their supervisors ) . who revealed that employees will have loyalty to their organization if they are supported at work even by organization, supervisors or colleagues. Also *Bordia et al., (2017)* reported on his study ( effect of resource availability on social exchange relationships ) that conducted on peer network and their effect on leader member exchange revealed low perception toward loyalty dimension as the relationships at work provide extra resources for support and satisfaction among employees.

On the other hand, regarding contribution dimension our study revealed that the majority of staff nurses had low perception toward items reflecting contribution dimension for example (Atmosphere of cooperation is available between supervisor and subordinates within the hospital and supervisor gives powers to skilled and experienced subordinates respectively). This is also clear if supervisor provides sufficient flexibility to

subordinates to carry out their work. Our result is supported by *Venkataramani et al., (2016)* and his study was the influence of team members and team leaders, who reported that the atmosphere of work has a positive effect on work flow and progress as social network affect job performance and feeling supported. Also in the line with, *Wang et al., (2017)* who reported in his study ( interactive effect of leader member tie and network centrality on leadership effectiveness ) that employees with high quality Leader-member exchange relationship can communicate with leaders effectively, and leaders can clearly understand the needs of their subordinates.

Meanwhile, the fourth dimension of leader member exchange (professional respect) also our result revealed that nearly all of staff nurses had low perception toward most of the items reflecting professional respect dimension (my supervisor makes me feel the importance of my job as a vital part of the organization, supervisors appreciate and cherish efforts of nurses, supervisors have great confidence in capabilities of nurses and my direct supervisor appreciates my efforts at work). In agreement with this *Radzi and Othman, (2016)* on his study ( moderating effect of leader member exchange and role breadth self -efficacy ) who added that empowerment in the organization depends on the belief that every member of the organization is able to contribute. The degree of creativity in work, spreading the regulation of respect for and between employees and avoid discrimination among them, showing that recognition and appreciation is an important element that encourage employees for further achievements and success.

In total, the current research findings showed that nearly all staff nurses had low perception toward contribution and professional respect dimensions while, most of them had moderate perception toward other dimensions (loyalty, affect). The result of *Kim et al., (2017)* supports our study and indicates that employees had low perception

toward leader member exchange dimensions as a whole and that employees interpret supervisory help from their leaders and supervisors as being indicative of organizational support for them.

Lastly, the present study clarified that there was a highly statistically significant correlation between total organizational support level and total leader member exchange level, in agreement with *Rahn et al., (2016)* and his study was ( mediating role of leader member exchange on followers out come ) who confirmed that leader member exchange is a major predictor of perceived organizational support and explained that leaders and supervisors are considered to be organizational representatives who impact basic decision making and act as a bridge between the administration and the employees and employees view their supervisors' help as organizational help.

Finally, we can say that Worker's perception of being supported by organization may lead them to feel safe, display positive attitude toward organization and even see themselves as part of the organization. Organizational support, the lack of this perception or low level of this perception may affect the attitude of the worker negatively towards the job and the organization (*Ahmed and Nawaz, 2015*).

The higher the level of LMX is, the higher the employees' perceptions of organizational help and support. Subordinates with high-quality LMX relationships may actually perform better because of the added support, feedback, resources and opportunities provided to them. The quality of LMX has a stronger effect on POS, thus indicating that LMX plays a key role in affecting employees' perceptions of organizational support, both LMX and POS have significant impacts on employees' affective commitment and can later lead to employees' intentions to leave (*Robson and Robson, 2016*).

## Conclusion

### The study finding concluded that:

- Majority of staff nurses had low perception toward organizational support.
- Majority of staff nurses had low perception toward leader member exchange.
- There is a statistically significant positive correlation between organizational support and leader member exchange.

## Recommendations

### The following recommendations are suggested:

#### Nurse manager have to :-

- Consider employees values, interests and complain.
- Evaluate the effect of orientation programs to newly graduates to explain rights and duties.
- Dissemination of organizational values and strategies all over the organization through workshops.

#### Supervisors should:-

- Periodical performance appraisal to assess reasons of deterioration if present.

## Further researches

Further researches are suggested to investigate

- ✓ Staff nurses perception toward organization as a whole.
- ✓ The relation between supervisors and subordinates.
- ✓ How to create a conducive work atmosphere.
- ✓ Future researches are needed to gain further insights on effect of organizational support and the relation between supervisors and subordinates on organizational outcomes.

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