

Exploring the Effects of Work Readiness, Organizational Justice, and Professional Identity on the Work Performance among Newly Nurses

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Abstract

Background: In light of the clinical nurse shortage and rising healthcare needs, enhancing nurses' job performance is vital. Findings suggest that perceived organizational justice, professional identity, emotional labor, and job performance are significantly and positively related. The aim of this study to examine the effects of work readiness, organizational justice, and professional identity on the work performance among newly nurses. **Methods:** A cross-sectional descriptive study included a purposive sample of 200 new nurses from the Pediatric, Medical-Surgical, Critical, Obstetrics and Gynecology department at Sohag University Hospitals. **Five tools were used in this study:** Tools (1): **Nurses' demographic data**, Tools (2): Nurses' work readiness, Tools (3): Nurses' organizational justice, Tools (4): Nurses' professional identity, and Tools (5): Nurses' work performance were utilized for collecting the data. **Results:** The results indicated that work readiness, organizational justice, and professional identity significantly influence new nurses' work performance. Specifically, higher levels of work readiness, organizational justice, professional identity, and were associated with improved job performance. **In conclusion**, this study investigated the ways in which these new nurses' work readiness affected their performance. According to the findings, the relationship between new nurses' work performance and work readiness is mediated by both professional identity and organizational justice. In order to improve job performance, nursing managers should use effective management to enhance nurses' perceptions of organizational justice and professional identity.

Keywords: *Newly Nurses, Professional Identity, Organizational Justice, Work Readiness, & Work Performance among*

Operational definition:

A new nurse is defined as a nurse who has been working for less than a year post-graduation (Kesten et al., 2021).

INTRODUCTION

Work performance refers to the behaviors and actions exhibited by employees that align with an organization's goals and objectives (National Health Commission et al., 2024). It encompasses two key aspects: task performance, which involves completing job responsibilities, and relationship performance, which focuses on enhancing organizational efficiency through interactions with others (Maleki et al., 2023). Various factors influence work performance, including employee characteristics, work environment, managerial style, organizational resilience, social support, commitment, job satisfaction, and burnout (Suliman et al., 2023). Understanding these factors can

help organizations optimize employee performance and achieve their objectives (Alilyyani et al., 2022).

While research has identified various factors impacting work performance in industrial settings, there's a growing need to explore the specific factors influencing new nurses' work performance (Smokrovic et al., 2020). The relationship between work readiness and performance is gaining attention, and it's essential to consider how professional identity and organizational justice affect new nurses' job performance (Kesten et al., 2021). By investigating these factors, we can better understand the challenges and needs of new nurses, ultimately informing strategies to enhance their performance, job satisfaction, and retention in the nursing workforce (Alilyyani, 2022).

Work readiness is a key predictor of new graduates' job performance, career advancement, and development. In nursing, it's crucial for newly graduated nurses to apply theoretical knowledge in practical settings. Nurses with high work readiness can quickly integrate into clinical teams, perform tasks independently, and demonstrate long-term potential (Wolff et al., 2020). According to job demands-resources theory, work readiness as a resource boosts motivation, enthusiasm, and work engagement. Research shows a positive link between work readiness, job satisfaction, and engagement, ultimately leading to better work performance. Based on this, we hypothesize that new nurses' work readiness is positively associated with their work performance (Caballero & Walker, 2020).

Professional identity is a valuable asset for individuals and organizations, reflecting one's perception of their profession's goals, values, and societal expectations (Abadi et al., 2023). A strong work readiness helps nurses affirm their professional roles and values, enhancing their professional identity (Yu et al., 2023). Research shows that professional identity influences work performance, and social identity theory suggests that individuals' behaviors are shaped by their group affiliation (Levin et al., 2022). A strong professional identity can instill a sense of mission, leading to positive work performance outcomes (Pirzadeh et al., 2023).

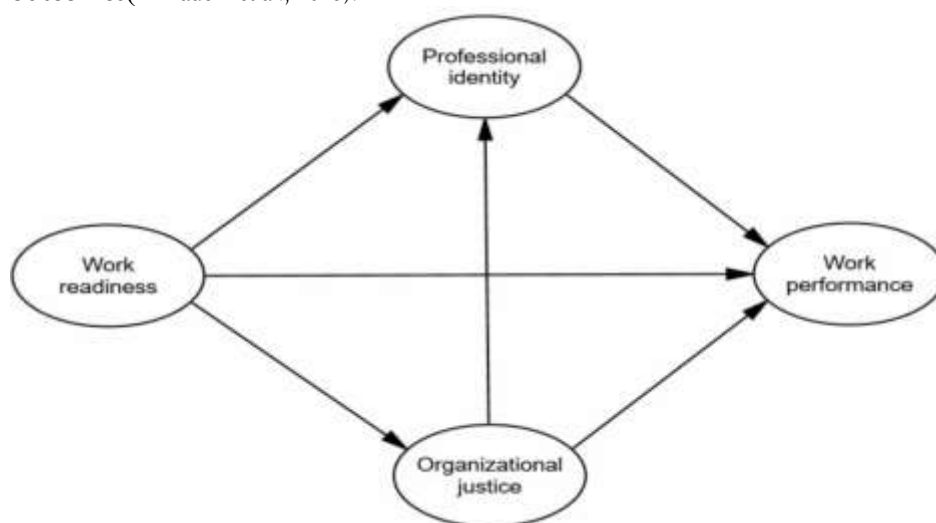


Figure. 1 Basic architecture diagram

Organizational justice refers to employees' perceptions of fairness regarding organizational policies and practices that affect their interests (Colquitt, 2021). Fairness theory suggests that employees' satisfaction with fairness impacts their work motivation (Zhang, 2023). Research shows that organizational justice is linked to work performance, with fair environments influencing employee outcomes. Additionally, work readiness, particularly organizational acuity and social competence, can shape employees' understanding of fair practices and their perception of organizational justice (Li et al., 2020).

Research suggests that social interaction and personal social competence can positively influence interpersonal justice, a key aspect of organizational justice (Wyllie et al., 2021). When nurses are well-prepared for their careers, they're more likely to have a positive outlook, which enhances their perception of fairness (Heath et al., 2023). According to social identity theory, fair distribution of labor can foster a sense of identity. Studies also show that organizational justice can shape an individual's professional identity. Based on this, we can explore the relationships between work

readiness, organizational justice, and professional identity(Ren et al.,2021).

Significant of the study:

The global nursing shortage is a pressing issue, with the World Health Organization projecting a deficit of 7.6 million nurses by 2030. As of 2023, nursing shortage stands at approximately 2.8 million, with new graduates making up only 5% of the workforce. Clinical nurses play a vital role in healthcare, but high turnover rates among them can negatively impact the profession, healthcare facilities, and patient care quality(**National Health Commission , 2024**).

New nurses face significant challenges in clinical settings due to the profession's demands and risks, leading to decreased enthusiasm and potentially lower job performance. This can affect their job stability, personal satisfaction, and accountability. Given the importance of new nurses to the future of the profession, it's crucial to address these challenges (Guo et al., 2023).

To support new nurses, it's essential to explore strategies that promote their job satisfaction, retention, and performance. This could include targeted training programs, mentorship initiatives, and workplace environment improvements. By addressing these challenges, we can work towards a more sustainable and supportive nursing workforce (Alilyyani , 2022). Hence, the aim of this study to examine the effects of work readiness, organizational justice, and professional identity on the work performance among newly nurses.

Aim of the study:

The aim of this study to examine the effects of work readiness, organizational justice, and professional identity on the work performance among newly nurses.

Research questions:

What are effects of work readiness, organizational justice, and professional identity on the work performance among newly nurses?

Subjects and methods

Research design:

A descriptive cross-sectional design was employed from early September 2023 to late December 2023. The researchers in the cross-sectional study simultaneously measured the study participants' exposures and outcomes. The purpose of this kind of research is to describe the features of a community, not to establish causal relationships between variables. This approach is often used to draw conclusions about potential relationships or to collect preliminary data to aid in future investigation and testing.

Research settings:

The study was conducted in the Pediatric, Medical -Surgical, Critical, Obstetrics and Gynecology department at Sohag University Hospitals.

Sample:

The study included a purposive sample of 200 new nurses from the previously selected setting who were working less than one year..

Tools for data collection

Five tools were used in this study for collecting the data:

Tool (1): Nurses' Demographic data

There are 6 questions. It involved gender, age, education, departments, average daily working hours, and average monthly night shifts (times).

Tools (2): Nurses' work readiness

he Work Readiness Scale for Graduate Nurses, developed by Walker et al. (2015) and later modified by Li (2020), is used to evaluate the work readiness of new nurses. This scale assesses the extent to which new nurses are prepared to enter the workforce and perform their roles effectively. The scale likely measures various aspects of work readiness, such as clinical skills, critical thinking, communication, and professionalism. The 38 items on this scale are distributed across five dimensions: organizational acuity (7 items), vocational development (9 items), social competence (9 items), job competitiveness (8 items), and personal work characteristics (4 items). It employs the Likert-10 scoring system, with 1–10 points representing responses ranging from total disagreement to total agreement. Higher ratings indicate that new nurses are more prepared for the workforce. This scale's Cronbach's α coefficient was 0.985 in this investigation, compared to 0.920 in the previous report.

Tools (3): Nurses' Organizational Justice

The Organizational Justice Scale, developed by Colquitt (2001) and translated by Zhang (2007), was used to assess organizational justice. This 20-item scale is divided into four subscales:

- Distributive justice (5 items): fairness of outcomes or rewards
- Procedural justice (7 items): fairness of processes and procedures
- Interpersonal justice (4 items): respect and dignity in interactions
- Informational justice (5 items): adequacy and truthfulness of information

The scale uses a 5-point Likert scale, ranging from 1 (strongly disagree) to 5 (strongly agree). Example items include:

- Distributive justice: "The assignment results reflect my contribution to the hospital."
- Procedural justice: "The hospital can maintain consistency in the implementation of the system."
- Interpersonal justice: "They respect me."
- Informational justice: "The leader always explained to me in detail the execution of the assignment procedure."

This scale provides a comprehensive assessment of organizational justice, allowing researchers to evaluate the fairness of various aspects of organizational functioning. A higher score on this scale indicates a greater level of organizational justice perceived by the new nurse. The Cronbach's α coefficient for the scale was 0.910 [63]. In this study, the Cronbach's α coefficient was determined to be 0.933.

Tools (4): Nurses' Professional identity

The Professional Identity Rating Scale for Nurses, developed by Liu et al. (2011), assesses the professional identity of new nurses through 30 items across five dimensions:

1. Occupational Cognitive Evaluation (9 items): perceptions of the nursing profession
2. Occupational Social Support (6 items): support from colleagues and others
3. Occupational Social Skills (6 items): confidence in social interactions
4. Occupational Frustration Coping (6 items): ability to handle career challenges
5. Occupational Self-Reflection (3 items): self-awareness and reflection on one's profession

Using a 5-point Likert scale (1 = extremely non-compliant, 5 = highly compliant), example items include:

- "Nursing gives me a sense of value" (professional cognitive evaluation)
- "I think the understanding and support of my colleagues can make me feel happy" (professional social support)
- "I am confident in my social demeanor" (professional social skills)
- "I feel that people can exercise and grow in their careers" (coping with career setbacks)

Higher scores indicate a stronger professional identity among nurses. It was found that the scale's Cronbach's α coefficient was 0.938. This study's Cronbach's α coefficient revealed that to be 0.978.

Tools (5): Nurses' Work performance

The Work Performance Scale, developed by Borman & Motowidlo (1993) and translated by Yu (1996), was used to assess the work performance of newly licensed nurses. This scale evaluates the nurses' ability to perform their job duties effectively, including aspects such as task performance, contextual performance, and overall job proficiency. After being tested on nurses, this scale showed excellent validity and reliability, with a Cronbach's α coefficient of 0.900 (Yu et al., 2022). It has two dimensions: interpersonal performance (six items) and task performance (five items), for a total of eleven items. The Likert-5 rating system is used on the scale, and scores go from 1 (complete inconsistency) to 5 (complete consistency). Improved work performance among new nurses is indicated by a higher score on this scale. The Cronbach's alpha coefficient in this study was 0.938.

METHODS

Tool validity and reliability:

After a thorough assessment of the literature, the tools' content validity was established. Five professionals with over ten years of experience in the fields of pediatric nursing, medical-surgical nursing, obstetrics and gynecology, and nursing administration reviewed the data collection tools' content. In accordance with the panel's assessment of the tools' appropriateness, phrase structure, item sequencing, scoring accuracy, and item recording, no changes were made.

Pilot study:

It was conducted on 40 new nurses, or 10% of the sample, to assess the viability of the research process and make necessary modifications, clarifications, and estimates for the time required to complete the study tools. New nurses were used to test the designed instruments. Uncertain items were clarified, superfluous items were left out, and new items were added as the sheets were being filled up. The primary study sample consisted of those who participated in the pilot trial.

Administrative and Ethical consideration:

The ethics committee of Sohag University's nursing faculty granted permission to carry out this study under number 133/ 6-6-2023. To carry out the study, the administrators of the nursing faculty at Sohag University provided the official letters pertaining to the duties of the chosen settings. All participants, including the new nurses, were given an explanation of the study's purpose at the outset by the researchers, who also gave them the assurance that any information gathered would be kept private.

The researchers informed the new nurses that all information collected would be kept private by introducing themselves and outlining the purpose of the study at the start of the interview. They were told by the researchers that participation in the study is entirely optional, that response will be kept private, and that they can leave the study at any moment and for any reason.

Data collection:

Official permissions were obtained from Sohag University Hospital administrators and the Manager of the Pediatric, Medical -Surgical, Critical, Obstetrics and Gynecology wards. Permission was also obtained from the Head Nurse of the previous setting at Sohag University Hospital and their authorities. The researcher greeted the woman, introduced herself, and conducted the interview. To gain their consent, the nature and goal of the study were described. Nurses gave their informed agreement to participate in the study.

The researchers attended to the previous settings of the study two times/a week from 9.00 am to 1.00 pm. The subjects at first were determined through previous inclusion criteria, and the data were collected by using the study tools. The participants took approximately 20-30 minutes to complete the questionnaire. Nurses were given the assurance that their involvement in this study was entirely voluntary and that they might leave at any moment. Additionally, by coding data, anonymity and confidentiality were guaranteed. Each participant was questioned separately by the researcher, and gathered demographic **data**. The researcher assessed the nurses' work readiness, organizational justice, professional identity, and their work performance.

Statistical analysis

SPSS 25.0 software was used to analyze the data. First, descriptive statistics were used. The analysis then revealed that the data collected in this study has a normal distribution and that the variables are linearly correlated, which led to the use of Pearson's correlation analysis to look at the relationships between the four variables.

RESULTS:

Table (1): Demographic data of the studied nurses (n= 200)

Variables		n	%
Gender	Male	50	25.0
	Female	150	75.0
Age (years)	≤ 21	188	94.0
	>21	12	6.0
Education	Institute of technical health	156	78.0

	Bachelor's	44	22.0
Departments	Surgery department	40	20.60
	Obstetrics and gynecology	12	6.90
	Pediatric department	10	5.80
	Emergency and Intensive care unit	16	8.10
Average daily working hours	≤ 8	64	32.0
	8 ~ 10	116	58.0
	≥ 10	20	10.0
Average monthly night shifts (times)	≤ 5	88	44.00
	5 ~ 8	78	39.0
	≥ 8	34	17.0

Table (1): Among the 200 new nurses, 75% of respondents were female while 25% were male; 94% of new nurses were under the age of 21, and 68% held Institute of technical health degrees; the distribution of new nurses across various departments was as follows: surgery (25%), obstetrics and gynecology (25%), pediatrics (25%), emergency and intensive care unit (25%).

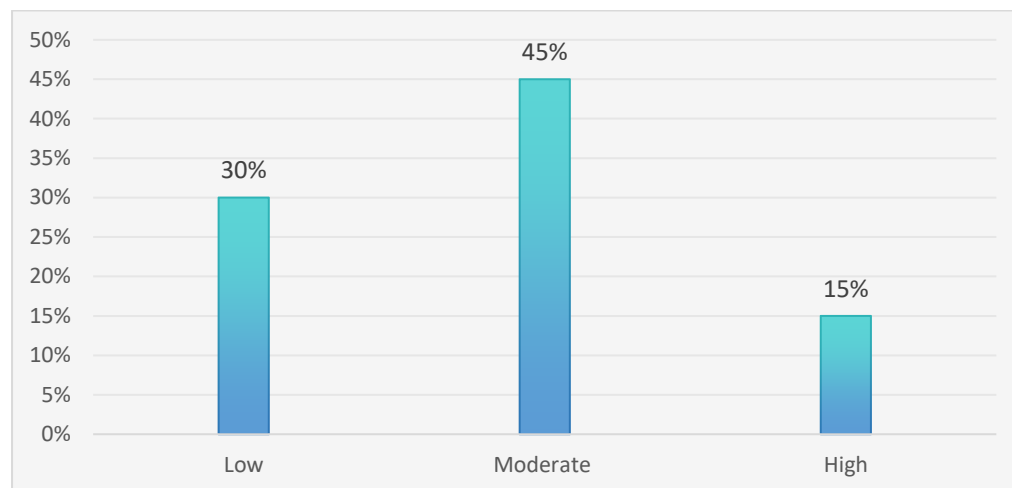


Figure (1): Total nurses' new work readiness level (n= 200).

Figure (1): Shows that 45% of the new nurses had total moderate work readiness level, 30% was low, and 15% of them had high level.

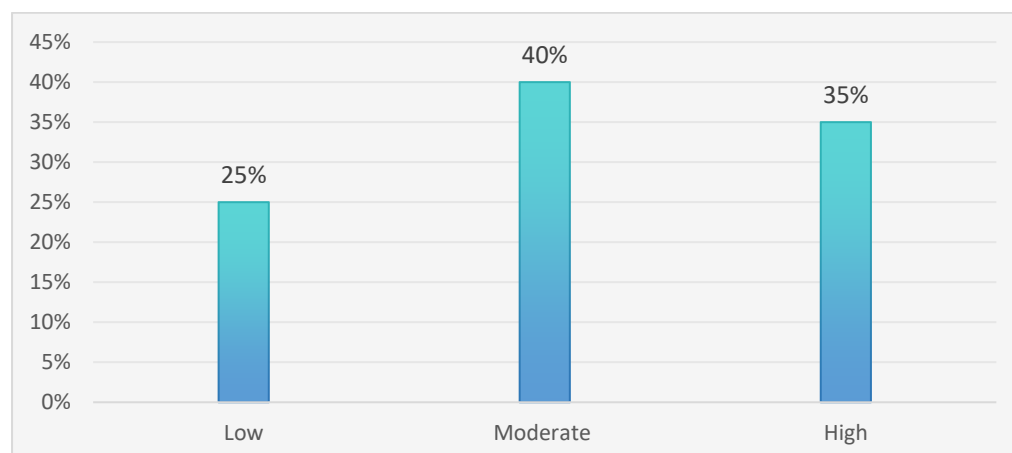


Figure (2): Total nurses' new organizational justice level (n= 200).

Figure (2): Shows that 25% of the new nurses had total low organizational justice level and 35% of them had high level.

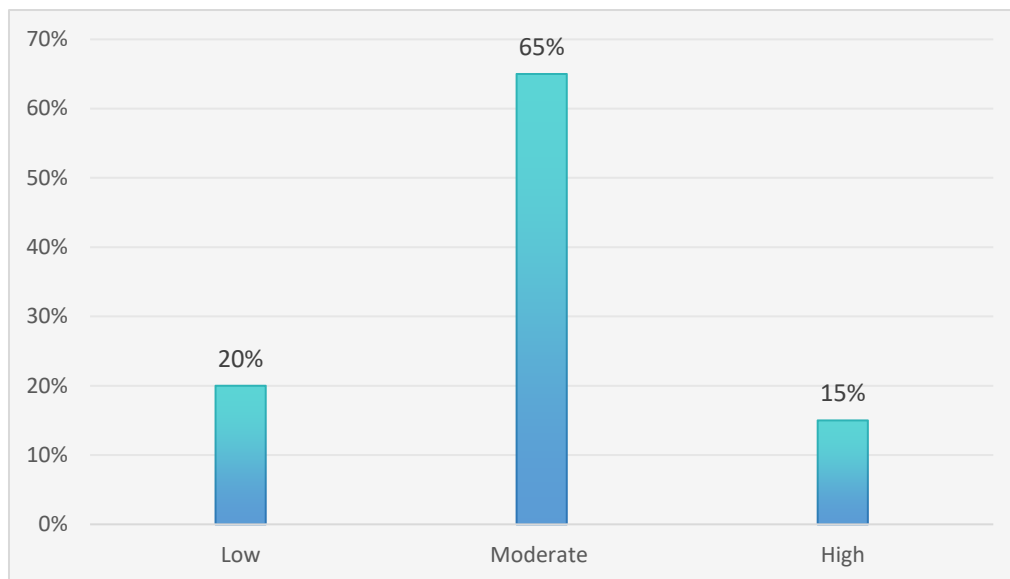


Figure (3): Total nurses' new professional identity level (n= 200)

Figure (3): Demonstrates that 65% of the new nurses had total moderate professional identity level and 15% of them had high level.

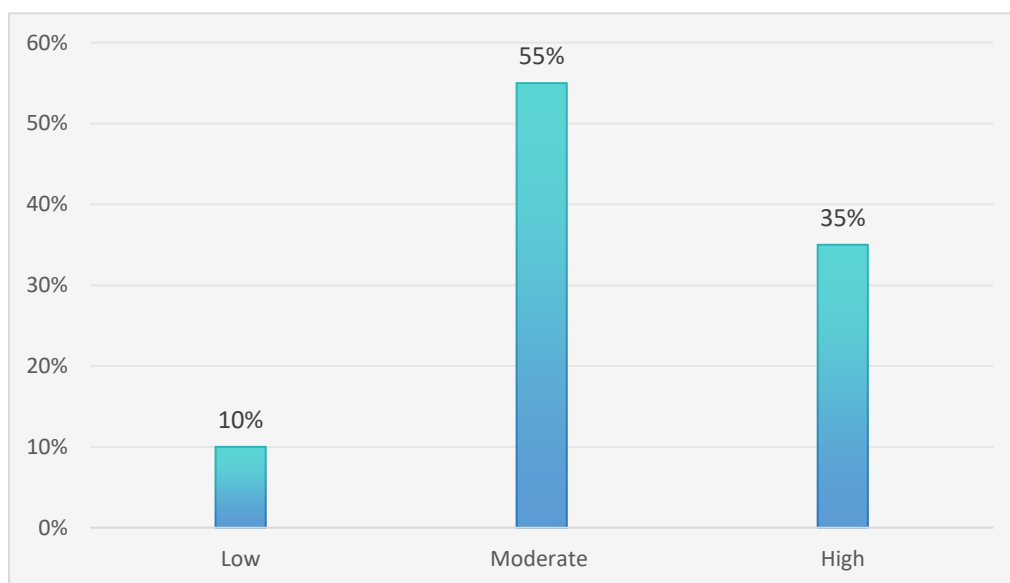


Figure (4):Total new nurses' work performance level

Figure (4): Illustrates that 55% of the new nurses had total moderate work performance level and 35% of them had high level.

Table 2 Correlations between work readiness, organizational justice, and professional identity on the work performance among newly nurses (n= 200)

Variable	Work readiness	Work performance	Professional identity	Organizational justice	Range	Media n	Mean ± SD
Work readiness	1				1 ~ 10	290.00	283.19 ± 59.75
Sig (two-tailed)	N/A						
Work performance	0.580**	1			1 ~ 5	41.00	39.34± 10.49
Sig (two-tailed)	0.000	N/A					
Professional identity	0.647**	0.635**	1		1 ~ 5	114.00	122.55± 23.77
Sig (two-tailed)	0.000	0.000	N/A				

Organizational justice	0.604**	0.676**	0.634**	1	1 ~ 5	75.00	80.66±17.00
Sig (two-tailed)	0.000	0.000	0.000	N/A			

**P < 0.01 (two-tailed)
SD: Standard deviation.

Table 2 presents the range, median, standard deviation, significance (two-tailed), and correlation coefficient for each variable in this study. The average score for new nurses' work readiness was 283.19 ± 59.75, indicating an upper-middle level. Their scores for professional identity, organizational justice, and work performance were 122.55±23.77, 80.66±17.00, and 39.34±10.49, respectively, which fall within the middle level.

Correlation analysis revealed moderate positive relationships between work readiness and work performance ($r = 0.580$, $p < 0.01$), strong positive relationships between work readiness and professional identity ($r = 0.647$, $p < 0.01$), and strong positive relationships between work readiness and organizational justice ($r = 0.604$, $p < 0.01$). The correlation between work performance and professional identity was also highly positive ($r = 0.635$, $p < 0.01$), as was the correlation with organizational justice ($r = 0.676$, $p < 0.01$). Additionally, there were strong positive correlations between organizational justice and professional identity ($r = 0.634$, $p < 0.01$). These findings suggest that work readiness, organizational justice, and professional identity are significant factors influencing the work performance of new nurses.

Table 3 Total, direct, and indirect effect of professional identity on work readiness, organizational justice, and work performance

Effect	Path relationship	Effect	Boot-strap SE	Bootstrap 95% CI	P-value	Relative mediating effect (%)
Direction effect	work readiness → work performance	0.162	0.054	(0.058, 0.249)	0.003	25.70
Indirection effect	work readiness → professional identity → work performance	0.113	0.030	(0.063, 0.168)	0.000	18.66
	work readiness → organizational justice → work performance	0.269	0.036	(0.202, 0.336)	0.000	45.49
	work readiness → organizational justice → professional identity → work performance	0.066	0.015	(0.038, 0.112)	0.000	12.87
	iden- tity → work performance					
Total mediating effect		0.457	0.033	(0.363, 0.541)	0.000	74.30

As indicated in Table 3, the bootstrap 95% confidence interval (CI) from work readiness to work performance is (0.058, 0.249), with $P < 0.05$, thereby confirming hypothesis 1; the bootstrap 95% CI from work readiness to professional identity to work performance is (0.063, 0.168), with $P < 0.01$, thus confirming hypothesis 2; the bootstrap 95% CI from work readiness to organizational justice to work performance was (0.202, 0.336), with $P < 0.01$, thereby confirming hypothesis 3; and the chain of mediating role from work readiness to organizational justice and professional identity to work performance has a bootstrap 95% CI of (0.038, 0.112), with $P < 0.01$, thus confirming hypothesis 4. These findings indicate that effective work readiness can enhance new nurses' perception of organizational justice, which in turn improves their professional identity and ultimately leads to better work performance. Besides, the direct. The impact of work readiness on job performance is quantified at 0.162, while the overall mediation effect value stands at 0.457, representing the cumulative mediation effect across three distinct mediation pathways, which is referred to as the total indirect effect. The effect values for the three mediation pathways identified in this research were 18.66%, 45.49%, and 12.87%, respectively.

DISCUSSION

This study found higher work readiness scores among nurses compared to Li et al.'s (2020) survey. A possible reason for this difference is that most participants in this study worked in tertiary hospitals, which typically have higher standards of professional management and may provide more resources and support for nurses, contributing to their increased work readiness. Hospital administrators usually conduct induction training programs before new nurses are onboarded. In this stage, the managers put a lot of effort into helping the new nurses develop their practical abilities and social competencies, which leads to a relatively high level of job preparedness among the participants. Furthermore, compared to Zhou et al., who used a sample for their study, the participants' professional identity scores were slightly higher of more seasoned nurses (Lei & Wu, 2007).

Several factors may contribute to the observed work readiness levels among new nurses: support Systems: New nurses often receive guidance from peers and clinical supervisors early in their careers, Post-Epidemic Awareness: Younger nurses may have a heightened appreciation for the nursing profession due to their experiences during the epidemic, and Educational Background: The high percentage of undergraduate-educated nurses (67.2%) in this study may also play a role in their work readiness (Li et al., 2020).

These elements could collectively influence the work readiness of new nurses. More specialized knowledge is correlated with new nurses' greater educational and cultural backgrounds. They are able to handle difficulties with more poise by applying the knowledge they have gained when faced with complex nursing responsibilities, exhibiting exceptional professional qualities (See et al., 2022).

Along with improving the standard of nursing care given to patients, this strengthens the nurses' sense of self and cultivates a lifelong love for the field. A study on hotel employees by Viseu et al., (2023) found that the participants' organizational justice scores were slightly lower. Differences in the populations under study could be the cause of the disparity in the results. This research primarily focuses on new nurses. When faced with a lot of pressure and difficulties at work, people could feel unfairly treated because of the many job duties, intricate interpersonal relationships, and comparatively low pay.

Work performance ratings were lower than those reported in the study by Li et al., (2017) which contained a sample of more experienced nurses. This discrepancy may be explained by the fact that new nurses are often unfamiliar with the departmental environment, rules and regulations, and work habits, and they typically lack extensive work experience and problem-solving skills, which results in slightly diminished work performance. The nursing sector and the hospitality sector exhibit differences in job responsibilities, management structures, and wage disparities, leading to varying levels of organizational justice.

In line with the expectations stated in hypothesis 1, this study found that new nurses' work readiness had a significant favorable impact on their work performance. When new nurses are more prepared for the field, they typically have a wider range of skills, which boosts their confidence and increases their excitement for their jobs (Walters et al., 2022), which in turn improves their performance. The results highlight the need to stress the importance of new nurses being prepared for the workforce (Wang, 2022). In order to do this, educational institutions should continuously improve the nursing curriculum to meet the changing needs of the nursing profession as well as the particular requirements of real-world employment responsibilities.

To improve work readiness, it is crucial to put in place training programs that mimic real-world work scenarios, such as simulated first aid exercises and discussions of complex cases. Additionally, nursing students should receive intensive training in areas like wound care and venous puncture. Schools should also strengthen their relationships with hospitals in order to provide more internship opportunities for students. Second, hospitals that offer internships should designate experienced clinical professors to supervise the internships and maximize clinical practice opportunities for nursing students. Nursing students can improve their readiness for work by participating in hands-on nursing experiences, such as daily patient care, fundamental care duties, and specialized care activities.

According to this study, professional identity mediates the relationship between recently graduated nurses' job performance and work readiness. A gap in previous research is filled by the mediating mechanism

found in this study. It is easier for new nurses to build and reinforce their professional beliefs and role knowledge when they are properly prepared for their responsibilities (Li, 2020). The profession they are keen to pursue reflects their personal values as they recognize their vocation (Chen & Reay, 2021). Strong professional identities can improve nurses' job performance by motivating them to actively participate in clinical responsibilities.

This result highlights the need to support new nurses' professional identity development. The first step is for teachers to foster nursing students' professional ethics and qualities through both planned classroom education and casual encounters outside of the classroom. They should help the students understand the nursing profession and instill in them a sense of professional values. Additionally, educational institutions ought to let nursing students and illustrious alumni communicate and share happenings. This strengthens nursing students' professional identities by allowing them to see the career growth options linked to the nursing major (Mak et al., 2022).

Every newly nurse should have a customized career planning strategy created by nursing supervisors. To motivate and recognize new nurses, hospitals could establish a special award fund to provide financial and spiritual rewards for excellence in areas like patient satisfaction and professional abilities, create a dedicated team to promote and develop nursing culture within the hospital. These initiatives can help foster a supportive environment and encourage professional growth among new nurses.. We can support the professional identity of recently graduated nurses and promote the nursing profession by holding speech competitions, essay contests, and internet reporting (Johnson et al., 2023).

According to this study, there is a mediating role for organizational justice between new nurses' work performance and work readiness. This study offers a new theoretical framework and practical recommendations for enhancing new nurses' job performance. Notably, it confirms the mediating role of organizational justice, particularly interpersonal justice, between work readiness and performance. When new nurses are well-prepared, they are more likely to perceive and engage in fair interactions with colleagues and patients, improving their adaptability and effectiveness in the workplace (Bouckenoghe et al., 2024).

Perceiving a high degree of organizational justice, nurses are more likely to emphasize their own growth and professional performance, stay focused on their duties, and participate and contribute (Li et al., 2020). On the other hand, nurses who experience unfair treatment may get suspicious of the organization and even become suspicious of it (Gerlach et al., 2019). As a result, their enthusiasm for their work and general performance on the job suffer. The study showed that the relationship between organizational justice and newly hired nurses' job performance was mediated by professional identity.

According to cognitive-emotional theory, situational information is the primary source of an individual's cognitive processes and emotional responses, which in turn impact their behavioral choices. This implies that people will be able to obtain a thorough grasp of the distribution process through open and transparent decision-making procedures. Such actions not only increase a person's sense of trust and belonging in the company, which motivates them to actively participate, but they also improve employees' professional judgment and reduce negative behavioral tendencies, which in turn improves staff performance (Ma et al., 2023). According to the findings of another study by Mohamed, (2024), justice influences a number of employee attitudes and behaviors, including trust, work performance, strange organizational behavior, stress, turnover, sabotage intention, and work satisfaction.

Limitation and future research direction

First off, this study was limited to one province in one nation because it only looked at a small sample of recently graduated nurses from four departments at Sohag University Hospitals. This cultural and local distinctiveness could affect how applicable the findings are. To improve the findings' generalizability, future studies should think about using multi-center survey approaches and expanding the sample sources. Second, this study is cross-sectional, which restricts its capacity to clearly define causal links. By defining precise time points, longitudinal studies could be used in future research to monitor the development of new nurses' performance and job preparedness.

CONCLUSION

In conclusion, the current study concluded that according to the findings, the relationship between new nurses' work performance and work readiness is mediated by both professional identity and organizational justice.

Recommendations:

In the light of the findings of the study, the following recommendations are suggested

- In order to improve job performance, nursing managers should use effective management to enhance nurses' perceptions of organizational justice and professional identity.
- Additional research and replication of the current study in various contexts, such as with a bigger sample size and in other settings, are necessary to guarantee that the findings are generalizable.

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