

Effect Of Structured Teaching Program On Negotiation Skills And Time Management Of Nurses At Tertiary Sector Hospital

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ABSTRACT

Objective: To evaluate the effect of structured teaching program on the negotiation skills of nurse managers

Material and Method: A quasi-experimental one- group pretest–posttest study was used. The study participants were taken from outdoor medical, surgical departments and critical care units of Nawaz Sharif Social Security Hospital, Lahore, Punjab, Pakistan. The population was the nurse managers/ Head nurse present at the Nawaz Sharif Social Security Hospital, Lahore. The calculated sample Size is less than 30.

Results: Participants responses regarding negotiation knowledge questions which were based on True/ False. Although the majority of participants knew the answers to the negotiation skills questions, the results show that more than one half of the respondents lacked proper negotiation expertise. Participants' negotiation skills significantly improved as a result of the educational intervention; the negotiation skills of the aggressor (t=6.237, P<0.05), preparer (t=7.700, P<0.05), and listener (t=11.061, P<0.05) were found to differ significantly between the pre and post intervention periods

Conclusion: The purpose of this study was to find out how well the head nurses now negotiate and manage their time. Moreover, the present study examined the ways in which educational programs influence these head nurses' negotiating abilities. This study demonstrates that even though many head nurses had little experience negotiating and managing their time, the educational intervention had a significant impact. They gained confidence in their ability to communicate, listen intently, and use deliberate techniques like empathy and teamwork after training

Keywords: Negotiation Skills, Time Management, Structured Teaching Program

1. INTRODUCTION

Success in any health care organization depends not only on knowledge and practices, but also on the ability of the nurse manager to negotiate for the good of the organization and the health of the nurses(Essex et al., 2023). Negotiation is a daily practice; whether it is an official negotiation at workplace or unofficial conversation to obtain something you need from somebody else, negotiation forms our employed and individual lives. Effective negotiation skills are crucial to success in any organization and the rapid change in nursing environment and practice requires head nurses to be effective negotiators in the clinical workplace(GómezCantarino et al., 2021; Lines et al., 2020).

Negotiation is a method for resolving problems, conflicts or disagreements among two or more parties. The two parties create suggestions and counter suggestions so the communication takes place between the parties. Each party employs his effort to achieve maximum results. Negotiations take place daily conduct on all topics, except ethics and religion(de Oliveira Dias, 2020; Korobkin, 2024; Lewicki et al., 2020). Negotiations processes have the following sequence: beginning, during, and closing; the most effective tool in the beginning of negotiation is listening; the party use the time to listen and observe,

and not the time for discussing(Korobkin, 2024). Also it is essential to identify the ability of each party and to discuss perceptions of each party clearly in direct way to act on behalf of another. As the negotiation matures, identify areas of similarities and differentiates to begin making concessions(Korobkin, 2024; Plotino et al., 2020).

During the negotiation, each party exploring benefit, developing sound approach and putting together concessions with good results. The beginning phase involves struggle for benefit and the closing phase influenced by time pressures, but this middle phase is a time primarily for measuring movement, first the party will listen carefully for offers and hints of offers and avoid significant concessions early in the negotiation as such a maneuver might falsely raise an opponent's expectations(Rock, 2024). Emotions are very valuable in negotiating, but keep emotions under control. Also it is necessary to follow the patience to create a calming, supportive environment for the resolution of differences, resolve problems and reach to successful agreement(Georgiadou et al., 2020; Rock, 2024). A good negotiator needs to develop negotiation skills to ensure the best possible outcome in the negotiation process. The negotiation process always begins with careful preparation and an expectation to make concessions with the other party. Being prepared and gathered as much information as possible will impact on the effectiveness of negotiation(Sudarshan, 2023). Negotiator needs to know the answers for possible questions. Also it is important to leave the personal issues outside the negotiation room. In the negotiations the emotions need to be concealed and make decisions based on rational reasons and not on emotional reasons (Boothby et al., 2023; Heunis et al., 2024). There are several factors that influence the negotiation process such as; time, information, environment, and personalities. The nursing staff had many responsibilities with specific deadlines so time plays a great role in an effective negotiation process(Drgac & Himmelsbach et al., 2023).

The information is important for effective negotiation therefore the lack of information always provide unclear image to the other party in negotiation. The environment is the corner stone in conducting the negotiation process because temperature affects the negotiation passage, people number, and their behavior influence the negotiation. In addition to self-esteem it is vital to influence on other party(Idham et al., 2022; Lokatt et al., 2023).

Time is a vital reserve that each head nurse wants to accomplish the objectives as well as aims of an association. Time management can be defined as a period, either little or extensive, which includes in what way head nurses utilize it wisely to make outcome or is the act or process of applying conscious control above the amount of time consumed on certain actions, specifically in order to rise effectiveness or production. Time management is one of the managerial skills of the head nurses and is essential for accomplishment of institutional objectives(Addis et al., 2023; Judith Roach et al., 2023). Time management is the ability of nurses to use the time to accomplish the tasks in the exact time. When nurse managers have effective time management skill, they are able to maximize use of every hour for achieving goals(Idham et al., 2022).

Proper time management allows taking some measure of control during negotiation process. pre-planning the activities help to be become prepare, know exactly what the need to achieve and help to be more in control of the future(Goldsby et al., 2020; Yan et al., 2022). The principles of good time management including; develop a personal sense of time, identify long-term goals, make medium-term goals, plan the work, make the best use of the time, organize work, delegate effectively, make use of committed time, manage the self and manage meetings during negotiating process(Golds by et al., 2020; Moore et al., 2020) Negotiation is an essential skill for time management and it depends on the competence of the head nurse as a negotiator; there is an irregularity in the institution when the head nurses do not have this competency. Head nurses utilize negotiation for its advantages. Negotiation is a finest effective method to time management(Coelho et al., 2023; Nurmeksela et al., 2020) Effective negotiation skills enable nurses to prioritize tasks, manage conflicting demands, and allocate time efficiently. Good time management allows nurses to prepare thoroughly for negotiations with colleagues, physicians, and patients, leading to better patient outcomes(Son et al., 2024).

Strong negotiation skills also help nurses manage their workload, delegate tasks, and minimize stress. By managing their time effectively, nurses can negotiate more effectively, advocating for their patients and themselves. Ultimately, this link enhances patient care, nurse satisfaction, and healthcare outcomes. Therefore, the aim of present study is to evaluate the effect of structured teaching program on negotiation and time management skills of nurses managers. The negotiations play a major role in all aspects of daily activity of the head nurses. Every discussion that requires a decision needs negotiating and time management skills. The head nurse negotiates with patients and their families, the nurses, managers, physician and other healthcare workers to obtain their full consent and cooperation. In nursing, negotiation skills and time management are intricately linked. Time Management is one of the strategies for successful negotiation. Time is important aspect for preparing the negotiation. It should be determine suitable time for starting negotiation according to parties' desire, estimating the negotiation period and making time plan for negotiation process. Effective negotiation skills enable nurses to prioritize tasks, manage conflicting demands, and allocate time efficiently. Good time management allows nurses to prepare thoroughly for

negotiations with colleagues, physicians, and patients, leading to better patient outcomes. Strong negotiation skills also help nurses manage their workload, delegate tasks, and minimize stress. By managing their time effectively, nurses can negotiate more effectively, advocating for their patients and themselves. Ultimately, this link enhances patient care, nurse satisfaction, and healthcare outcomes.

Relational: 70% of nurse managers in Pakistan reported difficulty in negotiating with colleagues and physicians. Moreover, in nursing, negotiation skills and time management are intricately linked. Effective negotiation skills enable nurses to prioritize tasks, manage conflicting demands, and allocate time efficiently. A study published in the Journal of Time Management (2019) found that 80% of head nurses in Pakistan reported difficulty in prioritizing tasks and managing their workload effectively. Furthermore, based on the literature review recommendations, an interventional studywill be conducted to improve negotiations and time management skills among nurses manager. Negotiation skills are an essential competency for head nurses and associated with improved patient satisfaction, reduced conflict, and increased staff retention.

2. MATERIAL AND METHODS:

A quasi-experimental one- group pretest–posttest study was used. The study participants were taken from outdoor medical, surgical departments and critical care units of Nawaz Sharif Social Security Hospital, Lahore, Punjab, Pakistan. The population was the nurse managers/ Head nurse present at the Nawaz Sharif Social Security Hospital, Lahore. The calculated sample Size is less than 30. This sample size is small to perform the statistical test with good efficacy. So 30 participants were taken after Adding 20% drop out rate the sample size was 36. The Study duration was 9 months after the approval of synopsis from IRB.

Inclusion Criteria:

Both male and female registered head nurses

Having age 25-60 years

Head Nurses who have more than 1 Year experience as head nurse.

Exclusion Criteria

The nurses working on contract and board created posts

The staff nurses and student nurses were excluded

Nurses on rotation were excluded

Nurses who already receive any education/workshop on negotiation in last 6 months.

Research Tools

Data for the present study was collected using the following three tools:

Negotiation Knowledge Questionnaire:

The questionnaire developed by the researchers based on the review of the related literature to assess the head nurses knowledge about negotiation. A structured questionnaire consisted of 15 questions (multiple choice 10 questions and true and false 5). The questions were scored as "1" for correct answer, and "zero" for incorrect answer.

Scoring system:

The questions were scored as "1" for correct answer, and "zero" for incorrect answer. The total scores 30 and cut point done at 60%= 18 points for negotiation knowledge expressed as follow; 24-30 points considered good negotiation knowledge; 18-23 points considered average negotiation knowledge and 18 points considered poor negotiation knowledge

Negotiation Process Questionnaire:

An adopted questionnaire was used to assess the negotiation process skills as an aggressor, preparer, listener and talker. It contains 28 statements divided into four main categories; Talker "7" items, aggressor "7" items, preparer "7" items and listener "7" items.

Scoring system:

The items were scored as "3" always, "2" sometime "1" never. The total score expressed as follow; 66-84 points considered high negotiation skill, 47-65 points considered moderate negotiation skill and 28-46 points considered low negotiation skill.

Time management:

Questionnaire is adopted from literature to assess the amounts of time to utilize by nurse manager during various activities namely setting priorities, scheduling tasks, and utilizing techniques to maximize productivity. The scale consisted of "10" items to assess time management skill during negotiation process.

Scoring system:

The item was scored as "3" always, "2" sometime "1" never. The total score expressed as follow; 21-30 points considered high time management skill, 11-20 points considered moderate time management skill and 10 points considered low time management skill.

Educational program

This program was designed to provide nurse managers an opportunity to develop negotiation knowledge and skill, also to improve their time management during negotiation process. It covering the following items; definition, element, purpose, types, principles, effective negotiator characteristics, negotiator skills, stages and process of negotiation, negotiation strategies, preparation for negotiation, and negotiation technique.

Tools validity and reliability

The tools were reviewed an expert panel of different nursing departments. The panel ascertained the face and content validity of the tools. Reliability was done by Cronbach's Alpha coefficient test which revealed that each of the three tools consisted of relatively homogenous items. The internal consistency of negotiation knowledge was 0.91, the internal consistency of negotiation process style scale was 0.72, and the internal consistency of time managing skill was 0.78.

3. RESULTS

The current study aims to analyze the effect of educational programs on the head nurse negotiation knowledge and time management skills among the tertiary care hospitals. Based on the quasi experimental study, this study provides the head nurses negotiation knowledge and time management skills before the intervention and after the intervention. Besides this, current study also provides how the educational program can shape the head nurses abilities of notation, its knowledge and their time management abilities. In the following, currents study results are provided.

Demographic Analysis

Table 4.1

Constructs		Frequency	Percentage
Gender	Male	6	20.0
	Female	24	80.0
Job Type	Permanent	30	100.0
Marital Status	Married	17	56.7
	Single	13	43.3
Age Group	25-34 Years	6	20.0
	35-44 Years	12	40.0
	45-54 Years	6	20.0
	Above 55 Years	6	20.0
Qualification	Nursing Diploma	16	53.3
	Specialty	10	33.3
	Masters	4	13.3

Job Position	Head Nurse	30	100.0
Department	Emergency	6	20.0
	Medical ICU	5	16.7
	Cardiology	7	23.3
	Nephrology	9	30.0
	Gynecology	3	10.0
Experience	1-3 Years	3	10.0
	4-6 Years	8	26.7
	7-10 Years	12	40.0
	Above 10 Years	7	23.3

In Table 4.1, respondents 'demographic details has been provided. They were all employed as head nurses in various sections of tertiary care health care facilities. The results showed that 24 of the 30 participants were female, indicating that women comprise the great majority. In terms of marital status, 13 nurses were single, while 17 nurses were married. The age distribution indicates that mid-career professionals are well represented, with the majority of them (12) being between the ages of 35 and 44. The remaining participants were fairly evenly distributed between younger (ages 25–34) and older (ages 45 and above) age groups. Additionally, the education of the respondents shows that the majority of nurses (16) have a nursing diploma, but a sizable portion (10) have completed specialized training, and a smaller proportion (4) have earned a master's degree. Similarly, 6 nurses were working in emergency department,5 in Medical ICU, 7 in Cardiology, 9 in Nephrology and remaining 3 in gynecology. Finally, most

(12) of the head nurses had experience of 7-10 years.

Pre-Interventional Descriptive Analysis

Negotiation Knowledge Questionnaire

Table 4.2

Sr.	Questions	Correct		Incorrec	et
No.		Freq.	Percent	Freq.	Percent
	Which of the following is NOT a key element in effective negotiation for head nurses?	11	36.7	19	63.3
	Understanding the interests of all parties involved				
	Maintaining a rigid stance to assert dominance				
	Developing strong communication skills				
	Building relationships with colleagues and stakeholders				
2	When negotiating with a physician over patient care decisions, what is the primary goal of the head nurse?	10	33.3	20	66.7
	To assert authority and dominance				
	To find a mutually beneficial solution				
	To win at any cost				
	To prioritize the nurse's preferences over the physician's	5			

3	What role does active listening play in	12	40.0	18	60.0
	negotiation for head nurses?				
	It allows the nurse to dominate the conversation				
	It helps in understanding the concerns and needs other parties	of			
	It is unnecessary in negotiation scenarios				
	It creates unnecessary delays in the negotiation process				
4	When facing resistance from nursing staff during negotiation, what approach should the head nurse adopt?	a9	30.0	21	70.0
	Use coercion to force compliance				
	Explore the underlying reasons for resistance an address them	d			
	Ignore the resistance and proceed with the negotiation				
	Threaten disciplinary action against resistant staff member	's			
5	Which negotiation style is characterized by assertivenes and cooperation, seeking to find solutions that satisfy a parties involve?		40.0	18	60.0
	Competitive				
	Collaborative				
	Avoidant				
	Accommodative				
6	What is the significance of establishing BATNA (Best Alternative to a Negotiated Agreement) for head nurses?	st10	33.3	20	66.7
	It helps in intimidating the other party during negotiations				
	It provides a fallback position in case negotiations fail				
	It demonstrates a lack of commitment to negotiation				
	It undermines trust between parties involved				
7	Which of the following is an effective strategy for dealin with resistance during negotiation?	g8	26.7	22	73.3
	Threatening consequences				
	Ignoring the resistance				
	Acknowledging and exploring the reasons behind it				
	Intensifying pressure				

8	What role does empathy play in negotiation?	9	30.0	21	70.0
	It is irrelevant				
	It helps in understanding the other party's perspective				
	It makes negotiations more confrontational				
	It leads to emotional manipulation				
9	When faced with a deadlock in negotiation,	6	20.0	24	80.0
	what is a recommended approach?				
	Surrendering to the other party's demands				
	Pushing harder for your own position				
	Exploring alternative options and solutions				
	Ignoring the deadlock and moving forward regardless				
10	Which of the following is a potential outcome of a successful negotiation for a head nurse?	7	23.3	23	76.7
	A win-lose scenario				
	Strained relationships with colleagues				
	Improved working conditions and team morale				
	d) Increased competition within the nursing staf	<u>f</u>			

Table 4.2 shows the finding regarding participants' responses regarding negotiation understanding. The negotiation knowledge exhibits 10 questions which were based on categorical variable. The finding show that head nurse knowledge regarding negotiation skills was poor before the educational intervention. In the following, the responses on the negotiation knowledge are provided in details:

Question 1: Only one-third (36.7%) of the nurses show were having the knowledge that taking a firm stand isn't a useful negotiating strategy.

Question 2: Merely one-third (33.3%) recognized that the primary objective is to discover a solution that benefits all parties, not to "win."

Question 3: 40% of respondents correctly identified this, whereas the remaining respondents were unaware of the importance of listening in negotiations.

Question 4: Just 30% of respondents opted for the proper strategy, which involves investigating the causes of resistance as opposed to disregarding or imposing judgments.

Question 5: The collaborative method was deemed the most successful by just 40% of respondents.

Question 6: The need of having a contingency plan in talks was only recognized by one- third (33.3%) of the participants.

Question 7: Only 26.7% of the participants recognized the need of acknowledging and addressing resistance.

Question 8: Only 30% of respondents thought empathy was a useful negotiating tactic.

Question 9: Only 20% were aware that when negotiations halt, the best course of action is to look into other options.

Question 10: 23.3% agreed that better working conditions and team spirit are indicators of a fruitful negotiation.

Negotiation Knowledge True/False

Table 4.3

Sr.	Questions	Correct		Response	es	
No.			True	True		1
		Answer	Freq.	%Age	Freq.	%Age
11	Negotiation is only necessary when conflicts arise between parties.	False	12	40.0	18	60.0
12	Win-win outcomes are not always possible in negotiations.	False	13	43.3	17	56.7
13	Effective negotiation involves primarily focusing on one's own interests.	False	11	36.7	19	63.3
14	Active listening is an important skill in negotiation.	True	12	40.0	18	60.0
15	Compromise is always the best solution in negotiations.	False	10	33.3	20	66.7

Table 4.3 shows the participants responses regarding negotiation knowledge questions which were based on True/ False. Although the majority of participants knew the answers to the negotiation skills questions, the results show that more than one half of the respondents lacked proper negotiation expertise.

Negotiation Process Tool

Nurses' negotiation skills as Talker

Table 4.4

Sr.	Questions		Always		Sometime		Never	
No.	Freq.	%Age	Freq.	%Age	Freq.	%Age		
1	Prefer to talk	4	13.3	17	56.7	9	30.0	
2	Rely on verbal persuasion skills	7	23.3	17	56.7	6	20.0	
3	Talk more than listen	3	10.0	18	60.0	9	30.0	
4	Influenced by feeling	6	20.0	15	50.0	9	30.0	
5	Rely on gut feelings rather than logic	6	20.0	15	50.0	9	30.0	
6	Skip from topic to topic	6	20.0	17	56.7	7	23.3	
7	Get bored quickly with too detail	5	16.7	18	60.0	7	23.3	

The results from Table 4.4 give us a better understanding of how participants handle communication in conflict situations. For Question 1, only 13.3% of participants said they always prefer to talk things out during conflict, while the majority (56.7%) said they sometimes do. Interestingly, 30% shared that they don't like to talk in such situations at all.Moving to Question 2, about 23.3% said they often rely on verbal persuasion to influence others, while 56.7% use these skills occasionally. A smaller group (20%) mentioned that they never depend on verbal persuasion.

For Question 3, a small number (10%) admitted to talking more than listening regularly, while 60% said they do so sometimes, and 30% claimed they never do it at allindicating that listening still plays an important role for most. When asked

in Question 4 whether they are influenced by emotions, 20% said they often are, 50% noted that it sometimes happens, and 30% said they are rarely or never swayed by emotions.

In Question 5, the same trend appeared 20% said they frequently trust their gut over logic, 50% do so from time to time, and 30% tend to rely more on rational thinking. For Question 6, 20%

admitted they often jump from topic to topic during conversations. However, more than half (56.7%) said they do it occasionally, and 23.3% reported they usually stay on track.

Finally, in Question 7, 16.7% said they get bored easily with too many details, while a large portion (60%) experience this once in a while. About 23.3% shared that they do not mind details at all.

Nurses' negotiation skills as aggressor

Table 4.5

Sr.	Questions	Always	Always		Sometime		Never	
No.		Freq.	%Age	Freq.	%Age	Freq.	%Age	
1	Use a lot of facts and logics	6	20.0	17	56.7	7	23.3	
2	Have clear goals	7	23.3	19	63.3	4	13.3	
3	Use detail and process	7	23.3	16	53.3	7	23.3	
4	Focused to end result	7	23.3	17	56.7	6	20.0	
5	Value details that pertinent with topic	13	43.3	15	50.0	2	6.7	
6	Use negotiation as a game to win	3	10.0	15	50.0	12	40.0	
7	Become aggressive if the situation need	7	23.3	14	46.7	9	30.0	

Table 4.5 illustrates the usual behavior of participants in circumstances involving negotiations or decision-making. The results show that only one out of five participants (20%) stated they always rely on logical thinking when answering question 1, which focuses on using facts and logic. About 57% of individuals use it occasionally, but the remaining 23% don't rely on it considerably. Although reasoning is useful, not everyone uses it. Regarding question 2, approximately one in four (23.3%) respondents are more consistent and always set clear goals, whereas approximately two-thirds (63.3%) say they do so sometimes. Setting objectives is very common, as seen by the modest percentage of respondents (13.3%) who said they don't often have defined goals.

Regarding question 3, which asks about the use of precise procedures, 23.3% of respondents claim they always pay attention to the specifics and how things are done, and more than half (53.3%) do so occasionally. The remaining ones are less process-oriented, suggesting a combination of flexible and organized thought. Regarding issue 4, which focuses on final outcomes, the tendency is similar: most people (56.7%) strike a compromise between objectives and the journey, while a tiny percentage (23.3%) are always outcome-driven. Some (20%) place little emphasis on the final outcome. Similarly, question 5 which emphasized on valuing relevant details, nearly everyone agreed it's important: 43.3% always focus on relevant details, and another 50% sometimes do. Very few (6.7%) overlook this showing a strong general preference for staying on-topic and detail-oriented.

In the same manner, question 6 highlight the negotiation as a game to win, just 10% of respondents consistently answered "yes." 40% of respondents stated they don't consider it a game at all, while half indicated they felt this way occasionally. According to this, the majority of individuals do not view negotiations in a win-lose or competitive manner. Lastly, over one in four (23.3%) respondents stated they might become aggressive if necessary in tense situations, and nearly half (46.7%) admitted to occasionally doing so. However, even under stressful situations, 30% of people would rather remain composed

and non-aggressive.

Nurses' negotiation skills as Preparer

Table 4.6

Sr.		Questions		Always	Sometim	ne	Never	
No.	Freq.			%Age	Freq.	%Age	Freq.	%Age
1	Can l	be very intimidating	7	23.3	13	43.3	10	33.3
2	Prepa	nration is negotiation	12	40.0	12	40.0	6	20.0
3	Prepa	nred to defend my beliefs	10	33.3	13	43.3	7	23.3
4	Good	l listening and sizing others up	8	26.7	12	40.0	10	33.3
5	Stay	on track	3	10.0	18	60.0	9	30.0
6	Able	to back up my beliefs	3	10.0	18	60.0	9	30.0
7	Get to	o the end result as quickly as possible	8	26.7	15	50.0	7	23.3

Table 4.6 provides intriguing look at how people view their own negotiating methods which displays a combination of self-awareness, flexibility, and confidence. For example, on question 1, 43.3% of respondents acknowledge that they may be scary at times, but a nearly similar percentage (33.3%) maintain that they never come across as such. This illustrates the stark differences in how forceful and more collaborative types view themselves.

Contrarily, question 5, which reveals a disconnect between confidence and execution, question 4 reveals a strong conviction in one's beliefs more than 33% are ready to defend their position. However, only 10% consistently stay on course or provide evidence to support their claims. In response to question 6, listening skills reveal a similar divide: 66.7% of respondents take pleasure in their ability to assess people, while a third do not consider this a strength, which might cause them to miss important indications during negotiations.

Nurses' negotiation skills as Listener

Table 4.7

Sr.	Questions	Always		Sometim	Sometime		Never	
No.		Freq.	%Age	Freq.	%Age	Freq.	%Age	
1	Guided by emotions	6	20.0	17	56.7	7	23.3	
2	Defer to others for assistance	9	30.0	13	43.3	8	26.7	
3	Prefer to listen	6	20.0	16	53.3	8	26.7	

4	Not comfortable with talking	8	26.7	13	43.3	9	30.0
	through the process						
5	Interested in the smallest details	6	20.0	17	56.7	7	23.3
6	Negotiate based value system	6	20.0	13	43.3	11	36.7
7	Concerned about the process rather than winning	10	33.3	14	46.7	6	20.0

Table 4.7 presents the responses regarding how participants as listener approach negotiation and communication, particularly in emotional or collaborative situations. First, in response to question 1, just one out of five individuals (20%) stated that they are always influenced by their emotions, whereas over half (56.7%) stated that this occurs occasionally. The majority of people are at least occasionally influenced by their feelings, as seen by the lesser percentage (23.3%) who say they rarely or never rely on emotions.

In response to question 2, 30% of respondents stated they frequently seek assistance from others, whilst the majority (43.3%) only does so occasionally. About a quarter (26.7%) would rather manage things on their own. This suggests that while not universal, a collaborative approach is prevalent.

In response to question 3, which asked if people preferred listening to talking, 20% of respondents said they were active listeners, while more than half (53.3%) said they occasionally preferred listening. The fact that slightly more than a quarter (26.7%) doesn't typically like to listen suggests that people generally want to communicate in a balanced manner.

Intriguingly, in response to question 4, 26.7% of participants acknowledged that they are uncomfortable discussing procedures, and 43.3% stated that they occasionally feel uncomfortable doing so. Nonetheless, over 30% feel better at ease speaking aloud, suggesting that communication styles differ greatly.

Regarding question 5, which asks about attention to detail, 20% of participants are constantly interested in the specifics, whereas the majority (56.7%) only occasionally pay attention to details. The remaining 23.3% exhibit a mix of big-picture and detail-oriented thinking, with little attention to minute details.

In response to question 6, which asks about bargaining based on personal values, just 20% of respondents regularly use their value system, whilst 43.3% do so sometimes. Diverse ethical methods are evident, though, since a noteworthy 36.7% of respondents state that they rarely use their principles as a negotiating tool.

Finally, one-third (33.3%) of respondents strongly agreed when asked whether they place more emphasis on the process than on "winning," while almost half (46.7%) stated that it depended on the circumstance. merely 20% of respondents put victory ahead of the negotiation's course, indicating that most people prefer fairness and process than merely results.

Time Management

Table 4.8

Sr.	Questions		Always		Sometime		Never	
No.		Freq.	%Age	Freq.	%Age	Freq.	%Age	
1	Start negotiation process at the time	3	10.0	15	50.0	12	40.0	
2	Negotiation help in aims achievement	7	23.3	14	46.7	9	30.0	
3	Can another person take your place in negotiation process	13	10.0	15	50.0	12	40.0	
4	Participant helps to achieve aim.	8	26.7	18	60.0	4	13.3	

5	There is important person not present.	7	23.3	15	50.0	8	26.7
6	Clear aims of negotiation process.	6	20.0	16	53.3	8	26.7
7	There is important issues not discuss	9	30.0	14	46.7	7	23.3
8	There is another method rather than negotiation for problem solving	3	10.0	18	60.0	9	30.0
9	Negotiation process take more time than deserve	8	26.7	15	50.0	7	23.3
10	Agreement at the end of negotiation process	7	23.3	15	50.0	8	26.7

Table 4.8 highlights the responses on time management in the negotiations among head nurse. In the following participants responses on time management questions is displayed:

Question 1: The finding show that only 10% of participants report that they always start the negotiating process on time. Half (50%) are able to do it occasionally, but 40% frequently put it off, suggesting that they need to be more prepared or time-conscious when starting conversations.

Question 2: When asked if negotiating aids in goal achievement, almost a quarter (23.3%) strongly agreed, while 46.7% were undecided, stating that it occasionally aids. Thirty percent, however, expressed skepticism, indicating that they might not always find negotiating appealing or successful.

Question 3: It is noteworthy that just 10% of respondents consistently agreed that someone else could bargain on their behalf, while 40% said they would prefer to do it themselves and 50% said it depends. This shows that a lot of individuals think of negotiating as a personal and delicate activity. Question 4: Involving others helps attain the aim, according to the majority of participants (26.7% said always, and a strong 60% said occasionally). Just 13.3% disagreed, indicating that most people think teamwork is important.

Question 5: 23.3% of respondents said that important individuals' absences during talks were a constant problem, while 50% claimed that this was occasionally a problem. This implies that a common obstacle to successful results may be insufficient involvement.

Question 6: Just 20% of respondents claim they are always certain in their aims when negotiating, while the majority (53.3%) say their clarity changes. There is potential for improvement in pre-negotiation planning, as seen by the additional 26.7% who acknowledge frequently being uncertain.

Question 7: About 30 percent of individuals believe that significant concerns are occasionally overlooked, compared to 46.7% who believe it occurs occasionally. This suggests that the negotiating process may be ineffective or distracted.

Question 8: Although just 10% of respondents always take alternatives into consideration, a significant majority (60%) of respondents think that occasionally, other approaches to problem- solving outside negotiation could be effective. This demonstrates a degree of receptivity to other methods.

Question 9: 26.7% of respondents agree that talks take longer than they should, and half believe that this is occasionally the case. Just 23.3% of respondents don't think it's an issue, suggesting that time management may be a common worry.

Question 10: Finally, there are times when the results of discussions are uncertain. Just 23.3% believe they always get to an agreement, half think it happens occasionally, and 26.7% say they frequently depart without a solution.

Post-Interventional Descriptive Analysis

Negotiation Knowledge Questionnaire

Table 4.9

Sr.	Questions	C	Correct	In	correct
No.	Freq.		Percent	Freq.	Percent
1	Which of the following is NOT a key element in effective negotiation for head nurses?	20	66.7	10	33.3
	Understanding the interests of all parties involved				
	Maintaining a rigid stance to assert dominance				
	Developing strong communication skills				
	Building relationships with colleagues and stakeholders				
2	When negotiating with a physician over	19	63.3	11	36.7
	patient care decisions, what is the primary goal of the head nurse?				
	To assert authority and dominance				
	To find a mutually beneficial solution				
	To win at any cost				
	To prioritize the nurse's preferences over the physician's				
3	What role does active listening play in negotiation for head nurses?	20	66.7	10	33.3
	It allows the nurse to dominate the conversation				
	It helps in understanding the concerns and needs of other parties				
	It is unnecessary in negotiation scenarios				
	It creates unnecessary delays in the negotiation process				
4	When facing resistance from nursing staff during a negotiation, what approach should the head nurse adopt?	18	60.0	12	40.0
	Use coercion to force compliance				
	Explore the underlying reasons for				
	resistance and address them				
	Ignore the resistance and proceed with the negotiation				
	Threaten disciplinary action against resistant staff members				

5	Which negotiation style is characterized by assertiveness and cooperation, seeking to find solutions that satisfy all parties involve?	19	63.3	8	26.7
	Competitive				
	Collaborative				
	Avoidant				
	Accommodative				
6	What is the significance of establishing BATNA (Best Alternative to a Negotiated Agreement) for head nurses?	22	73.3	8	26.7
	It helps in intimidating the other party during negotiations				
	It provides a fallback position in case negotiations fail				
	It demonstrates a lack of commitment to				
	negotiation				
	It undermines trust between parties involved				
7	Which of the following is an effective strategy for dealing	19	63.3	11	36.7
,	with resistance during negotiation?	-,	00.0		
	Threatening consequences				
	Ignoring the resistance				
	Acknowledging and exploring the reasons behind it				
	Intensifying pressure				
8	What role does empathy play in negotiation?	20	66.7	10	33.3
	It is irrelevant				
	It helps in understanding the other party's perspective				
	It makes negotiations more confrontational				
	It leads to emotional manipulation				
	1				
9	When faced with a deadlock in negotiation, what is a	21	70.0	9	30.0
	recommended approach?	-			
	Surrendering to the other party's demands				
	Pushing harder for your own position				
	Exploring alternative options and				
	solutions				
	d) Ignoring the deadlock and moving				

	forward regardless				
10	Which of the following is a potential outcome of a successful negotiation for a head nurse?	19	63.3	11	36.7
	A win-lose scenario				
	Strained relationships with colleagues				
	Improved working conditions and team morale				
	Increased competition within the nursing staff				

Table 4.9 show that nurse have understanding regarding negotiation after the education intervention i.e., collaboration, empathy, and problem-solving strategies like BATNA (Best Alternative to a Negotiated Agreement). The majority of participants provided accurate answers to these kinds of questions, demonstrating a solid basis. About one-third, however, continue to maintain antiquated or ineffective beliefs, especially when it comes to handling opposition and using empathy. This suggests that further training is required, particularly in the areas of emotional intelligence and teamwork. Though there is potential for improvement via focused professional development, the replies generally point to a promising body of knowledge.

NI	tiation	17		T	/TZ ~ 1	
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Sr. ---

No.

Questions Correct

Answer

Responses

True False

				Freq.	%Age	Freq.	%Age
11	Negotiation	is only necessary when	False	6	20.0	24	80.0
confli	onflicts arise between parties.		False	8	26.7	22	73.3
12	Win-win outcom	es are not a	lways				
possib	le in negotiations.		False	9	30.0	21	70.0
13	Effective negoti	iation involves primarily					
focusi	ng on one's own int	terests.	True	21	70.0	9	30.0
14	Active listening	is an important skill in					
negoti	ation.		False	9	30.0	21	70.0
15	Compromise is	always the best solution					
in neg	otiations.						

According to Table 4.10, the majority of head nurses possess a strong awareness of essential negotiation skills, particularly the value of active listening and the realization that negotiation isn't just used in conflict circumstances. Nonetheless, there

are still many people who think that win-win situations aren't always achievable, and some people put their own interests before of teamwork. Overall, there is potential for development in the comprehension of more complex and cooperative negotiating methods, even though the underlying knowledge is solid.

Negotiation Process Tool

Nurses' negotiation skills as Talker

Table 4.11

Sr.	Questions	Always	Sometime		ne	Never	
No.		Freq.	%Age	Freq.	%Age	Freq.	%Age
1	Prefer to talk	17	56.7	8	26.7	5	16.7
2	Rely on verbal persuasion skills	17	56.7	7	23.3	6	20.0
3	Talk more than listen	15	50.0	9	30.0	6	20.0
4	Influenced by feeling	14	46.7	9	30.0	7	23.3
5	Rely on gut feelings rather than logic	18	60.0	6	20.0	6	20.0
6	Skip from topic to topic	13	43.3	11	36.7	6	20.0
7	Get bored quickly with too detail	17	56.7	8	26.7	5	16.7

It is evident from Table 4.11 that 56.7% of respondents always choose to talk rather than listen. Instead of using reasoning, they usually depend on gut instincts (60%) and verbal persuasion (56.7%). A sizable percentage (50%) talk more than they listen, and 46.7% are frequently swayed by their feelings. A large percentage of respondents (43.3%) avoid talking about some issues, and 56.7% find that too much information soon bores them. According to the research, respondents generally prefer less organization and detail and more impromptu, emotionally charged communication.

Nurses' negotiation skills as aggressor

Table 4.12

Sr.	Questions	Always		Sometime		Never	
No.		Freq.	%Age	Freq.	%Age	Freq.	%Age
1	Use a lot of facts and logics	15	50.0	8	26.7	7	23.3
2	Have clear goals	15	50.0	11	36.7	4	13.3
3	Use detail and process	13	43.3	10	33.3	7	23.3
4	Focused to end result	14	46.7	10	33.3	6	20.0
5	Value details that pertinent with topic	21	70.0	7	23.3	2	6.7
6	Use negotiation as a game to win	12	40.0	11	36.7	7	23.3
7	Become aggressive if the	19	63.3	7	23.3	4	13.3

situation need			

According to table 4.12, 70% of respondents prioritize pertinent data, 50% always use facts and reasoning, and respondents typically respect these attributes. While 46.7% of respondents stay focused on the final objective, half of the respondents continuously have clear goals. Regarding negotiating, 63.3% of people become combative when necessary, and 40% view it as a game of competition. Overall, the information points to responders who are rational, goal-oriented, meticulous, and have a competitive attitude while negotiating. They also appear to be willing to use force when needed.

Nurses' negotiation skills as preparer

Table 4.13

Sr.	Questions	Always	Always		ne	Never	
No.		Freq.	%Age	Freq.	%Age	Freq.	%Age
1	Can be very intimidating	16	53.3	7	23.3	7	23.3
2	Preparation is negotiation key	16	53.3	10	33.3	4	13.3
3	Prepared to defend my beliefs	20	66.7	4	13.3	6	20.0
4	Good listening and sizing others up	15	50.0	7	23.3	8	26.7
5	Stay on track	16	53.3	8	26.7	6	20.0
6	Able to back up my beliefs	13	43.3	11	36.7	6	20.0
7	Get to the end result as	17	56.7	8	26.7	5	16.7

quickly as possible

According to Table 4.13, the majority of respondents (53.3%) think that preparation is essential for successful negotiations and are viewed as scary. Half (50%) place a high value on listening well and evaluating others, and a sizable majority (66.7%) are always ready to defend their opinions. In talks, 43.3% feel confident in supporting their opinions, while 53.3% remain on course. 56.7% of respondents also favor achieving the desired outcome fast. In negotiations, respondents often place a high importance on efficiency, aggressiveness, and preparedness.

Nurses' negotiation skills as listener

Table 4.14

Sr.	Questions	Always		Sometime		Never	
No.		Freq.	%Age	Freq.	%Age	Freq.	%Age
1	Guided by emotions	17	56.7	8	26.7	5	16.7
2	Defer to others for assistance	19	63.3	6	20.0	5	16.7
3	Prefer to listen	14	46.7	8	26.7	8	26.7
4	Not comfortable with talking through the process	22	73.3	3	10.0	5	16.7

5	Interested in the smallest details	17	56.7	8	26.7	5	16.7
6	Negotiate based value system	15	50.0	7	23.3	8	26.7
	Concerned about the process rather than winning	20	66.7	7	23.3	3	10.0

Table 4.14 show that responses regarding how people approach negotiation on a more personal level as listener. A majority (63.3%) of respondents feel at ease asking for assistance from others, indicating a more cooperative or team-oriented mentality, whereas many (56.7%) respondents have a tendency to follow their emotions. A sizable portion (73.3%) feel uncomfortable talking during the negotiating process, and almost half would rather listen than

speak. Moreover, half focus on the little things, and half base their choices on their own ideals. Remarkably, two-thirds are more concerned with the outcome of the negotiation than with winning outright.

Time Management Questionnaire

Table 4.15

Sr.	Questions	Always		Sometime		Never	
No.		Freq.	%Age	Freq.	%Age	Freq.	%Age
1	Start negotiation process at the time	19	63.3	6	20.0	5	16.7
2	Negotiation help in aims achievement	24	80.0	5	16.7	1	3.3
3	Can another person take your place in negotiation process	17	56.7	6	20.0	7	23.3
4	Participant helps to achieve aim.	18	60.0	8	26.7	4	13.3
5	There is important person not present.	18	60.0	6	20.0	6	20.0
6	Clear aims of negotiation process.	17	56.7	9	30.0	4	13.3
7	There is important issues not discuss	21	70.0	5	16.7	4	13.3
8	There is another method rather than negotiation for problem solving	21	70.0	4	13.3	5	16.7
9	Negotiation process take more time than deserve	23	76.7	5	16.7	2	6.7
10	Agreement at the end of negotiation process	22	73.3	5	16.7	3	10.0

Table 4.15 show the majority of respondents think that bargaining is effective, with 80% of them thinking that it aids in goal achievement and 73.3% often achieving an agreement. Most (63.3%) begin talks on schedule, and 56.7% say they have certain goals in mind. Although 60% of respondents believe that participants help achieve results, they also see that important people are occasionally not there. While, 76.7% of respondents say the procedure might take longer than required, and 70% think significant concerns are frequently overlooked. Negotiation is generally regarded as beneficial, although it may also be ineffective and lacking at times. Comparative Analysis of the Pre and Post Educational Intervention

In the current study, education intervention was conducted among head nurses and data was gathered before and after the intervention. In the following Table 4.16 to 4.18, the t-test results are given and explained.

Table 4.16

		Mean	N	Std. Deviation	Std. Error Mean
Pair 1	KQ	1.6867ª	30	.23596	.04308
	KQ_2	1.6867ª	30	.23596	.04308
Pair 2	TF	1.6133ª	30	.28736	.05246
	TF_2	1.6133ª	30	.28736	.05246
Pair 3	NP	2.0905ª	30	.27692	.05056
	NP_2	2.0905ª	30	.27692	.05056
Pair 4	NPA	1.9857	30	.32781	.05985
	NPA_2	1.6571	30	.39810	.07268
Pair 5	NPP	2.0333	30	.30864	.05635
	NPP_2	1.6619	30	.31496	.05750
Pair 6	NPL	2.0238	30	.30266	.05526
	NPL_2	1.5952	30	.29797	.05440
Pair 7	TM	2.0767ª	30	.38389	.07009
	TM_2	2.0767ª	30	.38389	.07009

Table <u>4.17</u>

Paired Samples Correlations						
		N	Correlation	Sig.		
Pair 4	NPA & NPA_2	30	.700	.000		
Pair 5	NPP & NPP_2	30	.641	.000		
Pair 6	NPL & NPL_2	30	.750	.000		

Table		Pair	red	Sample	4.18 Test
Paired Differences Mean Std.	t	df	Sig. (2-		
Deviati on					

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Std. Error Mean

95% Confidence	Interval	of the	Difference
tailed)			

					Lower	Upper			
Pair	NPA -	.32857	.28853	.05268	.22083	.43631	6.237	29	.000
4	NPA_2								
Pair	NPP -	.37143	.26422	.04824	.27277	.47009	7.700	29	.000
5	NPP_2								
Pair	NPL -	.42857	.21222	.03875	.34933	.50782	11.061	29	.000
6	NPL_2								

The findings presented in Tables 4.16 to 4.18 indicate that the participants' negotiation skills significantly improved as a result of the educational intervention; the negotiation skills of the aggressor (t=6.237, P<0.05), preparer (t=7.700, P<0.05), and listener (t=11.061, P<0.05) were found to differ significantly between the pre and post intervention periods. Therefore, it can be concluded that the education intervention carried out as part of this study has significantly improved the head nurse's negotiating abilities. Findings, however, show that there were no appreciable variations in the knowledge questions or time management abilities between the study's before and post-interventional data collection.

4. DISCUSSION

The current study aims to analyze the educational intervention on head nurse to explain their negotiation skills and time management skills while working in the tertiary care hospitals. The findings of this study of pre-interventions show that most participants are not aware of,

comprehend, or know how to negotiate. Additionally, there was far less cooperation, empathy, and important information on how to watch the negotiation. These finding are in line with recent literature which show that nurse negotiation skills are not up to mark (Higazee & Gab Allah, 2022). Further, highlighted inconsistencies in communication styles and the limited application of goal- setting or reasoning in conflict situations. Many nurses lacked organized techniques, avoided direct contact, or were emotionally sensitive and influenced by the factors that make negotiation and leadership difficult. Self-perception data revealed a discrepancy between confidence and actual approach, with few people regularly using structured or evidence-based bargaining tactics. Additionally common were procedural pain and emotional impact, indicating the necessity of training in effective communication and emotional regulation (Van Zoonen & Sivunen, 2022).

Time management emerged as one of the major problems. Few nurses had clear goals for the negotiations, and they were not started on time. Due to inadequate planning and prioritization, many experienced delays and overlooked significant challenges. The recent finding has been found that nurses have been poor in preparation for negotiation (Van Zoonen & Sivunen, 2022). These findings demonstrate the importance of structured educational programs in enhancing nurses' time management and negotiation skills. To improve leadership competence and confidence among nurses, training should incorporate goal-setting, scenario-based practice, and introspective exercises. Previously, findings revealed that nurses have difficulty negotiating in the healthcare industry, which suggests a possible gap in their professional growth (Arnaert, Mills, Bruno, & Ponzoni, 2018; Hewitt, Mills, Hoare, & Sheridan, 2024).

Therefore, current study findings emphasize the need for well-structured educational programs that focus on building essential skills like time management and effective negotiation. These programs can assist nurses in feeling more competent and confident by incorporating practical components like goal-setting, realistic scenario-based practice, and personal reflection. Equipped with these resources, nurses are not only more strategic and well-organized, but they are also more emboldened to speak out for their patients and themselves, which eventually results in improved outcomes in healthcare environments.

Contrarily, post-interventional data results indicate that head nurses' negotiation skills and knowledge increased dramatically. Most participants demonstrated empathy, a deep understanding of teams, and the use of problem-solving strategies such as BATNA (Best Alternative to a Negotiated Agreement). However, almost one-third still had antiquated opinions, particularly when it came to dealing with opposition and using empathy, which emphasizes the need for more cooperation and emotional

intelligence training. These results support the beneficial contribution of educational and training programs to improved negotiating abilities (Pujadas & Pardo-Bosch, 2024).

The findings show that head nurses grasp fundamental negotiation principles, such as the need of active listening and the use of negotiation for goals other than conflict resolution. However, certain misunderstandings persist, particularly regarding the practicality of win-win scenarios and how to achieve a balance between individual and communal interests. This suggests that there is still room to create more cooperative strategies which is consistent with literature (Shabaan, El-syaid, Eid, & Abozied, 2021). In a similar vein, nurses frequently express themselves emotionally and impulsively. Many people were more inclined to talk than listen, and they relied more on intuition than reasoning. In terms of organized communication and emotional control in particular, this demonstrates a disconnect between their understanding and practice.

The majority of participant's respected facts, logical reasoning, and had precise goals in mind. Nonetheless, many people treated negotiations competitively and were willing to be forceful when required, showing a mix of collaboration and conflict. Respondents were usually forceful, maintained their ground, and focused on the conclusion, demonstrating a strong results-oriented approach. Felt comfortable asking for assistance and exhibited a team-oriented attitude. However, emotions continued to play an important role. While most people preferred to listen, pay attention to details, and focus on objectives rather than personal accomplishments, dealing with emotional responses remained difficult.

Most participants showed a clear respect for facts, logical reasoning, and came into negotiations with specific goals in mind which is also highlighted as the key to effective communication and decision-making in healthcare(Bouguenina et al., 2023). However, many viewed negotiations as a little competitive process and were not hesitant to use assertiveness when necessary. This mix of cooperation and firmness is similar to the research of Grant and Shandell (2022), which focused on how effective negotiators typically alternate between voicing their opinions and being cooperative based on the circumstances. Participants also revealed that having a results-driven attitude, remaining outcome-focused, and sticking to their positions would be beneficial. However, they also appreciated teamwork and felt at ease asking for assistance, indicating a good balance between autonomy and cooperation that are particularly crucial in emotionally intelligent leadership(Lakhmani et al., 2022).

Emotions were still a problem despite the attached advantages. It wasn't always simple to control emotional reactions, both one's own and those of others, even while most people favored paying close attention, listening intently, and aiming for common objectives rather than individual victories. This is consistent with recent research by(Li et al., 2021), which highlights that many healthcare workers still need assistance in developing their emotional intelligence. All things considered, these observations imply that in addition to practical skills, training should concentrate on assisting nurses in gaining emotional awareness and control so they may more successfully handle challenging, high-pressure circumstances. Furthermore, it is evident that the majority of nurses are goal-oriented and view negotiating as beneficial. However, real-world problems like missed deadlines, absent stakeholders, and forgotten details keep things moving slowly. Therefore, implementation still has to be improved even if attitudes are improving.

Hence, it is evident that participants' approaches to bargaining and negotiating had improved, which was one of the educational intervention's most significant results(Chagani, 2024). Planning ahead, listening intently, and confidently and assertively expressing their opinions were all areas in which nurses significantly improved. This transition represented a genuine change in their perspective rather than merely picking up new skills. Many changed their attitude to negotiating from being uncertain or passive to being more deliberate, strategic, and confident. Thus, targeted training can significantly impact nurses' time management and negotiating skills in hectic healthcare settings (Ismail et al., 2025). Moreno et al. (2024)also emphasized on how practical learning can be attained through role-playing and scenarios assists nurses in using these abilities in ways that seem empowered and realistic.

The fact that the influence extends beyond personal development is very heartening. Improved negotiation skills among nurses foster improved collaboration, facilitate improved communication, and ultimately result in better patient care. Giving nurses the skills and self- assurance to speak up, advocate, and lead is more crucial than ever as healthcare continues to

become more complex. In order to ensure that nurses are not only capable of providing care, but also have a significant say in how that care is provided, this type of training is an important first step. Ultimately, the most important outcome of the educational intervention was a considerable improvement in bargaining behaviors(Chagani, 2024). Participants improved their ability to plan, listen, and voice their opinions in an aggressive manner. This demonstrates how their attitude to bargaining changed significantly as a result of the instruction. These findings are concurrent with the literature that

emphasized that educational intervention substantially improve the nurse negotiation skills and time management skills in the health care settings (Ismail et al., 2025).

5. CONCLUSION

The purpose of this study was to find out how well the head nurses now negotiate and manage their time. Moreover, the present study examined the ways in which educational programs influence these head nurses' negotiating abilities. This study demonstrates that even though many head nurses had little experience negotiating and managing their time, the educational intervention had a significant impact. They gained confidence in their ability to communicate, listen intently, and use deliberate techniques like empathy and teamwork after training. However, some nurses still have trouble controlling their emotions, maintaining organization, and efficiently managing their time. These findings demonstrate the importance of actual, hands-on training in developing not just knowledge but also practical confidence and competence in managing and negotiating in hectic hospital settings.

Theoretical Implications

This study offers potential insights from a theoretical perspective. First, it supports Kolb's Experiential Learning Theory, which is all about learning by doing and reflecting on those experiences. The educational program's mix of interactive lectures, group discussions, and hands-on practice shows that how learning that's active and focused on the learner really helps nurses build both their understanding and their skills in real situations. Second, the findings add to what we know about negotiation and communication in nursing. The findings show that with the right support and training, nurses can develop key skills like negotiation, communication and time management skills that are crucial for effective leadership. This fits well with leadership theories that stress being adaptable, confident, and good at building relationships in healthcare settings. Finally, the study emphasizes that information acquisition alone is insufficient, true behavior change occurs when nurses use their newly acquired knowledge at workplace setting.

Practical Implications

This intervention has several practical benefits that can make a real difference in the healthcare settings. By helping nurses improve their negotiation and time management skills, the educational programs can encourages smoother teamwork, quicker resolution of conflicts, and better decision-making overall. This not only makes the work environment less stressful but also lifts staff morale, which is especially important in the fast-paced and demanding helth care sector.

Additionally, patients get prompt, compassionate treatment when nurses manage their time and communicate more efficiently. Stronger bonds between nurses, patients, and coworkers foster trust, which in turn improves patient satisfaction and retention rates. The fact that this nine-week program, which was evaluated with a small number of head nurses, provides a workable model that is simple to modify and extend to other departments or institutions is also encouraging. This implies that comparable training may be incorporated into nursing staff orientation and professional development on a regular basis worldwide. Finally, the favorable outcomes offer hospital administrators and educators convincing, fact- based justifications for funding these skill-building initiatives. Healthcare companies may better support their nurses and raise the standard of care that patients get by including them in the educational programs

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