

Association between Performance Appraisal System, Workplace Well-being, Career Plateau, and Job Satisfaction among Nurses

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ABSTRACT

Background: Performance appraisal systems are integral to nursing management because they facilitate the recognition of nurses' contributions, performance enhancement, and career advancement. However, evidence of their influence on nurses' workplace well-being, job satisfaction, and career plateauing remains unclear. **Objectives:** This study aimed to investigate the relationship between performance appraisal systems, workplace well-being, career plateau, and job satisfaction among nurses in selected hospitals. **Methods:** A descriptive correlational cross-sectional design was employed, involving 340 nurses from three hospitals in Assiut Governorate (Main Assiut University Hospital, General Assiut Hospital, and El-Mabarah Hospital, Egypt). Data were collected using five structured questionnaires: personal and occupational characteristics, performance appraisal systems, workplace well-being, career plateau, and satisfaction with performance appraisal. Data collection spanned three months, from July 2025 to September 2025. **Results:** Approximately 40% of nurses perceived the performance appraisal system as poorly implemented in their hospitals. Moderate levels of workplace well-being and job satisfaction were reported by 37.1% and 61.2% of the nurses, respectively. More than half of the participants experienced low levels of career plateaus. Significant positive correlations were identified between performance appraisal systems and both workplace well-being and job satisfaction, while a significant negative correlation was observed with career plateau ($p \leq 0.001$). In the multiple linear regression analysis, workplace well-being and satisfaction with performance appraisal were significant positive predictors of the performance appraisal system, whereas career plateau was not a significant predictor ($p > 0.965$). **Conclusion:** The effective implementation of performance appraisal systems is associated with enhanced workplace well-being and increased job satisfaction and is inversely correlated with career plateau among nurses.

Keywords: Career Mobility; Job Satisfaction, Nurses; Occupational Health; Personnel Performance Appraisal

INTRODUCTION

Performance appraisal systems and other organizational management strategies directly influence nurses, who are integral to healthcare delivery. As primary healthcare providers, nurses are tasked with maintaining high standards of patient care while adapting to increasing workloads, advancing technologies, and challenging healthcare environments (Salem *et al.*, 2025).

Performance appraisal systems (PAS) serve as crucial management instruments within healthcare institutions, facilitating employee performance evaluation, constructive feedback provision, and the establishment of professional development objectives (Joseph & Varghese, 2024).

From a conceptual perspective, PAS can be theorized as organizational resources that influence nurses' work experiences through mechanisms such as feedback, recognition, and opportunities for professional growth (Afşar *et al.*, 2025). Effective performance appraisal practices may therefore influence important work-related outcomes, including workplace well-being, career plateauing, and job satisfaction among nurses (Yang *et al.*, 2026).

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Career plateaus may be evident structurally due to limited promotion opportunities or organizational constraints, or they may be content-related, where nurses encounter monotony or a lack of challenges in their daily work tasks (Rabenu & Shertzer, 2025). Nurses experiencing career plateaus frequently report frustration, diminished engagement, and decreased motivation, which can adversely impact job satisfaction, performance, and overall workplace well-being (Akçay & Ünlüöner, 2026).

Moreover, performance appraisal significantly influences nurses' job satisfaction by providing clear feedback and opportunities for professional development (Rodrigues *et al.*, 2026). Traditionally, nursing performance appraisals have focused on assessing clinical competencies, adherence to patient care standards, and technical skills (Wang *et al.*, 2025). However, contemporary appraisal methods emphasize the recognition of achievements and the provision of constructive feedback, which can enhance motivation, reinforce a sense of professional value, and improve job satisfaction (Keith *et al.*, 2021).

The interactions among performance appraisal, career plateau, workplace well-being, and job satisfaction are conceptually interrelated. Effective appraisal systems characterized by transparency, fairness, developmental feedback, and recognition may enhance workplace well-being and job satisfaction while potentially reducing perceptions of career stagnation (Sucipto *et al.*, 2026). Conversely, appraisal systems lacking clarity, consistency, or meaningful feedback may increase perceived injustice and stress, contribute to career stagnation, and diminish job satisfaction among nurses (Jonathans *et al.*, 2026).

Significance of the Study

Performance appraisal in nursing is a critical management instrument that provides valuable insights into the efficacy and quality of care delivery, directly influencing nurses' job satisfaction and workplace well-being. A review of the literature indicates a paucity of studies on this topic in the literature. Hamidi (2023) investigated the impact of performance appraisal on employee job satisfaction and organizational behavior, while Abdelrahim *et al.* explored the relationship between nurses' performance appraisal systems, empowerment, and work satisfaction at the national level in Sudan. Rabuana and Yanuar (2023) analyzed the role of employee well-being as a mediator between the work environment and engagement and employee performance on a global scale. However, limited evidence is available regarding the interrelationships among performance appraisal systems, workplace well-being, career plateau, and job satisfaction among nurses in hospitals in Assiut Governorate. Most previous studies have examined these variables separately or in different healthcare contexts. Therefore, investigating these four variables together in Assiut Governorate hospitals can fill an important empirical gap and provide context-specific evidence to support nursing management and improve nurses' workplace and career outcomes.

Aim of the Study

This study aimed to investigate the relationship between the performance appraisal system, workplace well-being, career plateau, and job satisfaction of nurses.

Research Questions

Q1: How do nurses perceive the implementation of the performance appraisal system in the three selected hospitals?

Q2: What are the levels of workplace well-being, career plateau, and job satisfaction among nurses in the three selected hospitals?

Q3: Is there a significant association between the implementation of the performance appraisal system and nurses' workplace well-being, career plateau, and job satisfaction?

METHODOLOGY

Research Design and Setting

The study employed a descriptive correlational cross-sectional design. The study took place at three hospitals in Assiut Governorate, Egypt: Assiut University Main Hospital (bed capacity = 1700), Assiut General Hospital (bed capacity = 214), and El-Mabarrah Hospital (bed capacity = 155).

Sample

Convenience sampling was used to enroll nurses who were available and willing to participate during the data-collection period. To minimize potential selection bias, data collection was conducted across the three hospitals using the same exclusion criteria, recruitment procedures, and data-collection tools.

The target population consisted of 2,950 nurses employed in the three participating hospitals at the time of the study. The minimum required sample size was calculated using Epi Info software, based on a total population size of $N = 2,950$ nurses, an assumed population proportion of $p = 0.50$ to maximize the estimated sample size, a 5% margin of error ($d = 0.05$), and a 95% confidence level ($Z = 1.96$). The calculated minimum sample size was approximately 340 nurses. 230 nurses from the Main Hospital, 62 nurses from General Assiut Hospital, and 48 nurses from El Mabarrah Hospital. Data collection was conducted over a period of three months, from July 2025 to September 2025.

Data Collection Tools

The data needed for the study were collected using the following five different tools:

Tool I: Self-Administered Questionnaire

It included personal and occupational data, which were used to collect data about hospital name, gender, age, educational qualifications, and years of experience.

Tool II: Performance Appraisal System Questionnaire

Following an extensive review of the relevant literature (Jaber *et al.*, 2025; Ritter *et al.*, 2023), this questionnaire was developed to assess the implementation of the performance appraisal system in the selected hospitals. It comprised 54 items, with each item scored on a three-point Likert scale: 1 = never, 2 = sometimes, and 3 = always. The total score ranged from 54 to 162. Scores of 54–91 (<65%), 92–121 (65%–75%), and 122–162 (>75%) indicated poor, satisfactory, and excellent application of the performance appraisal system, respectively.

Validations of the Performance Appraisal Tool

Content Validity

An expert panel comprising four faculty members from the Nursing Administration Department and seven nursing directors, along with their assistants from three distinct healthcare sectors, evaluated the content validity of the Performance Appraisal System questionnaire. Based on the feedback provided by the experts, necessary modifications were made. The Content Validity Index (CVI) was used to quantitatively assess content validity. The scale's overall content validity index (S-CVI) was 0.91, signifying excellent content validity.

Construct Validity

Exploratory Factor Analysis (EFA) demonstrated adequate sampling adequacy (Kaiser–Meyer–Olkin [KMO] and a significant Bartlett's test of sphericity ($\chi^2 = 11833.118$, $p < 0.001$)). Six factors were extracted, explaining 87.96% of the total variance, with factor loadings ≥ 0.40 considered acceptable.

Tool III: Employee Well-being in Workplace Questionnaire

The Employee Well-being in Workplace Questionnaire was adopted from the validated version developed by Czerw (2019). The original instrument demonstrated satisfactory validity and was developed to assess employees' well-being in the workplace. In the present study, the questionnaire was reviewed by a panel of experts to assess the relevance, clarity, and appropriateness of the items to the study context. The questionnaire comprised 43 items rated on a five-point Likert scale (1 = strongly disagree to 5 = strongly agree). The total score ranged from 43 to 215, with scores of 43–100, 101–157, and 158–215 indicating low, moderate, and high levels of workplace well-being, respectively.

Tool IV: Employee Career Plateau Questionnaire

The Employee Career Plateau Questionnaire was adopted from the validated instrument developed by

Miles (2010) to assess the risk of career plateau among nurses. In the present study, the questionnaire was reviewed by a panel of experts to assess the relevance, clarity, and appropriateness of the items to the study context. No modifications were made to the original items. The questionnaire comprised 12 items, with each item rated on a five-point Likert scale ranging from 1 = strongly disagree to 5 = strongly agree. The total score ranged from 12 to 60, with scores of 12–27, 28–43, and 44–60 indicating low, moderate, and high risk of career plateau, respectively.

Tool V: Satisfaction with Performance Appraisal Questionnaire

The Satisfaction with Performance Appraisal Questionnaire was adopted from the validated version developed by Hung (2019) to assess nurses' satisfaction with the performance appraisal system. In the present study, the questionnaire was reviewed by a panel of experts to assess the relevance, clarity, and appropriateness of the items to the study context. The questionnaire comprised 18 items, with each item rated on a five-point Likert scale ranging from 1 = very dissatisfied to 5 = very satisfied. The total score ranged from 18 to 90, with scores of 18–40, 41–63, and 64–90 indicating low, moderate, and high levels of satisfaction, respectively.

The internal consistency reliability for study tools II, III, IV, and V, was tested by using Cronbach's alpha 0.982, 0.845, 0.754, and 0.818, respectively.

Pilot Study

A pilot study was conducted involving 10% (34 nurses) of the total participants employed at the three selected hospitals. Following this pilot study, modifications were made to the questionnaire; consequently, the nurses who participated in the pilot study were excluded from the main study sample.

Administrative Stage

During the administrative phase, formal permission to conduct the study was obtained from the Research Committee at the Directorate of Health and Population, the Director of the Central Upper Egypt Health Insurance Branch, the Dean of the Faculty of Nursing at Assiut University, and the medical and nursing directors of the selected hospitals.

Inclusion criteria: Nurses who were employed in the participating hospitals during the data-collection period, were available to participate, and were willing to participate in the study were included.

Exclusion criteria: Nurses who were on leave during the data-collection period (e.g., maternity or sick leave), intern nurses, nursing students, and nurses who declined to participate or submitted incomplete questionnaires were excluded from the study.

Interviewing Stage

The researchers approached eligible nurses, explained the purpose of the study, and obtained implied informed consent. Participants were provided with self-administered questionnaires covering personal and professional information, the Performance Appraisal System questionnaire, and additional research instruments. The researcher provided guidance and clarified any inquiries without influencing participants' responses, while ensuring confidentiality. Data were collected over a three-month period from July 2025 to September 2025.

Assessment Stage

The completed surveys were systematically examined, coded, and entered into the data analysis software during the evaluation phase of the study. To assess the levels of performance appraisal application, workplace well-being, career plateau, and satisfaction, the researcher evaluated each instrument according to its respective scoring system and conducted an initial descriptive analysis of the data.

Statistical Design

Data was analyzed using IBM SPSS Statistics, version 26. Frequencies and percentages were used for

descriptive analysis. The chi-square (χ^2) test was used to assess differences in categorical variables across hospitals. Pearson's correlation coefficient (r) was used to examine relationships among the study variables. Multiple linear regression was performed to identify predictors of the performance appraisal system. Statistical significance was set at $p < 0.05$.

Ethical Considerations

The research obtained ethical clearance from the Faculty of Nursing Research Ethics Committee of the Faculty of Nursing, Assiut University, Egypt, with reference number 1120240936 on 24th November 2024.

RESULTS

Table 1: Distribution of Nurses' Personal and Occupational Data for Study Sample (n=340)

	Main University Hospital		General Assiut Hospital		Elmabarrah Hospital		χ^2	df	P-value
	N	%	N	%	N	%			
Age									
From 20- >25 year	0	0.0	35	56.5	0	0.0	218.01	6	0.000**
From 25- >30 year	103	44.8	27	43.5	15	31.3			
From 30- 40 year	127	55.2	0	0.0	29	60.4			
More than 40 year	0	0.0	0	0.0	4	8.3			
Gender									
Male	86	37.4	9	14.5	17	35.4	11.72	2	0.003**
Female	144	62.6	53	85.5	31	64.6			
Education Level									
Bachelor degree in nursing	103	44.8	29	46.8	26	54.2	27.48	4	0.000**
Nursing technical institute	127	55.2	33	53.2	18	37.5			
Nursing school (diploma)	0	0	0	0	4	8.3			
Experience Years									
Less than 5 years	103	44.8	45	90	4	8.3	192.83	4	0.000**
From 5-10 years	127	55.2	7	10	26	54.2			
From 10 -15 years	0	0	0	0.0	18	37.5			
Marital Status									
Single	68	29.6	49	79.0	17	35.4	55.34	4	0.000**
Married	144	62.6	13	21.0	31	64.6			
Divorced	18	7.8	0	0.0	0	0.0			

Note: χ^2 = Chi-square test; df = degrees of freedom; * $p < 0.05$; ** $p < 0.001$

Table 1 shows the distribution of nurses' personal and professional characteristics across the three hospitals. Most participants (67.6%) were from the Main University Hospital, followed by General Assiut Hospital (18.2%) and El-Mabarrah Hospital (14.1%). The majority were female, married, and aged between 30 and 40 years. Significant differences were found among hospitals regarding age, educational qualifications, years of experience, and marital status.

Table 2: Levels of Performance Appraisal System Application in the Different Selected Hospitals as Reported by Nurses (n=340)

	Main University Hospital		General Assiut Hospital		Elmabarrah Hospital		χ^2	df	P-value
	N	%	N	%	N	%			
Poor	93	40.4	34	54.8	8	16.7	62.24	4	<0.001**
Satisfactory	94	40.9	16	25.8	18	37.5			
Excellent	43	18.7	12	19.4	22	45.8			

Note: χ^2 = Chi-square test; df = degrees of freedom; * $p < 0.05$; ** $p < 0.001$

Table 2 shows significant differences in performance appraisal system implementation across the three hospitals ($\chi^2 = 62.24$, $p < 0.001$). Poor application was highest at General Assiut Hospital (54.8%), while excellent implementation was highest at El-Mabarrah Hospital (45.8%).

Table 3: Distribution of Participants' Responses Regarding Performance Appraisal Practices

	Main university hospital		General Assiut Hospital		Elmabarrah Hospital		χ^2	df	P-value
	N	%	N	%	N	%			
1-Who is responsible for evaluating the employee performance in your organization?									
Head Nurse	151	65.7	39	62.9	41	85.4	8.01	2	0.018*
Nursing director	79	34.3	23	37.1	7	14.6			
2-How many times per year is your performance evaluated?									
Monthly.	131	57.0	62	100	48	100	66.80	2	<0.001**
Every four months.	99	43.0	0	0.0	0	0.0			
3-Are you aware of the content used for your performance appraisal?									
Yes	81	35.2	28	45.2	48	100.0	67.09	2	<0.001**
No	149	64.8	34	54.8	0	0.0			
4-Are you aware of the criteria used in your performance appraisal?									
Yes	47	20.4	28	45.2	48	100.0	111.53	2	<0.001**
No	183	79.6	34	54.8	0	0.0			
5-Are you been reviewed by your manager or supervisor after your performance appraisal?									
Yes	54	23.5	31	50.0	40	83.3	66.91	2	<0.001**
No	176	76.5	31	50.0	8	16.7			
6-Do you have the right to identify your performance appraisal results									
Yes	43	18.7	38	61.3	40	83.3	94.23	2	<0.001**
No	187	81.3	24	38.7	8	16.7			
7-Do you have the right to choose your appraiser?									
Yes	0	0.0	5	8.1	18	37.5	88.75	2	<0.001**
No	230	100.0	57	91.9	30	62.5			

Note: χ^2 = Chi-square test; df = degrees of freedom; *p < 0.05; **p < 0.001

Table 3 presents nurses' feedback on performance appraisal practices across the three hospitals. Most nurses reported that appraisals were conducted by the head nurse, with monthly evaluations being the most common. Nurses at El-Mabarrah Hospital showed greater awareness of appraisal standards. Significant differences were found among hospitals regarding evaluator, frequency of appraisal, feedback, awareness, and use of appraisal results. Overall, El-Mabarrah Hospital demonstrated more structured and transparent performance appraisal practices.

Table 4: Levels of Workplace Well-being Regarding the Performance Appraisal System Applied in the Different Selected Hospitals as Reported by Nurses (n=340)

	Main Hospital		General Assiut Hospital		Elmabarrah Hospital		χ^2	df	P-value
	N	%	N	%	N	%			
Low	87	37.8	21	33.9	4	8.3	40.62	4	<0.001**
Moderate	84	36.5	30	48.4	12	25.0			
High	59	25.7	11	17.7	32	66.7			

Note: χ^2 = Chi-square test; df = degrees of freedom; *p < 0.05; **p < 0.001

Table 4 shows significant differences in workplace well-being among nurses across the three hospitals ($\chi^2 = 40.62$, $p < 0.001$). Low well-being was most reported at the Main University Hospital (37.8%). In contrast, El-Mabarrah Hospital had the highest proportion of nurses reporting high workplace well-being (66.7%).

Table 5: Levels of Risk of Career Plateau as Reported by Nurses (n=340)

	Main University Hospital		General Assiut Hospital		Elmabarrah Hospital		χ^2	df	P-value
	N	%	N	%	N	%			
Low	136	59.1	25	40.3	40	83.3	37.75	4	<0.001**
Moderate	94	40.9	33	53.2	8	16.7			
High	0	0.0	4	6.5	0	0.0			

Note: χ^2 = Chi-square test; df = degrees of freedom; *p < 0.05; **p < 0.001

Table 5 shows nurses' career plateau levels across the three hospitals, with significant differences observed ($\chi^2 = 37.75$, $p < 0.001$). Low career plateau was most reported at Elmabarrah Hospital (83.3%). In contrast, moderate level was more common at General Assiut Hospital.

Table 6: Distribution of Levels of Nurses' Job Satisfaction Regarding the Performance Appraisal System Applied in the Different Selected Hospitals as Reported by Nurses (n=340)

	Main University Hospital		General Assiut Hospital		Elmabarah Hospital		χ^2	df	P-value
	N	%	N	%	N	%			
Low	16	7.0	0	0.0	0	0.0	10.72	4	0.030*
Moderate	140	60.9	42	67.7	26	54.2			
High	74	32.1	20	32.3	22	45.8			

Note: χ^2 = Chi-square test; df = degrees of freedom; * $p < 0.05$; ** $p < 0.001$

Table 6 shows nurses' job satisfaction across the three hospitals, with significant differences observed ($\chi^2 = 10.72$, $p < 0.030$). Moderate satisfaction was the most common level across the three hospitals. High satisfaction was reported by 45.8% of nurses at El-Mabarrah Hospital. Low satisfaction was reported by 7.0% of nurses at the Main University Hospital.

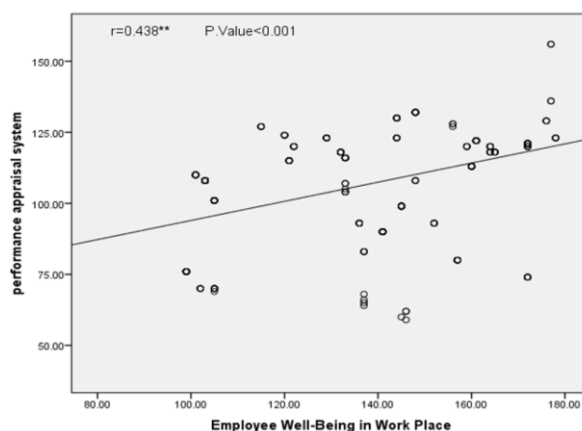


Figure 1: Correlation Coefficient between the Performance Appraisal System Applied in the Different Selected Hospitals and Nurses' Well-being in the Workplace (n=340)

Figure 1 demonstrates a statistically significant positive correlation between the performance appraisal system and nurses' workplace well-being ($r = 0.438$, $p < 0.001$).

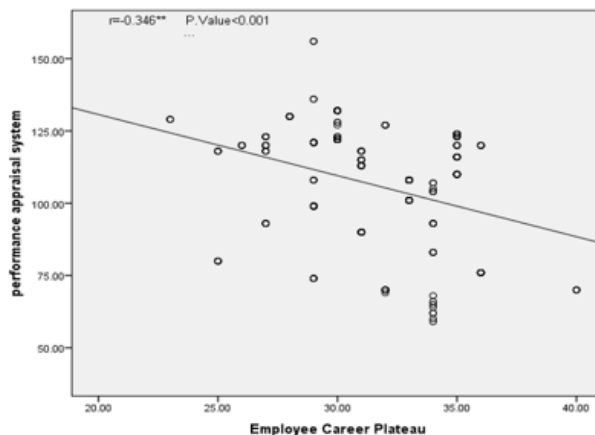


Figure 2: Correlation Co-efficient between the Performance Appraisal System Applied in the Different Selected Hospitals and Career Plateau (n=340)

Figure 2 demonstrates a statistically significant inverse correlation between the performance appraisal system and career plateau among nurses ($r = -0.346$, $p < 0.001$).

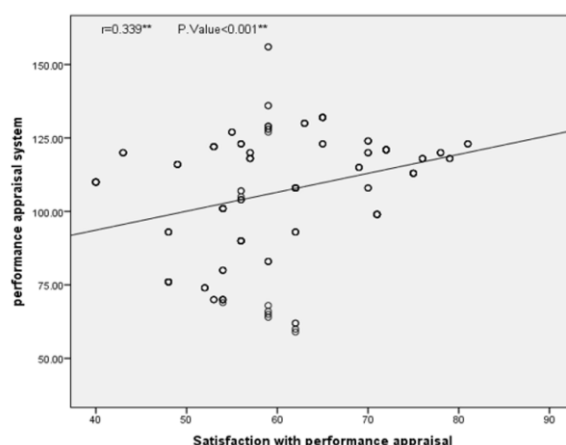


Figure 3: Correlation Co-efficient between the Performance Appraisal System Applied in the Different Selected Hospitals and Nurses' Satisfaction with Performance Appraisal (n=340)

Figure 3 demonstrates a statistically significant positive correlation between the performance appraisal system and nurses' satisfaction with performance appraisal ($r=0.339, p<0.001$).

Table 7: Multiple Linear Regression analysis of the Performance Appraisal System in Selected Healthcare Sectors as Reported by Nurses

Independent Variables	B	Std. Error	t	P-value
Employee Well-Being in Workplace	0.274	0.053	5.152	<0.001**
Employee Career Plateau Questionnaire	-0.020	0.449	-0.043	0.965
Satisfaction with Performance Appraisal Questionnaire	0.299	0.115	2.604	0.010*

Note: B = unstandardized regression coefficient; Std. Error = standard error; t = t-statistic; * $p < 0.05$; ** $p < 0.001$

Table 7 shows that employee well-being in the workplace and satisfaction with the performance appraisal system were significant predictors of the performance appraisal system, while employee career plateau was not a significant predictor. The model explained 20.4% of the variance in the performance appraisal system ($R^2 = 0.204, P<0.001$).

DISCUSSION

Understanding the links between performance appraisal and other important workforce outcomes is essential for effective nursing management (Luo *et al.*, 2025). Therefore, the present study aimed to investigate the relationship between the performance appraisal system, workplace well-being, career plateau, and job satisfaction among nurses in selected hospitals.

In terms of examining the PAS, the current study identified that while the PAS is operational, it has not yet achieved coefficient effectiveness, indicating a potential need for enhancements in appraisal practices within healthcare environments. This conclusion is consistent with Jaber *et al.* (2025), who reported that although nurses recognized the existence of PAS in their hospitals, its effectiveness was constrained by inefficient appraisal tools, insufficient training, and inadequate feedback mechanisms.

The analysis of workplace well-being in relation to the PAS implemented across various hospitals revealed generally moderate levels of well-being among nurses. This suggests that the appraisal process may require enhancements to foster a positive work environment more effectively. This finding was inconsistent with the results of O'Connor *et al.* (2024), who observed high levels of well-being among nurses when appraisal processes were effective, transparent feedback was provided, and nurses were actively involved in the evaluation.

The present study indicates that despite challenges within the appraisal system, many nurses perceive ongoing opportunities for career advancement, thereby mitigating the risk of a career plateau. This conclusion is consistent with the findings of Osman *et al.* (2024), who noted that although nurses encounter limitations in

appraisal processes, such as infrequent feedback or lack of clarity, they continue to engage in opportunities for learning, skill enhancement, and career progression.

In examining nurses' job satisfaction in relation to the PAS, the study identified that nurses generally reported moderate levels of satisfaction with the PAS. This finding contrasts with the results of Mohamed Abdelrahim *et al.* (2023), who observed highly positive impacts of PAS on nurses' job satisfaction and sense of empowerment, and Malik *et al.* (2025), who noted that appraisal practices involving constructive feedback, skill recognition, and clear goal-setting were associated with high motivation and satisfaction. The current findings imply that the PAS in the hospitals under study may not fully align with nurses' expectations or effectively facilitate their professional development and recognition.

To enhance nurses' career development and professional well-being, nursing administrators, policymakers, and decision-makers must ensure that appraisal procedures are equitable and transparent. This improvement can be achieved by providing continuous constructive feedback, ensuring that evaluators are adequately trained, involving nurses in the goal-setting process, and regularly reviewing and refining the appraisal system.

Limitations

This study has certain limitations that warrant consideration when interpreting the findings. The results may not be generalizable to multidisciplinary healthcare teams, as the study exclusively focused on nurses and did not include other specialists. Additionally, the cross-sectional design constrained the ability to evaluate causal relationships.

Future Scope

Future studies should use longitudinal and intervention-based designs to examine the long-term effects of improving performance appraisal systems on nurses' workplace well-being, career plateau, and job satisfaction. Research involving larger and more diverse samples across different healthcare settings is also recommended to enhance the generalizability of findings. Future research could further explore organizational and managerial factors that influence the effectiveness and transparency of performance appraisal systems and evaluate evidence-based appraisal interventions, including regular feedback, professional development, and career advancement mechanisms.

CONCLUSION

The findings suggest that while performance appraisal systems in the studied hospitals include basic evaluation functions, they are still insufficient in fully supporting nurses' professional outcomes. Nurses reported moderate job satisfaction and workplace well-being, but issues remain regarding transparency, clear evaluation criteria, and constructive feedback. Career plateaus were generally low; however, appraisal systems showed limited effectiveness in detecting or addressing them. A negative relationship was found between appraisal systems and career plateaus, while strong positive correlations were observed with job satisfaction and workplace well-being.

Recommendations

This study advocates for continuous training of nurse managers and policymakers to ensure the implementation of effective, unbiased, and equitable performance review processes. By establishing fair, transparent, and clearly defined evaluation criteria, nursing directors across various institutions can enhance the utilization and implementation of performance appraisal systems. Furthermore, opportunities for career advancement, role expansion, and ongoing education should be closely aligned with the appraisal outcomes.

CRedit Authorship Contribution Statement:

I.S.G.: Conceptualization, methodology, data collection and writing original draft. **H.R.Y.:** Supervision, review and editing. **E.A.G.:** Validation and formal analysis.

AI Assistance Declaration

The authors used ChatGPT for academic wording and text summarization during the preparation of this

manuscript. All outputs generated with AI assistance were critically reviewed, edited, and approved by the authors, who take full responsibility for the final version of the manuscript.

Conflict of Interest

The authors declare that there is no conflict of interest in the current study.

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