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A thematic analysis of professionalism from the perspective of nurse managers

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ABSTRACT

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Background & Aim: Professionalism is a multidimensional and dynamic concept that can be understood and interpreted differently in time, job position, or culture. Our study investigated how nurse managers interpret and understand professionalism in the Slovak sociocultural context.

Methods & Materials: This qualitative study adopted an interpretive design. The sample consisted of seven nurse managers working in the selected university hospital in Slovakia. Data were collected between November and December 2021 using semistructured interviews. Data were analyzed using reflexive thematic analysis.

Results: The reflexive thematic analysis resulted in developing six key themes specified in twenty-one sub-themes: Developing and maintaining professionalism; Challenges and problems of professionalism in nursing; Teamwork; Violation of professionalism; Requirements to become a nurse professional; Social status of nurses. These themes represent the perception of nurse managers of professionalism as a complex phenomenon grounded in the background and attitudes of nurses, socialization, quality of teamwork, profession requirements wrestling with the shortage of nurses, dominance of medicine, and lack of respect for the profession of nurses.

Conclusion: Together with other healthcare managers, nurse managers should continuously support and guide novice nurses and nursing students, share knowledge and skills, overcome stereotypes, support teamwork through strengthening nurse-patient collaboration or building collegian relationships, and improve the social status and recognition of nurses in society.

Introduction

Nurses belong to the largest and most diverse workforce and are the strongest pillars of the healthcare system (1). They are required to demonstrate professionalism in their routine practice, as it determines patient satisfaction, supports positive health outcomes, and the personal and professional growth of nurses (2). Professionalism is associated with turnover rate, intrinsic motivation, organizational and affective commitment, satisfaction, and performance. A higher level of professionalism enhances recognition, improves autonomy and status, fosters job satisfaction, and enhances the quality of practice (3). The terms professionalism and professionalization have been discussed in the international professional literature for decades, yet many nursing researchers agree that this phenomenon remains insufficiently explored (1, 2).

Professionalism is a dynamic and evolving concept that is based on professional values and respect for yourself and others, honesty, integrity. responsibility, and commitment to continuous improvement and self-regulation. It relates to the specific set of knowledge, behavior, and attitudes that are acquired in the process of socialization. The important professional legislative principles, regulations, and standards for clinical practice performance are reflected in it (3). Miller (4) developed specifically for nursing The Wheel of Professionalism in Nursing, the center of which is education in a university setting and a scientific background in nursing, which was considered

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Copyright © 2023 Tehran University of Medical Sciences. Published by Tehran University of Medical Sciences. This work is licensed under a Creative Commons Attribution-Noncommercial 4.0 International license (https:/creativecommons.org/licenses/by-nc/4.0/) Noncommercial uses of the work are permitted, provided the original work is properly Cited crucial for professionalism in nursing. In the model, the structure of other areas necessary for professionalism and professional development in nursing was developed: Adherence to the Code for Nurses; Theory: Development, Use, and Community service orientation; Continuing Education and Competency. Other developed areas in the models were Evaluation Research: Development, Use, Evaluation Self-regulatory, Autonomy Professional organization Participation, Publication and Communication. Professionalism can be understood as a multidimensional concept that involves several attributes. Its understanding might be influenced by job position (5). However, within nursing, nurse managers (NMs) contribute to the greatest extent to the advancement of the nursing profession, together with the development and support of the professionalism of nurses. Nurse managers play a significant role on the frontline of nursing. Their leadership style is one of the key factors that support nurses' professionalism (6). Leadership is a part of the work culture where managers encourage and inspire employees to achieve excellent results (7). Strengthening management supports employees' personal resources (autonomy and self-confidence) and developmental resources (feedback and support), which help in achieving work goals. This has a positive correlation with nurses' motivation, work attitudes, and performance (6,7).

The results of several studies suggest that the approach of nurse managers, focusing on autonomy, differs from a developmentoriented approach (1,7). Autonomy-oriented behavior provides employees with the ability and motivation to work autonomously by increasing their own initiative (8). Professional autonomy of nurses means not only independence in clinical practice, including decision-making, problem-solving, and taking steps to meet patient needs and assuming responsibility (9) but also the opportunity to influence working conditions and develop nursing practices in a broader sense (10). On the other hand, behavior based on a developmentoriented approach provides employees with opportunities for continuous growth and a focus on increasing their personal resources (11). Both of these approaches are essential, and employees should know that they are supported and have a leader who will guide them during their activities.

Nurse managers are responsible for planning, organizing, and meeting strategic and operational goals in the nursing department. Therefore, their understanding of professionalism may lead to greater awareness of aspects that may support or threaten the nursing profession in general (1).

Nurse managers solve crisis situations, supervise the quality of nursing care, check and methodically guide the keeping of health records, monitor satisfaction with nursing care, and approve educational plans (12). According to Miller (4), nurse leaders advocate for change in the nursing profession by accepting responsibility for promoting and maintaining professional behavior.

Managers are expected to provide professional leadership in nursing and use leadership strategies and methods to fully utilize the potential of the workforce (2 In addition, they are expected to support and improve the development of knowledge and skills of nursing staff, as well as influence, motivate, and empower nurses. Strategies used by healthcare leaders directly affect staff satisfaction and, subsequently, patient satisfaction (10,11). Several studies show that the management and leadership skills of nurses have an impact on the working environment of nurses, their performance, the quality of care, the use of research and their continuous professional development (13), outcomes of patients, their relatives, and hospital organizations (1,3). The study aimed to investigate how nurse managers interpret and understand professionalism in the Slovak sociocultural context.

Methods

This qualitative study adopted the experiential inductive reflective thematic analysis approach to understand how NMs make sense of professionalism in the Slovak context. The experiential reflective thematic analysis approach was chosen because it allows one to capture and explain people's own perspectives and understandings (14). The study was carried out according to the COREQ checklist.

The study was approved by the Ethics Committee of the Jessenius Faculty of Medicine in Martin, Comenius University in Bratislava (EC no. 79/2021).

After granting consent from the selected hospital in Slovakia, the participants were selected using the purposeful method. The inclusion criteria for NMs were: a) occupied a clinical management position; b) had a master's degree in nursing; c) completed specialization training in the field of practice. NMs were excluded if they: a) did not provide informed consent;

b) not occupied a clinical management position. The characteristics of the sample are reported in Table 1. Nurse managers were contacted through the hospital's head nurse. After obtaining informed consent, the researcher arranged an individual interview date and time with the nurse manager.

Based on a flexible interview guide, faceto-face semi-structured interviews were chosen to get rich data. The questions in the interview guide focused on the meaning of professionalism, its characteristics, the professional status of nurses, and the specifics of nursing professionalism in the sociocultural context of Slovakia. The example of interview questions is reported in Table 2. Data were collected in the Slovak language between November and December 2021 until the information power of the data was achieved in terms of reflections on the information richness of the dataset and how that meshes with the aims of the study. (Braun, Clarke, 2022, p. 28). The interviews were led by an experienced researcher with a Ph.D. degree in nursing and were conducted at the participants' convenience (time and place). The interviews lasted 42 minutes on average were audio recorded and transcribed verbatim.

Table 1. Participant characteristics

Position	Gender	Age	Nursing experience	Unit
Nurse manager	Female	38	15	Surgical
Nurse manager	Female	52	35	Orthopedic
Nurse manager	Female	48	30	Anesthesiology & intensive care
Nurse manager	Female	57	35	Ophthalmic
Nurse manager	Female	50	32	Dermatovenerologic
Nurse manager	Female	60	41	Internal
Nurse manager	Female	54	34	Neurological
	Nurse manager Nurse manager	Nurse managerFemaleNurse managerFemaleNurse managerFemaleNurse managerFemaleNurse managerFemaleNurse managerFemaleNurse managerFemaleNurse managerFemale	Nurse managerFemale38Nurse managerFemale52Nurse managerFemale48Nurse managerFemale57Nurse managerFemale50Nurse managerFemale60	PositionGenderAgeexperienceNurse managerFemale3815Nurse managerFemale5235Nurse managerFemale4830Nurse managerFemale5735Nurse managerFemale5032Nurse managerFemale6041

The NMs' responses were analyzed using reflective thematic analysis (14) with the assistance of ATLAS. Ti 9. Reflective thematic analysis was designed to develop patterns of meaning called themes in a dataset. Themes and subthemes were generated through the six-step analytical process: familiarization with the dataset (reading and re-reading the data to familiarize with content), coding (generating brief codes to capture important parts of the data), generating initial themes (examining the codes to develop patterns of meaning as initial themes), developing and reviewing themes

(checking the initial themes against the codes), refining, defining, and naming themes (developing a comprehensive analysis of each theme and deciding on an informative name for themes), and writing up (connecting the analytic narrative and data extracts and contextualizing the analysis in relation to existing literature). The analysis of all interviews was carried out by an experienced researcher (KŽ) as recommended by Braun and Clarke (14, p. 118). Each step was discussed with the peer data analysis group (DK, KŽ, JČ, RK).

Interview questions	Prompts		
	What does the work of a nurse encompass?		
In your opinion, what does professionalism mean in	What significance does professionalism hold in nursing?		
nursing?	How has your perspective on professionalism changed over the		
	course of your practice?		
	How would you characterize her, or could you describe a nurs		
What qualities should a nurse possess as a professional?	you consider an example of professionalism?		
what quanties should a nurse possess as a professional.	In your opinion, how does a nurse become a professional?		
	What influences this process?		
What do you consider unprofessional behavior in nursing?	Can you provide me with specific examples?		
	What, in your opinion, enhances the professionalism of nurs in our context?		
What challenges does nursing professionalism currentl	What, in your opinion, threatens the professionalism of nurs		
face in our context?	in our context?		
	What problems do you perceive in relation to professionalism		
	in nursing?		
How do you perceive the level of respect for the	How could this position be improved?		
professional status of nurses in healthcare compared to	What is the status of nurses in society according to you		
other healthcare professionals?	perspective?		

Table 2. The example of interview questions

Results

Professionalism from the perspective of NMs

The concept of professionalism was reflected by NMs in six main themes:

Developing and maintaining professionalism; Challenges and problems of professionalism in nursing; Being a professional; Social status of nurses; Teamwork; and Violation of professionalism (Figure 1).



Figure 1. Professionalism from the perspective of nurse managers

The theme of "*Developing and maintaining professionalism*" was specified by subthemes: Building self-confidence, Commitment to the profession, Family background, Nurse experience, Selfimprovement, and Professional socialization.

The first subtheme reflected the building of self-confidence in a newly graduated nurse, which relates to the acceptance of the nurse by colleagues and patients. For a newly graduated nurse, building self-confidence is closely related to mastering the technical skills of nursing procedures: "When nurses enter the practice, the most important thing for them is to master the manual skills... That is actually the basis of their feeling, of such professional selfconfidence, as well as acceptance by patients and coworkers" (NM2). Positive feedback is important from coworkers as well as the manager, reflecting the acceptance and recognition of the work or adequate steps/procedures that led to a good outcome of care.

The second subtheme illustrated the commitment of nurses to the profession. Professionalism can be learned to some extent, but its development is most significantly influenced by the very commitment to the profession and, therefore, the efforts of nurses to constantly improve and innovate things: "...to become a professional, a person must be as dedicated as possible to her/his work and must know what he/she actually wants to achieve. Professionalism and professional attitude can be learned in one's own way, ... we have to have something in our heart, something in ourselves to be able..., not every person is capable of that" (NM3). In connection with the commitment to the profession, the nurse must especially be interested in the patient, have a sincere desire to help people/patients, and not consider the profession of a nurse only as a job that is financially rewarded: "Well, professionals must be interested in the patient. And they really want to help patients or the people that they care for, and they want to help them so sincerely that they do not have this profession to get paid once a month" (NM2). The commitment to the nursing profession is also evident in other spheres of nursing than in clinical practice: "...and in society, we present ourselves in all possible forms, in research, we have seminars, conferences, literature..., we publish books, we publish in journals, we present ourselves with various lectures..." (NM4).

The third subtheme reflected the importance of family background and family support in building nurses' professionalism: ...Family is very important to me to be a professional. After all, you have to have that background, and if you do not have it or you do not have time for the family, the meaning of everything is lost, and it becomes a problem. So, these moments are probably the most important for me and will probably negatively affect professionalism" (NM3). The family background can act as a driving force for the nurse, but at the same time, it provides her with a balance in life, which allows the nurse not only to devote herself to her work but also to develop it further.

The fourth subtheme illustrated how the experience of nurses supported the building of professionalism. Young nurses (novices) implementation prioritized the of the prescribed treatment plan, and the satisfaction of physicians with the work performed: "I considered myself a good nurse when I managed to complete all the tasks and when the physician was simply satisfied" (NM1). With increasing age, nurses have become aware of other aspects that are important in their work. Their practice was based on their knowledge and experience: "A person needs his own experiences, also life experiences, and *experience something in that life, to gain such* humility and be able to empathize with the situation of patients, relatives, but basically also colleagues" (NM6).

The fifth subtheme reflected the necessity for nurses' self-improvement in building and maintaining their professionalism. After mastering the technical aspects of nursing procedures, communication skills were important and could also be supported by graduating from college or university: "... When I started working, communication was basically talked about very minimally, but education and the fact that I went to university really helped me advance my communication skills" (NM2). The

building of professionalism can also be supported by communication with physicians and colleagues or the development of critical thinking: "...and just by talking to those colleagues, physicians, you read something yourself, then you start to educate yourself, you start to understand all things differently, and you also adopt a different approach to work ..." (NM3). Nurses become professionals by cultivating their own personalities and trying to have a broader scope at work while being colleagues to physicians. This should move them forward in the context of their efforts to be equal members of the team.

The sixth subtheme illustrated professional socialization as a necessary aspect maintaining building and nurse professionalism. Building professionalism has already begun during studies in nursing students, through an example of a nurse mentor: "... the student gains a lot of that experience and knowledge in practice during that mentoring, and it really depends on how the mentor deals with him/her, how she influences her/him ... " (NM6). It is the personality of the nurse that is an important aspect of building professionalism in nursing students. A nurse can become a mentor only after meeting certain prerequisites, such as good communication skills; otherwise, the student may feel insecure, demotivated, or underestimated. Another positive step in building the nurse's professionalism is assistance during the adaptation process. The work environment, the team at the workplace, and insufficient support in the adaptation process can negatively affect the building and maintaining of the professionalism of a newly hired nurse or a graduate nurse: "...the environment, the closest colleagues, the support of the closest people who are included in the adaptation process, will help a lot, so that's really important...the right approach to them it can awaken in them the desire to improve, to work on themselves" (NM1).

The theme of "*Challenges and problems of professionalism in nursing*" was specified by subthemes: Nurse shortage and lack of motivation.

The first subtheme reflected one of the most significant problems in the nursing profession in general. Nurse shortage has become a serious challenge: "It is mainly the lack of nurses, and this can affect professionalism in a negative sense... we are like a factory and quickly do so many procedures... relationships are cold" (NM3). One NM described: "The fact that there is a shortage of nurses also has the advantage that it is finally simply visible that nurses are absent in the system. So, there are departments and clinics that are completely unable to function normally without them..." (NM1). The consequence of the nurse shortage is the inability of workplaces to maintain quality care, which was not possible even during the COVID-19 pandemic. A positive aspect of the COVID-19 pandemic is the awareness of political authorities and the public that nurses are essential to ensure the functioning of particular workplaces, which could lead to a change in the position of nurses in the future. Nurse managers are aware that the implementation of only necessary nursing activities leads to a decrease in the quality of care provided, but also to a threat to the professionalism of nurses.

The second subtheme illustrated the lack of motivation in nurses as another problem and current challenge of professionalism in nursing. The lack of motivation of nurses is anchored in a dominant stereotype that is evidenced in society. The hierarchical type of relationships workplace, in the the implementation of mainly instrumental activities, and the related submissiveness of the nurses caused those nurses not to fully demonstrate their professionalism: "We are simply submissive, and of course, there is also the stereotype, which still prevails in many people, that the nurse is simply the one who listens to the doctor and prefers to quietly do what needs to be done" (NM1).

The theme "*Teamwork*" was specified by subthemes: Accountability of the nurse manager, Teamwork support, Nurse-patient collaboration, and Team disharmony.

The first subtheme illustrated the meaning and importance of the accountability

of NMs within teamwork. At the time of the crisis, the COVID-19 pandemic, NMs were actively looking for auxiliary staff to make nurse work easier, as nurses had to care for patients with coronavirus: "...so actually my nurses teach them, but we did not have any conflicts among them. They did the first and the last; their workload was high, so we were doing our best to ensure that they had additional support staff" (NM 5). The support of nurse managers is important in crisis situations and eliminates the risk of unwanted conflicts (manifestations of inappropriate behavior between professionals), while leading to nurses' satisfaction. The support of nurse managers also includes the possibility of open problem-solving so that the negative impact of the nurse's personal problems on the patient is avoided.

The second subtheme reflected the support in the team, which positively affected the professionalism of the nurses. Nurses understood the importance of teamwork and the need to help each other. The functioning of the team had an impact on the patient: "The patients perceive us differently if we try to work in the team, communicate with each other, and the team is functional... When they (patients) see that nurses are kind to each other, they communicate and say thank you... We treat patients in the same way, and that is why teamwork is essential" (NM 4). The collective can positively form the nurse so that he/she provides quality nursing care; in certain cases, the pressure of the collective may be inadequate and may lead to the nurse's intention to leave the current job position.

The third subtheme illustrated the importance of teamwork in the nurse-physician relationship. Nurses expected more support and representation from doctors, which could support their professionalism: "Because we work as a team, the physician cannot be without us. How many times have I told the physician that you are one, but you need a team of 10 people, and those 10 people are nurses? If you did not have that team, you would not do the surgery" (NM 4). They often performed activities instead of physicians. Clear clarification of competencies and not exceeding the competence framework could support the equality of nurses and physicians as members of the healthcare team: *"You have your competencies and simply insist on them and do not subordinate to the physician"* (NM 7).

The theme "Violation of professionalism" was specified by subthemes: Lack of nurses' interest, Lack of respect for the nurse profession, Unprofessional behavior, and communication.

The first subtheme reflected the lack of interest in nurses as one of the aspects that professionalism. threatened their Professionalism was threatened by the socalled cold, numbress, which could also be caused by fatigue or exhaustion: "Unprofessional in relation to the patient is, for example, numbness, cold, and lack of interest. Perhaps we attribute it to fatigue exhaustion. But this was also there before, sometimes the lack of interest of those people or not being creative within care...it is along with cold care and adhering to stereotypes..." (NM 3). Disinterest is also manifested in stereotypes, limitations of creativity, or insensitivity toward patients.

The second subtheme illustrated the threat to the professionalism of nurses through their lack of respect and estimation of their own profession. Dissatisfaction with nurses or their notorious complaints did not lead to others respecting them: "A person has to earn respect. If the nurses keep whining, keep being dissatisfied... They have many unsatisfied patients, undone work, or something else, then there is the problem...they will not be respected by others" (NM 4).

The third subtheme illustrated unprofessional behavior and communication as aspects that significantly threaten nurses' professionalism. An inappropriate way of communicating at the patient's bedside is unprofessional behavior: "I considered consider it unprofessional when nurses have communication, very poor are not professionally educated, do not know how to treat patients, are insensitive, harsh, unethical absolutely, do not have a shred of altruism or empathy" (NM 4). The professionalism of nurses is also threatened by inappropriate or vulgar behavior toward patients, including shouting or humiliating patients, but also behavior that does not support the team, superiority over other colleagues: "...and then also if nurses simply cannot handle, for example, the patients' manifestations, explosiveness or basically some kind of vulnerability that they cannot keep inside themselves..." (NM 6)

The theme "*Requirements to become a nurse professional*" was specified by subthemes: Formal requirements for the nurse professional and Personal characteristics of the nurse professional.

The first subtheme represented the formal requirements for the nurse professional as perceived by NMs. NMs considered education a basic formal requirement, while lifelong learning was considered a basic element of nursing professionalism: "So, nurses must be educated professionally because when they do not have professional knowledge, they cannot provide relevant information to patients" (NM4). NMs also required that nurses know how to work quickly but correctly: "When something is happening, also maintain the mandatory decorum, and do everything to ensure that all work procedures are actually preserved, just so that nothing was out of the ordinary" (NM5).

The second subtheme represented the NMs' requirements for a professional nurse's personal characteristics. A nurse should be kind, sincere, and sensitive: "I say it simply, with kindness, ethically, sensitively, and as a team member" (NM1). Another NM highlighted: "Nurse are decently self-confident but not arrogant, they are aware of their knowledge but polite to people, they can communicate... They can be very nice, accommodating to people, they can convince people... They are professionally competent" (NM4). According to NMs, nurses should demonstrate belonging and empathy both in relation to patients and colleagues. At the same time, they should be able to depersonalize themselves at work and not solve their problems at work. The demanding nursing job should fulfill them and bring them satisfaction.

The theme "*Social status of nurses*" was specified by subthemes: Dominance of medicine, Nurse profession in society, Professional organization, and Promoting professional status.

The first subtheme expressed the persistence of the dominance of medicine and the biomedical model of care, which determined the relationships between physicians and nurses in the workplace: "I don't come across it at our workplace, but I know that it prevails somewhere. That is just the stereotype that the physician is someone... The nurse will keep records and do what she/he says. That is the stereotype. We will be rooting out people for a long time (NM1). Another NM stated: "Even people will not respect us at all; they will not listen to you when the doctor, who is God, tells them and the nurse, when she tells them something, it is zero points, she is just a stupid nurse" (NM4).

The second subtheme reflected the position of the nurse profession in society: "...the general public does not know what the nurse profession entails, which is why there are only a few people interested in this profession because they do not know exactly what they should imagine under it, what can they actually do for that sick person" (NM2). Another NM highlighted: "The position of nurses is not what we (nurses) deserve; it is much lower. "(NM3). The professional nurse in society was also jeopardized by the way nurses were presented in various TV series/serials: "...how, when the nurse is portrayed in the media, mostly in some series, is it completely detached from reality. And we will see if that affects the perception of nurses" (NM4).

The third subtheme presented the issue of professional organization. The Slovak Chamber of Nurses and Midwives had the potential to influence, support, and develop professionalism: "I think the organization has that potential, but I think the chamber should be seen more. It should be heard more because I think that, in general, nurses perceive the chamber quite negatively" (NM1). In relation to social status, the professional organization is expected to be more active towards the public to present the nursing profession and convince and explain what nurses do. It is expected to present the nursing profession in the media, for example, in podcasts on social networks, and not solve only the financial issue. The role is primarily to convince society of the tasks nurses can perform and the activities they can provide for society. On the other hand, NMs themselves perceive the professional organization negatively: "Perhaps I will be a little critical of our professional organizations. I don't think they handle it well... we simply do not know how to sell ourselves: we do not know how to show what is in us" (NM3).

The fourth subtheme expressed the possibilities to support the professional status of nurses. Nurses themselves must participate in strengthening and emphasizing the importance of professionalism within the profession. It is necessary to make themselves visible, even in places where they have not been able to implement their competence until now (for example, prevention, community settings, and schools), to explain who nurses are, what activities they provide within the healthcare system, and what potential they can offer to "We probably need to present society.: ourselves more, point out more to our work ... Maybe if nurses were more among people, as it is abroad, they have community nurses or school nurses... those nurses are not only seen by sick people on the wards, but also by people in ordinary life, schools, or in those communities... those nurses went to the healthy population as well" (NM1).

Discussion

Our study aimed to investigate how nurse managers interpret professionalism in the sociocultural context of Slovakia. Nurse managers in our study understood professionalism as a multidimensional and dynamic concept that covers several interconnected attributes.

Nurse managers reflected upon the concept of professionalism through six themes. The first theme is related to developing and maintaining professionalism. Through practical experience, continuous education, and personal growth, nurses build their professional identity throughout their professional lives. This process begins during their studies as part of the professional socialization of nursing students. Nurse managers consider it important for nursing graduates to master instrumental skills. Skills appreciated by patients and colleagues enhance a nurse's professional selfassurance and self-confidence (15). In its history, nursing has undergone fundamental changes in the provision of nursing care and professional training, yet it is difficult to define the personality characteristics that nurses should have in contrast to formal educational requirements. Basic virtues and values are anchored in the ICN Code of Ethics for Nurses (16) and subsequently in national codes of ethics. Managers expect nurses to adhere to ethical and professional standards. They must be polite, self-confident, willing, kind, sensitive, and show respect and empathy in relation to the patient and colleagues. NMs expect a professional approach, appropriate knowledge and skills, and the ability to assess the situation and manage stressful situations. Similar requirements are mentioned in the literature review by Rchaidia et al. (17).

The second theme reflected the challenges and problems of professionalism in nursing. Nurse managers in our study considered the constantly growing global problem of nurse shortage and nurse lack of motivation to be challenges and professional problems. The Slovak professional organization also emphasizes the urgent need to strengthen the workforce in the healthcare sector. Since the problem has persisted for a long time, it is necessary to look for solutions to provide much higher quality health care with less personnel. Therefore, work motivation is an extremely important factor that affects the quality and content of work, affecting health outcomes (18). They can maintain and increase nurses' intrinsic motivation, encourage them to develop skills, and help them set personal goals. Nurse shortage has created many negative impacts on patient health outcomes, but it also increases the workload of nurses. Analysis of studies in a systematic review by Tamata and Mohammadnezhad (19) revealed that increased burnout. psychosomatic disorders, stress. unattractive or poor working conditions, and

insufficient support of nurses led to the tendency of nurses to leave their jobs.

The third identified theme reflects the issue of being a professional. Knowledge, skills, and experience are fundamental components of professional growth (20-22). Nurse managers described that they expect a professional approach from nurses, including education, the ability to assess situations and handle stressful situations, being active and dedicated to their work, managing the technical aspects of nursing procedures, possessing adequate communication skills (both verbal and non-verbal), keeping a cool head (being able to make timely and appropriate decisions), undergoing specialized training, being able to defend their opinions, being a team member (part of a collective), and integrating into the team (7,12). The ability to make decisions and take responsibility for them is crucial. As mentioned in the study by Hunter & Cook (23), providing quality care and assistance to patients and continually improving oneself. Al-Ruzzieh (24) and AllahBakhshian et al. (20) emphasize that nurses need to have knowledge acquired through formal education, which ensures their ability to practice well and make sound decisions. They also view lifelong learning as an essential aspect of nursing (25).

Another area that nurse managers perceive as important for nursing professionalism is the social status of nurses. The idea persists in our society that nurses exclusively fulfill the physicians' prescribed treatment plan, and university education is not needed for such responsibilities. Even some of the nurses themselves question the need for education. At the time of the COVID-19 pandemic, society's reactions were different, from supporting nurses in the first phase of the pandemic to discrediting them during its persistence. Social recognition plays an important role in staving in the profession or even in the choice of this profession by young people (26). Another issue highlighted by NMs was the role of professional organizations. Nurse managers perceived that the professional organization should be more involved in supporting the professionalism of nurses. Regulatory bodies and organizations are responsible determining for almost all components of care delivery and the need for staff in the unit. The importance of professional organization was also highlighted in several international studies (4,21). The nurse managers in our study expressed mostly unfulfilled expectations of the professional organization. They have negatively assessed the process of lifelong learning and financial problems but also describe the lack of activities to motivate nurses to remain active in the profession.

The professionalism of nursing is reflected in the complexity of teamwork (7,27). This is precisely another area identified by nurse managers in our research sample. Nurse significantly managers influence team collaboration, performance, and team success, aimed at providing the highest level of care (12). Nurse managers consider support in crisis situations and eliminating the risk of unwanted conflicts (manifestations of inappropriate behavior among staff) as important. Their support for staff also includes the opportunity for open problem-solving to prevent the negative impact of a nurse's personal issues on the patient. Currently, making decisions is challenging, especially due to a shortage of nurses, a situation that was exacerbated during the Covid-19 pandemic. Leaders must be able to leverage their skills. McCabe Sambrook (2014) repeatedly confirmed in their study that teamwork and its significance were critical elements.

The final theme identified by nurse managers in our study is the violation of professionalism.

Professionalism is threatened by the lack of interest of nurses, which manifests itself mainly under the influence of the factors mentioned above (28). Lack of staff, high workload, and fatigue contribute to unprofessional communication. low performance of nursing staff, and subsequently to poor quality care and conflicts among nurses (29). Nurse managers in our study described that lack of interest and inappropriate communication are also manifested in stereotypes, limitations of creativity, and insensitivity toward patients. Nurses must feel valued and supported, and managers must work to improve communication with nurses (28).

Nurse managers in our study considered the constantly growing global problem of nurse shortage and nurse lack of motivation to be challenges and professional problems. The Slovak professional organization also emphasizes the urgent need to strengthen the workforce in the healthcare sector. Since the problem has persisted for a long time, it is necessary to look for solutions to provide much higher quality health care with less personnel.

The study has several limitations. Interviews were conducted in a single healthcare facility. Some of them were carried out during the last phase of the COVID-19 pandemic, which could affect nurse managers' statements.

Conclusion

Our study delved into the complex landscape of professionalism as perceived by nurse managers within the sociocultural context of Slovakia. The findings revealed that professionalism in nursing is a multifaceted and evolving concept, encompassing a range of interconnected attributes. Through the six thematic areas explored in this study, we gained valuable insights challenges, into the expectations, and dynamics surrounding professionalism in nursing.

This study offers valuable insights into the interpretation of professionalism in nursing within the context of Slovakia and provides a for future exploration foundation and practice improvements in nursing and education. As the nursing profession continues nurse managers, to evolve, educators, policymakers, and professional organizations must collaborate to address the identified challenges and support the ongoing development of professionalism among nurses, ensuring the provision of high-quality care to patients.

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Conflict of Interest

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