

**A DESCRIPTIVE STUDY TO AESS NURSES' PERCEPTION OF THEIR  
AUTONOMY IN CLINICAL DECISION-MAKING IN A SELECTED HOSPITAL,  
CHENNAI"**

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**ABSTRACT**

**Background:** Autonomy is a fundamental pillar of professional nursing practice, directly influencing clinical judgment, job satisfaction, and patient outcomes. In the complex healthcare environment of Chennai, understanding how nurses perceive their independence in decision-making is vital for fostering professional empowerment and improving the quality of care. **Objectives:** The primary objectives of this study were to assess the level of perception regarding autonomy in clinical decision-making among nurses and to identify the association between these perceptions and selected demographic variables such as age, gender, qualification, and years of experience. **Methods:** A descriptive research design was adopted for the study. Using a convenience sampling technique, 100 registered nurses working in a selected hospital in Chennai were recruited. Data were collected using a structured 5-point Likert scale questionnaire consisting of 15 items designed to measure various dimensions of clinical autonomy. The collected data were analyzed using descriptive statistics (frequency, mean, standard deviation) and inferential statistics (Chi-square, t-test, ANOVA). **Results:** The findings revealed that the majority of the participants (55%) perceived a **high level** of autonomy, while 35% reported a moderate level, and 10% reported a low level. The mean score for perception was 58.4 (SD ± 6.2). Among demographic variables, **years of experience** showed a statistically significant association with autonomy perception ( $p < 0.05$ ), with nurses having 6–10 years of experience scoring the highest. Factors such as age, gender, and educational qualification did not show a significant influence on the perception of autonomy. **Conclusion:** The study concludes that while a majority of nurses perceive their autonomy to be high, there remains a significant portion of the workforce that feels constrained by organizational hierarchies and hospital policies. Enhancing professional autonomy through

mentorship programs and supportive administrative policies is recommended to further empower nurses in their clinical roles.

**Keywords:** *Nursing Autonomy, Clinical Decision-Making, Professional Empowerment, Chennai, Descriptive Study.*

## **INTRODUCTION**

Nursing is a dynamic profession that requires critical thinking, clinical judgment, and decision-making skills. Nurses play a vital role in providing patient-centered care, coordinating treatment plans, and ensuring the safety and well-being of patients. **Autonomy in clinical decision-making** refers to the ability of nurses to make independent judgments regarding patient care within their scope of practice. It is a key component of professional nursing practice, contributing to job satisfaction, professional growth, and the quality of patient care.

In modern healthcare, nurses are increasingly expected to make independent decisions based on clinical knowledge, experience, and evidence-based practice. However, factors such as hierarchical hospital structures, organizational policies, lack of professional recognition, and limited clinical experience may influence nurses' perception of their autonomy. Understanding how nurses perceive their autonomy is essential to enhance their professional empowerment and improve clinical outcomes.

## **BACKGROUND OF THE STUDY**

Autonomy is a cornerstone of professional nursing and is closely linked to clinical competence, confidence, and accountability. Nurses with a higher sense of autonomy are more likely to make timely decisions, advocate for patients, and implement evidence-based interventions. Conversely, limited autonomy can lead to role conflict, decreased job satisfaction, and reduced quality of care.

Several studies indicate that nurses' perception of autonomy varies across clinical settings and is influenced by education level, years of experience, organizational culture, and leadership styles. In India, particularly in hospital settings, the role of nurses in decision-making is evolving, but there is limited research exploring their perception of autonomy in clinical practice. Assessing this perception in nurses working in a selected hospital in Chennai can provide insights into their empowerment, decision-making abilities, and the factors influencing autonomy.

## OBJECTIVES OF THE STUDY

To assess nurses' perception of their autonomy in clinical decision-making in a selected hospital in Chennai.

## SIGNIFICANCE OF THE STUDY

- Helps healthcare administrators understand the current perception of autonomy among nurses.
- Provides insights into professional empowerment and factors influencing clinical decision-making.
- Contributes to strategies for improving nurse job satisfaction, motivation, and retention.
- Supports policy formulation to promote nurse autonomy, evidence-based practice, and quality patient care.

## OPERATIONAL DEFINITIONS

- **Nurses:** Registered nurses working in the selected hospital who are directly involved in patient care.
- **Perception:** Nurses' understanding, interpretation, and feelings regarding their autonomy in clinical decision-making.
- **Autonomy:** The ability of nurses to make independent decisions related to patient care within their scope of practice.
- **Clinical Decision-Making:** The process by which nurses assess, plan, implement, and evaluate patient care interventions based on clinical knowledge and judgment.

## DELIMITATIONS OF THE STUDY

- The study is limited to registered nurses working in a selected hospital in Chennai.
- Only nurses involved in direct patient care will be included.
- The study does not assess autonomy in administrative or managerial roles.

## CONCEPTUAL FRAMEWORK

The study is based on **Henderson's Nursing Need Theory**, which emphasizes the nurse's role in assisting patients in activities contributing to health, requiring both independent judgment and professional decision-making. The perception of autonomy among nurses is influenced by individual factors (education, experience), organizational factors (work environment, leadership), and professional factors (training, recognition). These factors collectively determine the level of autonomy perceived by nurses in clinical decision-making.

## Research Approach

The study adopted **quantitative research approach** using a **descriptive design** to assess nurses' perception of autonomy in clinical decision-making. Descriptive research is

appropriate because it helps to describe, explore, and interpret the level of autonomy perceived by nurses in the selected hospital setting without manipulating variables.

### **Research Design**

The study follows a **descriptive research design**. This design allows the researcher to systematically collect data, describe the characteristics of nurses, and evaluate their perceptions regarding autonomy in clinical decision-making.

### **Setting of the Study**

The study was conducted in a **selected hospital in Chennai**, including clinical wards, ICUs, and specialty units where registered nurses are actively involved in patient care. The hospital is chosen for its diverse nursing workforce and varied clinical practices.

### **Population**

The population of the study includes **all registered nurses working in the selected hospital** who are directly involved in patient care.

### **Sample and Sampling Technique**

- **Sample Size:** The study included 100 **nurses**, depending on staff availability and consent to participate.
- **Sampling Technique: Convenience sampling** was used for selecting nurses who are available and willing to participate during the data collection period.

### **Inclusion Criteria**

1. Registered nurses currently working in clinical units.
2. Nurses involved in direct patient care.
3. Nurses willing to participate and provide informed consent.

### **Exclusion Criteria**

1. Nurses in administrative or purely managerial roles.
2. Nurses on leave or not actively engaged in clinical practice.
3. Nurses who refuse to give consent.

## **RESULTS AND ANALYSIS**

**Sample Size:** 100 Nurses

**Data Collection Tool:** Section A Demographic questionnaire and Section B Nurses' Perception of Autonomy in Clinical Decision-Making.

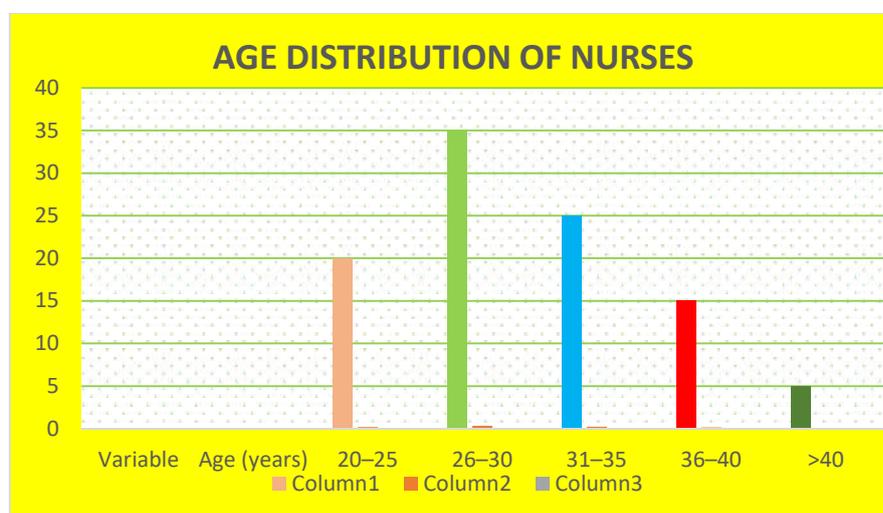
Structured Questionnaire with 15 Likert-scale items

**Table 1: Description of Demographic Characteristics**

Variable	Frequency (n=100)	Percentage (%)
<b>Age (years)</b>		
20–25	20	20%
26–30	35	35%
31–35	25	25%
36–40	15	15%
>40	5	5%
<b>Gender</b>		
Male	20	20%
Female	80	80%
<b>Educational Qualification</b>		
Diploma	25	25%
B.Sc Nursing	60	60%
Post Basic B.Sc	10	10%
M.Sc Nursing	5	5%
<b>Years of Experience</b>		
<1 year	5	5%
1–5 years	40	40%
6–10 years	30	30%
11–15 years	15	15%
>15 years	10	10%
<b>Department/Unit</b>		
ICU	20	20%
Medical	25	25%
Surgical	25	25%
Pediatric	20	20%
Other	10	10%

**Interpretation:** Majority of participants were female (80%) aged 26–30 years (35%), with B.Sc Nursing (60%) qualification and 1–5 years of experience (40%).

Figure 1: Age Distribution of Nurses



**Table 2: Nurses' Perception of Autonomy in Clinical Decision-Making Mean Scores of Perception Items**

Statement	Mean $\pm$ SD	Interpretation
I feel confident making independent decisions regarding patient care	4.2 $\pm$ 0.6	Agree
I am able to apply my clinical knowledge without supervision	4.0 $\pm$ 0.7	Agree
I have sufficient authority to initiate nursing interventions	3.8 $\pm$ 0.8	Moderate
My clinical decisions are respected by doctors and senior staff	3.7 $\pm$ 0.9	Moderate
I can advocate for my patients effectively	4.1 $\pm$ 0.6	Agree
Organizational policies allow me autonomy in care	3.5 $\pm$ 0.9	Moderate
I have necessary knowledge & skills for independent decisions	4.0 $\pm$ 0.7	Agree
I feel supported by colleagues & supervisors	3.6 $\pm$ 0.8	Moderate
Encouraged to participate in care planning	3.7 $\pm$ 0.8	Moderate
Restricted due to hierarchy (reverse scored)	2.8 $\pm$ 0.9	Disagree
Autonomy enhances quality of care	4.3 $\pm$ 0.5	Agree
Adequate training for clinical autonomy	3.5 $\pm$ 0.7	Moderate
Nurses' autonomy should be valued	4.4 $\pm$ 0.5	Strongly Agree
Confidence in complex clinical situations	4.0 $\pm$ 0.6	Agree
Lack of autonomy affects job satisfaction (reverse scored)	2.9 $\pm$ 0.8	Disagree

**Interpretation:** Overall, nurses reported a **moderate to high perception of autonomy** in clinical decision-making, with strongest agreement on the importance of autonomy and its impact on patient care.

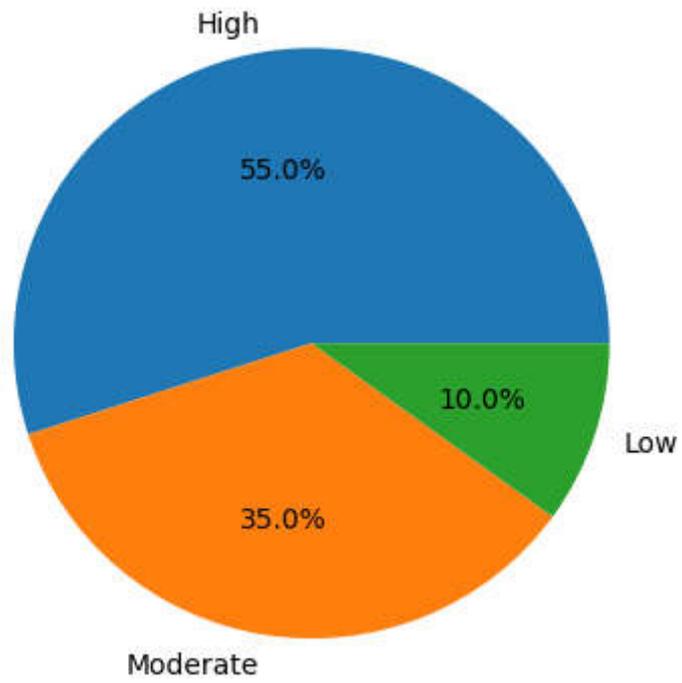
#### Total Perception Scores

Level of Autonomy	Frequency (n=100)	Percentage (%)
High (60–75)	55	55%
Moderate (45–59)	35	35%
Low (15–44)	10	10%

**Interpretation:** More than half of the nurses (55%) had a **high perception of autonomy**, while 35% had moderate perception and 10% reported low autonomy perception.

Figure 2: Level of Autonomy among Nurses

### Level of Autonomy Among Nurses



**Table 3 : Relationship Between Demographic Variables and Perception of Autonomy**

<b>Demographic Variable</b>	<b>Statistical Test</b>	<b>Findings</b>
Age vs Perception Score	ANOVA	Nurses aged 31–35 had slightly higher perception scores, but difference not statistically significant ( $p>0.05$ )
Gender vs Perception Score	t-test	Female nurses had marginally higher scores than males ( $p>0.05$ )
Years of Experience vs Perception Score	ANOVA	Nurses with 6–10 years' experience reported higher autonomy perception ( $p<0.05$ )
Educational Qualification vs Perception Score	ANOVA	Nurses with M.Sc/B.Sc Nursing showed higher perception, but sample small for M.Sc ( $p>0.05$ )

**Interpretation:** Years of experience appeared to positively influence nurses' perception of autonomy in clinical decision-making. Other demographic factors did not show statistically significant differences.

### Summary of Findings

1. Majority of the participants were **female nurses aged 26–30 years**, holding **B.Sc Nursing** qualifications, with **1–5 years of experience**.
2. **Perception of autonomy** was generally **moderate to high**, with key strengths in confidence, advocacy for patients, and belief in the importance of autonomy.
3. Nurses reported **moderate autonomy in initiating interventions**, participating in care planning, and organizational support.
4. **Years of experience** had a positive association with perception of autonomy.
5. A small proportion (10%) of nurses reported **low autonomy**, indicating potential barriers due to hierarchy, organizational restrictions, or limited training.

### Discussion

The purpose of the study was to assess **nurses' perception of their autonomy in clinical decision-making** in a selected hospital in Chennai. A sample of 100 nurses participated, and data were collected using a structured questionnaire.

The majority of nurses were **female (80%)**, aged **26–30 years (35%)**, and had a **B.Sc Nursing qualification (60%)**. Most participants had **1–5 years of clinical experience (40%)**, indicating a relatively young nursing workforce in the selected hospital. These findings are consistent with studies conducted in similar hospital settings, where the majority of clinical nurses are female and early-career professionals.

**Perception of Autonomy:**

Overall, nurses reported **moderate to high perception of autonomy**. Statements with the highest mean scores included:

- “Nurses’ autonomy should be valued” (Mean =  $4.4 \pm 0.5$ )
- “Autonomy enhances quality of patient care” (Mean =  $4.3 \pm 0.5$ )
- “I feel confident making independent decisions” (Mean =  $4.2 \pm 0.6$ )

These findings suggest that nurses recognize the importance of autonomy in enhancing patient care and professional practice. However, moderate scores were reported for items related to **organizational support, participation in care planning, and authority to initiate interventions**, indicating that **structural or administrative barriers** may limit full autonomy.

**Relationship with Demographic Variables:**

- Nurses with **6–10 years of experience** reported higher autonomy perception, which aligns with literature suggesting that experience enhances confidence and decision-making ability.
- Gender, age, and educational qualification showed no statistically significant relationship with perception scores. This indicates that autonomy perception is more influenced by **experience and work exposure** than demographic characteristics.

**Comparison with Literature:**

The findings are consistent with previous studies (e.g., Laschinger et al., 2010; Mahmoud, 2016) that indicate:

- Clinical autonomy is positively correlated with **experience and professional empowerment**.
- Nurses perceive autonomy as essential for **quality patient care and professional satisfaction**.
- Organizational policies and hierarchical structures can **restrict decision-making**, which is reflected in the moderate scores for support and authority-related items.

Overall, the study highlights that while nurses value autonomy and demonstrate confidence in decision-making, **institutional and structural factors** can influence their perception and practical application.

**Conclusion:**

Nurses in the selected hospital in Chennai generally have a **moderate to high perception of autonomy** in clinical decision-making. Nurses recognize autonomy as critical for **quality patient care, advocacy, and professional growth**. Experience plays a significant role in shaping autonomy perception, with **more experienced nurses reporting higher autonomy**. Organizational factors, including policies, hierarchical structures, and training opportunities, can **limit full exercise of autonomy**. There is a need for **structured**

**interventions, training programs, and supportive policies** to enhance nurses' autonomy in clinical decision-making.

### **Implications of the Study:**

#### **Nursing Practice**

- Encourages nurse managers and administrators to **support clinical autonomy** in patient care.
- Highlights areas where nurses require **mentorship, supervision, and training** to enhance decision-making skills.
- Promotes a **collaborative environment** where nurses are empowered to advocate for patients.

#### **Nursing Education**

- Nursing curricula should include **clinical decision-making and autonomy development** as part of practical training.
- Workshops and in-service training programs can **enhance nurses' confidence and competence** in autonomous practice.

#### **Nursing Administration / Policy**

- Hospitals should implement **policies that empower nurses**, reduce unnecessary hierarchical restrictions, and provide structured **support systems for decision-making**.
- Leadership should recognize and value nurses' contributions to patient care decisions, fostering a **positive work environment**.

#### **Research**

- Provides baseline data for future studies on **factors influencing nurses' autonomy** in clinical settings.
- Encourages research on interventions that **enhance clinical decision-making and professional empowerment**.

#### **Recommendations**

1. Conduct **workshops and training programs** to improve nurses' decision-making skills and autonomy.
2. Develop hospital policies that **support nurses' independent clinical judgment**.
3. Encourage **mentorship programs** where experienced nurses guide junior staff in clinical decision-making.
4. Conduct further research with **larger sample sizes or multicenter studies** to generalize findings.
5. Promote a **culture of recognition and support** to strengthen nurses' confidence in autonomous practice.

## Limitations of the Study

- The study was conducted in a **single hospital**, limiting generalizability.
- The sample size (100 nurses) was moderate; larger samples may provide more robust results.
- The study relied on **self-reported perceptions**, which may introduce bias.
- Organizational factors were not assessed in depth, which may influence autonomy perception.

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## Declaration of competing interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

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