

Effect of Nurses' Organizational Culture, Workplace Bullying and Work Burnout on Turnover Intention

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Abstract

The purpose of this study was to identify the factors that affect a nurse's turnover intention. A questionnaire survey was conducted on nurses working for general hospitals in South Korea, and the data obtained from the accomplished questionnaires were analyzed using SPSS Windows 18.0. Factors influencing the turnover intention of a nurse were identified as innovative culture ($\beta=-0.09$), relational culture ($\beta=-0.43$), hierarchical culture ($\beta=0.43$), workplace bullying ($\beta=0.53$), and work burnout ($\beta=0.27$). The results indicate the major factors influencing the turnover intention of a nurse. Therefore, these factors may serve as predictors of nurse's turnover intention how this would benefit an employer.

Keywords: Culture, bullying, burnout, turnover

1. Introduction

As of July 2015, there are 771 JCI-(Joint Commission International)-certified medical organizations in 64 countries in Europe, Asia, and Africa, and all the medical organizations in every country try to provide professional and high-quality medical services as well as disease treatments while trying to adapt to the rapidly changing medical environments [1]. One of the basic ways to provide high-quality medical services is to stably secure and operate a nursing workforce, but the number of in-service nurses per 1,000 people in South Korea is only 4.7, which is much lower than 9.1, the average number of nurses in the OECD (Organisation for Economic Co-operation and Development) countries. Further, the average turnover rate of nurses in South Korea was found to be 16.9%, which is much higher than 2.4%, the average turnover rate of public health and social welfare workers in the country [2]. Such a high turnover rate of nurses may make it difficult to provide high-quality nursing services, further decreasing the timeliness of pain or bedsore management, and may threaten the patients' safety by increasing the rate of fall accidents or red-light incidents. In addition, it will lead to the reduction of organizational productivity and to a decline in organizational operation efficiency, and will not only have negative socioeconomic effects but will also threaten individual nurses' well-being by decreasing their job satisfaction and affecting their mental health [3-8]. Many previous studies on nurses' turnover intention emphasized the correlation between nurses' psychosocial work environment and organizational culture. An organizational culture indicates a series of values, beliefs, and behavior patterns forming the core identity of an organization, and because it functions as a normative adhesive binding an organization, it has a great effect on the entire organization [9]. An organizational culture greatly affecting the organization members' behaviors have been

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cited as one of the most important antecedents of workplace bullying. Workplace bullying indicates that one or more than one worker constantly show aggressive or irrational behavior towards someone in the same workplace, and it mostly appears as verbal violence or criticism but can appear in a more delicate form, such as estranging someone from a group or speaking ill of someone behind his/her back [10]. The field of health and medical service is one of the industrial fields where workplace bullying most frequently takes place. In the U.K., 1/6 of the nurses working in hospitals reported that they went through workplace bullying in the past 12 months [11], and in the U.S., 65% of the nurses reported that they witnessed their co-workers being bullied [12]. In South Korea, 23% of the nurses going to graduate school who were interviewed reported that they experienced workplace bullying in the past 6 months [13]. Nurses experience various kinds of workplace bullying depending on their work environment and organizational culture as the authoritative and strict hierarchical organizational atmosphere in hospitals justifies workplace bullying [14]. Workplace bullying, however, weakens nurses' organizational bond, reduces their job satisfaction, and causes stress-based disorders such as loss of confidence, nervous breakdown, and depression, ultimately leading to the reduction of organizational productivity as well as to turnover [9]. Organization members who have experienced workplace bullying show a higher degree of job burnout because of the stress imposed on them by their job environment and interpersonal relations. One of the most severe job stress phenomena, burnout features physical, mental, and emotional exhaustion caused by constant and repetitive emotional pressure [15]. When experiencing burnout, nurses lose their drive to work, which not only lowers the quality of their services but also causes them to be indifferent to the patients, ultimately leading to nurses' turnover [16]. Thus, one of the most effective strategies to improve the productivity of a nursing organization and the quality of nursing services is to reduce nurses' burnout. A research on Italian nurses put emphasis on the management of nursing human resources through the modification of the organizational culture as a strategy to reduce nurses' burnout [17], and another research on workers in casinos, a field of the service industry, reported that the improved fellowship between the organization members through the institution of changes in their organizational culture was effective in lowering their turnover intention by reducing their burnout [18]. Thus, this study aimed to come up with a model for effectively managing human resources that could predict nurses' turnover intention, nursing organization cultures, workplace bullying, and burnout, and to verify the suitability of this model, based on previous studies.

2. Methods

2.1. Sample

Approved by the Bioethics Committee of S Medical Organization (No. IRB-1501-15), this study was conducted that nurses who had worked for over 6 months for any of the five general hospitals located in Seoul and Gyeonggi Province and who agreed to participate in this research were selected as study subjects.

2.2. Measurement

2.2.1. Organizational Culture

To measure the nursing organizational culture, this study used the tool developed by Han [19]. This tool consists of 20 questions under the subdomains of innovative culture, relational culture, hierarchical culture, and work-oriented culture, and employs a 4-point Likert scale for scoring, where the higher the score is, the more strongly the respondent nurse perceives the characteristic of the organizational-culture type concerned. Cronbach's α was 0.88 in Han's research [19] and was 0.85 in this study.

2.2.2. Workplace Bullying

To measure workplace bullying, this study used the tool developed by Einarsen, *et al.*, [20] and whose reliability and validity were verified by Nam *et al.*, [21]. This tool consists of 22 questions about negative behaviors in the past 6 months that can be perceived as workplace bullying, each scored based on a 5-point scoring scale, where the higher the score is, the greater the negative behaviors experienced by the respondent.

2.2.3. Work Burnout

To measure nurses' burnout, this study used MBI (Maslach Burnout Inventory) developed by Maslach and Jackson [22] and modified and supplemented by Jung [23]. MBI consists of 21 questions: 9 about emotional exhaustion, 4 about depersonalization, and 8 about personal achievements. The respondents' answers are scored based on a 5-point scoring scale, with a higher score meaning a higher degree of burnout. In Jung's research [23], Cronbach's α was 0.76, and in this study, it was 0.75.

2.2.4. Turnover Intention

To measure nurses' turnover intention, this study used the tool developed by Lawer [24] and modified by Park [25]. This tool consists of four questions, each scored based on a 5-point scale, with a higher score meaning a higher degree of turnover intention. In Park's research [25], Cronbach's α was 0.84, and in this study, it was 0.85.

2.3. Data Analysis

Collected data were analyzed with the SPSS WIN 18.0 program (SPSS Inc.). This study analyzed the demographic characteristics of the research subjects as well as the reliability of tools was tested with Cronbach's alpha. The relationship between the turnover intention of nurses and the related factors were analyzed by Pearson correlation analysis, and influential factors were analyzed by a stepwise multiple regression analysis.

3. Results

3.1. General Characteristics of Subjects

To comprehend the socio-demographic characteristics of research subjects, this study investigated their ages, marital status, religions, educational backgrounds, job positions, departments, working types and careers in the present hospital and total careers for clinical trials. As a result, it was found that 64.6% (157 persons) were 26 to 29 years old, and 79.8% (194 persons) were married. It was also found that 59.3% (144 persons) were religious, 74.5% (181 persons) graduated from 3 years' course colleges, 89.3% (217 persons) were ordinary nurses, and 35.0% (85 persons) worked for special departments. Lastly, 59.3% (144 persons) worked in 3 shifts, and 46.1% (112 persons) had 1 to 5 years of career in the present hospital, which was a similar distribution to 46.9% (114 persons) whose total career was 1 to 5 years (Table 1).

Table 1. The General Characteristics of Subjects

(N=243)

Variables	Category	n (%)
Age (yr)	20-29	157(64.6)
	30-39	58(23.9)

	40-49	21(8.6)
	≥50	7(2.9)
Marital status	Married	194(79.8)
	Single	99(20.2)
Religion	Yes	144(59.3)
	None	99(40.7)
Education background	3yr nursing college	181(74.5)
	4yr nursing college	58(23.9)
	Master or above	4(1.6)
Current position	Staff nurse	217(89.3)
	Charge nurse	23(9.5)
	Head nurse or above	3(1.2)
Nursing unit	Internal Medicine	59(24.3)
	Surgery	64(26.3)
	Special unit	85(35.0)
	Others	35(14.4)
Shift work	Three shift	144(59.3)
	Double shift	16(6.6)
	Usual shift	83(34.1)
Total period of current hospital (yr)	<1	72(29.6)
	1-5	112(46.1)
	≥6	59(24.3)
Total period of clinic career (yr)	<1	53(21.8)
	1-5	114(46.9)
	≥6	76(31.2)

3.2. Correlation BETWEEN Turnover Intention and the Related Factors

The analysis results of correlation between turnover intention and the related factors of the subject are presented in Table 2. In organizational culture, innovative culture ($r=0.65$, $p<0.01$), relational culture ($r=0.62$, $p<0.01$), hierarchical culture ($r=-0.28$, $p<0.01$), had a significant correlation with turnover intention. While workplace bullying ($r=-0.58$, $p<0.01$) and work burnout ($r=-0.33$, $p<0.01$) had a significant correlation with turnover intention.

3.3. Influential Factors of Turnover Intention

In order to identify the factors affecting turnover intention, a multiple regression analysis was conducted with organizational culture (innovative culture, relational culture, and hierarchical culture), work bullying, and work burnout as the

independent variables. The results are shown in Table 3. It was found that the regression model to predict the turnover intention of nurses was statistically significant ($F=31.04$, $p<0.05$). The Adjusted R^2 , which represents the explanatory power of this model was 0.40. Major factors affecting the turnover intention of nurses were work bullying ($\beta=0.53$), hierarchical culture ($\beta=0.43$), relational culture ($\beta=-0.43$), work burnout ($\beta=0.27$), and innovative culture ($\beta=-0.09$). Of these factors, growth needs was found to be the most important predictor for the motivation of nurses.

Table 2. The Correlation Among the Variables

Variables	X1	X2	X3	X4	X5	X6
X1: Innovative culture	0.65*					
X2: Relational culture	0.62*	0.82				
X3: Hierarchical culture	-0.28*	-0.23*	0.76			
X4: Bullying	-0.58*	-0.62*	0.23*	0.81		
X5: Work burnout	-0.33*	-0.40*	0.24*	0.40*	0.74	
X6: Turnover intention	-0.47*	-0.41*	0.23*	0.46*	0.65*	0.81
Cronbach's α	0.76	0.88	0.74	0.80	0.93	0.90

* $p<0.001$

4. Discussion

This study intended to discuss the effect of nurses' organizational culture, workplace bullying and work burnout on their turnover intention. Through the results of this study, it was found that nurses' organizational culture has an effect on turnover intention. According to a research conducted by Hutchinson, *et al.*, [14] on nurses and another research [26] conducted on employees in public and private universities in Pakistan, organizational atmosphere or organizational culture has an effect on turnover intention, which is similar to the result of this study. This finding explains that as organizational culture is a factor affecting organization members' values, beliefs, and behavior patterns, it forms either positive or negative group behaviors [9]. It was discovered in this study that among all the nurses' organizational cultures, the innovative and relational cultures have negative correlations with turnover intention. A previous study [18] reported, however, that

Table 3. Influential Factors of Turnover Intention

Independent variables	Dependent variable	B	β	S.E	p	F	Adjusted R^2
Innovative culture	---	-0.03	-0.09	0.22	0.005		
Relational culture	---	-0.21	-0.43	0.16	0.004		
Hierarchical culture	---> Turnover Intention	0.13	0.43	0.19	0.011	31.04	0.40
Bullying	---	0.23	0.53	0.11	<0.001		
Work burnout	---	0.56	0.27	0.02	<0.001		

β =Standardized regression weights; B= Regression weights; S.E=Standardized error

smooth communication and cooperation between organization members are important factors that can reduce turnover intention, and this study seems to have

confirmed this finding. Therefore, it is important for nursing managers to create channels through which the organization members can smoothly communicate with one another, further reducing nurses' turnover intention. Besides, it seems important to establish an organizational atmosphere where the organization members can cooperate with one another, rather than an excessively achievement-oriented organizational atmosphere, and to have nurses regularly participate in activity programs.

Especially, in this study, the relational culture was found to have a negative effect on turnover intention while the hierarchical culture was found to have a positive effect on the same. In other words, as organization members have a more tense organizational atmosphere and a stronger hierarchical structure or authoritative atmosphere, they experience more stress from their jobs and are more likely to perceive the surrounding circumstances in a negative way [14]. To reduce nurses' turnover intention, therefore, it seems necessary to assure them of autonomy in their jobs rather than to foster an inflexible organizational atmosphere, and to establish an organizational culture where horizontal human relations can be sustained between the organization members, rather than vertical ones.

This study also confirmed that workplace bullying and work burnout in a group of nurses have a direct effect on nurses' turnover intention. These findings are similar to the results of a previous research on nurses [27] that nurses' perceived work environment causes changes in their feelings towards their jobs, and that such emotional changes ultimately affect the organization. Consequently, this study confirmed that nurses' work environment and organizational atmosphere are important factors for reducing their turnover intention, and that organization members' psychological stability through an organizational culture where they support and recognize one another has a direct relation with the productivity of the organization [28]. Therefore, it is necessary for nursing managers to show active interest in developing programs for reducing the nurses' work burnout, thus decreasing their turnover intention, while seeking measures to reduce the phenomenon of workplace bullying, which will ultimately bring about synergy. In addition, developing activity and education programs through either a relational or innovative culture fit for the characteristics of the organization seems helpful in reducing nurses' turnover intention.

5. Conclusion

The results of this study can be summarized as follows. First, nurses' organizational cultures were found to have an effect on turnover intention. Second, it was found that workplace bullying has an effect on nurses' turnover intention. Third, work burnout was found to have an effect on nurses' turnover intention. This study is significant in that it provided basic data that can be used by nursing managers to reduce nurses' turnover intention, but there is a need to carry out further studies on the correlation between the types of organizational culture and turnover intention.

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