

An exploration into the levels of Job Satisfaction and Turnover Intention for Nurses currently working in Ireland and during the Covid-19 pandemic

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Abstract

The purpose of this study is to uncover the reasons for such high levels of job dissatisfaction and turnover intention with nursing staff in Ireland. The healthcare industry is known to be notorious for high levels of stress-induced labour and employee turnover, especially in terms of the nursing staff, and the situation in Ireland has been particularly inadequate for almost a decade. It has become an increasingly worrying issue for the industry and for the country of Ireland, and has gained the attention of multiple researchers, Human Resource Management and healthcare organisations all searching for a solution to alleviate the problem.

The key objectives are to determine the level of stress that these nurses encounter and the reasons behind it. This involves investigating any possible reasons for an employee to leave their role in nursing due to high levels of job dissatisfaction and stress. The last objective is to evaluate the current views from an employee satisfaction level from nurses working in the healthcare industry now and have also worked as a nurse since the Covid-19 pandemic hit Ireland in March 2020. If these employees are intending to leave their nursing roles, the goal is to get recommendations from these staff members on staff morale could be improved to reduce a person's intention to leave or job dissatisfaction levels.

This study gathers secondary research to identify the main aspects found in previous research such as poor relationships with management and a serious shortage of nursing staff which affect job satisfaction levels, along with previous actions taken to reduce the issues. A survey was created to gather primary research on the subject area which was sampled on current nursing staff who have worked in the Irish healthcare industry throughout the Covid-19 pandemic. The research concludes by outlining the study's contribution to existing literature. Recommendations are made for Human Resource Management, along with further suggestions for any future research regarding this topic area.

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Declaration

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List of Abbreviations

- INMO Irish Nurse and Midwives Association
- HSE Health Service Executive
- WHO World Health Organization
- GP General Practitioner
- EU European Union
- JSR Job Safety and Respect
- RM Relationships with Management
- WLB Work-Life Balance
- JS Job Satisfaction
- ANOVA Analysis of Variance

Chapter 1: Introduction

1.0 Research Rationale

Human Resources plays a vital role in the health care industry on a global scale to obtain a high-quality health care system. Kabene *et al* (2006) have established that it is critical to obtain high-quality staff, have efficient training and development plans in place, increase equity and fairness and improve efficiency in terms of staffing policies and employee retention.

Retaining nursing staff in the healthcare sector in Ireland has become a constant struggle for Human Resource Management to try and control. Previous research shows that one of the main reasons for this issue is due to the high number of employees feeling stressed and 'burned-out' in their positions, eventually leading to job dissatisfaction and the intention to leave (McKenna and Jeske, 2020). The Literature Review has led the author to discover that this ever-growing issue of employee turnover in the Irish healthcare industry has been widely explored in previous research. However, the author noted that all the previous literature exposed has been derived before the Covid-19 pandemic reached Ireland in March 2020. There is a substantial lack of research carried out regarding employee satisfaction and staff turnover levels since these employees endured working in such a pressurised and stressful environment. For this reason, the author has been led to carry out research in this particular area and observe any trends or differences in job satisfaction levels after working in a hospital throughout such a difficult time.

1.1 Research Question

For the purpose of this dissertation, the author has composed the following Research Question as;

'Acknowledging the issues that Irish healthcare industry faced during the Covid-19 pandemic, what are the current levels of job satisfaction and wellbeing amongst Irish Nurses working on the front line?'

1.2 Research Objectives

Objective One: To determine an update on the main reasons why Irish nurses working in the healthcare industry encounter such high levels of stress and poor wellbeing;

Objective Two: To explore what good leadership means to nurses in the Irish healthcare industry and to determine possible ways of how it can be accomplished in the current climate;

Objective Three: To examine if the reasons behind high stress levels, burnout and the intention to leave the industry has increased with the acknowledgement that they have experienced working throughout the Covid-19 pandemic;

Objective Four: To determine how the levels of burnout, stress and depression amongst Irish nurses can be reduced and what actions can be taken to prevent these employees from leaving.

1.3 Structure of Dissertation

1.3.1 Chapter 1: Introduction

This introductory chapter gave a brief overview of the study by describing the research rationale, defining the Research question and its objectives. A synopsis of each chapter has also been provided.

1.3.2 Chapter 2: Literature review

The literature review summarizes and critically analyses previous primary research carried out on the topic in question for this study. In this chapter, the author uses a variety of books, journal articles and various other sources with the purpose of exploring issues regarding employee turnover intention and job satisfaction levels amongst nurses currently working in Ireland.

1.3.3 Chapter 3: Research Question

The author outlines the research problem and objectives within this chapter. It also outlines the research question for the dissertation.

1.3.4 Chapter 4: Research Methodology

This chapter discusses how the research was undertaken to gather the relevant information for this study. It outlines research philosophy and the methods used to obtain the primary and secondary data within this study. In addition to this, it also describes the approaches used to analyse the data and identifies the research ethics along with any limitations of the research.

1.3.5 Chapter 5: Findings and Analysis

This chapter presents the data gathered from the primary research in thorough detail which was conducted through the use of an online survey. The author includes several tables, graphs and charts for a more effective display of the results.

1.3.6 Chapter 6: Discussion

This chapter analyses the findings from the primary research. These findings will be compared and linked to the secondary data found in the literature review. The analysis and discussion are carried out to better examine the objectives set out for the study as aforementioned in section 1.2.

1.3.7 Chapter 7: Conclusion and Recommendations

This chapter draws a conclusion from the findings and all the research gathered throughout. The author proposes recommendations in which future researchers could consider if conducting a similar study.

1.4 Conclusion

This introductory chapter has delivered a summary of the research. The next chapter will critically analyse the literature gathered from secondary research in reference to employee turnover and retention issues due to low levels of job satisfaction among nurses working in Ireland.

Chapter 2: Literature Review

2.0 Introduction

This study explores existing literature on employee wellbeing amongst nurses working in Ireland and if it has an impact on turnover intentions. It is widely known that retention of Irish nurses is difficult to attain due to demanding work conditions. A press release by the Irish Nurse and Midwives Association stated that there is an 'ageing workforce' in Nursing which threatens a global shortage of 5.9 million nurses (INMO, 2020). Turnover intention has been high for several years due to burnout and feelings of low morale from the emotional exhaustion leading to disengaged employees (McKenna and Jeske, 2020).

In addition to this pressing issue, the Covid-19 pandemic which broke in Ireland in March 2020 has put immense strain on the industry which was already struggling to keep their workforce. This study acknowledges the fact that the survey was issued after the worst period of Covid-19. Even though Covid-19 is still active, the case numbers and the effect on most people's health has decreased due to the impact of the vaccinations.

There has been a wide variety of extensive studies, procedures, and effort put in place in the healthcare industry to try and improve employee wellbeing and working conditions, in hopes of reducing the level of turnover. This raises the question; what are the most prevalent reasons behind employee turnover within healthcare that they feel they need to leave the industry or relocate? Has the Covid-19 pandemic had an effect of these decisions and what can be done to remedy the situation?

2.1 The Irish Healthcare Industry

The Irish Healthcare system is considered a good, comprehensive system whereby the public operations are heavily funded by the Irish Government and operated mainly by the Health Service Executive (HSE). Public healthcare is free for any resident residing in Ireland for at least 1 year. There is also a growing number of private healthcare services around Ireland. Yang (2021) found that 'Ireland's expenditure on health care as a share of GDP amounted to 7.2 percent in 2020'. The World Health Organisation (WHO) stated that there are approximately 27 million women and men nurses and midwives globally which make up for almost 50% of the global health workforce (WHO, 2022)

However, studies also found that the number of operating hospitals dramatically reduced from 184 in 2020, down to 86 in 2021 (Michas, 2021). The number of patients waiting for a hospital bed was on the rise and then the Covid-19 pandemic hit Ireland in March 2020. Hospitals were already struggling with overcrowding and staff shortages, and now health experts have expressed their fears on how the Irish healthcare industry will cope with the effects of the pandemic (Yang, 2021).

There has been much criticism identified with Ireland's healthcare industry when compared to other countries in the European Union (EU). As an example, Evetovits *et al* (2012) has stated that in most EU countries, free General Practitioner (GP) care is provided to all citizens. Whereas in Ireland, the only citizens in Category I with medical cards/GP visit cards are entitled to free GP visits. To get a full medical/GP visit card in Ireland, all applicants are assessed primarily on an income means test. In 2019, 31.8% of the population had a medical card in Ireland (Central Statistics Office, 2020). Citizens in Category II pay out of pocket for each visit, and then separately pay for their prescriptions which is a particular issue with 'respect to barriers to and inequities in access to care' (Evetovits *et al*, 2012, pp. 1).

In addition to this issue, the problems with the Irish healthcare industry are further associated with low patient capacity in hospitals which was heightened during the peak of the Covid-19 pandemic, long waiting times for A&E departments and general procedures and the rapid exit of nurses and medical professionals in Ireland (MacNamee, 2017). From years 2010 to 2017, approximately 14,000 qualified nurses and midwives have chosen to leave the Irish healthcare industry according to MacNamee (2017).

2.2 Retention issues amongst Nurses

In 2018, the WHO (2018) issued statistical data that in relation to the current shortage of healthcare workers, 50% of these are in the area of nursing and midwifery. The INMO released a workforce planning strategy to highlight the need for turnover and retention by sharing some statistics in turnover within Ireland. In 2019, the turnover rate stood at 7.3% on a staff nurse grade, with the average usually being 6.4%. Research shows that 'quality of patient care and disruption in service provision' incurs a cost due to low levels or retention and high levels of resignations yearly (INMO, 2019, p.7).

Numerous research studies have shown that different demographics and work characteristics can contribute to the intensity of hospital working conditions which eventually can lead to burnout. Hanafin *et al* (2020) found that in Ireland younger nurses feel burnout more (68%) than compared to nurses over the age of 51 years old (47%). Full time employees feel burnout more than part time employees, and nurses with a higher educational qualification such as a master's degree, were found to feel burnout quicker than those with a bachelor's degree.

Along with the ageing population being one issue, Ireland has seen many young nurses emigrate to work as a Nurse in other countries due to issues such as poor management, unfair

compensation and the burnout experienced due to the shortage of staff (Jilani, 2019). With this in mind, an interesting study carried out by Park and Gursoy (2012) has found that 'Millennials' the youngest generation of employees, called the 'Millennials', born between the years 1981 and 1999, have the lowest level of work engagement in comparison to older generations. Millennials tend to hold the perception of 'high leisure work values, and low work centrality' (Park and Gursoy, 2012, p. 1197). For them a sense of meaning and fulfilment is critical in relation to the work they carry out.

For years now, Ireland has relied heavily upon migrant health workers inclusive of nurses as Humphries *et al* (2009) states that between years 2000 to 2009, 40% of all newly registered nurses within Ireland were migrants outside of the European Union (EU) and healthcare facilities around Ireland have reported that there is between 50%-80% of migrant nurses in their headcount. As Ireland continue to recruit the majority of nursing staff from outside of the EU, countries such as Canada, Australia and the United States of America actively source and recruit Irish nurses by offering attractive employment packages which Ireland would not provide. As an example, Canadian employers have offered nurses housing which is seen as more affordable than living in Dublin (Humphries *et al*, 2009).

McKenna and Jeske (2020) have discovered the importance of having ethical leaders in such high-stress environments who will promote work engagement and hopefully result in reduced turnover intention. Studies have shown that if these leaders share their experiences and empower employees to take initiative to show that rather than being in control, they are in 'service' along with their colleagues improves relationships and employee engagement (DeVries and Curtis, 2019).

DeVries and Curtis (2019) found what the main factors hindering effective leadership in Nursing is the lack of time to practice this leadership due to pressure and staff shortages, a

lack of education and training and poor support from the organisation management teams. It is assumed that this pressure and shortage of staff has worsened since the Covid-19 pandemic, but is the impact similar in both public and private healthcare facilities?

2.3 Covid-19 and its Impact on the Healthcare Industry

As the Covid-19 pandemic is such a recent event, there has been substantial broadcasting on a global level of the effects the virus has had on the general population due to self-isolation during restriction periods, lack of physical social contact and a 'reduced access to public health advice' (Kelly, 2021). However, little research carried out on the impact that it has had on nurses in hospital settings.

Qassem Surrati *et al* (2020) has explored the psychological impact that Covid-19 has had on healthcare workers in general. It was discovered through quantitative research that stress, anxiety and even depression is prevalent amongst healthcare practitioners and has been linked to the impact of the Covid-19 pandemic. The risk factors associated with this anxiety and depression include a lack of knowledge and training and pre-existing stress related conditions in the industry which adds to the risk of poor mental health among employees. Kelly (2021) also found that risk factors relating to poor mental health include 'being female, being a nurse and being on the frontline'.

The impact of the pandemic has also had psychological effects on student nurses who must complete placements in Irish hospitals to complete their degree. These students have had to endure working in a tough environment during the pandemic with poor pay and work conditions (Power, 2021). Student nurses felt disrespected by the Irish government and

organised protests in Dublin to improve these conditions and eventually a pay increase was agreed for fourth year students.

A nursing graduate also stated that due to the lack of resources, staff shortages and lengthy waiting lists that she was tested 'mentally, physically and emotionally' during her first six months working in an Irish hospital, and eventually decided to move abroad for better working conditions and management of the industry (Calnan, 2019). This poses the question of what can management do to alleviate this stress on their employees and future qualified nurses?

2.4 Nursing Leadership

As previously mentioned, there is an apparent lack of leadership skills among nurses on a global level. Ireland have attempted to develop nursing leadership in recent years but found its implementation a challenge (DeVries and Curtis, 2019). The most common obstacles that were found in this study were the lack of time due to the heavy workload and staff shortages, a lack of support from management teams and a lack of education/training to prepare nurses with the necessary leadership skills which hindered the confidence and motivation to initiate leadership during work.

Nursing in Ireland traditionally takes a transactional management approach, with emphasis on a hierarchy of management with individual leaders who 'take control'. However, research has shown that adopting a transactional management style in conjunction with a transformational management approach would be more effective in nursing due to the addition of employee engagement and partnership amongst nurses of all levels in an organisation. This type of leadership promotes 'relationship building, communication, empowerment and engagement (DeVries and Curtis, 2019, p. 349).

Due to the complexity of nursing leadership, certain characteristics which studies have found nursing leaders should possess does not correlate with any one leadership model. Nursing leaders should be passionate, optimistic, a role model and the ability to build personal connections and manage crisis. Figure 1 below has been derived from DeVries and Curtis (2019 p. 350) which outlines the continuum found between both a transactional and transformational leadership approach.

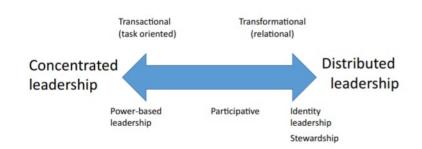


Figure 1: The continuum from concentrated to distributed leadership (Source: DeVries and Curtis, 2019, p. 349)

2.5 Factors that could contribute to reducing Staff Turnover

A national study carried out by McCarthy *et al* (2002), identified the most common issues that contribute towards turnover in Ireland, as well as determining some factors which may contribute towards retaining these nurses. It was established that the most common source of turnover in Ireland was due to conflict between nurses and nurse managers (Landstrom, Biordi and Gillies (1989). If these nurses received better support from management and superiors that there would be a likelihood of turnover rates decreasing and job satisfaction increasing (Wai Chi Tai et. al. 1998). Other than the management issues identified above, Table 1 below has been derived from McCarthy *et al* (2002) national study to identify the most evident responses that were established. The most common responses included the need for better pay, to be given more professional opportunities to develop their skills and for better resources provided within hospitals.

Factors that would have encouraged nurses to stay	N	%
Better pay	431	22
More opportunities to develop your skills	348	18
Better resources to help you do your job better	304	16
More autonomy/control over the care you deliver	280	15
Access to continuing professional development	275	14
Better quality of management	254	13
Better managerial attitude	246	13
Improved promotion prospects	242	13
Reduced work load	234	12
Better career structure	195	10
A more professional approach to care delivery	165	9
Flexible working hours	163	8
Better communication with immediate supervisor	160	8
Better opportunities for career breaks	145	8
Opportunity to take on a different role	141	7
Nothing	111	6
Increased responsibility	106	6
More varied work	92	5
Provision of child care facilities	85	4
Greater access to job sharing	68	4
Given a transfer	44	2
Availability of part-time working	45	2

Table 1: 'Factors that would have encouraged nurses to stay' (Source: McCarthy et al, 2002, p. 87)

2.6 Conclusion

In this chapter, the author has determined the main factors affecting the issue of high turnover in the field of nursing as well as nurses intention to leave their current roles. These factors were identified by examining secondary research. The secondary research has also outlined suggestions to reduce the level of stress, burnout and turnover intention which has been explored in this chapter. However, a major obstacle noted by the author is that to date, there has been very little research carried out in the field of Nursing since the Covid-19 pandemic reached Ireland in 2020, regarding the current job satisfaction and staff turnover intention of nurses.

This study will undertake research to find out the reasons why staff turnover is still so high, if any. The next chapter will undertake how the research will be carried out for this topic and how it will be implemented in this study.

Chapter 3 – Research Question

3.0 The Research Problem

The author has outlined the causes relating to the healthcare industry and their struggle to retain Irish nurses before the Covid-19 pandemic broke in Ireland. These issues were related to a negative impact on the wellbeing of nurses in the Irish healthcare industry. Possible causes for these issues have been linked to burnout, increased stress levels, poor management, and poor working conditions.

However, there is a lack of research that has been carried out on the impact of the Covid-19 pandemic on Irish nurses which has raised the question for this current research: has the Covid-19 had an impact on the levels of depression, anxiety and low morale amongst Irish nurses? If so, does this impact their intention to stay in the industry and what do they feel would help to improve the healthcare industry and job satisfaction levels?

3.1 Research Question Defined

There has been much research carried out on the controversy within Ireland relating to the shortage of nurses in the country and the unease of the future workforce in the healthcare industry. The author recognised a lack of literature regarding the extent of research carried out since the Covid-19 pandemic has begun in March 2020 and the impact it has had on employee wellbeing of Irish nurses.

The author wants to discover the main reasons why nurses burn out or want to leave the industry and how much Covid-19 has impacted these outcomes. Therefore, the research question defined is 'Acknowledging the issues that Irish healthcare industry faced during the Covid-19 pandemic, what are the current levels of job satisfaction and wellbeing amongst Irish Nurses working on the front line?'

3.2 Research Objectives

In reference to the research question previously stated, the author will investigate to address the following research objectives:

- To determine an update on the main reasons why Irish nurses working in the healthcare industry encounter such high levels of stress and poor wellbeing;
- To explore what good leadership means to nurses in the Irish healthcare industry and to determine possible ways of how it can be accomplished in the current climate;
- To examine if the reasons behind high stress levels, burnout and the intention to leave the industry has increased with the acknowledgement that they have experienced working throughout the Covid-19 pandemic;

• To determine how the levels of burnout, stress and depression amongst Irish nurses can be reduced and what actions can be taken to prevent these employees from leaving.

Chapter 4 – Research Methodology

4.0 Introduction

The methodology outlines the chosen research methods carried out in this study and how these methods will be applicable to facilitate the result of this thesis. The author will justify the selection of the methodology adopted by defining the philosophy of research and will include discussions on the research process and methods used to collect data and analyse the findings.

4.1 Philosophical Assumptions

It is widely known that the term Philosophy is hard to define, however, it is still a large influence in the practice of research studies. To simplify the term research philosophy, Creswell (2009) created four different 'Worldviews' as seen in Figure 2 below (Postpositivism, Constructivism, Advocacy/Participatory and Pragmatism). It outlines how each Worldview applies to the different types of research methods.

Four Worldviews for Research

Postpositivism	Constructivism
 Determination Reductionism Empirical observation and measurement Theory verification 	 Understanding Multiple participant meanings Social and historical construction Theory generation
Transformative	Pragmatism
 Political Power and justice oriented Collaborative Change-oriented 	Consequences of actions Problem-centered Pluralistic Real-world practice oriented

Figure 2: The Four Worldviews (Source: Creswell, 2009, p.6)

The philosophy appropriate for this study is the Postpositivism Worldview as it advocates that even though the research carried out does not prove a hypothesis, it verifies the accuracy of the hypothesis. Therefore, this Worldview will be implemented for this study, whereby typically the researcher begins 'with a theory, collects data that either supports or refutes the theory, and then makes the necessary revisions before additional tests are made'(Creswell, 2009, p.7)

4.2 Research Methods

Research methods is defined as 'the forms of data collection, analysis, and interpretation that researchers propose for their studies' (Creswell, 2009, p.15). This involves gathering secondary and primary research and analysing both results to conclude the findings.

4.2.1 Secondary Research

Secondary research is the practice of collecting sources of data and other information that already exists such as government reports, library books and journals, archived data sets and syndicated information services (Stewart & Kamins, 1993).

The literature review gathered secondary research by conducting an in-depth study of previous literature and research on the topic area of this thesis. Multiple authors and previous studies were reviewed to gather the most accurate and up to date findings on this topic. The author obtained this information through books, journals, and articles. By conducting secondary research, it will help the author to facilitate the further creation of surveys and primary research. Therefore, this secondary data is essential to develop credible knowledge of the research topic.

4.2.2 Primary Research

Primary research can involve both quantitative and qualitative data using questionnaires, surveys, observations, documentation or interviews with individuals or small groups.

The Postpositivism worldview previously discussed is often associated with a quantitative approach, as the collection of this numerical data will help verify or reject the theory in question. Quantitative research is 'associated with the production of numerical data that are objective in the sense that they exist independently of the researcher and are not the result of undue influence on the part of the researcher' (Descombe, 2010, p. 237).

As the researcher, the author felt that quantitative research ensures the most accurate, unbiased information for analysis as it provides a distance and anonymity from the participants. In contrast, Bryman and Stephens (1988, p. 1) defines qualitative research as being 'associated with participant observation and unstructured, in-depth interviewing',

Therefore, a quantitative approach will be undertaken in the form of surveys as they are found to be most effective for gathering facts to test a theory, and to measure the attitude towards a 'social phenomenon or trend' (Denscombe, 2010, p. 5). Figure 3 below helped to assist the author with carrying out the research as it lists the steps to follow in a 'deductive approach' for quantitative research (Creswell, 2009, p.57).

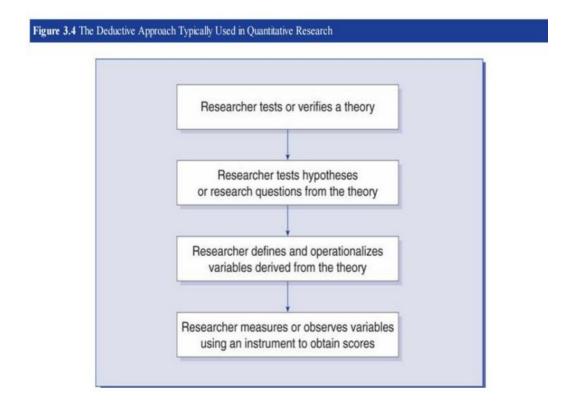


Figure 3: The Deductive Approach typically used in Quantitative Research (Source: Creswell, 2009, p. 57)

4.3 Research Design

There are numerous factors that influenced the author for this design of the current study. The first factor is the philosophical theory of the Postpositive Worldview as it proves to verify theories and obtain success through carrying out quantitative research. A second element of influence includes the research problem which needed to be addressed or clarified. The

author felt that due to the extent of numerical data required, the accessibility of analysing the end results and for the overall research question, that a quantitative research design is more suitable for this study.

As the author required responses from a wider sample, qualitative research has been ruled out of this study. According to Malhotra (2009), qualitative research is based on nonrepresentative cases in small numbers. The data collected is unstructured and then analysed in a non-statistical way for a richer understanding. Whereas, with quantitative data the research sample is distributed to a larger population of interest through a structured format and statistically analysed. This analysis then leads to recommendations for a final course of action.

As part of the research design process, the author considered alternative data collection methods such as focus groups, one-to-one interviews, and observations 'in the field'. However, these methods have been ruled out due to issues such as biased feedback and the low volume of responses that would be received in comparison to surveys.

4.4 Data Collection and Analysis

The author chose to collect the necessary data using surveys. These surveys were distributed through the online website 'Survey Monkey' as this method allows the author to reach a wider audience by sharing the survey via email, on mobile devices and social media. Additionally, the anonymity of these surveys should encourage the respondents to provide more honest and valid answers. These questionnaires will be distributed to nurses who have worked in hospitals in Ireland throughout the Covid-19 pandemic. By using quantitative

asked to complete the survey. All candidates who participate will be provided the option to

research for this particular study, candidates will be selected at random, approached and

complete a consent form assuring them confidentiality of their answers. A copy of the consent form can be found in the Appendix. The aim is to utilise feedback from approximately 100 questionnaires, which will be analysed and discussed in further detail in the next chapter.

The author feels that this approach is more unbiased for gathering the required information and will provide a more effective analysis when comparing the results with the secondary research sought out for this study. In keeping with the Postpositivist worldview, the author aims to seek out a wide range of candidate perspectives, in part due to the generalization capabilities of the research question.

4.5 Sampling

Sampling will be used for the research process where the focus of gathering research is on a subset, rather than all, of the research population (Denscombe, 2010). As explained by Collis and Hussey (2009), 'sample size is related to the size of the population under consideration' and for the purpose of this research study, the sample is related to a group of Irish nurses working in Ireland.

Probability and non-probability sampling are the two types of sampling techniques used in research. Probability sampling provides an equal chance of every member of the population to participate in the study such as simple random sampling, systematic sampling, stratified sampling, and cluster sampling. Non-probability sampling is targeting specific groups of the sample to partake in your research such as convenience, quota, purposive and snowballing sampling (Collis and Hussey, 2009).

For this research project, random sampling will be used which involves gaining research from larger numbers and any member of that population can be asked to participate in the research

regardless of their position or status in the hospital/company. This will provide the most valid results as they reflect the characteristics of the population from which they are selected, and the researcher will have no such influence on the respondents (Denscombe, 2010). Random selection of the generalized population will also be used in this research which will ensure unbiased information (Creswell, 2009). A requirement for this research is that all participants who complete the survey should have experience of working in an Irish hospital both before and after the Covid-19 pandemic hit Ireland.

Non-probability sampling was ruled out of this research project due to the lack of generalisation on the sample itself. Random sampling in particular, is advantageous due to its representativeness and generalisation capabilities. It is a time-consuming method, but the data has proved to be much more accurate than non-probability sampling (Sharma, 2017).

4.5.1 Questionnaires

For this study, one questionnaire was designed and distributed online to participants via Survey Monkey. All questions were composed in relevance to the research questions and the objectives that have previously outlined and are securely stored online through a password protected account.

The introductory section is a brief overview on the background, objectives, the voluntary nature of participation, declarations of anonymity and confidentiality, and written consent. Section two delved into socio-demographics and the participants occupational history such as age; sex; education and years' of experience as a nurse.

The next section of the questionnaire was developed using a pre-existing scale called the Quality of Nursing Working Life Scale: The Psychometric Evaluation of the Turkish

Version' (Sirin and Sokmen, 2015). This scale consists of 42 items and has 5 subscales. However, for the author to clarify the hypothesis' this scale was modified by using just 31 items and 4 subscales and the acknowledgement that this questionnaire is answered by participants since Covid-19 hit Ireland was introduced into the questions. As an example, the Matrix scale questions asked 'With respect to your position working as a nurse in Ireland since the Covid-19 pandemic began, please indicate a response to the following options'.

The scales are measured by a 6-point likert scale ranging from 'Disagree very strongly' counting for as 1 point, up to 'Agree very strongly' counting for 6 point. The lowest possible points are 31, and the highest is 186. The higher the score indicates a better job satisfaction levels. The data was analysed and compared between different groups of employees such as their age, specific roles, and level of education so that trends and issues can be identified and use the results to develop a better understanding of the research question. The aim is to gain insight of employee wellbeing so that recommendations can be made on how to overcome issues regarding work related stress and retention since the Covid-19 pandemic.

4.5.2 Hypotheses

The quantitative hypothesis for this study are as follows:

H1: Job safety and the respect for nurses in the community have a contributing factor towards a nurses' intention to leave their job due to job dissatisfaction

H2: Relationships with management have a contributing factor towards a nurses' intention to leave their job due to job dissatisfaction

H3: Work-life balance have a contributing factor towards a nurses' intention to leave their job due to job dissatisfaction

H4: Job satisfaction levels have a contributing factor towards a nurses' intention to leave their job

4.6 Research Ethics

The ethical obligations that the author has to its participants have been outlined by Guthrie (2010, pp. 16-23) and include the following:

- Participants should not be harmed or deceived throughout the study, especially in terms of their moral and legal standards
- Participation should be willing and informed
- Data should be held in confidence

The author informed the participants of these obligations at the beginning of the survey as well as ensuring that no personal information would be obtained, and their anonymity is secured. Respondents could withdraw at any time and all participants have agreed to answer the questions on a voluntary basis. A copy of the consent form can be found in Appendix B of this thesis.

4.7 Limitations

The main limitation in this research will be the small sample size. As the study is restricted to a specific time frame which will make it difficult to develop a wider range of responses. Responses may also be limited due to the sensitive topics which will be discussed in the survey such as employee turnover and management issues where some members of this population will not want to be involved in. However, the author has ensured participants that all responses will be anonymous and will be safely handled and stored securely.

The researcher chose to opt for solely quantitative research instead of a mixed approach of both quantitative and qualitative. Although, questionnaires were deemed the best approach for this particular study, qualitative research tends to be richer in details and more flexible for gaining specific information. A mixed-method approach would have provided more detailed results for the researcher but due to the time constraints and limited availability or resources, the researcher proceeded with quantitative research.

4.8 Conclusion

The methodology chapter has provided an accurate and descriptive understanding of how the author implemented the research for this study. It also outlined the research philosophy adopted (Postpositivism) and its influence on the subsequent data collection phase. The reason behind using the chosen research method to clarify the problem have been clarified based on the research question and objectives of this study. The ethical considerations and limitations of the research methods adopted for this study have also been identified. The next chapter will focus on the findings that were gathered and analysed after carrying out the research.

Chapter Five: Findings & Analysis

5.0 Introduction

The key objective of this chapter is to present the findings of the primary data in a clear and analytical manner. For this study, the data was gathered during a four-week period in June 2022, through the use of an online survey (see Appendix).

A total of 92 questionnaires were collected in this period. However, during the analysis some responses were eliminated due to partial replies and blank responses, which reduced the useable dataset to 72 responses.

As outlined previously, the data gathered was closely examined by utilizing the basic survey analysis provided by the hosting website (www.surveymonkey.com). A more in-depth analysis was made possible by the use of a statistical software platform known as SPSS (version 28). The data was broken down using this tool to clarify and compare any significant differences in the results

This chapter begins by presenting an analysis of the demographic profiles of the participants in the study using descriptive statistics as a guide. The next section explores the descriptive statistics of the variables assessed in the study. In the final section, the researcher will test the hypotheses by utilizing ANOVA tests.

5.1 Demographic Findings

The author used Microsoft Excel to review the demographic profile of participants. The sample consisted of 72 (N=72) participants in total, all of whom work in the field of Nursing within Ireland. Most participants were female which amounted to 80.56% (N=58) participants. The remaining 19.44% (N=14) participants were Male. There was a strong range of participants from different age groups. The number of participants between 25-34 years old was N=38 (52.78%) making them the dominant age group in this study. There were 26.39% (N=19) participants between the age of 35-49, 11.11% (N=8) participants that were 50+ years, and 9.72% (N=7) participants between the ages of 18-24.

The survey was completed by nurses working in different types of healthcare industries. The majority of participants work in public hospitals which amounted to 69.44% (N=50) people. There were 20.83% (N=15) participants working in private hospitals and 9.72% (N=7) who worked in other healthcare facilities such as community mental health services.

The results found that most participants of the survey work full-time as nurses, amounting to 90.28% (N=65). There were 6.94% (N=5) of part time nurses and 2.78% (N=2) casual nurses who participated in the study.

5.2 Descriptive Statistics

Statistics can be either descriptive or inferential. Inferential statistics will be looked at further on in this chapter and the focus now will be on the descriptive statistics found within the study when analysing the finding of the survey. Descriptive statistics can 'summarize data in an organised manner by describing the relationship between variables in a sample or population' (Yellapu, 2018). This data can be presented using tables, charts graphic forms which can be well presented for this kind of study. The descriptive statistics will be discussed for each variable before moving onto the inferential statistics.

5.2.1 Job Safety and Respect

The results from this questionnaire revealed that the nurses who participated feel that job safety and the respect from the community is positive as outlined in Figure 4. The results that had the most positive results were 'I communicate with other team members outside of my direct team' with 52.78% (N=38) agreeing, 27.78% (N=20) strongly agreeing and 9.72% (N=7) very strongly agreeing to this statement. The second statement with the most positive result was 'Society has a positive opinion about nurses' with 36.11% (N=26) agreeing, 37.50% (N=27) strongly agreeing and 9.72% (N=7) very strongly agreeing (83.33%, N=60 total).

The two statements with the poorest reception were 'I feel safe and protected against damage (physical/moral/verbal)' with 29.17% (N=21) disagreeing, 13.89% (N=10) strongly

disagreeing and 16.67% (N=12) very strongly disagreeing (59.73%, N=43). The second was 'Managers respect nursing' with 31.94% (N=23) disagreeing, 11.11% (N=8) strongly disagreeing and 13.89% (N=10) very strongly disagreeing (56.94%, N=41 total).

With respect to your position working as a nurse in Ireland since the Covid-19

pandemic began, please indicate a response to the following options:

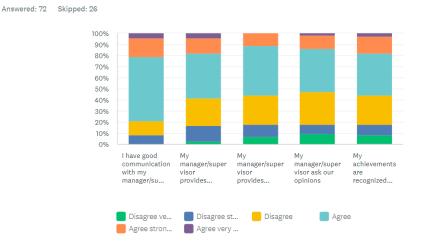


Figure 4: Job Safety and Respect Results
(N=72)

5.2.2 Relationships with Management

As displayed in Figure 5 below, the results for nurses' opinions on their relationships with management is positive overall, with no negative score (disagree – very strongly disagree) going above 50%. The most positive statement was 'I have good communication with my manager/supervisor' where 58.33% of respondents agree, 16.67% strongly agree and 4.17% very strongly agree (79.17% in total).

With respect to your position working as a nurse in Ireland since the Covid-19 pandemic began, please indicate a response to the following options:

Answered: 72 Skipped: 26

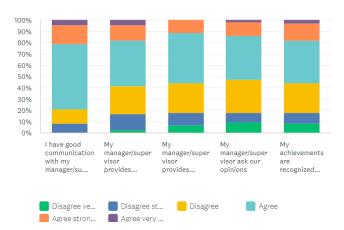


Figure 5: Relationships with Management Results (N=72)

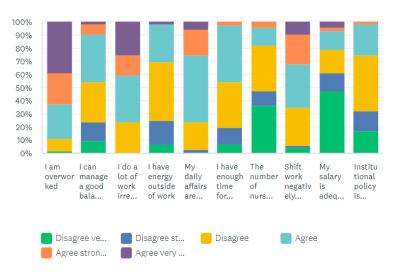
5.2.3 Work-Life Balance

Overall, the results from the work-life balance variable are quite negative. There were 10 statements in the scale and all statements resulted in at least 50% of participants responding negatively. Figure 6 displays overall responses along the most unfavorable statements being the following:

- 'I am overworked' resulted in 26.39% of participants agreeing, 23.61% strongly agreeing and 38.89% very strongly agreeing which amounts to 88.89% of participants.
- 'The number of nurses is adequate in my unit' resulted in 34.72% disagreeing, 11.11% strongly disagreeing and 36.11% very strongly disagreeing which amounts to 81.94% of participants.
- 'My salary is adequate for my job' resulted in 18.06% disagreeing, 13.89% strongly disagreeing and 47.22% very strongly disagreeing which amounts to 79.17% of participants.

- 'My daily affairs are frequently disrupted' resulted in 51.39% agreeing, 19.44% strongly

agreeing and 5.56% very strongly agreeing which amounts to 76.39% of participants.



With respect to your position working as a nurse in Ireland since the Covid-19 pandemic began, please indicate a response to the following options:

Answered: 72 Skipped: 26

Figure 6: Work-Life Balance Results

(N=72)

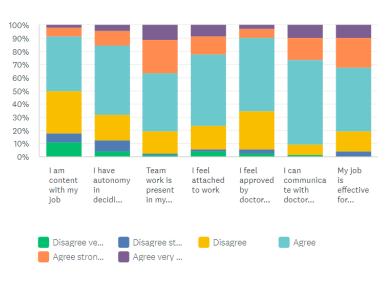
5.2.4 Job Satisfaction

The final scale used in this questionnaire was to analyse the levels of job satisfaction on nurses working in Ireland. The results from the 72 participants are positive on average which is displayed in Figure 7. The most positive statements were 'I can communicate with doctors at work' where 63.89% of participants agreed, 16.67% strongly agreed and 9.72% very strongly agreed, amounting to 90.28% overall. 'Team work is present in my unit' also had an overall positive score where 44.44% of participants agreed, 25% agreed strongly and 11.11% very strongly agreed which amounts to 80.55% overall. The author also thought it was important to note that for the statement 'I am content with my job' results in 50% of

participants either agreeing, strongly agreeing or very strongly agreeing, and the other 50%

either disagreed, strongly disagreed or very strongly disagreed.

With respect to your position working as a nurse in Ireland since the Covid-19 pandemic began, please indicate a response to the following options:



Answered: 72 Skipped: 26

Figure 7: Job Satisfaction Results
(N=72)

5.2.5 Intention to Leave

Following on from the previous literature discussed in Chapter two, the author wanted to explore if the participants had any intention of leaving their role in Nursing due to the topics discussed in the 'Quality of Nursing Working Life Scales' used in this questionnaire. The question asked was 'If possible, would you leave your current hospital within the next year as a result of job dissatisfaction?' and 56.94% (N=41) of participants responded 'Yes' which the author found alarming. There were 23.61% (N=17) of respondents who are 'unsure' and 19.44% (N=14) of respondents who do not plan to leave the roles in nursing.

However, with the use of SPSS these answers were tested on the hypotheses mentioned in Chapter 3 and they all had a statistically significant positive impact on the results which will be discussed in more detail in the next section.

The author was interested in finding out if there were certain factors in the participants nursing role that was contributing to any potential job dissatisfaction. Therefore, the final question on the survey asked, 'Do you have any recommendations for your management team on how to improve staff morale in the hospital?'.

The most common answers were that participants felt they need more support from their managers with 23 participants mentioning this topic. An example anonymous response is that he/she would like to see 'senior management communicate with nursing staff & they are more visible, it makes people feel seen & valued'.

The second most common answer noted by 20 participants was the need for an increase in headcount with one anonymous response stating that they would recommend 'better staffing to stop burnout'. The third most common response with 15 participants addressed the need for better pay in their roles with one respondent saying, 'the current wage is not adequate for the current cost of living'. These responses coincide with the literature from the secondary research discussed in Chapter 2 of this study.

The tables below anonymously outline some of the statements that were derived from the survey on this question in terms of the need for increased support from management (Table 2), more staffing (Table 3) and increase in salary (Table 4) to provide a more in-depth analysis.

Participants Statements on the need for increased support from Managers
Senior management communicate with nursing staff & they are more visible, it makes people feel seen & valued
Listen to staff and appreciate them give appraisal in work let them know if their doing well
Listen to them change to leadership styles and only use management styles when needed not for everything
Validate and reward good work being done with professional or educational opportunities
Actually know who my manager is, due to retirements, have no line manager in the last 8 months
Communicate with staff. Provide feedback to staff. Respect staff.

Table 2: Participants Statements on the need for increased support from Managers

Participants Statements on the need for more Nursing Staff
Hire more staff (currently unsafe staffing)
Better staffing to stop burnout
Balanced staffing with patient safety
Address staffing level issues
More support and more staffing

Table 3: Participants Statements on the need for more Nursing Staff

Participants Statements on the need for an increase in salary
Nurses to be paid more and have a better work life balance
Increase salary and support in terms of hours worked
Improve pay and working conditions
Proper salary renumeration
In line with other healthcare professionals we should be compensated monetarily
plus time in lieu for all hours worked above our contracted ones.

Table 4: Participants Statements on the need for an increase in salary

The descriptive statistics are displayed in Table 5 by summarising the variables in this study. The variables are broken down into Job Safety and Respect (JSR), Relationships with Management (RM), Work-Life Balance (WLB) and Job Satisfaction (JS) and the mean and standard deviation are identified.

	Mean	Std. Deviation	Ν
JSR Total	33.06	6.79	72
RM Total	17.89	4.48	72
WLB Total	27.57	6.52	72
JS Total	27.33	3.68	72

Table 5: Descriptive Statistics of the Variables

5.3 Inferential Statistics

In contrast to descriptive statistics, 'inferential statistics are calculated with the purpose of generalizing the findings from a sample to the entire population of interest' (Allua and Thompson, 2009, p. 168). Inferential statistics analyse statistical significance testing and there are numerous different tests that can be used for making conclusions on data sets. These analyses can be either parametric or nonparametric. Nonparametric statistics are mainly used for variables that would not have an ordinary distribution. Therefore, a parametric statistical analysis was used to calculate the statistical significance of the variables with the participants intention of leaving their role in Nursing. This was tested using an analysis of variance (ANOVA) in the form of a one-way between group ANOVA.

5.3.1 ANOVA Analysis

The author felt that ANOVA testing would be the most suitable method for analysing the results by using a one-way between group analysis of variance. A one-way ANOVA will test for differences in group means and will test the 'impact of only one independent variable on your dependant variable' (Pallant, 2020, pp. 109). It 'involves one independent variable which has a number of different levels' and allows the probability of a null hypothesis while allowing for multiple comparison of the variables (Pallant, 2020). The current study investigates if there is a significant impact that the four variables; job safety and respect, relationships with management, work-life balance and job satisfaction have on the participants intention to leave their jobs.

The ANOVA tests were conducted on each variable testing if any of them had a significant impact on the participants intention to leave their nursing job. There were four variables as outlined above which are JSR, RM, WLB and JS. The ANOVA results indicate if there is a statistically significant difference in your variable if the significant value (Sig. value) if is less than 0.05. The sig. value (p) in the ANOVAs tested for all variables were more than 0.05, indicating that none of the variables had a significant impact on the participants intention to leave their job. However, there were some apparent results that will be highlighted in relation to the hypotheses tested and discussed in further detail in the next chapter.

Four hypotheses were proposed for the purpose of the study and were as follows:

Hypothesis 1 (H1) proposed that job safety and the respect for nurses in the community have a contributing factor towards a nurses' intention to leave their job due to job dissatisfaction. The data generated from the ANOVA results show that the Sig. value for job safety and respect being p = .149 (Sig. value > .05), indicating that safety and respect does not have a

statistically significant relationship with participants intention to leave. Therefore, hypothesis 1 was not supported by the results.

Hypothesis 2 (H2) proposed that relationships with management have a contributing factor towards a nurses' intention to leave their job due to job dissatisfaction. The data generated from the ANOVA results show that the Sig. value for relationships with management being p = .164 (Sig. value > .05), indicating that relationships with management does not have a statistically significant relationship with participants intention to leave. Therefore, hypothesis 2 was not supported by the results.

Hypothesis 3 (H3) proposed that work-life balance has a contributing factor towards a nurses' intention to leave their job due to job dissatisfaction. The data generated from the ANOVA results show that the Sig. value for work-life balance being p = .053 (Sig. value > .05), indicating that work-life balance does not have a statistically significant relationship with participants intention to leave. This means that hypothesis 2 was not supported by the results. However, when compared with the Sig. value of the previous two hypotheses, it is sitting on the border of being less than 0.05 indicating some level of value there.

Hypothesis 4 (H4) proposed that job satisfaction levels have a contributing factor towards a nurses' intention to leave their job. The data generated from the ANOVA results show that the Sig. value for job satisfaction levels being p = .091 (Sig. value > .05), indicating that job satisfaction levels does not have a statistically significant relationship with participants intention to leave. Therefore, hypothesis 4 was not supported by the results.

Overall, the findings of this research are widely dispersed in terms of both demographic and inferential statistics. There is a strong variety of age groups, working in mostly public or private healthcare facilities. The random sampling methodology was beneficial for this wide variety of information that was collected. The hypotheses found that there is no statistical significance to these nurses' intention to leave. However, data found in the specific questions or statements asked will be utilized for the recommendation and discussion chapter.

Chapter 6: Discussion

6.0 Introduction

This chapter has been structured according to the research hypotheses and objectives set out for this study to reflect on the key findings identified in the previous chapter and relate these with respect to past literature. The author will focus on the main issues nurses working in Ireland face and any comparisons identified regarding job satisfaction levels and turnover intention in their roles. The author will also investigate if there are any particular findings relating to the impact that the covid-19 pandemic has had on these nurses' intention to leave their current roles.

6.1 Statistical Findings Discussion

This chapter will utilize the results of the current study and compare it with the findings of the secondary research outlined in Chapter two. The intention of the research project was to analyse the current job satisfaction levels in the nursing industry and their intention to leave their roles, if any. The study acknowledges that the healthcare industry were faced with immense pressure and stress when the Covid-19 pandemic arrived in Ireland up until the vaccinations were distributed on a national level almost one year later. Therefore, the author was eager to discover if there was much of a drastic change in nurses' opinions of their roles when compared to the secondary research and the pressure that these employees were already under due to the reasons discussed in the literature review. The existing literature outlined that the healthcare industry data has been suffering from low retention levels since 2004 due to nurses emigrating for better work-life balance, an increase in income and benefits and more opportunities for professional development in countries like Canada, Australia, and the United States of America. The INMO are constantly fighting the Irish government to address these issues and reduce turnover, however, it has been a challenge for many years.

Research around the impact of the Covid-19 pandemic on humans established that those who pose a higher risk of poor mental health during the period of the Covid-19 pandemic are female nurses who work on the frontline in the healthcare industry. Student nurses were also found to be highly affected mentally by the stress of their placements during the pandemic which led to the author questioning whether the intention to leave is higher now since before the pandemic. The aim of this research study was to evaluate the participants intention to leave their Nursing roles. This data was then tested with the four variables outlined in the previous chapter to analyse if they posed any significant value to the participants intention to leave.

When reviewing the data, it was noted that over half of the participants responded 'yes' to the question 'if possible, would you leave your current hospital within the next year as a result of job dissatisfaction?'. There was also a high number of responses who were unsure and less than 20 percent who answered 'No'. This echoes the need for retention strategies to be put into place in the nursing industry as the existing literature had also determined that there is a 50% shortage of nursing staff worldwide (WHO, 2018). The existing literature had also found that there are a high number of nurses emigrating from Ireland to work in another country due to burnout and job dissatisfaction also amplifies the need for retention strategies in the Irish healthcare industry. This finding also highlights the need to retain the younger nurses in the field as over half of the participants were between the age 25-34. The literature

that was discussed in chapter two highlighted the fact that there is an ageing population of nurses in Ireland due to the higher levels of burnout amongst nurses under the age of 51 and the high numbers of young nurses emigrating. The low numbers of nurses aged 50+ that participated in the survey supports the literature. However, due to the small sample size, this cannot be affirmed from a national perspective.

For H1, a null hypothesis was found in relation to job safety and the respect for nurses in the community have a contributing factor towards a nurses' intention to leave their job due to job dissatisfaction. However, there were still factors that identified issues which should be addressed and could aid in maintaining good job satisfaction levels and decreasing the intention to leave. It is evident from the data that the role of nursing is a rewarding one, and they notice a sense of respect from society but they responses about how safe and protected they feel from physical/moral/verbal damage was very poor indicating that they are subject to regular physical/moral/verbal abuse regularly. It is important to note that what is causing the damage was not specified in the statement but the reasoning behind it is out of scope to this study.

For H2, a null hypothesis was found in relation to the nurses' relationships with management having an impact on their intention to leave their role due to job dissatisfaction. The results highlight positivity in how managers communicate, provides feedback, and recognises the team/individual achievements. This data contradicts the existing literature, where the author discovered an array of published articles where relationships between nursing staff and management/leadership struggled and contributed towards the intention to leave. There was a strong emphasis on the lack of well-established leadership skills in the field of nursing was also outlined which encourages the need for leadership training and coaching which could be addressed in another study.

For H3, a null hypothesis was found in relation to work-life balance contributing towards a nurses' intention to leave their job due to job dissatisfaction. However, the researcher noted that even though it has no significant effect on the participants leaving their roles, that there are several issues or responses that require attention in this study. Almost 90% of participants felt that they are overworked since the Covid-19 pandemic begun. Other major findings are that participants feel that they're salary is not adequate for the work involved, that there is inadequate staffing numbers in their unit and thus, their 'daily affairs are frequently disrupted. As over half of the participants within this study were in the age bracket of 25-34, they would be considered Millennials. As explained in the literature, studies have shown that Millennials struggle more with work-life balance than any other generation. The author believes that work-life balance should be addressed in further detail in other studies and will discuss further in the recommendations section. These findings coincide with the existing literature where it is evident that nurses in Ireland are overworked due to staff shortages and high turnover rates.

For H4, a null hypothesis was found in relation to the job satisfaction levels having a contributing factor on their intention to leave their roles. An important aspect to note was that it was a 50:50 score when participants were asked if they are content with their job indicating the need for improvements or change for some participants and highlights the existing literature where it was evident that professional opportunities were lacking, and job satisfaction levels were scattered due to numerous factors relating to the role of an Irish nurse and the Irish healthcare industry.

6.1 Research Objectives Discussion

There were four research objectives outlined in chapter three and the researcher hoped to achieve an update or answer to these objectives throughout this study.

For the first objective, the author wanted to determine an update on the main reasons why Irish nurses working in the healthcare industry encounter such high levels of stress and poor wellbeing. This objective was acknowledged in the research findings where the most prominent answer in the work-life balance variable was the fact that almost all participants are feeling overworked, short staffed and they find that they're daily work is disrupted frequently which would contribute towards high levels of stress. These answers commensurate the existing literature as it was highlighted by Jilani (2019) that issues such as unfair compensation, poor management, and burnout due to staff shortages is the reasoning behind the many young nurses emigrating to work as a Nurse in other countries.

Secondly, the objective was to explore what good leadership means to nurses in the Irish healthcare industry and to determine possible ways of how it can be accomplished in the current climate. The findings revealed that the participants do not have a strong enough opinion to uphold the existing literature from previous years. On average, there was a mixed variety of scores on how the communication, supervision and recognition of nurses is managed by these managers with more than half providing positive feedback overall. Therefore, the researcher looked to the open-ended question, 'Do you have any recommendations for your management team on how to improve staff morale in the hospital?' to gain more insights. This strengthened the objective as the answers provided multiple recommendations on how receiving increased support from managers and supervisors would improve staff morale.

Thirdly, the objective was to examine if the reasons behind high stress levels, burnout, and the intention to leave the industry has increased with the acknowledgement that they have experienced working throughout the Covid-19 pandemic. The results show that almost half of the participants want to leave their role in Nursing within the next year due to job dissatisfaction, and almost 24 percent of people are unsure if they would which can be seen as concerning for the industry. This also upholds the existing literature as high turnover rates were emphasised as a recurring issue. However, when analysing the answers on the open-ended question, not one participant mentioned anything about the Covid-19 pandemic affecting staff morale and job dissatisfaction. Therefore, it could be viewed that the Covid-19 pandemic has had little effect on why the intention to leave it so high. However, the questionnaire was only acknowledging the fact that the research was underway since the Covid-19 pandemic and was not possible to compare with the existing literature from previous years. The research was intending to look for any changes in the reasoning behind staff morale and job dissatisfaction since the pandemic began due to the increase in stress and pressure during this time.

Lastly, the fourth objective was to determine how the levels of burnout, stress and depression amongst Irish nurses can be reduced and what actions can be taken to prevent these employees from leaving. It is evident from the findings that teamwork if strong within the field of nursing, but the staff shortages can negatively affect this. The findings also reveal that relationships with other healthcare workers and doctors do not have a negative effect on their stress levels and nurses feel that they do have a positive level of autonomy int their roles. However, only 50 percent of the participants are content within their role. The findings show that the most common causes of job dissatisfaction are the lack of support from management, the need for an increase in supervision and headcount and better wages. The previous chapter revealed some statements anonymously from the participants to prove this

answer. Therefore, when compared with the previous data in the literature review, the findings show that the same issues and trends are reoccurring since the covid-19 pandemic began and there are no substantial new findings revealed.

6.2 Conclusion

In this chapter, the author has cross-analysed the findings from the primary research carried out for this study together with the literature previously gathered to identify any recurring issues and trends. The author has indicated some possible explanations from the literature for the continuation of high employee turnover and the cause of high stress-levels. The author has also identified key statements from the nurses in regard to how leadership and managers can reduce the levels of burnout and stress and increase job satisfaction levels amongst nursing staff in Ireland. Overall, the research objectives and hypotheses for this study were met and compared with the previous literature to find that the Irish Healthcare Industry is still facing the same issues for the past decade and there has been no shift in the reasons behind the nurses intention to leave their roles in Nursing. The next chapter will make recommendations in regard to the analysis and the study will be drawn to a conclusion.

Chapter 7: Recommendations and Conclusion

7.0 Introduction

The underlying principle of this study was to clarify the if job dissatisfaction and turnover intention in Nursing in Ireland is still an issue and if the reasoning behind this has changed since before the covid-19 pandemic began in Ireland.

The author carried out secondary research to allow the author to develop a better understanding of the research topic. Primary research was gathered using a quantitative approach and a total of 72 valid responses were collected. By undertaking this primary research, the author was provided with important findings and developed a better understanding of issues concerning employee turnover and levels of job satisfaction with Nurses working in the Irish healthcare industry.

This chapter will draw conclusions regarding its contribution to the literature and will provide recommendations for Human Resources departments and Leadership teams in the industry and also suggests areas worthy of further study.

7.1 Contributions to the Literature

The research undertaken in this study has provided a vital contribution in clarifying the levels of job satisfaction levels and turnover intention in nurses working in the Irish healthcare industry throughout the Covid-19 pandemic. The current findings have uncovered that the job dissatisfaction and intention to leave is still high with half of the sample wanting to leave their current roles and a quarter unsure if they will or won't within the next year. The literature uncovered multiple studies which explained the most common reasons for the high levels of turnover and job dissatisfaction amongst nurses working in Ireland and the author recognized a repetition of the same reasons in each research paper. It was revealed from the primary research conducted for this study that the stress-related issues found add to the findings that have emerged in previous studies such as 'staff shortages', and ''poor leadership' skills amongst management and supervisors. These findings have also provided additional information which has found to contribute towards work related stress including the lack of supervision and performance reviews from management.

7.2 Recommendations

7.2.1 Recommendations for Human Resource Management

The most evident recommendation contributing to the possible reduction of employee turnover in the field of Nursing in Ireland would be for Human Resources departments to improve or provide nursing managers and supervisors with intense training on efficient and management practices. This practice would potentially improve the relationships between nurses and nurse managers/supervisors. It may also enhance these nurse managers and supervisors' ability to cope with work-related stress and in turn, provide more efficient supervision and employee management which should improve job satisfaction levels for nursing staff. The research suggests that HRM should improve management-employee relationships by boosting morale through more training and evaluation in regard to managing and controlling their line staff. It is important for HRM to observe that frontline managers encourage their staff rather than making them feel incompetent and unfairly treated.

The results from the primary research also offer some different recommendations. Teamwork in the healthcare industry was high overall for nursing staff who participated in this study. However, this teamwork is difficult to sustain due to the lack of staff and low retention levels. Therefore, it is believed that an increase in the number of nursing staff would decrease levels of stress and tension among current staff members. This recommendation should allow management to evenly dispense workloads among each departmental team member, thus, avoiding the issue of employee burnout. Another popular recommendation contributing to the possible reduction of employee turnover amongst nurses working in Ireland is an increase in salary or adequate payment for overtime and the level of work that nurses are involved in. Therefore, a recommendation derived from this study would be for human resources and

leadership teams to re-evaluate the compensation packages for staff grade Nurses within Ireland to avoid more nurses emigrating and decrease employee turnover.

7.2.2 Recommendations for Future Studies

It is important to note that this study was limited to a small sample size of nursing staff working in Ireland throughout the Covid-19 pandemic. It is recommended that an increased sample size would offer more precise results. This study has uncovered that the main reasons behind the high levels of job dissatisfaction and turnover intention from the perspective of nurses working in Ireland has not changed due to the Covid-19 pandemic. However, due to the limitations of this study, it was noted that this research has been undertaken with the acknowledgement that these employees have worked in the Irish healthcare industry throughout of the pandemic. For a more specific analysis on the effects of the covid-19 pandemic and employee turnover, the author found that it would be beneficial to conduct a further study with this specific detail in the research method carried out to uncover a more indepth knowledge of the struggles and mental health effects the pandemic has had on nurses and their intention to leave, if any. The primary research revealed that nurses feel they have a poor work-life balance and half of the participants are not content in their current roles Therefore, regarding future study in this topic area, it is recommended to conduct a study within a larger geographical location to achieve more diverse results from various cultures and employment practices. It is also important to observe the fact that over half of respondents for this study were between the age of 25-34 (Millennials). This introduces an opportunity to investigate further if this generation of employees are affecting the levels of employee turnover and job dissatisfaction in the Irish healthcare industry due to their high demands in terms of having a work-life balance.

7.3 Conclusion

This final chapter has concluded the overall research topic. It has summarised the overall contribution of the literature and research, as well as drawing recommendations for Human Resources departments and also for future studies.

Personal Statement

Although I have found this research study difficult to balance at times while working full time and having other commitments, I have found it extremely rewarding. The experience has been challenging but I felt that I have learned a lot about conducting a postgraduate research project. Staff morale and employee retention has always interested me, and while I worked in an Irish hospital during the Covid-19 pandemic for a period throughout my studies, I found that the employee turnover, particularly among Nursing staff was particularly high. This is the reason why I chose to conduct a study on job satisfaction and turnover intention amongst nurses working in Ireland as it was something that interested me. It is well-known that Ireland have has issues in retaining health care staff and that strategies have been put in place to alleviate the situation and to attract and retain employees into the industry.

This research project has provided me with an insight on the raw details contributing to the high turnover of nursing staff in Ireland by carrying out this research on nurses currently working in Ireland and throughout the pandemic. I have also learned a lot about Irelands healthcare industry and past issues relating to the retention of nursing staff through the secondary research investigated. The project allowed me to gauge and clarify what strategies should be considered and established by leadership teams and Human Resources departments.

There have been many challenges throughout my time conducting this research project. However, the most important skill that I have grasped was the need for time management and organisation. To carry out a research project, I found that having a set plan in place is vital to ensure that you are allowing sufficient time to focus on all chapters allocated. I found that the data collection took longer than expected to complete and was a challenge to obtain the last few responses. However, I compromised and focused on other areas of my thesis while gathering all of the responses that were required to analyse the findings effectively.

As a person who has never used SPSS before, this was the next biggest challenge as I found it difficult to navigate and familiarise myself with. Through perseverance, and a lot of studying on the topic of SPSS, I have gained additional skills in using the application which contributed to the research project.

I am thankful for all of the support and guidance that was provided to me from my supervisor, Dr. Caoimhe Hannigan, my family and friends and my partner and it was a huge achievement for me to complete this. I am proud of myself for completing this research project and can safely say that it was beneficial for my own career in Human Resources where I have gained knowledge and critical skills which are required in the industry.

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Appendices

Covid-19 Stress on Nurses

Covid-19 Related Stress on Nurses in Ireland

Thank you for participating in this survey.

The aim of this survey is to explore the levels of stress and burnout experienced by nurses working in Ireland and if it is related to their future intentions regarding their career path. It will also investigate if the Covid-19 pandemic has had an impact on the increase in these issues.

This research is being conducted by Emma Kenny, as a research dissertation which forms part of the requirements for a Master's in Human Resource Management degree at National College of Ireland. The research is being supervised by Dr Caoimhe Hannigan, Lecturer in Psychology at National College of Ireland.

Confidentiality:

Your participation in this research study is completely voluntary and your response will remain anonymous and confidential. The answers will only be used for analysis in the dissertation.

To ensure confidentiality, no identifying data will be collected such as your name, IP address or email address. The researcher is the only person who will have access to the data collected in this questionnaire where data will be stored on a password-protected file.

If you have any questions, do not hesitate to contact me on x20168047@student.ncirl.ie. Dr Caoimhe Hanningan can be reached on caoimhe.hannigan@ncirl.ie if required.

I would like to thank you in advance for your participation and cooperation. The questionnaire should take around 5-10 minutes to complete.

Emma Kenny

* 1. Do you consent with your personal data being processed as described above? You must click Yes in order to take the survey.

() Yes

O No

* 2. Please state your age category:

0 18-24

0 25-34

0 35-49

0 50+

* 3. Please state your gender:

○ Female

🔿 Male

O Prefer not to say

* 4. What type of healthcare industry are you currently working in?

O Public hospital

O Private hospital

O Other (please specify)

* 5. What type of contract are you employed under?

🗌 Full Time

Part Time

Casual

Temporary

 * 6. With respect to your position working as a nurse in Ireland since the Covid-19 pandemic began, please indicate a response to the following options:

	Disagree very strongly	Disagree strongly	Disagree	Agree	Agree strongly	Agree very strongly
Society has a positive opinion about nurses	0	\circ	0	0	0	0
The institution give professional opportunities	0	0	0	0	0	0
I communicate with other team members outside of my direct team	0	0	0	0	0	0
I receive support for in service training and constant education	0	0	0	0	0	0
Nursing policies and procedures facilitate my job	0	0	0	0	0	0
The safety procedures in place provides a safe environment	0	0	0	0	0	0
I feel safe and protected against damage (physical/moral/verbal)	0	0	0	0	0	0
I believe my job is safe	0	0	\circ	0	0	0
Managers respect nursing	0	\circ	0	0	0	0

 * 7. With respect to your position working as a nurse in Ireland since the Covid-19 pandemic began, please indicate a response to the following options:

	Disagree very strongly	Disagree strongly	Disagree	Agree	Agree strongly	Agree very strongly
I have good communication with my manager/supervisor	0	0	0	0	0	0
My manager/supervisor provides adequate supervision/inspection	0	0	0	0	0	0
My manager/supervisor provides feedback about performance	0	0	0	0	0	0
My manager/supervisor ask our opinions	0	0	0	0	0	0
My achievements are recognized by my manager/supervisor	0	0	0	0	0	0

* 8. With respect to your position working as a nurse in Ireland since the Covid-19 pandemic began, please indicate a response to the following options:

	Disagree very strongly	Disagree strongly	Disagree	Agree	Agree strongly	Agree very strongly
I am overworked	\bigcirc	0	\bigcirc	\bigcirc	\bigcirc	\bigcirc
I can manage a good balance between work and family	0	0	0	0	0	0
I do a lot of work irrelevant to nursing	0	\circ	0	0	0	0
I have energy outside of work	0	\circ	0	0	0	0
My daily affairs are frequently disrupted	0	\circ	0	0	0	\circ
I have enough time for work	0	\circ	0	0	0	0
The number of nurses is adequate in my unit	0	0	0	0	0	0
Shift work negatively affects my life	0	\circ	0	0	0	0
My salary is adequate for my job	0	\circ	0	0	\circ	\circ
Institutional policy is suitable for saving time for family.	0	0	0	0	0	0

* 9. With respect to your position working as a nurse in Ireland since the Covid-19 pandemic began, please indicate a response to the following options:

	Disagree very strongly	Disagree strongly	Disagree	Agree	Agree strongly	Agree very strongly
I am content with my job	0	\circ	\bigcirc	0	0	0
I have autonomy in deciding patient care	0	\circ	\circ	0	0	0
Team work is present in my unit	\bigcirc	0	\circ	0	0	0
I feel attached to work	0	0	0	0	0	0
I feel approved by doctors at work	\circ	0	0	0	0	0
I can communicate with doctors at work	0	0	\circ	0	0	0
My job is effective for patients and their family life	0	0	0	0	0	0

* 10. If possible, would you leave your current hospital within the next year as a result of job dissatisfaction?

() Yes

O No

O Unsure

* 11. If yes, what do you intend to leave?

O The current position

○ The current organisation

○ The field of nursing

○ Not applicable

* 12. Do you have any recommendations for your management team on how to improve staff morale in the hospital?

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