

NURSES' PERCEPTION OF COMPENSATION AND WORKLOAD TOWARDS INTENTION TO LEAVE

Gunawan Andri Fauzi¹, Pramono Hari Adi²

¹Magister Manajemen Jenderal Soedirman University, gundrifauzi@gmail.com, Indonesia

²Magister Manajemen Jenderal Soedirman University, pramono.adi@unsoed.ac.id, Indonesia

ABSTRACT

The lack of nurses is one of the problems in health sector, it may cause a decline in the quality of patient care services. Nurses must have high job satisfaction as a way to prevent the intention to leave. Compensation is an important aspect that needs to be considered by an organization and the suitability of workload is also one of the considerations for employees in deciding to stay or leave the organization. This study used a qualitative method to understand the perceptions of nurses at Duta Mulya General Hospital regarding compensation and workload in relation to their intention to leave. Data obtained through in-depth interviews. The analysis of this research used qualitative descriptive analysis and the results of the study will provide a comprehensive understanding of the compensation and workload associated with the intention to leave from the perspective of the nurses. The results showed that most nurses felt dissatisfied with the compensation they received, especially for additional compensation other than salary. Furthermore, nurses also complained about the workload that was not appropriate, especially when numbers of patients treated in outpatient and inpatient department are high. These factors may cause the intention to leave of the nurses from current job.

Keywords: Compensation, workload, intention to leave

1. Introduction

Globally, the lack of nurses is one of the problem in the healthcare sector. Consequently, the quality of patient care services has decreased (Van Bogaert et al., 2010). Therefore, it is necessary to ensure a high level of job satisfaction among nurses and take an appropriate prevention to avoid the intention to leave has become a major concern (Sabanciogullari & Dogan, 2015). High level of nurse dissatisfaction leads to turnover in the nursing profession (Banaszak-Holl & Hines, 1996), which in turn may cause the lack of staff, increased overtime and work stress, increased burnout, longer patient waiting lists, and ultimately an increased in displeasure of the patients. Nurses turnover also increased recruitment and orientation costs (Murrells, Robinson & Griffiths, 2008).

Heinen et al. (2013) stated that the characteristics of the work environment, professional identity, job satisfaction, and burnout due to excessive workload are the most persuasive factors that influence nurses' decisions to stay or quit from their jobs. Previous study has shown that turnover in nursing is a logical consequence of job dissatisfaction of the nurses. Initially, the nurse left the unit, then from the hospital, and finally his/her job (Iliopoulou & While, 2010).

Compensation is an important aspect for employees and companies. It has to be adjusted to the employee's workload. The amount of compensation may affect work performance, motivation, and job satisfaction. If the compensation is provided appropriately, employees will be satisfied and motivated to achieve company goals. However, if the compensation is not in accordance with the workload that has been implemented, it will affect work performance, motivation, and job satisfaction (Notoatmodjo, 2009). The impact from this situation is that employees have the intention to leave.

Duta Mulya Hospital as a private hospital is a labor-intensive organization contained many professions and experts that play a role in development of health services. One of the professions that plays an important role in providing services to patients is a nurse. Based on the results of the preliminary interview, it was found that the nursing profession at Duta Mulya Hospital had a high turnover rate. A high turnover rate will have a negative impact to the hospital because it can lead to instability and uncertainty to the employees and increase the cost of employees' education and training.

Therefore, this study will focus on the perceptions of nurses at Duta Mulya Hospital regarding compensation and workload related to their intention to leave.

2. Literature Review

2.1 Compensation

Compensation is all forms of rewards paid to employees as the results from the task they do (Dessler, 2015). According to Hayes & Ninemeier (2009), compensation is an amount of money and other items of value (for example, profits, bonuses, allowances) provided as a reward for work performance. In other words, all forms of financial gifts and benefits received by employees as part of an employment relationship. The government through the Ministry of Health also issued a Decree of the Minister of Health of the Republic of Indonesia Number 625 of 2010, in which remuneration is defined as the cost of expenses by the hospital, as compensation for employees, the benefits of which are received by employees in the form and type of reward and protection components.

The remuneration system must pay attention to the basic objectives for the hospital and employees. Therefore, the management system must be implemented as well as possible. Hasibuan (2012) states that the purpose of remuneration is a bond of cooperation, job satisfaction, effective procurement, motivation, employee stability, discipline, the influence of labor unions and the influence of government regulations. Basically, remuneration should provide satisfaction to all parties, i.e. employees, employers, companies, communities and government.

According to Notoadmodjo (2009) the goals that must be achieved in providing remuneration are to respect work performance, ensure fairness, retain employees, obtain quality employees, control costs and increase income, and comply with regulations.

Lu et al., (2012) reported that salary, additional allowances, and contingent benefits are related to job satisfaction of nurses, and these factors are strongly related to turnover intention. Several studies have shown that salary and financial benefits are considered the most significant factors for job satisfaction among male nurses compared to female nurses (Borkowski et al., 2007; Chan et al., 2009).

2.2 Workload

Workload is the perceived relationship between the amount of mental processing ability or resources and the amount required to carry out a task (Hart, 1988). According to Robbins & Judge (2015), workload refers to the intensity of work assignments, which is a source of mental stress for employees.

According to Munandar (2001), there are two aspects of workload, i.e workload as a physical demand and workload as a demand for duty.

Davis and Newstrom (1985) stated that there are eleven dimensions that cause the workload of a worker, i.e work overload, time urgency, inefficient control systems (poor quality of supervisors), inaccurate granting of authority in accordance with assigned responsibilities (inadequate authority to match responsibilities), insufficient performance feedback, role ambiguity, changes in work (change of any type), interpersonal and intergroup conflict, insecure political climate, frustration, and differences between company values and employee values.

Soleman (2011) divided the factors that affect workload are as follows:

- External factors, i.e tasks, work organization and work environment.
- Internal factors, i.e somatic factors (gender, age, body size, nutritional status, health conditions, etc.), and psychological factors (motivation, perception, belief, desire, satisfaction, etc.).

Measurement of workload is carried out to obtain information on the level of effectiveness and efficiency of the organization's work based on the amount of work that must be completed within one year. According to O'Donnell and Eggemeier (1986), workload measurements can be carried out in three types, i.e subjective measurements, performance measurements, and physiological measurements.

Currently, the issue of turnover among nurses is one of the main concerns in the health sector. Applebaum et al. (2010) confirmed that nurse turnover intention was positively related to nursing workload, work-related stress, and fatigue. Similarly, Meeusen et al. (2011) stated that the emotional and psychological condition of nurses had worsened due to excessive workloads and lack of support from colleagues and supervisors. As a result, the turnover intention increased. A survey of health professionals' job satisfaction and their intention to quit their jobs reported that

the length of professional experience is an important factor for nurses' job satisfaction and their intention to quit the profession (Kavanaugh, Duffy & Lilly, 2006). In addition, they found that individual characteristics (eg, gender, age education level, and race) were not the basis for variations in job satisfaction.

About an half (48%) of the nurse respondents from Finland reported that, if possible, they would be discharged from the hospital the following year due to job dissatisfaction, with about a third of the Swedish sample and a quarter of the Norwegian sample responding. The patient's workload is related to job satisfaction and intention to leave, whereas the greater the patient's workload, the less job satisfaction and increased intention to leave. One of the implications from Lindqvist et al. (2014) study argue that when making efforts to increase nurse retention, policy makers and management must consider their workload.

2.3 Intention to Leave

According to Tett & Meyer (1993), the intention to leave is the desire of employees to leave the company consciously and there is an element of intention. In addition, this may be interpreted as someone who estimates subjectively the possibility or probability of leaving the company or profession in the near future (Bigliardi, Petroni & Ivo Dormio, 2005).

According to Mathis and Jackson (2001), employee turnover is classified into several types:

- Employee willingness, i.e voluntary turnover and involuntary turnover
- Functional level, i.e functional turnover and dysfunctional turnover.
- Forms of control, i.e turnover that cannot be controlled and turnover that can be controlled.

The intention to leave is known to be a strong predictor of leaving from work (Krausz, Koslowsky, Shalom, & Elyakim, 1995), and leaving from work is considered a major contributor to nursing shortages (Flinkman, Leino-Kilpi, & Salantera, 2010). Aiken et al. (2001) reported that 16.6% to 38.9% of nurses in five countries (United States, Canada, United Kingdom, Scotland, and Germany) reported an intention to leave the following year, and this increased from 29.4% to 53,7% in nurses who are less than 30 years old. In a study of 2,250 nurses in Shanghai, Liu et al. (2011) reported that 40.4% of nurses reported an intention to leave. In another study using the Chinese version of Intent to Stay Nurses (six items, on a five-point Likert scale, scores from one to five, where a higher score indicates a stronger intention to stay), the researchers found that the average score of nurse intention to stay is 3.53, which means nurses are at a moderate level willing to stay in their current job (Wang et al., 2012).

3. Research Methodology

The method used in this study is a qualitative research method to obtain an in-depth picture of nurses' perceptions of compensation, workload, and intention to leave.

3.1 Population and Research Subjects

The subjects of this study were several nurses from each service unit at Duta Mulya Hospital, while additional information was obtained from supporting sources, i.e the Nursing Coordinator, the Chair of the Nursing Committee, and the Head of the Sub Division of Personnel. Determination of research subjects (informants) is considered adequate if it has achieved redundancy (the data obtained is saturated and research subjects no longer provide new or varied information).

3.2 Data Collection

Data collection techniques carried out by in-depth interviews. In-depth interviews were conducted using structured interviews where the researcher had a question instrument in the form of written questions with alternative answers that had been provided. Researchers will conduct structured interviews with several nurses from each service unit at Duta Mulya Hospital.

3.3 Data Analysis

The data analysis process was carried out by the researcher after the data in the form of a transcript of the interview results and the required documentation were considered complete and perfect, the analysis would use the Miles and Huberman model which was taken with the following steps (Sugiyono, 2015):

- **Data reduction**
Data reduction is defined as a process of sorting, summarizing, sorting out what is important and getting rid of unused data. So that the researcher will sort, summarize and get rid of unused data and continue with the coding process in the analysis process and rearrange and draw a conclusion.
- **Data verification**
The next step is to verify the data. In this stage, it will be used to reinforce some of the initial findings made in the previous steps. The initial conclusions that have been made cannot be said to be credible before the verification step is carried out. This verification step will match the initial conclusions with existing document data, therefore if there is a match between the initial conclusions and existing data, the results of this study can be said to be valid or credible.

4. Result

The results of this study were obtained through in-depth interviews with four nurses from each service unit, i.e the outpatient department (Informant 1), the 1st floor inpatient department (Informant 2), the 2nd floor inpatient department (Informant 3), and the emergency department. (Informant 4). All informants are women who are married with a working period of 1-5 years.

4.1 Compensation

All informants said that they received compensation in the form of a monthly salary consisting of basic salary and incentives for the number of treated patient. The salary received has met the regional minimum wages in Cilacap Regency. Additional compensation received if there are

other jobs outside of work as a nurse, for example when involved in the hospital accreditation process, being head of the program, or out duty.

Most of the informants stated that they were dissatisfied with the current compensation. The reasons including not receiving compensation for nursing care, some of them have not received employee health insurance from the hospital, the amount of compensation is not in accordance with job risks (for example, risk of exposure to disease), and there is no annual leave. Some informants who get additional work other than nursing duties receive additional compensation, but some others do not.

4.2 Workload

According to the informant, the nurse's job that must be done is to carry out nursing job and nursing care. However, in its implementation some informants stated that the workload was not yet effective.

Informant 1, Informant 2 and Informant 3 convey the reason because there is no division of nurse duties for each medical area. Therefore a team of nurses per shift carries out tasks for various medical areas at once and this is an unusual system in the hospital. Currently, the inpatient departments is divided into two, i.e the 1st floor and 2nd floor inpatient department. The 1st floor inpatient department includes obstetric and gynecological care, perinatology, and the High Care Unit (HCU). Meanwhile, the second floor inpatient department includes internal medicine, surgery, pediatric, and isolation chamber.

When the number of treated patient are high, they complain of exhaustion at work because they have to complete various kinds of work at once and sometimes exceed working hours. Without division of the medical area makes nurses confused and decrease their focus. Apart from that, the informants also had not received information regarding the evaluation of the nurse's workload calculation based on the number of treated patient per month/year.

In contrast, Informant 4 conveyed that the workload is in accordance with his nursing duties. The workload in the emergency department is in accordance with their competence and abilities.

4.3 Perceptions of Compensation and Workload Towards Intentions to Leave

The majority of informants stated that they had the intention to leave due to dissatisfaction with the compensation and inappropriate workload. They revealed that compensation and workload were related to the intention to leave.

The main reason for the intention to leave is not actually the salary, but the additional compensation, such as the fees from patient services, health insurance, and the annual leave program.

Patient services are not always stable from time to time, but this is an other motivation for them to work hard because they will directly get the results from it. It is different with the percentage system of the number of treated patients which is divided evenly based on the number of care,

the results will be perceived equally. According to them, this actually shows the spirit of work because the compensation received for patient care is not a reflection of personal work results.

According to informants, health insurance for nurses at work is obtained from two sources, i.e. BPJS Kesehatan (health insurance) and BPJS Ketenagakerjaan (labor insurance). Some informants stated that they had received the insurances, and unfortunately, some had not. Health insurance is considered important because it is a form of protection for nursing job who are at high risk of exposure to disease.

So far, there has been no annual leave for nurses. The informant stated that annual leave was felt to be important because it was an employee right that had to be fulfilled by the employer. They revealed that the annual leave can be used for personal activities. Regardless, informants are still grateful because female nurses get 3 months maternity leave.

Regarding workload, the variety of work that must be done at one time, especially when the number of treated patients are high, is considered to be a source of work-related exhaustion. Especially for female nurses who are married, the high workload that requires them to complete work beyond working hours also results in neglected work activities at home.

According to some informants, they will more focused if the nursing care is divided based on each medical area. In hospital services, outpatient and inpatient services usually have their respective teams of nurses. However, in their current workplace there is no such division of duties. This is happen in outpatient and inpatient department. According to them, an obvious division of tasks will increase focus on work and improve service to patients.

The conditions above can lead to the intention of leaving for the nurse.

5. Discussion

Compensation is an important aspect of retaining employees. The same goes for the nursing profession who works in hospitals. From the results of interviews with informants, most informants stated that they were not satisfied with the current compensation, especially for additional compensation outside of salary, both financial and non-financial. As a result, there was a desire to leave their current job. This is in line with the report by Li et al. (2011) that out of 9,698 in 181 hospitals in China, about 45% of nurses are dissatisfied with their current job, and most of it is due to salary. Five percent of them have the intention to leave. And according to Morgan et al. (2013), even though there is supervisory support from supervisor and an appropriate workload, a nurse's attachment to their job is strongly driven by extrinsic rewards (salary, incentives, allowances, etc.) they received.

The workload also needs to be considered as an effort to keep nurses from leaving. Workload that is too heavy can result in exhaustion due to work which has an impact on reducing the performance of nurses which results in the emergence of an intention to leave. From the findings by Hammig (2018), it is stated that 1 in 6 health workers in Switzerland show work exhaustion due to an imbalance of workload, whereas for the nursing profession around 28.7% have the idea of leaving their job. Job imbalance and compensation received are strong predictors of the desire

to leave. There is a strong correlation between workload, work fatigue, and intention to leave. If the workload is too high, work fatigue will appear due to a person's inability to complete work for a certain period of time or the work being done takes too long. The impact will appear in two conditions, i.e emotional exhaustion and depersonalization which in turn will increase the intention to leave (Yang et al., 2014).

6. Conclusion

Lack of nurses in the health sector, especially in hospitals, can cause a decrease in the quality of service to patients. In order to maintain the quality of nursing services, various efforts need to be made by the hospital management in order to maintain nursing personnel. One form of this effort is to pay attention to job satisfaction of nurses in order to avoid the emergence of an intention to leave.

Compensation and workload are vital things that need attention. Although salary as the main component in compensation has been provided according to provisions, hospital management also needs to pay attention to other compensation components, such as remuneration for nursing services, employee health insurance, and annual leave allowances. Workloads that are in accordance with more focused work tasks can avoid work exhaustion among nurses. These two topics turned out to be decisive factors for a nurse to consider staying or even raising the intention to leave their job.

Further research is needed on other factors that can influence the intention to leave among nurses in order to provide a more complete picture of this topic.

References

- Aiken, L.H., Clarke, S.P., Sloane, D.M., Sochalski, J.A., Busse, R., Clarke, H. & Shamian, J. (2001). Nurses' reports on hospital care in five countries. *Health Affairs*, 20, 43-53.
- Applebaum, D., Fowler, S., Fiedler, N., Osinubi, O. & Robson, M. (2010). The impact of environmental factors on nursing stress, job satisfaction, and turnover intention. *The Journal of Nursing Administration*, 40(7-8):323-328.
- Banaszak-Holl J. & Hines, M.A. (1996). Factors associated with nursing home staff turnover. *The Gerontologist*, 36(4):512-517.
- Bigliardi, B., Petroni, A. & Ivo Dormio, A. (2005). Organizational socialization, career aspirations and turnover intentions among design engineers. *Leadership & Organization Development Journal*, 26(6), 424-441.
- Borkowski, N., Amann, R., Song, S-H. & Weiss C. 2007. Nurses' intent to leave the profession: issues related to gender, ethnicity, and educational level. *Health Care Management Review*, 32(2):160-167.
- Davis, K. & Newstrom, J.W. (1985). *Perilaku Dalam Organisasi*. Jakarta: Erlangga.
- Dessler, G. (2015). *Manajemen Sumber Daya Manusia*. Jakarta: Salemba Empat.
- Flinkman, M., Leino-Kilpi, H. & Salanterä, S. (2010). Nurses' intention to leave the profession: Integrative review. *Journal of Advanced Nursing*, 66, 1422-1434.

- Hammig, O. (2018). Explaining burnout and the intention to leave the profession among health professionals – a cross-sectional study in a hospital setting in Switzerland. *BMC Health Serv Res* 18, 785 (2018). <https://doi.org/10.1186/s12913-018-3556-1>.
- Hart, S.G. & Staveland, L.E. (1988). *Development of NASA-TLX (Task Load Index): Result of empirical and theoretical research*, In P.A. Hancock & N. Meshkati (Eds.), *Human Mental Workload*. Amsterdam: North Holland.
- Hasibuan, M. (2012). *Manajemen Sumber Daya Manusia*. Jakarta: PT Bumi Aksara.
- Hayes, D.K., Ninemeier, J.D. (2009). *Human Resources Management in the Hospitality Industry*. New Jersey: John Wiley and Sons.
- Heinen, M.M, Van Achterberg, T., Schwendimann, R., Zander, B., Matthews, A., Kózka, M., & Ball, J. (2013). Nurses' intention to leave their profession: a cross sectional observational study in 10 European countries. *International Journal of Nursing Studies*, 50(2):174-184.
- Iliopoulou, K.K. & While, A.E. (2010). Professional autonomy and job satisfaction: survey of critical care nurses in mainland Greece. *Journal of Advanced Nursing*, 66(11):2520-2531.
- Kavanaugh, J., Duffy, J.A. & Lilly, J. (2006). The relationship between job satisfaction and demographic variables for healthcare professionals. *Management Research News*, 29(6):304-325.
- Keputusan Menteri Kesehatan Nomor 625/MENKES/SK/V/2010 tentang Pedoman Penyusunan Sistem Remunerasi Pegawai Badan Layanan Umum Rumah Sakit di Lingkungan Kementerian Kesehatan.
- Krausz, M., Koslowsky, M., Shalom, N. & Elyakim N. (1995). Predictors of intentions to leave the ward, the hospital, and the nursing profession: A longitudinal study. *Journal of Organizational Behavior*, 16, 277-288.
- Li-feng Zhang, Li-ming You, Ke Liu, Jing Zheng, Jin-bo Fang, Min-min Lu, Ai-li Lv, Wei-guang Ma, Jian Wang, Shu-hong Wang, Xue Wu, Xiao-wen Zhu, Xiu-qing Bu. (2013). The association of Chinese hospital work environment with nurse burnout, job satisfaction, and intention to leave. *Nursing Outlook* Volume 62, Issue 2, P128-137, March 01, 2014. <https://doi.org/10.1016/j.outlook.2013.10.010>
- Lindqvist, R., Alenius, L.S., Runesdotter, S., Ensio, A., Jylhä, V., Kinnunen, J., Sjetne, I.S., Tvedt, C., Tjønnfjord, M.W. & Tishelman, C. (2014). Organization of nursing care in three Nordic countries: relationships between nurses' workload, level of involvement in direct patient care, job satisfaction, and intention to leave. *BMC Nursing*, 2014, 13:27.
- Liu, C., Zhang, L.J., Ye, W.Q., Zhu, J.Y., Cao, J., Lu, X.Y. & Li, F.P. (2011). Job satisfaction and intention to leave: A questionnaire survey of hospital nurses in Shanghai of China. *Journal of Clinical Nursing*, 21, 255-263.
- Lu, H., Barriball, K.L., Zhang, X. & While, A.E. (2012). Job satisfaction among hospital nurses revisited: a systematic review. *International Journal of Nursing Studies*, 49(8):1017-1038.
- Mathis, L.R. & Jackson, H.J. (2001). *Manajemen Sumber Daya Manusia*. Jakarta: Salemba Empat.
- Meeusen, V.C., Van Dam, K., Brown-Mahoney, C., Van Zundert, A.A. & Knape, H.T. (2011). Understanding nurse anesthetists' intention to leave their job: how burnout and job satisfaction mediate the impact of personality and workplace characteristics. *Health Care Management Review* 36(2):155-163.

- Morgan, J. c., Dill, J., Kalleberg, A. L. (2013). The quality of healthcare jobs: can intrinsic rewards compensate for low extrinsic rewards? *Sage Journals* Vol 27, Issue 5, 2013. <https://doi.org/10.1177%2F0950017012474707>.
- Munandar, A.S. (2001). *Psikologi Industri dan Organisasi*. Jakarta: Universitas Indonesia.
- Murrells, T., Robinson, S. & Griffiths P. (2008). Job satisfaction trends during nurses' early career. *BMC Nursing*, 7(7):1-13.
- Notoatmodjo, S. (2009). *Pengembangan Sumber Daya Manusia*. Jakarta: Rineka Cipta.
- O'Donnell, R.D. & Eggemeier, F.T. (1986). *Workload Assessment Methodology*. New York: Wiley.
- Robbins S. P. & Judge T. A. (2015). *Organizational Behavior*. New Jersey: Pearson.
- Sabanciogullari, S. & Dogan, S. (2015). Effects of the professional identity development programme on the professional identity, job satisfaction and burnout levels of nurses: a pilot study. *International Journal of Nursing Practice*, 21(6):847-857.
- Soleman, A. (2011). Analisis Beban Kerja Ditinjau Dari Faktor Usia Dengan Pendekatan Recommended Weight Limit. *Jurnal Arika*, Vol.05 No.02.
- Sugiyono. (2015). *Metode Penelitian: Kuantitatif, Kualitatif, dan R&D*. Bandung: Alfabeta.
- Tett, R.P. & Meyer, J.P. (1993). Job satisfaction, organizational commitment, turnover intention and turnover: path analysis based on analytic findings. *Personnel Psychology*, 46, 259-93.
- Van Bogaert, P., Clarke, S., Roelant, E., Meulemans, H. & Van de Heyning, P. (2010). Impacts of unit-level nurse practice environment and burnout on nurse-reported outcomes: a multilevel modelling approach. *Journal of Clinical Nursing*, 19(11-12):1664-1674.
- Wang, L., Tao, H., Ellenbecker, C.H., Liu, X.H. (2012). Predictors of hospital nurses' intent to stay: A cross-sectional questionnaire survey in Shanghai, China. *International Nursing Review*, 59, 547-554.
- Yang Xiaoming, Ben-Jiang Ma, Chunchih lisa Chang, Chich-Jen Shieh. (2014). Effects of Workload on Burnout and Turnover Intention of Medical Staff: A Study. *Ethno Med*, 8(3): 229-237 (2014).