

Confronting the Nursing Workforce Crisis: Leveraging Organizational Behavior for Improved Crisis Resilience

Norah Muallith Dubays Alrashdi¹, Amal Majed L Alanazi¹, Badriah Majed Aqeel Alanezi², Fawzeaha Saadi Almotiri³, Sultana Mahali Alroweli³, Sana Fayez Alasmari⁴, Ahmad Mohammed Ahmad Alatidi³, Aml Saad Garboh Alanizi⁵, Thamer Ali Sehmi Alshomrani⁵, Samah Farhan Alanazi³

1. Second Health Cluster, Nursing Technician, KSA.
2. Nursing Specialist, Madinah Health Cluster Alula, KSA.
3. Nursing Technician, Third Health Cluster, KSA.
4. Nursing, Cluster3, Riyadh, KSA.
5. Nursing Technician, Second Health Cluster, KSA.

ABSTRACT

Nurse turnover rate and lack of retention are issues that have an impact on safe patient care, patient mortality, quality outcomes, and patient experiences in the acute care units at the hospitals. Turnover leads to excess labor utilization of overtime and increased hospital costs.

KEYWORDS: Sretention, resilience, nurses.

1. Introduction

Nursing retention and high turnover rates, impact health care on many levels (Tang & Hudson, 2019). There are substantial pressures on health care workers and facilities to provide quality care in a cost-effective manner to patients, in an effort to yield outcomes of satisfaction with both patients and staff (Bowles et al., 2019). Finding the balance with these pressures is a challenge. Nursing retention should be a priority across the globe, as many registered nurses (RN) are often found leaving their positions when conditions and pressures becomes undesirable (Laschinger et al., 2016; WHO, 2010). Turnover is expensive for health care facilities and often takes an emotional toll on nurses (Tang & Hudson, 2019). Nursing turnover affects staff satisfaction, disrupts productivity, and impacts patient care. Patients are turned away due to inadequate staffing numbers, which in turn decreases revenue for the facility (Vardaman et al., 2018). In addition, nurses often feel disenfranchised and stressed, which has an impact on job satisfaction. Many nurses have left the profession because they felt that this challenge does not allow them to care appropriately for patients (Aiken et al., 2017; Spence Laschinger & Fida, 2015). This review discusses how positive workplace environment and job satisfaction have a significant role on nurse retention. The strategies implemented for increased retention of nursing staff were focused on improving the workplace environment and included direct communication, supportive management, and nurse autonomy with

Norah Muallith Dubays Alrashdi, Amal Majed L Alanazi, Badriah Majed Aqeel Alanezi, Fawzeaha Saadi Almotiri, Sultana Mahali Alroweli, Sana Fayez Alasmari, Ahmad Mohammed Ahmad Alatidi, Aml Saad Garboh Alanizi, Thamer Ali Sehmi Alshomrani, Samah Farhan Alanazi
involvement in decision making. As the work environment improved through the implementation of interventions, a clinical significance was noted.

Building and strengthening workplace resilience is important in stressful work environments.

A number of adverse events or antecedents may carry a significant threat to nursing staff resilience, such as workplace violence, unpredictable workloads, compassion fatigue, lack of resources, workplace bullying, and lack of capacity to influence good patient outcomes (Jackson et al., 2007; Melnyk et al., 2013; Nowrouzi et al., 2015). While these events may be one-off, traumatic occasions that test the nursing staff's ability to bounce back, more commonly it is a continually negative workplace environment and culture that may culminate in staff burnout or compassion fatigue. If nurses cannot remain sufficiently resilient over time, then this ongoing vicarious trauma may lead to depression, poor physical health outcomes, higher staff turnover as well as poor patient care (Choi et al., 2011; Rickard et al., 2012). As identified by Pangallo et al. (2015, p. 1) it is important to make a distinction between chronic and acute stressors because resilience is likely to co-vary with the type and duration of a given stressor. Nurses are likely to be most exposed to chronic systemic stressors where the practice environment may not be conducive to providing a supportive workplace over a long period of time. Therefore, key workplace interventions that support nurses' resilience are important for ongoing staff retention and quality patient care (Hayes et al., 2012).

Significance of the Practice Problem:

Surveys of nurses in different countries indicate turnover is a global issue and is a particular concern in rural and remote areas (Brook et al., 2019; Mbemba et al., 2013; 4 2010). The extent and impact of nurse turnover has been noted in countries with developed healthcare systems. Furthermore, 20 – 50% of nurses surveyed in eight countries intended to leave their jobs, these countries included Belgium, France, Germany, Greece, Ireland, Poland, Spain, and Switzerland (Brook et al., 2019). Nursing turnover “has significant impact” on the provision of safe, quality care and patient mortality in those countries (Zander et al., 2016, p. 5). In 2020, the vacancy rate of RNs climbed 9% nationally; a full point higher than 2019 (NSI Nursing Solutions, 2021). The Bureau of Labor Statistics projected the nursing labor shortage will reach 1.13 million by 2024 (O'Donnell, 2020; Hogan & Roberts, 2015). The rising rate of nursing shortages directly impacts patient quality outcomes and experiences. In addition, low nurse retention rates lead to excess labor utilization in both overtime and onboarding. Nationally, only one in five hospitals (19.3%) reported an RN vacancy rate of < 5% in 2020, and in 2019 the national bedside RN turnover rate was 15.9% (NSI Nursing Solutions, 2021). The average cost of one bedside nurse is \$44,400 annually, with an average hospital loss of \$3.6m - \$6.1m/yearly (NSI Nursing Solutions, 2021). The cost of turnover can have a profound impact on hospitals, and needs to be managed. Over 32% of newly hired RNs do not reach their first-year anniversary. For those nurses that surpassed the first-year anniversary, the turnover rate before reaching their second year of employment is 20.5% (O'Donnell, 2020). The northern California RN turnover rate in 2017 was 10.7%, with a southern California turnover of rate 12.1% (Hospital

Association of Southern California, 2017). It is estimated that hospitals lose between \$4 and \$7 million per year because of nurse turnover, and each percent change in RN turnover cost the average hospital an additional \$306,400 each year (NSI Nursing Solutions, 2021).

The effects of the COVID-19 pandemic on the profession have amplified many of the challenges faced by nurse leaders. Nurse scholars have devoted significant effort into understanding leadership in the context of COVID-19 (e.g. Raso et al., 2021). However, many of these leadership studies lack strong theoretical underpinnings, which can impede the development of a cohesive understanding of how crises influence nurse leadership.

Themes that had an effect on nurse retention included:

1- Positive Workplace Environment

A positive workplace environment requires open and direct communication, access to information, collaboration, and supportive nurse managers (Rivaz et al., 2020; Jackimowicz and Lewis, 2018; Dewanto and Warhani, 2018; Minamizono et al., 2019; Nurdiana et al., 2018; Van de Bulcke et al., 2020; Moisoglou et al., 2020; Lee et al., 2019; & Whitehead et al., 2015).

Communication, Acknowledgement, and Recognition Job satisfaction was influenced through open and direct communication, collaboration, and decision making (Jackimowicz et al., 2018; Van den Bulcke et al., 2020; Moisoglou et al., 2020; Coundounaris et al., 2020; & Brown et al., 2018). The nurse managers who made a point to be active listeners with their health care staff, to share information, and use consistent follow up, improved communication on the unit, which may lead to increased nurse retention (Tang & Hudson, 2019).

2- Organizational culture

Organizational culture has been established as a strong predictor of employee retention (e.g. Sheridan, 1992; Brown et al., 2013) and is directly tied to the work environment component of the nurse workforce crisis model. One avenue for research could be examining how organizational concessions influence the development or resiliency of organizational cultures. Similar to leadership, understanding how crises affect organizational cultures and the subsequent effect on nurses' work experiences could offer insight into how the COVID 19 pandemic might strengthen or weaken the work force pipeline over the coming years. Integrating recent work on employee normative and distinctive preferences (Wood et al., 2019) into the nursing context also offers a novel avenue for contributions. Specifically, examining what individual differences might lead to distinctive preferences could be used for targeted recruitment. Alternatively, for healthcare organizations with limited resources, future research could examine if seeking to satisfy normative preferences might offer a more cost-effective means of retaining current nurses than seeking to satisfy distinctive preferences. Another relevant area of research related to climate is emotional contagion (e.g. Barsade, 2000). As an example, Bakker et al. (2005) found that for intensive care nurses, "perceived burnout complaints among colleagues were the most important predictor of burnout at the individual and unit levels" (p. 276). Along with burnout, loneliness is another

growing and significant issue faced by nurses (e.g. Amararat et al., 2019), and could be studied from the lens of emotional contagion. Building on studies such as these might offer insight into how to address the reinforcement loop in the workforce crisis model from a climate perspective, as well as offer theoretical framing for studies focusing on the link between poor work environments and nurses' negative work experiences.

3- Leadership Styles

Leadership styles have a direct impact on a nurses' intent to stay, and indirectly affect the quality of health services provided to patients. Transformational leadership is a style that includes a defined nurse manager role, positive management support styles, supportive hospital management, and supportive organizational climates, to increase nurse retention (Labrague et al., 2020; Adams et al., 2019; Genly, 2016; Hussein et al., 2019; Jakimowicz et al., 2018; Moisoglou et al., 2020; Nurdiana et al., 2018; Putra et al., 2020; Ke & Hung, 2017; Semachew et al., 2017; & Brook et al., 2018). Positive, encouraging, visible and available managers have increased nurse retention on their units versus those managers not engaged with their staff (Labrague et al., 2020).

Emergence of leaders within nurse units during crises could also offer novel insight into how nurses might fill the leadership void that is faced by many healthcare organizations. This stream of research could be informed by theories of leader emergence that focus on specific traits or draw on social network theories that seek to examine how interactions between individuals foster leader emergence (e.g. Kwok et al., 2018). Lastly, researcher could draw on implicit leadership theories (e.g. Lord et al., 2001) to examine how crises shift nurses' perceptions of leadership and how perceptions of effective leadership might change given resource constraints or unique environmental challenges.

4- Setting, Organizational Structure and Organizational

Need The setting was a 400-bed acute care facility located in the southwestern part of the United States. It is one of the largest hospitals and the largest employer in the area. The leadership team consisted of the chief executive officer (CEO), the chief nursing officer (CNO), the chief operating officer (COO), the chief financial officer (CFO), the chief strategy officer (CSO), and the chief human resources officer (CHRO). Organizational need and support were determined by the CNO, as well as, the acute care directors and nurse managers. Nurse retention has become a high priority to the organization, due to the increased turnover rate, which has the consequence of high costs to the organization and impacts the quality of care provided to patients. The volunteer participants in this pilot project were acute care nurses, totaling 20 participants, who were given surveys pre- and post- intervention implementation.

5- Stakeholders and Organizational Support

Due to the nursing turnover, there was a shortage of nursing staff, which was felt by other professionals in the organization, such as respiratory therapists, physical therapists, pharmacists, technicians, who were all supportive of this project. The

stakeholders with active involvement were those from the leadership team, the PM, and the nursing staff for the selected units. Turnover is disruptive to nursing productivity, and with inadequate staffing this directly affects patients and their families, who are also important stakeholders in nurse retention efforts (Vardaman et al., 2018).

6- Organizational Need and SWOT Analysis

The SWOT analysis of the hospital identified the following strengths for this project, core experienced staff, adequate resources, and a busy unit with high census. Additionally, when the hospital offered a new graduate program, they had full capacity due to hospital outreach. The weaknesses noted for this project were the nursing shortage and high turnover rate. The opportunity is that the hospital is the largest employer in the area and is able to pilot this project. The threats were the negative media coverage, of nurses leaving the organization, and the nurses' negative perception of management. (Appendix G).

7- Interprofessional Collaboration

Interprofessional collaboration requires all stakeholders to take an active role in maintaining a positive workplace environment. The interprofessional staff have been impacted by the nursing turnover and low retention rates and have been doing their best to adjust to new, inexperienced nurses. However, the increase in the turnover rate not only affected patient care, but it also disrupted the collaboration among interprofessional staff.

8- Plans for Sustainability

The plans for sustainability consist of the nurse managers maintaining their visibility and availability in patient care areas, interacting with staff nurses, acknowledging staff, and giving feedback to staff through open and direct communication. The nurse manager will also continue to lead focus groups, as this became an asset in addressing nurse turnover and retention, as well as, other issues from the staffs' perspective. Another important aspect for sustainability is maintaining a positive workplace environment that values nurse suggestions and recommendations to patient care and increases the voice of nurses in the decision-making process.

2. Conclusion

In conclusion, the pressing issue of nurse turnover remains a significant challenge within the healthcare sector, carrying profound implications for both patient care and organizational effectiveness. As this review has illustrated, high turnover rates among nursing staff not only jeopardize the quality-of-care patients receive but also contribute to financial strain on healthcare systems. The multifaceted nature of turnover is influenced by numerous factors, including workplace environment, management practices, and the emotional toll of nursing work. Indeed, creating a supportive workplace culture emerges as a pivotal strategy for enhancing nurse retention. When organizations prioritize open communication, recognition, and involvement of nurses in decision-making processes, they foster a sense of belonging and engagement among their staff, which can mitigate the urge to leave their

Norah Muallith Dubays Alrashdi, Amal Majed L Alanazi, Badriah Majed Aqeel Alanezi, Fawzeaha Saadi Almotiri, Sultana Mahali Alroweli, Sana Fayez Alasmari, Ahmad Mohammed Ahmad Alatidi, Aml Saad Garboh Alanizi, Thamer Ali Sehmi Alshomrani, Samah Farhan Alanazi positions.

Moreover, the impact of leadership styles cannot be overstated; transformational leadership models exhibit strong correlations with improved job satisfaction and intent to stay among nurses. Leaders who are actively engaged and supportive significantly contribute to a positive work environment, promoting higher retention rates and better patient care outcomes.

References

- Adams, A.M.N., Chamberlain, D., & Giles, T.M. (2019). Understanding how nurse managers see their role supporting ICU nurse well-being-A case study. *Journal of Nursing Management*, 27, 1512-1521.
- Aiken, L. H., Sloane, D., Griffiths, P., Rafferty, A. M., Bruyneel, L., McHugh, M., Maier, C. B., Moreno-Casbas, T., Ball, J.E., Ausserhofer, D., & Sermeus, W. (2017). Nursing skills mix in European hospitals: Cross-sectional study of the association with mortality, patient ratings, and quality of care. *BMJ Quality & Safety*, 26(7), 559–568. <https://doi.org/10.1136/bmj-jqs-2016-005567> PMID:28626086
- Amarat, M., Akbolat, M., Unal, € O. and G € unes € , Karakaya, B. (2019), “The mediating role of work alienation in the effect of workplace loneliness on nurses’ performance”, *Journal of Nursing Management*, Vol. 27, pp. 553-559.
- Bakker, A., Le Blanc, P. and Schaufeli, W. (2005), “Burnout contagion among intensive care nurses”, *Journal of Advanced Nursing*, Vol. 51, pp. 276-287.
- Barsade, S. (2000), “The ripple effect: emotional contagion in groups”, Working Paper 98, Yale School of Management, Yale University, New Haven, CT.
- Bowles, J. R., Batcheller, J., Adams, J. M., Zimmermann, D., & Pappas, S. (2019). Nursing’s leadership role in advancing professional practice/work environments as part of the quadruple aim. *Nursing Administration Quarterly*, 43(2), 157–163. <https://doi.org/10.1097/NAQ.0000000000000342> PMID:30839452
- Brook, J., Aitken, L., Webb, R., MacLaren, J., & Salmon, D. (2019). Characteristics of successful interventions to reduce turnover and increase retention of early career nurses: A systematic review. *International Journal of Nursing Studies*, 91, 47-59.
- Brown, P., Fraser, K., Wong, C., Muise, M. and Cummings, G. (2013), “Factors influencing intentions to stay and retention of nurse managers: a systematic review”, *Journal of Nursing Management*, Vol. 21, pp. 459-472.
- Brown, R., Wey, H., & Foland, K. (2018). The relationship among change fatigue, resilience, and job satisfaction of hospital staff nurses. *Journal of Nursing Scholarship*, 50(3), 306-313.
- Choi, S. P., Pang, S. M., Cheung, K., and Wong, T. K. (2011). Stabilizing and destabilizing forces in the nursing work environment: a qualitative study on turnover intention. *Int. J. Nurs. Stud.* 48, 1290–1301. doi: 10.1016/j.ijnurstu.2011.03.005
- Coundounaris, D.N., Akuffo, I.N., & Nkulenu, A.O. (2020). Human resource management for Ghanaian nurses: Job satisfaction versus turnover intentions. *Sustainability*, 17(7117), 15.
- Genly, B. (2016). Safety & job burnout. Understanding complex contributing factors. *Professional Safety*, 61(10), 45-49.
- Hayes, L. J., O’Brien-Pallas, L., Duffield, C., Shamian, J., Buchan, J., Hughes, F., et al. (2012). Nurse turnover: a literature review- An update. *Int. J. Nurs. Studies* 49, 887–905.
- Hogan, A., & Roberts, B. (2015). Occupational employment projects to 2024. *Monthly Labor Bureau Review*. U.S. Bureau of Labor Statistics. <https://doi.org/10.21916/mlr.2015.49>
- Hospital Association of Southern California. (2017). Southern California’s health care

- workforce: Challenges, approaches and solutions.
- Hussein, R., Salamonson, Y., Hu, W., & Everett, B. (2019). Clinical supervision and ward orientation predict new graduate nurses' intention to work in critical care: Findings from a prospective observational study. *Australian Critical Care*, 32, 397-402.
- Jackson, D., Firtko, A., and Edenborough, M. (2007). Personal resilience as a strategy for surviving and thriving in the face of workplace adversity: a literature review. *J. Adv. Nurs.* 60, 1–9. doi: 10.1111/j.1365-2648.2007.04412.x
- Jakimowicz, S., Perry, L., & Lewis, J. (2018). Compassion satisfaction and fatigue: A cross-sectional survey of Australian intensive care nurses. *Australian Critical Care*, 31(6), 396-405. <https://doi.org/10.1016/j.aucc.2017.10.003>
- Dewanto, A., & Wardhani, V. (2018). Nurse turnover and perceived causes and consequences: A preliminary study at private hospitals in Indonesia. *BMC Nursing*, 17 (52), p15.
- Ke, Y-T., & Hung, C-H. (2017). Predictors of nurses' intent to continue working at their current hospital. *Nursing Economics*, 35(50), 259-266
- Kwok, N., Hanig, S., Brown, D. and Shen, W. (2018), "How leader role identity influences the process of leader emergence: a social network analysis", *The Leadership Quarterly*, Vol. 29, pp. 648-662.
- Labrague, L.J., Nwafor, C.E., & Tsaras, K. (2020). Influence of toxic and transformational leadership practices on nurses' job satisfaction, job stress, absenteeism and turnover intention: A cross-sectional study. *Journal of Nursing Management*, 28, 1104-1113.
- Laschinger, H.K., Zhu, J., & Read, E. (2016). New nurses' perceptions of professional practice behaviors, quality of care, job satisfaction, and career retention. *Journal of Nursing Management*, 24, 656-665. <https://doi.org/10.1111/jonm.12370>
- Lee, T.S-H., Tzeng, W-C., Chiang, H-H. (2019). Impact of coping strategies on nurses' wellbeing and practice. *Journal of Nursing Scholarship*, 51(2), 195-204
- Lord, R., Brown, D., Harvey, J. and Hall, R. (2001), "Contextual constraints on prototype generation and their multilevel consequences for leadership perceptions", *The Leadership Quarterly*, Vol. 12, pp. 311-338.
- Mbemba, G., Gagnon, M.-P., Pare, G., Cote, J., (2013). Interventions for supporting nurse retention in rural and remote areas: An umbrella review. *Human Resources Health* 11(44).
- Melnyk, B. M., Hrabie, D. P., and Szalacha, L. A. (2013). Relationships among work stress, job satisfaction, mental health, and healthy lifestyle behaviors in new graduate nurses attending the nurse athlete program: a call to action for nursing leaders. *Nurs. Adm. Q.* 37, 278–285. doi: 10.1097/NAQ.0b013e3182 a2f963
- Minamizono, S., Nomura, K., Inoue, Y., Hiraike, H., Tsuchiya, A., & Illing, J. (2019). Gender division of labor, burnout and intention to leave work among young female nurse in Japan: A cross-sectional study. *International Journal of Environmental Research and Public Health*, 16(12), 12p.
- Moisoglou, I., Yfantis, A., Galanis, P., Pispirigou, A., Theoxari, A., Prezerakos, P. (2020). Nurses work environment and patients' quality of care. *International Journal of Caring Sciences*, 13(1), 108-116.
- Nowrouzi, B., Lighfoot, N., Carter, L., Larivere, M., Rukholm, E., and Belanger-Gardner, D. (2015). A qualitative study of the work environment in obstetrical nursing in northeastern Ontario, Canada. *J. Nurs. Educ. Practice* 5, 10–22. doi:10.5430/jnep.v5n7p10
- NSI Nursing Solutions, Inc. (2021). 2020 NSI national health care retention & RN staffing report.
- Nurdiana, N., Hariyati, R. T.S., & Gayatri, D. (2018). Head nurse strategy for increasing nurse retention: A factor analysis. *Enfermeria Clinica*, 29(S2), 560-566.
- O'Donnell, R. (2019). Hospital turnover in 2018: The trend continues. <https://www.hospitalrecruiting.com/blog/5729/hospital-turnover-in-2018-the-trend-continues>

- Norah Muallith Dubays Alrashdi, Amal Majed L Alanazi, Badriah Majed Aqeel Alanezi, Fawzeaha Saadi Almotiri, Sultana Mahali Alroweli, Sana Fayeze Alasmari, Ahmad Mohammed Ahmad Alatidi, Aml Saad Garboh Alanizi, Thamer Ali Sehmi Alshomrani, Samah Farhan Alanazi
- Pangallo, A., Zibarras, L., Lewis, R., and Flaxman, P. (2015). Resilience through the lens of interactionism: a systematic review. *Psychol. Assess.* 27, 1–20. doi: 10.1037/pas0000024
- Putra, A.P., Kusnanto, K., Yuwono, S.R. (2020). Effect of job satisfaction and organizational commitment on nurse retention: A systematic review. *Indonesian Nursing Journal of Education and Clinic*, 5(2), 197-205.
- Raso, R., Fitzpatrick, J., Masick, K., Giordano-Mulligan, M. and Sweeney, C. (2021), “Perceptions of authentic nurse leadership and work environment and the pandemic impact for nurse leaders and clinical nurses”, *Journal of Nursing Administration*, Vol. 51, pp. 257-263.
- Rickard, G., Lenthall, S., Dollard, M., Opie, T., Knight, S., Dunn, S., Walkerman, J., et al. (2012). Organisational intervention to reduce occupational stress and turnover in hospital nurses in the Northern Territory, Australia. *Collegian* 19, 211–221. doi: 10.1016/j.collegn.2012.07.001
- Rivaz, M., Tavakolina, M., Momennasab, M. (2020). Nursing professional practice environment and its relationship with nursing outcomes in intensive care units: a test of the structural equation mode. *Scan J. Caring Science*.
<https://doi.org/10.1111/scs.12877>
- Semachew, A., Belachew, T., Tesfaye, T., & Adinew, Y.M. (2017). Predictors of job satisfaction among nurses working in Ethiopian public hospitals, 2014: Institution-based cross-sectional study. *Human Resources for Health*, 15(31), 8p.
- Sheridan, J. (1992), “Organizational culture and employee retention”, *Academy of Management Journal*, Vol. 35, pp. 1036-1056.
- Spence Laschinger, H. K., & Fida, R. (2015). Linking nurses’ perceptions of patient care quality to job satisfaction: The role of authentic leadership and empowering professional practice environments. *The Journal of Nursing Administration*, 45(5), 276–283.
<https://doi.org/10.1097/NNA.000000000000198PMID:25906136>
- Tang, J.H.C., & Hudson, P. (2019). Evidenced-Based Practice guideline, nurse retention for nurse managers. *Journal of Gerontological Nursing*, 45(11), 12.
- Van den Bulcke, B, Mextaxa, V., Rusinova, K., Reyners, A.K., Rusinova, K., Jensen, H.I., Malmgren, J., Darmon, M., Talmor, D., Meert, A., Cancelliere, L., Zubek, L., Maia, P., Michalsen, A., Kompanje, E., Vlerick, P., Roels, J., Vansteelandt, S., Decruyenaere, J., Benoit, D. (2020). Ethical climate and intention to leave among critical care clinicians: An observational study in 68 intensive care units across Europe and the United States. *Intensive Care Medicine*, 46(1), 46-56.
- Vardaman, J. M., Rogers, B. L., & Marler, L. E. (2018). Retaining nurses in a changing health care environment: The role of job embeddedness and self-efficacy. *Health Care Management Review*, 45(1), 52-59.
<https://doi:10.1097/HMR.0000000000000202>
- Whitehead, P.B., Herbertson, R.K., Hamric, A.B., Epstein, E.G. (2015). Moral distress among healthcare professionals: Report of an institution-wide survey. *Journal of Nursing Scholarship*, 47(2), 117-125.
- Wood, D., Lowman, G.H., Harms, P.D. and Roberts, B.W. (2019), “Exploring the relative importance of normative and distinctive organizational preferences as predictors of work attitudes”, *Journal of Applied Psychology*, Vol. 104, p. 270.
- World Health Organization. (2010). A global survey monitoring progress in nursing and midwifery Available at: WHO, Geneva.
www.who.int/hrh/resources/survey/en/
- Zander, B., Aiken, L.H., Busse, R., Rafferty, A.M., Sermeus, W., & Bruyneel, L. (2016). The state of nursing in the European Union. *Eurohealth* 22(1), 3–6.