The Effects of Nurse Practice Environment and Organizational Justice on Job Embeddedness Among Hospital Nurses

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Purpose: The successful management of nurse turnover has long been a crucial issue for healthcare leaders. Job embeddedness have been described a promising new construct related to employee retention (Choi, J. S., & Kim, 2015; Mitchell, Holtom, Lee, Sablynski, & Erez, 2001). Job embeddedness indicates the degree of an organization member's intention to remain in the organization in connection with his or her job (Mitchell, Holtom, Lee, Sablynski, & Erez, 2001). A growing line of work has indicated that job embeddedness is a direct antecedent both of intent to quit and voluntary turnover and enhanced job embeddedness can decrease turnover intention and, subsequently, actual turnover (Choi, J. S., & Kim, 2015). A few studies focusing on nurse retention have demonstrated that the quality of nurse practice environments is associated with nurse outcome including job satisfaction, burnout, and intention to leave (Klopper, Coetzee, Pretorius, & Bester, 2012; Lacher, De Geest, Denhaerynck, Trede, & Ausserhofer, 2015). In addition, previous studies on social behavior in the workplace suggest a connection between organizational justice and absenteeism, commitment (Chênevert, Jourdain, Cole, & Banville, 2013), intention to stay (Griffin, 2010), and empowerment (Kuokkanen et al., 2014). Although nurse leaders in healthcare organizations have begun to pay attention to job embeddedness to guide nurse retention plan strategies, it has not been well understood which work-related factors (e.g. nurse practice environment and organizational justice) were connected to job embeddedness. This study was conducted to examine how nurses rated their job embeddedness and how nurse practice environment and organizational justice affected job embeddedness along with general characteristics among small and medium sized hospitals nurses in South Korea.

Methods: A cross-sectional study was conducted with a convenience sample of 233 nurses from two small and medium sized hospitals in Ulsan, South Korea. A structured questionnaire that includes a personal factors (age, gender, education), nurse practice environment scale, organizational justice scale, and job embeddedness scale was administered individually to the nurses. Ethics committee approval and institutional permissions were obtained and each participant provided written consent. Data analysis was based on descriptive statistics and hierarchical multiple regression using SPSS 24.0 (IBM, Armonk, NY). Two-tailed P values <.05 were considered significant.

Results: Most of the participants were young (23–34 years of age [74.1%]) and unmarried (65.2%). The majority of nurses had Diploma degrees (77.3%), with 5 years or more of job experience as nurses (61.7%), and were currently working as staff nurses (73.8%). The average job embeddedness was 2.89±0.49 (100-point conversion, 57.8%), and average nurse practice environment was 2.36±0.35 (100-point conversion, 59.0%). The average organizational justice was 2.61±0.58 (100-point conversion, 52.2%). For job embeddedness, the control variable (personal factors including age and marriage) in step 1 was $R^2 = 0.05$. In the second step, nurse practice environment was added and it was found to be significant ($R^2 = 0.43$). We found that the nurse participation in hospital affairs, staffing and resource adequacy, and collegial nurse-physician relations were significantly related to job embeddedness. In the final step, organizational justice was added and it was found to be significant ($R^2 = 0.53$). We found that the staffing and resource adequacy, collegial nurse-physician relations, distributive justice, procedural justice, and age were significantly related to job embeddedness. Hierarchical regression analysis showed that hospital nurses that had higher perceived staffing and resource adequacy and collegial nurse-physician relations, higher organizational and procedural justice, and were older were more likely to have higher job embeddedness scores.

Conclusion: The results of this study demonstrated a significant association between more favorable nurse practice environment and more fair distribution and process and better job embeddedness among small and medium sized hospitals nurses in South Korea. These findings add to the growing research evidence on nurse retention showing the importance of desirable nurse practice environment and organizational justice to improve nurses' job embeddedness. Nurse leaders and hospitals should pay great attention to the nurse practice environment, particularly in relation to staffing and resource adequacy and collegial nurse-physician relations for enhancing nurses' job embeddedness and retaining the nursing workforce in the face of predicted nurse shortages. In addition, the nurse leaders can facilitate nurses' job embeddedness by creating and maintaining an organizational culture of fairness and justice at a high level.

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Job embeddedness, Nurse practice environment and Organizational justice

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Abstract Summary:

This study was to understand more clearly about how work-related factors (e.g. nurse practice environment and organizational justice) affected job embeddedness along with general characteristics in hospitals nurses in South Korea.

Content Outline:

Introduction: The shortage and turnover of RN have been common concerns for hospitals and nurse leaders. Nurse turnover impacts patient outcomes and stresses remaining nurses. Thus it is imperative that nurse leaders in hospitals develop effective nurse retention plan strategy. Job embeddedness has been described a promising new construct related to nurse retention, being assumed to benefit employees and organizations. Job embeddedness has been a direct antecedent both of intent to quit and voluntary turnover and enhanced job embeddedness can decrease turnover intention and, subsequently, actual turnover. Although nurse leaders in healthcare organizations have begun to consider job embeddedness to guide nurse retention plan strategies, it has not been well understood which work-related factors (e.g. nurse practice environment and organizational justice) were connected to job embeddedness. This study is to examine how nurses rated their job embeddedness and how nurse practice environment and organizational justice affected job embeddedness along with general characteristics among small and medium sized hospitals nurses in South Korea.

Body: A cross-sectional study was conducted with a convenience sample of 233 nurses from two hospitals in Ulsan, South Korea. Data analysis was based on descriptive statistics and hierarchical multiple regression using SPSS 24.0 (IBM, Armonk, NY). The average job embeddedness was 2.89 ± 0.49 (100-point conversion, 57.8%) The results indicate that the nurse practice environment and organizational justice were significantly related to job embeddedness. Hospital nurses that had higher perceived staffing and resource adequacy and collegial nurse-physician relations, higher organizational and procedural justice, and were older were more likely to have higher job embeddedness scores.

Conclusion: The finding suggest a significant association between more favorable nurse practice environment and more fair distribution and process and better job embeddedness. For developing effective nurse retention plan strategy, nurse leaders in hospitals should consider the nurse practice environment, particularly in relation to staffing and resource adequacy and collegial nurse-physician relations and organizational culture of justice to enhance nurses' job embeddedness.

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