

# Impact of job satisfaction and job burnout on nurses' turnover intention at X Regional Hospital



CrossMark

Daniyah Fitriyah Puteri<sup>1</sup>, Rizma Adlia Syakurah<sup>2\*</sup>

## ABSTRACT

**Introduction:** As one of Indonesia's largest regional government-owned hospitals, Hospital X faces high nursing staff resignations, with turnover rates surpassing the ideal rate of 4%. Job dissatisfaction and burnout indication contribute to nurses' intention to leave. Consequently, this study analyses job satisfaction and burnout on nurses' turnover intention at X Regional Hospital.

**Methods:** A cross-sectional study was conducted between November 14 and December 14, 2022. Data was obtained through Google Forms and distributed to 293 nurses with a total sampling technique. Data was analyzed using Structural Equation Modelling (SEM) with the assistance of SmartPLS 4 software.

**Results:** As many as 274 respondents were declared willing to participate in this study. The job satisfaction has an insignificant negative influence on nurses' turnover intention. However, job satisfaction has a significant negative relationship with job burnout, and job burnout has a significant positive effect on nurse turnover intention and a significant adverse effect on job satisfaction. Demographic factors also significantly influence nurses' job satisfaction and job burnout. Then, in the indirect effect test, job burnout mediates the relationship between job satisfaction and nurses' intention to leave work. At the same time, demographics affect nurses' intention to leave work through their level of job burnout.

**Conclusion:** However, the results indicate no significant influence of job burnout mediated by job satisfaction and demographic factors mediated by job satisfaction on turnover intention. Hence, HR management should support and implement proactive measures, including revising the SOP for nurse schedule exchanges. Additionally, counseling programs should be considered to address low personal achievement issues among nurses.

**Keywords:** Demographic; job satisfaction; job burnout; nurse; turnover intention.

**Cite This Article:** Puteri, D.F., Syakurah, R.A. 2024. Impact of job satisfaction and job burnout on nurses' turnover intention at X Regional Hospital. *Journal of Community Empowerment for Health* 7(1): 47-56. DOI: 10.22146/jcoemph.87883

<sup>1</sup> Student of Public Health Science, Faculty of Public Health, Universitas Sriwijaya, Indralaya, Indonesia;

<sup>2</sup> Public Health Sciences, Faculty of Public Health, Universitas Sriwijaya, Indralaya, Indonesia.

\*Corresponding author:

Rizma Adlia Syakurah;  
Public Health Sciences, Faculty of Public Health, Universitas Sriwijaya, Indralaya, Indonesia;  
[rizma.syakurah@gmail.com](mailto:rizma.syakurah@gmail.com)

Submitted: 2023-08-10

Revised: 2024-01-03

Accepted: 2024-01-25

## INTRODUCTION

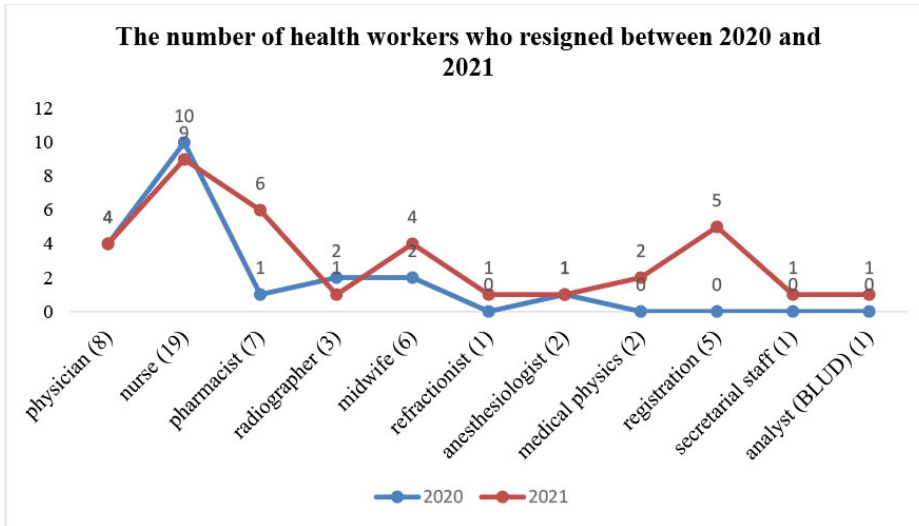
The fulfillment of health workers in Indonesia should have been achieved; however, the issue arises when hospitals face a shortage of nurses due to their uneven distribution throughout the country. According to the Decree of the Coordinating Minister for People's Welfare Number 54 of 2013, concerning the Target Standard for Human Resources for Health (HRH) Requirement Ratio, the projected ratio for 2025 is 200 nurses per 100,000 population.<sup>1</sup> However, in South Sumatra Province, there were 16,194 nurses in 2022, of which 30% were deployed in Palembang City.<sup>2</sup> This data indicates an insufficiency of nurses in Palembang to serve the entire population adequately. Nursing personnel are crucial in improving health status and have been regulated by law as essential contributors

to hospital healthcare services.<sup>3,4</sup>

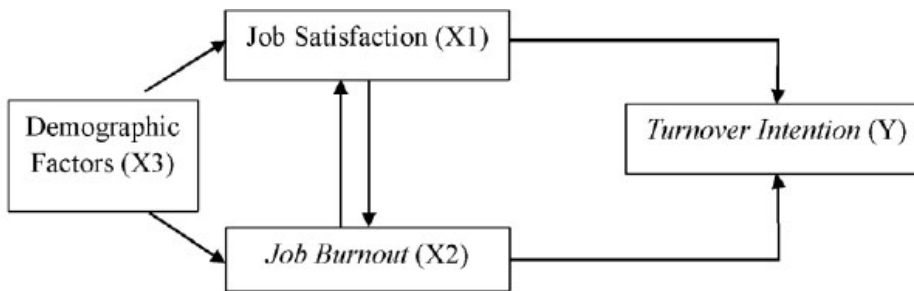
Nurses, being more numerous than other health workers, serve as the backbone of healthcare facilities. Their primary role as caregivers involves active engagement in nursing care to patients around the clock.<sup>3</sup> The availability of well-trained and skilled nursing staff is pivotal for the success of hospitals in delivering health services, thereby enhancing the quality of life and satisfaction of healthcare recipients. However, various problems and changes in the nursing service system have emerged due to insufficient nurses to cater to patient needs.<sup>5</sup> Alterations in nurses' working conditions have increased turnover intention within healthcare organizations, influenced by prolonged exposure to work-related stress (burnout) and job dissatisfaction. Turnover intention represents a conscious decision to leave the organization and has been premeditated.<sup>6</sup>

In general, the presence of turnover intention serves as an early indication of actual turnover.<sup>7</sup>

Hospital X commenced its official operations in June 2018 and was one of the designated referral hospitals for COVID-19 and one of Indonesia's largest regional government-owned hospitals. Unfortunately, this regional hospital experienced a significant number of resigned nurses. High nurse turnover rates have been observed from 2021 to 2022 (as of July), amounting to 13 people, with the turnover rate in 2021 amount 5.7%. This surpasses the ideal turnover rate, according to Mayawati (2021), which is between 3%-6% per year in sectors such as nursing that are required to provide high service levels.<sup>8</sup> This indicates the necessity for the hospital to anticipate, given its proximity to the ideal turnover rate. A high turnover rate may suggest that the number



**Figure 1.** The number of health workers who resigned between 2020 and 2021.



**Figure 2.** The correlation initial model on the variables.

The hypotheses are as follows:

- H<sub>1</sub>: Job satisfaction has a significant negative effect on turnover intention.
- H<sub>2</sub>: Job burnout has a significant positive effect on turnover intention.
- H<sub>3</sub>: Job burnout has a negative effect on job satisfaction.
- H<sub>4</sub>: Job satisfaction has a negative influence on job burnout.
- H<sub>5</sub>: Demographic factors influence job satisfaction.
- H<sub>6</sub>: Demographic factors influence job burnout.
- H<sub>7</sub>: Job satisfaction influences turnover intention, mediated by job burnout.
- H<sub>8</sub>: Job burnout influences turnover intention, mediated by job satisfaction.
- H<sub>9</sub>: Demographic factors influence turnover intention, mediated by job satisfaction.
- H<sub>10</sub>: Demographic factors influence turnover intention, mediated by job burnout.

of nurses departing from the hospital within a specified timeframe exceeds what is generally considered normal. Based on the following graph, the turnover rate of nurses is higher than that of other health workers (figure 1):

High nurse turnover significantly impacts hospital performance by losing experienced and competent nurses due to frequent turnover.<sup>9</sup> It will necessitate increased allocation of resources for recruiting and training new nurses. If left unresolved, this issue can indirectly affect the quality of patient care. Turnover among healthcare workers,

particularly nurses, can be influenced by various internal and external factors. Job dissatisfaction is generally the most significant factor contributing to turnover.<sup>7,10,11</sup> Job satisfaction is crucial in all work processes and benefits for the hospital. Satisfied nurses are more productive and consistently deliver high-quality performance, leading to greater satisfaction among healthcare service users.

Furthermore, job burnout poses another concern for nurses in Indonesia. A survey by the Indonesian National Nurses Association (PPNI) 2007 revealed

that approximately 50.9% of nurses in four provinces experienced complaints related to work stress, inadequate rest, heavy workloads, frequent fatigue, time constraints, and insufficient salaries without adequate incentives.<sup>12</sup> Unaddressed work stress among nurses can lead to job dissatisfaction and burnout.<sup>13</sup> Previous research demonstrated a significant association between burnout syndrome and turnover intention.<sup>14</sup>

This study is crucial due to the scarcity of prior research exploring the correlation between job satisfaction, job burnout, and turnover intention among nurses in Palembang hospitals. A decline in nurses' job satisfaction could potentially impact the quality of patient care, while structural empowerment among nurses is closely linked to patient safety. Hence, this study aims to analyze the impact of job satisfaction and burnout on nurses' turnover intention, specifically at X Regional Hospital in South Sumatra Province. The findings are expected to uncover critical factors influencing nurses' turnover intention and provide recommendations for enhancing employment quality and healthcare standards.

## METHOD

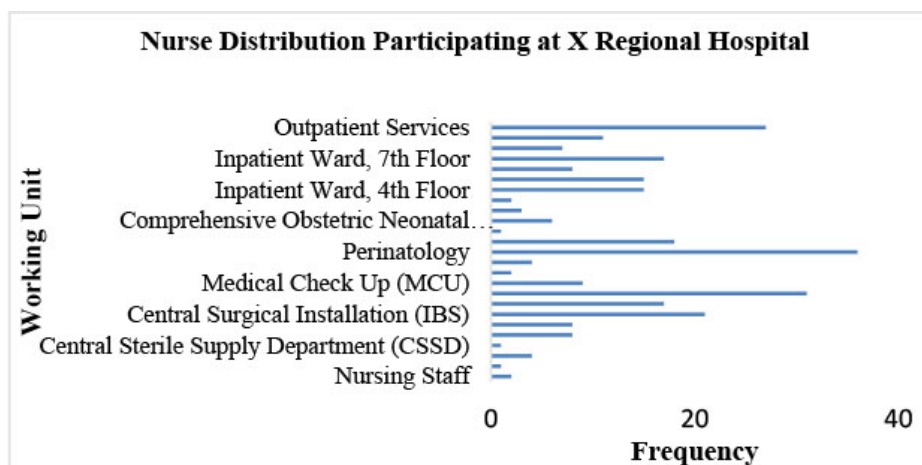
This study utilizes a quantitative analytical design with a cross-sectional approach. The study population includes all 293 nurses employed at X Regional Hospital in South Sumatra Province, identified through questionnaires administered to the Human Resources Management staff. The total sampling method was utilized; however, 19 potential respondents expressed their unwillingness to participate in the study, resulting in a research sample size of 274 respondents.

The initial model of correlation between variables can be seen in Figure 2.

Data were collected between November 14 and December 14, 2022, utilizing an online survey administered via Google Forms and distributed to the sample. The research instrument used a questionnaire with a Likert Scale consisting of respondent characteristics of job satisfaction using the McCloskey/Mueller Questionnaire (1990)<sup>15</sup>, adapted to Indonesia's language<sup>16</sup>. The job burnout

**Table 1.** Question Items of Questionnaire

Variable	Question Items	Code	Item
Demographic (Respondents Characteristic)	Age	US	
	Gender	JK	
	Residential Distance	JTT	
	Education Level	TP	
	Employment status	SK	
	Work Period	MK	
	Work Unit	UK	
	Marital Status	SP	
Job Satisfaction (McCloskey/Mueller)	Control and responsibility	CR	1, 2, 3, 4, 5
	Scheduling (Shifting schedule)	SC	6, 7, 8, 9, 10, 11
	Interaction Opportunities (Interaction in the work environment)	IO	12, 13, 14, 15
	Professional Opportunities	PO	16, 17, 18, 19
	Extrinsic (External rewards)	EX	20, 21, 22
	Coworkers (Relationship with colleagues)	CW	23, 24
	Praise and recognition	PR	25, 26, 27, 28
Job (Maslach Burnout Inventory- Human Services Survey (MBI-HSS))	Balance of family and work	BFW	29, 30, 31
	Emotional Exhausted	EE	1, 2, 3, 4, 5, 6, 7, 8, 9
	Depersonalization	DP	10, 11, 12, 13, 14
Turnover Intention (Turnover Intention Scale)	Personal Accomplishment	PA	15, 16, 17, 18, 19, 20, 21, 22
	Thinking of Quitting	TQ	1, 2
	Intention to Leave	IL	3, 4
	Job Search	JS	5, 6

**Figure 3.** Nurse Distribution Participating at X Regional Hospital.

questionnaire from Maslach Burnout Inventory-Human Services Survey (MBI-HSS)<sup>17</sup>, and turnover intention that has been adapted to Bahasa<sup>12,19</sup>, which had been tested for reliability 0.977, 0.918, 0.910 and validity with score 0.544-0.922, 0.305-0.810, 0.762-0.927, respectively. The question items of the questionnaire are shown in Table 1.

The level of job satisfaction (X1) is divided into three categories, namely “good” (76 – 100%), “enough” (56 –

75%), and “less” ( $\leq 55\%$ ).<sup>16</sup> The level of job burnout (X2) are divided into three categories for each indicator, namely “mild” ( $EE = \leq 16$ ,  $D.P. = \leq 6$ ,  $PA = \geq 39$ ), “moderate” ( $EE = 17 - 26$ ,  $DP = 7 - 12$ ,  $PA = 38 - 32$ ) and “severe” ( $EE = \geq 27$ ,  $D.P. = \geq 13$ ,  $PA = \leq 31$ ). Then the overall frequency of job burnout levels is categorized into two, namely “not burnout” (0 - 35) and “burnout” (36 - > 65).<sup>18,19</sup> The level of turnover intention (Y) is divided into two categories, namely the “high” category

( $\geq \text{Mean}$ ) and “low” ( $< \text{Mean}$ ). Then, the frequency of turnover intention as a whole is categorized into three categories, namely “high” (0-10), “moderate” (11-20), and “low” (21-30).<sup>12</sup> We analyzed the data descriptively with Ms. Excel and SPSS 25, and hypothesis testing with Structural Equation Modelling (SEM) through SmartPLS 4 application with two stages of evaluation, namely Outer Model (Measurement Model) and Inner Model (Structural Model).

Research ethics issues, including informed consent, anonymity, and confidentiality, were handled carefully during the study. This study was approved by the Faculty of Public Health Ethics Committee, Sriwijaya University, Number 354/UN9.FKM/TU.KKE/2022.

## RESULT

### Sample Characteristics

The majority of nurses were 26-35 years old (66.4%), female (76.6%), married (65.7%), residing as far as 2-10 KM (65.7%), with the last educational is D III Nursing, (42.3%), as contract workers (42.3%), with work period for >3 years (42.3%) (table 2) and work in the Perinatology unit (13.1%)

**Table 2. Characteristics of Research Informants**

No	Characteristics of Respondents	n	%
1	Age		
	<25 Years	51	18.6
	26 – 35 Years	182	66.4
	36 – 45 Years	39	14.2
2	46 – 55 Years	2	0.7
	Gender		
3	Male	64	23.4
	Female	210	76.6
3	Marital Status		
	Married	180	65.7
4	Not married	94	34.3
	Residential Distance		
	<2KM	44	16.1
5	2 – 10KM	124	45.3
	> 10KM	106	38.7
5	Education Level		
	Diploma (D III)	180	65.7
	Applied Bachelor’s Degree (DIV)	3	1.1
	Bachelor’s/Ners	86	31.4
6	Master of Nursing/Health	5	1.8
	Employment Status		
	Civil servant	105	38.3
	BLUD Non PNS	53	19.3
7	Contract worker	116	42.3
	Work Period		
	< 6 Months	21	7.7
	6 Months – 1 Year	79	28.8
8	1 – 3 Years	58	21.2
	>3 Years	116	42.3

**Table 3. Respondents’ Job Satisfaction, Job Burnout, and Turnover Intention Level**

Indicator	Job Satisfaction Level		
	Good	Enough	Less
CR	121 (44.2%)	14 (52.6%)	9 (3.3%)
SC	72 (26.3%)	143 (52.2%)	59 (21.5%)
IO	122 (44.5%)	149 (54.4%)	3 (1.1%)
PO	79 (28.8%)	185 (67.5%)	10 (3.6%)
EX	61 (22.3%)	177 (64.6%)	36 (13.1%)
CW	99 (36.1%)	170 (62.0%)	5 (1.8%)
PR	86 (31.4%)	178 (65.0%)	10 (3.6%)
BFW	70 (25.5%)	185 (67.5%)	19 (6.9%)
Indicator	Job Burnout Level		
	Mild	Moderate	Severe
EE	177 (43.0%)	57 (13.8%)	40 (9.7%)
DP	225 (54.6%)	27 (6.6%)	22 (5.3%)
PA	216 (52.4%)	13 (3.2%)	45 (10.9%)
Indicator	Turnover Intention Level		
	High	Low	
TQ	31 (11.3%)	243 (88.7%)	
IL	32 (11.7%)	242 (88.3%)	
JS	34 (12.4%)	240 (87.6%)	

(Figure 3).

The majority of respondents fell into the “good” category (41.97%) and the “enough” category (54.74%), implying that most hold a positive outlook toward job satisfaction. A significant proportion of them experienced burnout in their work (81.02%) and exhibited a low intention to leave their job (72.26%). However, it is crucial to acknowledge that the reported turnover intention rates range from 2.92% to 24.81%. According to Gillies, this indicates higher turnover intention rates among the respondents compared to the standard turnover intention among hospital nurses, which typically falls within 5% to 10%.<sup>7</sup>

At the level of job satisfaction, the majority of respondents have a good level of job satisfaction on the IO indicator (44.5%) and CR (44.2%) and are quite satisfied with the BFW and PO indicators (67.5%). Meanwhile, 21.5% of respondents felt dissatisfied with the SC indicator. Then, at the level of job burnout, the majority of respondents have mild job burnout on the DP indicator (54.6%) and moderate job burnout on the EE indicator (13.8%). Meanwhile, 10.9% of respondents felt severe job burnout in the PA indicator. On the other hand, at the level of turnover intention, the majority of respondents have low turnover intention in the TQ indicator (88.7%). Meanwhile, 12.4% of respondents have high turnover intention on the JS indicator (table 3).

**Reflective Model Measurement**

In the reflective outer model measurement, which is evaluated by testing construct reliability (Composite Reliability and Cronbach’s Alpha), convergent validity (outer loadings and Average Variance Extracted (AVE)), and discriminant validity (Fornell-Larcker Criterion). The acceptable limit for composite reliability is the same as any measure of reliability, including Cronbach’s Alpha, with a value >0.7. Then, the expected value to meet convergent validity is >0.7. However, the value of outer loadings >0.5 can be tolerated to maintain this indicator by considering the increase in the AVE value and composite reliability. The AVE value is expected to meet the minimum good criteria, namely >0.5. In discriminant

**Table 4. The Results of Reflective Model Measurement Based on Construct Reliability and Convergent Validity**

Latent Variable	Indicator/item	Outer Loadings	AVE	Cronbach's Alpha	Composite Reliability
Job Satisfaction	CR1 (control setting)	0.722	0.503	0.964	0.967
	CR2 (career advance)	0.644			
	CR3 (responsibility)	0.741			
	CR4 (control conditions)	0.776			
	CR5 (decision making)	0.759			
	SC1 (work hours)	0.637			
	SC2 (schedule flexibility)	0.657			
	SC4 (weekends off)	0.666			
	SC5 (flexibility weekends)	0.624			
	SC6 (weekend pay)	0.674			
	IO1 (care delivery)	0.704			
	IO2 (work social contact)	0.684			
	IO3 (social contact outside)	0.712			
	IO4 (interact disciplines)	0.711			
	PO1 (interact faculty)	0.787			
	PO2 (committee)	0.774			
	PO3 (research)	0.747			
	PO4 (publish)	0.728			
	EX2 (vacation)	0.683			
	EX3 (benefits)	0.601			
	CW1 (peers)	0.690			
	CW2 (physicians)	0.690			
	PR1 (supervision)	0.748			
	PR2 (superior recognition)	0.758			
	PR3 (peer recognition)	0.770			
	PR4 (feedback)	0.772			
	BFW1 (part-time)	0.706			
	BFW2 (maternity leave)	0.658			
BFW3 (child care)	0.696				
Job Burnout	EE1 (I feel emotionally drained from my work)	0.647	0.599	0.947	0.954
	EE2 (I feel used up at the end of the workday)	0.616			
	EE3 (I feel fatigued when I get up in the morning and have to face another day on the job)	0.695			
	EE4 (working with people all day is really a strain for me)	0.846			
	EE5 (I feel burnout from my work)	0.849			
	EE6 (I feel frustrated by my job)	0.860			
	EE7 (I feel I am working too hard on my job)	0.838			
	EE8 (working with people directly puts too much stress on me)	0.886			
	EE9 (I feel like I am at the end of my rope)	0.848			
	DP1 (I have become more callous toward people since I took this job)	0.744			
	DP2 (I worry this job is hardening me emotionally)	0.791			
	DP3 (I feel I treat some recipients as if they were impersonal "object")	0.752			
	DP4 (I do not really care what happens to some recipients)	0.663			
	DP5 (I feel recipients blame me for some of their problems)	0.739			
Turnover Intention	TQ1 (I will be quitting my job for the next year)	0.922	0.795	0.948	0.959
	TQ2 (I am thinking about quitting my job)	0.945			
	IL1 (I will quit my job this year)	0.920			
	IL2 (I will quit my job but not now)	0.879			
	JS1 (I have applied for another job)	0.872			
	JS2 (I am actively looking for job vacancies)	0.804			

validity, any latent variable with the square root of AVE must be higher than its correlation with other latent variables.

Based on Table 4, all latent variables demonstrate high composite reliability values: 0.967 for job satisfaction, 0.954 for job burnout, and 0.959 for turnover intention. The Cronbach's Alpha values also indicate high reliability: 0.964 for job satisfaction, 0.947 for job burnout, and 0.948 for turnover intention. Thus, all latent variables are considered reliable based on both tests.

Among all the indicators, ten indicators must be eliminated due to not being able to increase the AVE value, namely PA1, PA2, PA3, PA4, PA5, PA6, PA7, PA8 are all <0.5, and indicators EX1 (0.597) and SC3 (0.602) (table 4).

The Average Variance Extracted (AVE) value in the reflective model has shown that all latent variables have a value of > 0.5, which means that 50.3% of the latent variables of job satisfaction, 59.9% of the latent variables of Job Burnout, and 79.5% of the latent variables of turnover

intention have absorbed information on indicators. All latent variables are declared to have met the minimum criteria of the AVE value (Table 5).

**Formative Model Measurement**

The formative outer model measurement was evaluated using Outer Weights and Collinearity Statistics with Variance Inflation Factor (VIF). VIF ≥5 indicates a likelihood of critical collinearity problems, VIF = 3–5 suggests collinearity problems that are usually not critical, and VIF <3 indicates no collinearity issues.

Valid indicators (SK, TP, UK, and US) had p-values <0.5, while the others were removed due to insignificant after re-evaluating the outer loadings. VIF values for demographic latent variable indicators were below the critical range (VIF <5 or VIF <3), indicating no collinearity issues (table 6).

**Table 5. Discriminant Validity Based on Fornell-Larcker**

Variable	Job Burnout ( $\sqrt{AVE_x}$ )	Job satisfaction ( $\sqrt{AVE_x}$ )	Turnover Intention ( $\sqrt{AVE_x}$ )
Job Burnout	0.774		
Job satisfaction	-0.323	0.709	
Turnover Intention	0.445	-0.176	0.892

**Table 6. Demographic Construct Evaluation Based on Outer Weights and VIF**

	P-Values Beginning	Information	Outer Loading	Information	Final P-Values	VIF
JK → Demographics	0.414	Invalid	0.365	Not fulfilled	-	
JTT→Demographics	0.400	Invalid	0.089	Not fulfilled	-	
MK→Demographics	0.108	Invalid	0.096	Not fulfilled	-	
SK→Demographics	0.018	Valid	-	-	0.004	1.115
SP →Demographics	0.319	Invalid	0.187	Not fulfilled	-	
TP →Demographics	0.018	Valid	-	-	0.011	1.073
UK→Demographics	0.006	Valid	-	-	0.003	1.044
US→Demographics	0.008	Valid	-	-	0.005	1.066

**Table 7. Evaluation Inner Model Based on Path Coefficients**

Hypothesis		Original Sample(O)	Sample Means(M)	Standard Deviations (STDEV)	T Statistics ( O/STDEV )	P Values	Accepted
H1	Job Satisfaction → Turnover Intention	-0.036	-0.043	0.065	0.548	0.292	No
H2	Job Burnout→ Turnover Intention	0.434	0.433	0.087	4,973	0.000	Yes
H3	Job Burnout→ Job Satisfaction	-0.314	-0.323	0.069	4,578	0.000	Yes
H4	Job Satisfaction → Job Burnout	-0.293	-0.299	0.067	4,371	0.000	Yes
H5	Demographics → Job Satisfaction	0.128	0.149	0.075	1,704	0.044	Yes
H6	Demographics → Job Burnout	-0.240	-0.248	0.066	3,627	0.000	Yes

**Table 8. Evaluation of Inner Model Based on Specific Indirect Effects**

Hypothesis		Original Sample (O)	Sample Means (M)	Standard Deviations (STDEV)	T Statistics ( O/STDEV )	P Values	Accepted
H7	Job Satisfaction → Job Burnout → Turnover Intention	-0.127	-0.128	0.032	3,962	0.000	Yes
H8	Job Burnout→ Job Satisfaction→ Turnover Intention	0.013	0.018	0.023	0.563	0.287	No
H9	Demographics → Job Satisfaction → Turnover Intention	-0.005	-0.007	0.012	0.394	0.347	No
H10	Demographics → Job Burnout → Turnover Intention	-0.104	-0.108	0.039	2,669	0.004	Yes

**Table 9. Model Based Quality Evaluation F-Square**

	F-Square	Information
Demographics → Job Burnout	0.084	Small
Demographics → Job satisfaction	0.017	Small
Job Burnout→ Job Satisfaction	0.102	Small
Job Burnout→ Turnover Intention	0.208	Moderate
Job Satisfaction → Job Burnout	0.101	Small
Job Satisfaction → Turnover Intention	0.002	Small

intention (P-Values = 0.004, t = 2.669).

Structural Equation Modeling (SEM) cannot analyze in two directions simultaneously. Therefore, in this study, two analyses were conducted with the aim of fulfilling the conceptual framework and examining the hypothesis, specifically the influence between job satisfaction and job burnout variables.

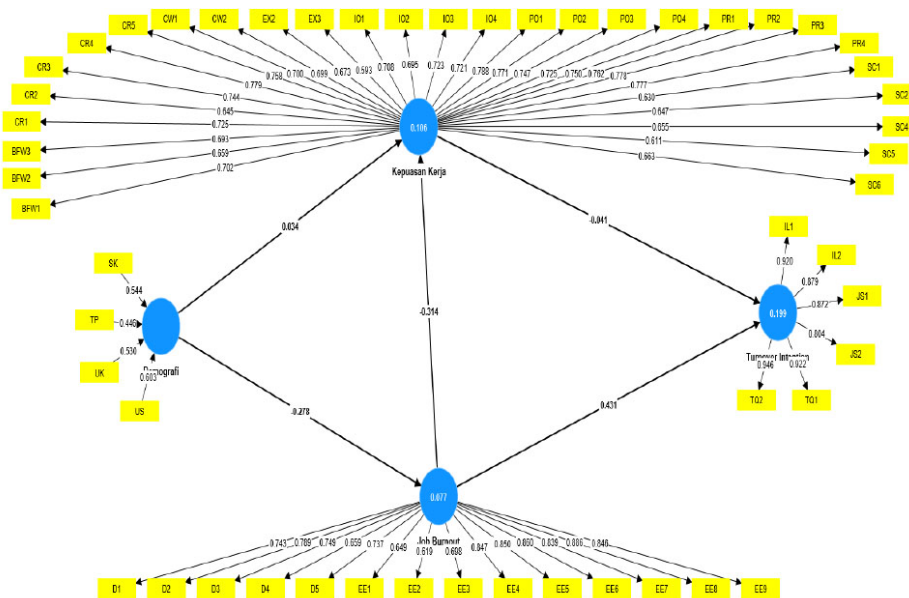
Furthermore, the structural model is tested by examining the goodness of fit test results based on the coefficient of determination R<sup>2</sup>. The R<sup>2</sup> values for job burnout, satisfaction, and turnover intention are 0.161, 0.016, and 0.200, respectively. This indicates that 16% of the variance in job burnout is explained by the independent variables (demographic and job satisfaction variables). In comparison, only 1% of the variance in job satisfaction is explained by the independent variables (demographic and job burnout variables). Furthermore, 20% of the variance is explained by the independent variables (demographic variables, job satisfaction, and job burnout) for turnover intention.

The results of Effect Size (F-Square) indicate that demography has a negligible effect on job burnout (0.084), a small effect on job satisfaction (0.017), and a negligible effect on turnover intention (0.002). Additionally, job burnout has a negligible effect on job satisfaction (0.102), and job satisfaction has a negligible effect on turnover intention (0.002). However, job burnout moderately affects turnover intention (0.208) (table 9).

The Q-square result is considered to assess the goodness of fit. A higher Q-square value indicates a better model fit with the data. Using the formula:  $Q^2 = 1 - (1 - R^2)(1 - R^2)(1 - R^2)$ , the Q<sup>2</sup> have the result is 0.064 (Q<sup>2</sup>> 0). It can be stated that the model of the influence of job satisfaction and job burnout is relevant for the prediction of turnover intention. The goodness of fit is 0.090 (SRMR = 0.090 < 0.1), which means that the model is fit and has a good fit.

**DISCUSSION**

The study found that nurses were dissatisfied with scheduling, in line with earlier research.<sup>20,21</sup> Indonesia's nurse scheduling, largely manual and based on experience, is seen as inefficient and prone



**Figure 4.** The Structural Equation Modeling (SEM) of job satisfaction and job burnout variables

**Inner Model Evaluation (Structural Model Test)**

Table 7 shows the results of the path coefficients analysis for the inner model evaluation. The significance values of the path coefficients confirm the hypotheses (hypothesis 1 to hypothesis 6), where significance is determined by a T statistic > 1.96 or p-values < 0.05.

The evaluation based on path coefficients shows that job satisfaction has no significant effect on turnover intention (p-values = 0.292, t = 0.548). In contrast, job burnout significantly and positively influences turnover intention (p-values = 0.000, t = 4.973) and job satisfaction (p-values = 0.000, t = 4.578). Additionally, job satisfaction significantly positively impacts job burnout (p-values = 0.000, t = 4.371). Moreover, demographic variables significantly affect job satisfaction (p-values = 0.044, t = 1.704) and job burnout (p-values = 0.000, t = 3.627).

**Specific Indirect Effects (Analysis of Indirect Influence of Mediation Variables)**

Table 8 shows the inner model evaluation's specific indirect effects analysis results. The significance values of the path coefficients, indicating the indirect influence between variables through the mediating variable, align with hypotheses 7 to 10. The significance threshold remains the same for the path coefficients analysis: T statistic > 1.96 or p-values < 0.05.

Based on the evaluation of the inner model using specific indirect effects, it was found that the job burnout variable significantly mediates the effect between job satisfaction and turnover intention (P-Values = 0.000, t = 3.962). However, job satisfaction does not significantly mediate the effect between job burnout and turnover intention (P-Values = 0.287, t = 0.563) and between demography and turnover intention (P-Values = 0.347, t = 0.394). On the other hand, the job burnout variable significantly mediates the effect between demography and turnover

to causing conflicts due to subjective preferences.<sup>22,23</sup> Unlike some countries,<sup>25</sup> Indonesia lacks state laws regulating nurses' working time and breaks. Despite similar working hours, considering nurse-to-patient ratios in scheduling is crucial to prevent excessive workload.<sup>26-29</sup> Overall, effective scheduling is crucial for boosting nurses' job satisfaction.<sup>30-32</sup>

Severe job burnout makes nurses feel incompetent and affects their motivation and productivity.<sup>33</sup> It influences their desire to leave their jobs, reflected in high Job Search scores. Turnover intention, influenced by job satisfaction and ease of finding new job prospects, is affected by business activity and available opportunities.<sup>11</sup> Job satisfaction indirectly impacts turnover intention, contrary to some earlier studies that suggest the need for a mediating variable.<sup>6,7,34</sup>

Job satisfaction has a limited impact on turnover intention, as employees opt to remain in their current roles due to the challenges in securing new ones.<sup>35</sup> This aligns with previous research indicating that job satisfaction is influenced by personal life and family, factors contributing to decisions regarding job dissatisfaction and quitting.<sup>36</sup> Employees may prioritize factors in their work environment over job satisfaction.<sup>37</sup>

Job burnout significantly and positively affects turnover intention, signaling that higher burnout increases turnover intention. Job fatigue directly affects turnover intention in this study, supporting earlier findings.<sup>38,39</sup> Burnout is one of the main reasons people consider quitting their professions, as higher burnout indicators increase turnover intention.<sup>14,39</sup> This study attributes severe job burnout to personal achievement. Job search (JS) is one of three indications of high turnover intention, revealing that nurses at X Regional Hospital, South Sumatra Province, feel burnout about themselves, life, and work. These signs suggest that nurses may contemplate leaving their jobs and applying elsewhere.

As job burnout increases, job satisfaction decreases, and this relationship is evident among Indonesian hospital nurses.<sup>38,40</sup> Personal accomplishment contributes most to burnout, while scheduling is the least satisfying aspect.

Managing job-related tiredness is crucial to boosting job satisfaction and combat feelings of low accomplishment. High workload and constant readiness in nursing can lead to burnout and reduced satisfaction. Different work schedules can affect nurses' fatigue levels.<sup>41</sup>

Demographic factors like age, education, work unit, and employment status affect job satisfaction among nurses. According to the previous study, early adulthood groups (26-35 years old) tend to be satisfied with their jobs.<sup>42</sup> Employees' age affects job happiness, and higher qualifications often mean higher job satisfaction, possibly due to better pay. A prior study found that higher-educated nurses are happier at work.<sup>43</sup> Factors like staffing, patient workload, stress, and work environment influence job satisfaction and burnout among nurses.<sup>44</sup> Positive practice environments boost inpatient nurses' job happiness.<sup>43</sup>

Moreover, the higher the level of demographics (age, employment status, education level, and work unit) and the lower the job burnout levels in this study were consistent with previous research.<sup>45,39,19</sup> Burnout moderated the relationship between job satisfaction and turnover intention, suggesting that lower job satisfaction and high burnout contribute to increasing turnover intention.<sup>38,14</sup> Poor job recognition, long hours, a difficult task, low personal values, and poor organizational management all contribute to turnover intention.<sup>46</sup> Work schedule dissatisfaction may also cause nurses to explore other possibilities

Job burnout significantly influences turnover intention, mediated by job satisfaction. However, in this study, job satisfaction does not significantly mediate the relationship between job burnout and turnover intention, which contrasts with previous research.<sup>47,48</sup> Burnout, resulting from physical and mental exhaustion, impacts job satisfaction, performance, and turnover intention.<sup>14</sup> Conversely, increased job burnout among nurses leads to decreased job satisfaction, increasing turnover intention.<sup>49</sup> A positive work environment helps nurses remain satisfied despite dissatisfaction with work schedules. Addressing these issues requires support from colleagues, supervisors,

and HR management to reduce burnout and dissatisfaction, ultimately lowering turnover intention.

This study found no correlation between demographic factors and turnover intention via job satisfaction, contrary to previous studies that linked age, marital status, and service length.<sup>50</sup> More research is needed to retain nurses, especially early in their careers, considering their perspectives. Gender, education, and work attributes, including job position, clinical experience, and work unit, affect job satisfaction and job switching (turnover intention).<sup>51</sup>

Most nurses reported high job satisfaction despite dissatisfaction with work schedules, which did not affect their resignation. The study found that job stress caused burnout in younger, contract-employed nurses with diplomas, leading to dissatisfaction and turnover.<sup>52,39</sup> The study stresses that demographics, job stress, work environment, and job satisfaction affect nurses' propensity to leave hospitals, supporting prior research on burnout and turnover.<sup>53-55,39</sup>

Despite its valuable implications, the study's limitations include incomplete questionnaire distribution (through the Head of the Room), leading to a 93.5% target sample reach, and prolonged data collection. Additionally, biased data may arise due to many questionnaire items and nurses' busy schedules, as responses are not directly monitored.

## CONCLUSION

This study found that nurses' job satisfaction in X Regional Hospital in South Sumatra Province did not significantly affect nurses' turnover intention. However, job satisfaction is related to nurses' job burnout, and the relationship is negative. In other words, the higher the level of job satisfaction, the lower the level of job burnout, and vice versa. Job burnout also had a significant positive impact on nurses' turnover intention and a significant negative impact on nurses' job satisfaction.

Research indicates that demographic factors in nurses can influence how satisfied or fatigued they are at work. When considering nurses' desire to move, job burnout became a factor



that mediated the relationship between job satisfaction and intention to leave. Although demographics also play a role in influencing nurses' intention to leave through job burnout, the results showed that there was no significant effect of job burnout mediated by job satisfaction, as well as demographic factors mediated by job satisfaction on nurses' intention to leave.

## ACKNOWLEDGMENT

The researcher would like to thank the Director of X Regional Hospital, South Sumatera Province, all staff, and participants in this study.

## CONFLICT OF INTERESTS

The authors declare that there are no conflicts of interest in this research.

## RESEARCH FUNDING

This study did not receive specific grants from funding agencies in the public sector, commercial, or non-profit section.

## AUTHOR CONTRIBUTION

DFP and RAS are responsible for the conception and design of the study. DFP performed data collection, analysis, and drafting. RAS performed data interpretation and manuscript review. DFP and RAS did critical revision and final approval of the version to be published.

## REFERENCES

- Direktorat Jenderal Tenaga Kesehatan. Rencana Kinerja Tahunan Direktorat Jenderal Tenaga Kesehatan. 2022; 38.
- BPS Provinsi Sumatera Selatan. Jumlah Tenaga Kesehatan Menurut Kabupaten/Kota (Orang), 2020-2022. *BPS Provinsi Sumatera Selatan*.
- Friandani WJ. Peran Perawat di Masa Pandemi Covid-19 – Rumah Sakit UNS. *Rumah Sakit UNS*, <https://rs.uns.ac.id/peran-perawat-di-masa-pandemi-covid-19/> (2021, accessed 8 October 2022).
- Suroso S, Hariyati RTS, Novieastari E. Pelayanan Keperawatan Prima Berbasis Budaya Berpengaruh terhadap Tingkat Kepuasan Pasien di Rumah Sakit. *J Keperawatan Indones* 2015; 18: 38–44.
- Agustin I, Amin M, Yunike J, et al. QNWL (Quality of Nurse Work Life) Pada Masa Pandemi Covid-19 Pengaruhnya Terhadap Turnover Perawat. *J Kesehat Poltekkes Palembang* 2022; 17: 93–104.
- Mahdi AF, Zin MZM, Nor MRM, et al. The Relationship Between Job Satisfaction and Turnover Intention. *Am J Appl Sci* 2012; 9: 1518–1526.
- Mardiana I, Hubeis AVS, Panjaitan NK. Hubungan Kepuasan Kerja dengan Turnover Intentions pada Perawat Rumah Sakit Dhuafa. *Manaj IKM J Manaj Pengemb Ind Kecil Menengah* 2014; 9: 119–130.
- Mayawati L. Pengaruh Kepuasan Kerja dan Job Insecurity terhadap Turnover Intention Perawat. *Psikol Kreat Inov* 2021; 1: 56–67.
- Purba BB, Prima A, Simanjuntak A. Penyuluhan Tentang Turnover Perawat Covid 19 Dan Pemanfaatannya Dalam Pengambilan Kebijakan di Rumah Sakit Sembiring. *J Pengabd Masy Putri Hijau* 2021; 2: 85–90.
- Kuswadi. *Cara Mengukur Kepuasan Karyawan*. Jakarta: Elex Media Komputindo, 2004.
- Adityarini D, Andry A, Adhikara M. A. Halo Effect in the Turnover Intention of Nurses at Hospital 'X'. *J Medicoeticolegal dan Manaj Rumah Sakit* 2020; 9: 85–99.
- Wardhani FKW. *Hubungan Antara Faktor-Faktor Stres di Tempat Kerja Dengan Turnover Intention Perawat di RSUD Tangerang Selatan*. Universitas Islam Negeri Syarif Hidayatullah Jakarta, <https://repository.uinjkt.ac.id/dspace/bitstream/123456789/53715/1/FEBRILIANI> (2018).
- Andarini E. *Analisis Faktor Penyebab Burnout Syndrome dan Job Satisfaction Perawat di Rumah Sakit Petrokimia Gresik*. Universitas Airlangga, <https://repository.unair.ac.id/77964/2/TKP> (2018).
- Aseptia UY, Pramitasari D. Pengaruh Job Stress dan Burnout Syndrome Terhadap Turnover Intention Pada Karyawan Wanita di Kota Malang. *J Ris Manaj Sains Indones* 2022; 13: 34–52.
- Tourangeau AE, McGillis Hall L, Doran DM, et al. Measurement of nurse job satisfaction using the McCloskey/Mueller satisfaction scale. *Nurs Res* 2006; 55: 128–136.
- Arini T. *Budaya Keselamatan Pasien Berbasis Pemberdayaan Struktural Dengan Kepuasan Kerja Perawat*. Universitas Airlangga, <https://repository.unair.ac.id/77538/2/TKP> (2018).
- Maslach C, Jackson SE. The measurement of experienced burnout. *J Occup Behav* 1981; 2: 99–113.
- Daniels A. *Listening to New Zealand Nurses : a Survey of Intent to Leave, Job Satisfaction, Job Stress, and Burnout*. Auckland University of Technology, 2004.
- Trisni Widhianingtanti L, Van Luijtelaar G. The Maslach-Trisni Burnout Inventory: Adaptation for Indonesia. *JP3I (Jurnal Pengukuran Psikol dan Pendidik Indones* 2022; 11: 1–21.
- Hayes B, Bonner A, Pryor J. Factors contributing to nurse job satisfaction in the acute hospital setting: A review of recent literature. *J Nurs Manag* 2010; 18: 804–814.
- Lin PS, Viscardi MK, McHugh MD. Factors influencing job satisfaction of new graduate nurses participating in nurse residency programs: A systematic review. *J Contin Educ Nurs* 2014; 45: 439–450.
- Rizany I, Hariyati RTS, Afifah E, et al. The Impact of Nurse Scheduling Management on Nurses' Job Satisfaction in Army Hospital: A Cross-Sectional Research. *SAGE Open*; 9. Epub ahead of print 2019. DOI: [10.1177/2158244019856189](https://doi.org/10.1177/2158244019856189).
- Zhai Y, Li R, Yan Z. Research on Application of Meticulous Nursing Scheduling Management Based on Data-Driven Intelligent Optimization Technology. *Comput Intell Neurosci*; 2022. Epub ahead of print 2022. DOI: [10.1155/2022/3293806](https://doi.org/10.1155/2022/3293806).
- Franita Yesi. Pendekatan Goal Programming pada Model Penjadwalan Perawat Multiobjektif dengan Mempertimbangkan Preferensi Perawat. *Unnes J Math* 2019; 8: 1–10.
- Min A, Min H, Hong HC. Work schedule characteristics and fatigue among rotating shift nurses in hospital setting: An integrative review. *J Nurs Manag* 2019; 27: 884–895.
- Dewanti NP, Jingga NA, Wahyudiono YDA. The Relationship between Work Shifts and Work Environment with Nurse Fatigue in the Emergency Department. *Indones J Occup Saf Heal* 2022; 11: 178–186.
- Yestiana Y, Kurniati T, Hidayat AAA. Predictors of burnout in nurses working in inpatient rooms at a public hospital in Indonesia. *Pan Afr Med J* 2019; 33: 1–8.
- Garde AH, Harris A, Vedaa Ø, et al. Working hour characteristics and schedules among nurses in three Nordic countries - A comparative study using payroll data. *BMC Nurs* 2019; 18: 1–10.
- Rizany I, Sri Hariyati RT, Afiyanti E. Assessing nurses' satisfaction on their work-schedules: The case of a hospital in Jakarta. *J Heal Transl Med* 2020; 23: 91–98.
- Simunić A, Gregov L. Conflict between work and family roles and satisfaction among nurses in different shift systems in Croatia: A questionnaire survey. *Arh Hig Rada Toksikol* 2012; 63: 189–197.
- Koning C. Does self-scheduling increase nurses' job satisfaction? An integrative literature review. *Nurs Manage*; 21. Epub ahead of print 2014. DOI: [10.7748/nm.21.6.24.e1230](https://doi.org/10.7748/nm.21.6.24.e1230).
- Leineweber C, Holendro Singh Chungkham, Lindqvist R, et al. Nurses' practice environment and satisfaction with schedule flexibility is related to intention to leave due to dissatisfaction: A multi-country, multilevel study. *Int J Nurs Stud* 2016; 58: 47–58.
- Parola V, Coelho A, Neves H, et al. Burnout and Nursing Care: A Concept Paper. *Nurs Reports* 2022; 12: 464–471.
- Alam A, Asim M. Relationship Between Job Satisfaction And Turnover Intention. *Int J Hum Resour Stud* 2019; 9: 163–194.
- Setiyanto AI, Selvi NH. Pengaruh Kepuasan Kerja dan Komitmen Organisasi Terhadap Turnover Intention. *J Akuntansi, Ekon dan Manaj Bisnis* 2017; 5: 105–110.
- Sari DP, Purwanto E. Pengaruh Efikasi Diri dan Upaya Terhadap Niatan Berhenti Dengan Mediasi Kinerja, Kepuasan Kerja dan Sindrom Kelelahan. *J Manaj* 2018; 15: 195–221.
- Raharjo DS, Pradiyana Y, Limakrisna N. Determinants of Turnover Intention: An

- Empirical Study of the Effect of Job Satisfaction, Compensation, and Career Development. *Cent Eur Manag J* 2022; 30: 333–344.
38. Setya BDA. Pengaruh Kepuasan Kerja Terhadap Turnover Intention Dengan Burnout Sebagai Variabel Mediasi (Studi Pada Karyawan PT. ISH Telkom Group di Kota X). UIN Maulana Ibrahim Malang. <http://etheses.uin-malang.ac.id/id/eprint/21310> (2020).
  39. Survival. Pengaruh Stres Kerja Terhadap Keinginan Untuk Pindah Dimediasi Burnout Serta Peran Karakteristik Demografi Sebagai Variabel Moderasi (Studi Pada Medical Representative di Kota Malang). Universitas Brawijaya, repository.ub.ac.id (2017).
  40. Mirza MN. Analisis Faktor Risiko dan Konsekuensi Burnout Pada Perawat di Rumah Sakit Swasta di Jakarta. *J Kesehat Masy* 2021; 9: 1–18.
  41. Rosnania R. Faktor Determinan Terjadinya Burnout Pada Perawat Di Rsud Lamadukkelleng Kabupaten Wajo. *Sebatik* 2021; 25: 434–441.
  42. Tadesse B, Muriithi G. The influence of employee demographic factors on job satisfaction: A case study of Segen Construction Company, Eritrea. *African J Bus Manag* 2017; 11: 608–618.
  43. Lee SY, Kim CW, Kang JH, et al. Influence of the Nursing Practice Environment on Job Satisfaction and Turnover Intention. *J Prev Med Public Heal* 2014; 47: 258–265.
  44. Saraswati IAP, Yanti NPED, Swedarma KE. Perbedaan Tingkat Kepuasan Kerja Perawat Berdasarkan Unit Kerja: Literature Review. *Coping Community Publ Nurs* 2021; 9: 450.
  45. Odedokun SA. Differential Influence of Demographic Factors on Job Burnout among Police Officers in Ibadan, Oyo State. *Mediterr J Soc Sci* 2015; 6: 520–526.
  46. Wang H, Jin Y, Wang D, et al. Job Satisfaction, Burnout, and Turnover Intention Among Primary Care Providers in Rural China: Results from structural equation modeling. *BMC Fam Pract*; 21. Epub ahead of print January 2020. DOI: [10.1186/S12875-020-1083-8](https://doi.org/10.1186/S12875-020-1083-8).
  47. Askiyanto M, Soetjipto BE, Suharto. The Effect of Workload, Work Stres and Organizational Climate on Turnover Intention with Work Satisfaction as an Intervening Variable. *Eur J Bus Manag* 2018; 10: 61–70–70.
  48. Sundari PRS, Meria L. Pengaruh Beban Kerja Melalui Burnout dan Kepuasan Kerja Terhadap Turnover Intention. 2017. Epub ahead of print 2017. DOI: [10.34306/abdi.v3i2.785](https://doi.org/10.34306/abdi.v3i2.785).
  49. Putra DMBA, Mujiati NW. Peran Kepuasan Kerja Dalam Memediasi Pengaruh Stres Kerja dan Motivasi Kerja Terhadap Turnover Intention. *E-Jurnal Manaj Univ Udayana* 2019; 8: 4045.
  50. Dewanto A, Wardhani V. Nurse Turnover and Perceived Causes and Consequences: a Preliminary Study at Private Hospitals in Indonesia. *BioMed Cent Nurs* 2017; 17: 1–15.
  51. Kankaanranta T, Nummi T, Vainiomaki J, et al. The role of job satisfaction, job dissatisfaction and demographic factors on physicians' intentions to switch work sector from public to private. *Health Policy*, 83(1), 50–64 | [10.1016/j.healthpol.2006.11.010](https://doi.org/10.1016/j.healthpol.2006.11.010). *Health Policy (New York)* 2007; 83: 50–64.
  52. Margarine NT, Marni E, Niriya S. Hubungan Adversity Quotient dengan Kejadian Burnout pada Perawat di Ruang Rawat Inap Kelas 3. *J Keperawatan Hang Tuah (Hang Tuah Nurs Journal)* 2021; 2: 12–27.
  53. Akova O, Cetin G, Cifci I. The Relation between Demographic Factors and the Turnover Intention in Pre-opening Hotel Businesses. *Procedia - Soc Behav Sci* 2015; 207: 377–384.
  54. Emiroğlu BD, Akova O, Tanrıverdi H. The Relationship Between Turnover Intention and Demographic Factors in Hotel Businesses: A Study at Five Star Hotels in Istanbul. *Procedia - Soc Behav Sci* 2015; 207: 385–397.
  55. AlBattat ARS, Som APM. Employee Dissatisfaction and Turnover Crises in the Malaysian Hospitality Industry. *Int J Bus Manag*; 8. Epub ahead of print 2013. DOI: <http://dx.doi.org/10.5539/ijbm.v8n5p62>.



This work is licensed under a [Creative Commons Attribution-ShareAlike 4.0 International License](https://creativecommons.org/licenses/by-sa/4.0/).