pISSN 2394-6032 | eISSN 2394-6040

Original Research Article

DOI: http://dx.doi.org/10.18203/2394-6040.ijcmph20172143

Factors influencing public hospital nurses' intentions to leave their current employment in Jordan

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Received: 26 March 2017 Accepted: 08 May 2017

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ABSTRACT

Background: Shortage of nurses resulting from nurses migration, has created a health care crisis in developing countries and has adversely affected the quality of nursing care provided to patients. The main objective of this study was to investigate the factors influencing Jordanian public hospital nurses' intent to leave their current employment. **Methods:** A cross-sectional survey was conducted among 348 registered nurses randomly selected from two public referral hospitals, Al Bashier Teaching Hospital, and Amirah Basma Teaching Hospital, Jordan. Data to investigate the nurses' satisfaction and their intention to leave were collected using self-administered questionnaire compromised 28 factors included in seven dimension: Administrative support, supervision and leadership, interaction with coworkers, work related factors, staff development practices, pay and promotion system, and control and responsibility. Data collected over a 4-month period (December 13, 2015 to April 7, 2016).

Results: of the 348 registered nurses 212 (60.9%) had an intention to leave their current work. The average satisfaction rate for all dimensions was (2.83). The dominant factors were not satisfied nurses (mean<3) and influencing their intention to leave were Pay and benefits, nurse to bed ratio due to shortage of nurses, and praising and recognitions for achievement. The variables gender, work experience, and nursing role yielded significant associations with intent to leave (p<0.05).

Conclusions: The study showed that the majority of nurses were dissatisfied and had intention to leave their current job. Developing strategies to increase retention of nurses such as salaries and benefits should be periodically reviewed in light of the national consumer index, in addition to other strategies could improve nursing retention and quality of nursing care.

Keywords: Nursing shortage, Intent to leave, Intent to stay, Job satisfaction, Nursing practice

INTRODUCTION

Shortage of nurses, resulting from nurse migration, has created a health care crisis in many developing countries and this scenario has adversely affected the quality of nursing care received by patients. ^{1,2} In Jordan, the rate at which nurses were leaving their current employment positions was reached approximately 37% in 2009.³

Public hospitals are the largest employers of nurses and are the institutions most affected by the current nursing shortage. Although the seeds of strategies to retain nurses in Jordanian public hospitals were planted three decades ago by increasing the number of graduates from nursing programs and focusing on recruitment. These efforts proved futile because retention strategies did not receive any attention. It is therefore, critically important to identify strategies to maintain optimal nursing

workforces in the health care environment in Jordanian public hospitals.

Numerous international studies examining the question of what determines staff nurses' intention to leave have produced conflicting results.⁵⁻⁷ The driving forces behind nurses' intent to leave seem to include the factors influencing job satisfaction.^{5,7,8} This indicates that job satisfaction plays a lead role behind intention to stay or leave in nursing profession.^{9,10} Researchers identify the various facets of job satisfaction and verify what influence these components on workers' productivity.⁵ Job satisfaction can be predicted by the variables as: type of the hospitals; private or public, autonomy, adequate staffing and work load, organizational support. 10-13 Researchers also having a say in job involvement, justice, and job stress, and organization commitment and economic cost commitment, and fairness in evaluation system. 8,14,15

Demographic factors are unique to each individual, such as age, gender, marital status, work experience, appear to affects nurses' work satisfaction and turnover intentions. 16 Contrasting findings recognized in literature related to the impact of sociodemographic variables and intention to stay or to leave. Although these attributes are clearly related to staff retention, the nature of the relationship is unclear, and they do not fully explain the job-changing behaviors of registered nurses (RNs).¹⁷ For example, study has shown that older nurses form a more stable workgroup and report greater job satisfaction than vounger nurses. 18 Contrasting findings indicated that younger nurses were more interested than older nurses in opportunities for advancement within the hospital, nurses' weekly celebrations, control over their schedules, productivity of unlicensed assistive personnel, tuition reimbursement, onsite child care, periodic increases in salary, shift differential, and sign-on hours. 19 Years of experience has also been recognized contrast findings in literature. Letvakand found that nurses with more years of experience were more inclined to leave than stay in the hospital but Pillay's found that nurses with more than 20 years of work experience were more likely to have a greater intent to stay. ^{20,21} The likelihood of leaving one's nursing position is highest in the first year of employment.²²

For this study Intent to leave or turnover, rather than actual turnover, was the outcome variable. Intent to leave is strongly supported as the best and the most accurate predictors of actual leaving and nurse turnover. As intent to leave or to stay indicates future plans, better understanding of intention may make it possible to institute changes that affect the decision prior to the nurse actually leaving employment.

The objective of this study was to investigate the factors influencing the intentions of registered nurses (RNs), at a two teaching public hospitals to leave their current employment.

METHODS

Study design

This cross-sectional descriptive study was conducted from December 13 to April 7, 2016 at public hospitals in Amman.

Setting and participants

The site for the present study was two public teaching hospitals with 1750- beds in Amman, Jordan. The hospitals offer general medical and surgical services in both in-patient wards and outpatient clinics. In addition, these hospitals offer clinical practice facilities for medical, nursing, and other health professional students. The questionnaires were distributed on a proportional simple random sample of 376 nurses who were practicing nursing with different roles in the hospitals was drawn from the population, of which 348 RNs (response rate 92.6%) completed the questionnaire and their responses eligible for analysis.

Ethical considerations

Permission to conduct this study was obtained from the Institution Review Board on Research, reference No. (78-35/36). Permission to gather the data was obtained from administrative body of each hospital. A list of RNs working in the hospital was compiled from the records of the nursing officer of the hospital to identify the nurses' areas of clinical practice. After this, there was no further connection between the questionnaires and the names of the respondents. Moreover, a cover letter preceded the questionnaire explaining the purpose and methods of the study, giving instructions to participants not to sign their name on the questionnaire, and reassuring them that their participation was voluntary and that their responses were handled confidentially. A statement of "Completion and return of the questionnaire implied your consent was obtained", was also written in the cover letter.

Study instrument and data collection

The primary outcome measure of interest was nurses' intent to stay or leave their current employment. The factors that could affect a nurses' satisfaction and intention identified in the literature was used to develop the self-completed questionnaire administered to participants. 5,7,8,16,23-25

The first part of the questionnaire evaluated demographic data including the nurse's gender, age, level of education, marital status, have children, years' experience, and role in nursing. One question regarding RNs intention to leave or to stay within the next 12 months was included in part 1.

The second part consisted of 28 factors that included seven sub scales (adopted from previous studies:

administrative support (six items, e.g. participation of nurses in decision making regarding the formulation of policies in their units), supervision and leadership (three items, e.g. supervision provided to nurses is helpful and supportive), interaction with co-workers (three items, e.g. the nurse identifies within a group in the hospital), work related factors (five items, e.g. Regular and purposive performance appraisal provided to nurses), staff development practices (six items, e.g. the available training and development programs conducted upon nurses' needs), pay and promotion system (three items, e.g. the rewards value provided to nurses are equitable with other employees in hospital), and control and responsibility (three items e.g. the nurses have autonomy in making decision related to patient care).

For the purpose of ensuring validity of the questionnaire. It was discussed with four highly educated nurse researchers and one statistician. Modification upon suggested changes was carried out. A pilot study was then conducted on a sample of 13 RNs working in a public hospital that was similar to the study setting. The nurses were asked to critique the questionnaire's layout, completeness, appearance, readability, thoroughness, and clarity of instructions. Minor changes to the final test instrument were made based on the suggestions of the pilot respondents. Cranach's alphas of the overall scale were 0.836 and Cronbach's alpha of the subscale ranged from 0.72 to 0.841, which indicates good reliability of the entire questionnaire.

The data were collected using a translated Arabic version self-administered questionnaire. Units head nurses' cooperation without any anticipated harm was obtained to facilitate distribution the questionnaires to all registered nurses working at the hospital. Four nurses BSC holders; two males and two females for data collection were recruited after one day training was given. All RNs who were working in a variety of hospitals' units and holding different roles were eligible for inclusion in the study. At each data collection site, the purpose of the study was explained to the study subjects before they completed the questionnaire.

The items were answered on a five —point likert scale with response options ranging from 1 (strongly not satisfied) to 5 (strongly satisfied). At the latest stage the answers classified in two categories: No satisfaction (means 1-3), and satisfaction (>3-5). We considered the items were not satisfied the participants were influenced their intention to leave, and the items satisfied them were influenced their intention to stay.

The data collection lasted four weeks. Data were checked for consistency and completeness before entry to computer software for analysis.

Statistical analysis

Data were analyzed using SPSS v.21 (New York: IBM). Descriptive statistics were calculated for means and

frequencies to determine the characteristics of nurses have intention to stay or to leave. Logistic regression analysis was used to predict the association between demographical factors and nurses' intent to stay or to leave. Statistical significance was set at P < 0.05.

RESULTS

Descriptive characteristics of the respondents

Of the total 376 distributed questionnaires, 348 were returned, yielding a 92.6% response rate. All items on the demographic profile were completed. Respondents were predominantly female (69.3%). The age of around half of respondents (52%) was 21-35 years. The mean age (SD) of respondents was 34.7 (8.9) years. The vast majority of nurses (72.4%) were married and 70.1% had children. The greatest proportion of respondents (74%) had work experience of 15 years or less in hospital, and around 90% were staff nurses. The proportion of RNSs who reported they intended to leave in their current employment position was around 70% (Table 1).

Stayers versus leavers

Overall, there were 136 stayers (39.1%) and 212 leavers (60.9%) (Table 1).Leavers outnumbered stayers in every demographic category except nurses with more than 15 years of nursing experience, 61% of whom reported an intent to stay.

Factors influencing nurses' intentions to leave or to stay

The most five prominent leading reasons not satisfied respondents and influencing their intention to leave were pay and benefits, work pressure, praising and recognitions for achievements, growth opportunities provided for job advancement, and lack of involvement in making decisions related to their units (Table 3).

While the five top factors that influenced respondents' intentions to stay in their positions the retirement system, family responsibilities balanced work, involved in work schedule, relationship and interaction with coworkers, and the tasks balanced with nurse's role and capabilities.

The logistic regression coefficient test for demographical factors effecting nurse's intention to leave revealed that gender, work experience, and nursing role were the personal factors significantly associated with nurses 'intent to leave (p<0.05) (Table 4). Regarding gender, male nurses were more likely to leave their current position than female nurses (OR=1.47, p=0.043). The other significant factor was work experience. Nurses who had more than 15 years of work experience were less likely to leave than those who had 15 years or less (OR=0.74, p=0.053). Nursing role was also among the significant factors; nurses who had a nurse manager or head nurse role were less likely to leave their position (OR=0.54, p=0.037) (Table 4).

Table 1: Stayers and leavers according their demographical data (n=348).

| The variable N= (348) n (%) | Stayers (n=1 | 36) (39.1%) | Leavers (n=2 | 12) (60.9%) |
|------------------------------|--------------|-------------|--------------|-------------|
| Gender | | | | |
| Male 107 (30.7) | 31 | 29 | 76 | 71 |
| Female 241 (69.3) | 105 | 46.6 | 136 | 56.4 |
| Age | | | | |
| 21-40 181 (52) | 49 | 36.1 | 132 | 62.3 |
| 40+ 167 (48) | 87 | 63.9 | 80 | 37.7 |
| Educational Level in Nursing | | | | |
| Diploma (126) | | | | |
| Bachelor (96) | 57 | 45.2 | 69 | 54.8 |
| | 30 | 31.3 | 66 | 68.7 |
| Marital Status | | | | |
| Married252 (72.4) | 119 | 87.5 | 133 | 62.7 |
| Single96 (27.6) | 17 | 12.5 | 79 | 37.3 |
| Have children | | | | |
| Yes 244 (70.1) | 114 | 83.8 | 130 | 61.3 |
| No104 (29.9) | 22 | 16.2 | 82 | 38.7 |
| Work experience (years) | | | | |
| $15 \le 257 (73.9)$ | 53 | 39 | 204 | 96 |
| 15 >91 (26.1) | 83 | 61 | 8 | 4 |
| Nursing role | | | | |
| StaffNurse315 (90.5) | 111 | 81.6 | 204 | 96.2 |
| Nurse manager33 (9.5) | 25 | 18.4 | 8 | 3.8 |

Table 2: The means and standard deviations for all the dimensions of the job satisfaction.

| The dimension Mean SD | | |
|-----------------------------------|------|------|
| Administrative support (A) | 2.97 | 0.76 |
| Supervision and leadership (S) | 3.21 | 0.81 |
| Interaction with coworkers (I) | 3.56 | 0.92 |
| Work related (W) | 2.67 | 0.89 |
| Staff development practices (S) | 2.51 | 0.78 |
| Pay and promotion system (p) | 1.74 | 0.89 |
| Autonomy and decision making (AD) | 3.16 | 0.83 |

Table 3: Top 5 factors influencing nurses' intention to leave (mean <3) (N=348).

| The item Mean (±SD) | Descending rank n (%)* |
|---|------------------------|
| Salary and benefits comparing to work load (P) 1.61 (0.81) | 315 (90.5) |
| Justified ratio of nurses to beds 2.78 (0.86) in each shift (W) | 283 (81.3) |
| Recognitions and praising for achievement 2.84 (0.76) assigned tasks (A) | 264 (75.9) |
| Opportunities for job advancement on base 1.98 (0.75) of nurse's needs (S) | 259 (74.4) |
| Involvement in making decision related to 2.13 (0.77) nursing care provided (I) | 236 (61.5) |

^{*}Percentages do not total 100 because nurses gave more than one reason for leaving

Table 4: Logistic regression coefficients for factors affecting nurses' intention to leave.

| Personal Variable | Regression coefficient | OR | p-value |
|-------------------|------------------------|------|---------|
| Gender | | | 0.012 |
| Female | | | |
| Male | 0.36 | 1.47 | 0.043 |
| Age | | | 0.343 |
| 21-40 | | | |
| 40+ | -0.26 | 0.79 | 0.392 |

| Marital Status | | | 0.416 | |
|-------------------------|-------|------|-------|--|
| Married | | | | |
| Single | 0.46 | 1.62 | 0.22 | |
| Have children | | | 0.612 | |
| No | | | | |
| Yes | 0.44 | 0.95 | 0.374 | |
| Work experience (years) | | | 0.001 | |
| 15 or less | | | | |
| 15+ | -0.28 | 0.74 | 0.053 | |
| Nursing role | | | 0.004 | |
| Staff Nurse | | | | |
| Nurse manager | -0.64 | 0.54 | 0.037 | |

DISCUSSION

In this study, the proportion of nurses who intended to leave their jobs was significantly more than those who intended to stay. This finding is consistent with studies conducted in both Ethiopia and Hungary but our intending to leave rate is higher than that found in the USA. This may be due to differences in job satisfaction as American nurses may have higher salaries and more benefits compared to nurses in our sample and to nurses who work in public hospitals in the developing world. Our findings suggest that the majority of nurses in our study population were dissatisfied with their work, a fact that should prompt hospital administrators to seek practical strategies to improve staff retention in their public hospitals.

Study results showed that nurses most likely to leave their nursing position were male, less than 30 years old, had less than 15 years' experience, and had a staff nurse role. These findings were not surprising because in Jordanian culture, as it is more difficult for Jordanian women to live and work as singles outside of Jordan. Therefore more males probably contemplate the decision to leave and move abroad compared to women. Younger nurses (21-35) were more likely to leave than older nurses (aged over 35). This finding is in line with previous studies conducted in Ethiopia, China, and South Africa. 7,8,28 One possible explanation for this finding might be that older nurses have more of a desire for stability as they approach their retirement age; the prospect of a retirement income is important to improving their quality of life. Also be that nurses over 35 years are more likely to have a family and therefore job stability is important.

Nevertheless, it is worth noting that nurses with more work experience were more likely to intend to stay and showed a negative relationship with intention to leave. This finding is similar to what was found by Wang and colleagues, suggesting that nurses with more experience may be truly committed to nursing. These nurses might have left their nursing jobs sooner to pursue careers in other fields if they thought that nursing was not for them. An alternative explanation is that the more experienced nurses had invested more of themselves in the

organization, making leaving impractical for them. Nurses with fewer years of experience were more likely to disclose intent to leave their positions. This may reflect a normal tendency for newer employees, after working a certain period in the nursing profession, to start reevaluating their lives in terms of future career paths.

The top five reasons not satisfied nurses and influenced their intent to leave were pay and benefits were identified by respondents as the dominant reason for leaving their current hospital for better remuneration. For many years, this factor have been identified as pervasive problems that may lead to job dissatisfaction, nurse burnout, and nursing attrition. Because Jordan, like many developing countries was affected by regional financial crises that decreased the purchasing power of the country's currency. These events forced many public hospital nurses to seek new jobs and more attractive working conditions in the private sector, in university-affiliated hospitals, or in other countries offering higher salaries and more benefits to nurses.

Work overload or work pressure, presented as unjustified nurse- to- patients ratio resulting from the shortage of nurses, was stated as an important factor in the leaving behavior of the majority of nurses, and have a cyclic effect on nursing turnover.³¹

Other factors such as lack of professional advancement opportunities and lack of involving nurses in making decisions related to their units were reported as important factors for nurses to end up their job. It has been reported that there is a positive relationship between staff development practices adopted by nurse managers and nurses' intent to stay.³² Also involving nurses in making decision and policy making activities has been reported as staff retention strategy, because it maintain the positive nature of the work environment and consequently nurses' job satisfaction.³³

The findings from the current study also suggests that retention efforts should focus on work environments, including support and motivation interventions, and professional growth opportunities, and organization commitments. These factors have frequently been reported in studies of job satisfaction to be the most

common predictors for nurses who decided to stay or to leave. $^{28,30,34,35}\,$

CONCLUSION

Knowing the reasons why nurses leave their positions in Jordanian public hospitals should assist in the development of effective strategies to reduce turnover. These strategies should improve nurses' job satisfaction, and retention of quality nursing staff. A key dimension of job satisfaction that has a significant impact on retention is salaries; these should be periodically reviewed in light of the national consumer price index.

Understaffing and heavy workload are not only intense stressors; they also give nurses insufficient time to provide quality patient care. Administrators should follow optimum nurse-to-patient ratios that take into consideration patient acuity, staff skill mix, nurse competence, nursing process variables, technological sophistication and institutional support of nursing³.

Study limitations

The cross sectional nature of the study precludes inferences regarding causality and limits the generalizability of the findings. This study also measuring the "intention" to leave by crosses sectional approach and not the actual leaving rates in a longitudinal approach. Nevertheless, these findings are an important step in understanding the factors influencing and predicting the staying and leaving intentions of nurses working in similar settings.

ACKNOWLEDGEMENTS

The author would like to extend his appreciation to the College of Applied Medical Sciences Research Centre and the Deanship of Scientific Research at King Saud University for funding this research (CAMS-RC3637/16). Thanks to nursing administration and nurses in the two public hospitals for their outstanding support and whose input made this study possible. Special thanks go to Dr. Baderldin Mohammed for statistical consultations at every step of this study.

Funding: This research received funding from the College of Applied Medical Sciences Research Centre and the Deanship of Scientific Research at King Saud University (CAMS-RC3637/16)

Conflict of interest: None declared

Ethical approval: The study was approved by the Institution Review Board on Research, reference No. (78-35/36)

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Cite this article as: Momani MA. Factors influencing public hospital nurses' intentions to leave their current employment in Jordan. Int J Community Med Public Health 2017;4:1847-53.