

Exploring the Impact of Organizational Well-Being on Intention to Leave the Nursing Profession: a Scoping Review

Citation: Basso RR., Della Bella V., Fiorini J., Sili A. “Exploring the Impact of Organizational Well-Being on Intention to Leave the Nursing Profession: A Scoping Review” (2024) *infermieristica journal* 3(4): 239-250. DOI: 10.36253/if-3122

Received: November 14, 2024

Revised: December 5, 2024

Just accepted online: December 20, 2024

Published: December 31, 2024

Copyright: Basso RR., Della Bella V., Fiorini J., Sili A. This is an open access, peer-reviewed article published by infermieristica Editore & Firenze University Press (<http://www.fupress.com/>) and distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

Data Availability Statement: All relevant data are within the paper and its Supporting Information files. This article has been accepted for publication and undergone full peer review but has not been through the copyediting, typesetting, pagination and proofreading process, which may lead to differences between this version and the Version of Record

Competing Interests: The Author(s) declare(s) no conflict of interest.

Rossella Roberta Basso¹, Valerio Della Bella¹, Jacopo Fiorini², Alessandro Sili²

¹ *Department of Biomedicine and Prevention, University of Tor Vergata, Rome, Italy*

² *Department of Nursing Professions, University Hospital of Tor Vergata, Rome, Italy*

Abstract

Introduction. In several countries, the desire among nurses to leave their profession is a significant concern. Recent studies highlight a relationship between the nursing working context and the intention to leave the profession, indicating that suboptimal working conditions significantly influence the willingness to remain a nurse. This literature review aims to define the relationship between nurses' organizational well-being and intention to leave the profession, analyzing which organizational well-being variables influence this decision.

Materials and methods. A scoping review was conducted on PubMed, Scopus, CINAHL, and Cochrane. The Joanna Briggs Institute's (JBI) methodology and the Preferred Reporting Items for Systematic Reviews and Meta-Analyses extension for Scoping Reviews (PRISMA-ScR) guidelines have been followed. Critical appraisal and data extraction were conducted using the JBI tools. Data were extracted and analyzed according to narrative synthesis.

Results. The search yielded 3,224 references. Following the review process, twelve articles were included in the review. Four main categories of variables were identified: job satisfaction, working conditions, physical-psychosocial health, and economic and professional recognition. Balanced workloads and organizational demands, adequate resources, and positive relationships between colleagues and patients characterized a supportive work environment where nurses lived in a condition of well-being and their intention to leave the profession decreased. In contrast, high workloads, overtime, insufficient resources, and lack of managerial support increased the intention to leave the profession.

Discussion. The relationship between nurses' well-being and their intention to leave the profession has been identified.

Healthcare organizations should improve the individual and organizational well-being of nurses as strategies to promote their retention. Understanding turnover drivers enabled healthcare managers to address critical issues that promoted retention by fostering sustainable work environments. Future multicenter studies should implement interventions to promote organizational well-being and evaluate the nurses' turnover intentions.

Keywords: Occupational Health, Psychological Well-Being, Working Conditions, Nurses, Personnel Turnover, Intention, Job Satisfaction, Health Resources.

Introduction

The significant transformations in citizens' healthcare needs and professionals' well-being are becoming increasingly central to healthcare management¹. The International Labour Organization defines Organizational well-being as "all the aspects of working life that include the safety of the physical environment, the perception of daily work activities, the consideration of the work environment, the climate, and the organization surrounding employees"². In recent years, the organizational well-being of nurses has been closely examined for patient and organizational outcomes³. In a positive work environment, nurses are more dedicated to their work, ensuring a better quality of care provided⁴. Creating and promoting a positive working climate, in which nurses reported good organizational well-being, may ensure better outcomes for a healthcare organization, in terms of quality of care⁴. Several studies have shown that a lower level of nursing organizational well-being is related to reduced productivity⁵ and performance⁶, increased absenteeism⁷ and counterproductive behaviours⁸. Conversely, a higher level of organizational well-being enhances team member engagement, relationship, commitment, and working performance³. Moreover, in a positive work environment where organizational well-being is promoted, staff turnover is reduced⁴.

Pressing worldwide concerns are the nursing shortage and the declining interest in nursing careers⁹. According to the data of the World Health Organization, about the caring demands of citizens, there is a shortage of 7.2 million medical professionals in the world, including 275,000 missing nurses¹⁰. The nurses' shortage in the healthcare system is a complex consequence of poor professional attractiveness⁹, economic

recognition¹¹, underemployment and working conditions¹². Nurses are exposed to shifts, high workloads, stress, and direct relationships with patients and caregivers, which can affect their performance and increase the risk of medical errors, in patient treatment, care and diagnostic testing^{3,4,13}. This shortage, exacerbated by younger nurses' intention to leave the profession, negatively impacts patient outcomes, including higher incidences of adverse events, falls, medication errors, missed care, reduced patient satisfaction, and even increased mortality¹⁴. These challenges contribute to more significant burnout and job dissatisfaction within the nursing workforce¹⁴.

Multiple studies have explored factors influencing healthcare professionals' intention to leave, such as work environment¹⁵, salary¹⁵, and socio-demographic characteristics¹⁶. At the same time, the weight of organization in the intention to leave one's job is essential, with organizational elements like justice, commitment, and job stress playing key roles¹⁷. Recent studies have confirmed the relationship between nursing working context and the intention to leave their job, showing how working in stressful conditions, higher workloads and organizational demands affect the desire to leave employment¹³.

A recent literature review has highlighted that numerous conceptual models have been developed to evaluate nursing organizational well-being and its related characteristics³. Moreover, a new conceptual model for the nurses' organizational well-being has been theorized¹, including specific variables of the nursing profession. These variables include individual-level factors, such as relationships with patients and constant exposure to suffering, pain, and death, as well as organizational-level factors, such as staffing, workload, positive relationships

within the work environment among nurses, with other healthcare professionals, with supervisors, and work-life balance³. Governing and managing different aspects of the nursing organizational well-being, understood as the practice environment in which the nurses work every day as professionals and individuals, can be crucial for both patients and, in general, all stakeholders¹⁸. Considering the already identified relationship between the nursing working context and their intention to leave the job¹³ and the lack of studies evaluating globally the impact of the nursing organizational well-being, as defined by Della Bella et al.³, on the intention to leave the profession, a scoping review is needed. The review aims to understand the relationship between nurses' organizational well-being and intention to leave, with a secondary goal of identifying specific well-being variables linked to this intention. Recognizing this relationship could provide valuable insights for healthcare executives and nursing researchers,¹⁹ promoting healthier, sustainable workplaces and improved care quality⁹.

Materials and Methods

A scoping review of the literature was conducted between March and November 2024 following the Preferred Reporting Items for Systematic Reviews and Meta-Analyses extension for Scoping Reviews (PRISMA-ScR) guideline^{20,21} and the Joanna Briggs Institute's (JBI) Manual for scoping review²².

Data Collection

The search was conducted across major scientific databases, including Medline (via PubMed), Cochrane, Cumulative Index to Nursing and Allied Health Literature (CINAHL), and Scopus. The study used the PICOM (Population-Intervention-Control-Outcome-Methods) framework to identify relevant keywords. The evidence-based structure (PICOM) applied in this review was: P) nurses; I) organizational well-being; C) not applicable; O) intention to leave; and M) primary studies (quantitative, qualitative, mixed-method). The following keywords were used: Nurse, Intention to Leave, and Organizational Well-Being First, the MeSH terms for the identified keywords were searched. Subsequently, a string was created for each of the elements of the identified PICOM, combining them with synonyms, special characters, and Boolean operators. The various strings were then combined using the Boolean

operator AND. Articles were then searched within the TITLE/ABSTRACT section to select those most relevant to the research objective. Finally, articles published from November 12, 2014, through November 12, 2024, were selected. A specific search strategy was developed for each of the databases included in the review to ensure comprehensive retrieval of relevant literature (supplementary files 1).

Eligibility Criteria

Studies were eligible for inclusion if they: a) recruited nurses as participants; b) were primary studies; c) investigated the relationship between organizational well-being and intention to leave; and d) were published in Italian or English (as researchers' language). Exclusions included unpublished studies, non-peer-reviewed publications, studies involving other healthcare professionals (e.g., physicians, nursing students, technicians, or mixed samples), or those published in languages other than Italian or English. Before the review, preliminary research was conducted to pre-test and refine the inclusion and exclusion criteria among all participating researchers.

Selection of the studies

Two researchers (VDB, RRB) screened, evaluated, and included articles on the Rayyan platform²³ using the "blind on" mode to enable simultaneous and blinded work.

All database search results were uploaded to the platform after duplicates were removed. The researchers independently reviewed all titles and abstracts and reached an agreement on their selection. The selected texts were then read in the full text, and the final selection was made unanimously. In the case of any dispute, a third researcher (JF) made the final decision. The selection process adhered to the PRISMA-ScR flow diagram^{20,21}, following the identification, screening, and inclusion stages. Initially, duplicates and studies outside the time frame were removed, followed by a review of titles and abstracts, and finally, the full texts were assessed.

Data Collection Process and Data Items

A data extraction tool (supplementary files 2) was developed according to the JBI Manual²² to summarise the manuscript according to title, author(s), year and country, aim, study design, sample, theoretical framework, results, and conclusion.

Quality Appraisal

Following the screening process, selected articles underwent a quality appraisal guided by the JBI Manual for Evidence Synthesis guidelines.²² Two independent reviewers (RRB and VDB) have critically appraised the studies included in the review, following the JBI critical appraisal instruments and according to each included study design. In case of disagreement, a third reviewer (JF) solved it. The JBI tools contain different evaluation criteria rated as yes, no, unclear or not applicable. For each criterion rated as yes, one point was assigned. The final percentile score has been calculated by adding together the yes ratings and dividing the total number of criteria of each appraisal instrument. Studies were rated as high quality if more than 80% of the appraisal criteria were endorsed, moderate quality if 50-80% of the appraisal criteria were endorsed, and poor quality if less than 50% of the appraisal criteria were endorsed. Studies with poor quality have been removed from the review.

Data Extraction and Synthesis

After assessing methodological quality, data were extracted and synthesized by title, authors, publication year, country, and organizational well-being variables (Supplementary file 2). Extracted data provided an overview of relevant variables across studies, facilitating a comprehensive understanding of organizational well-being factors associated with intention to leave.

Results

Following the PRISMA-ScR flow diagram^{20,21} (Figure 1), the literature search identified 3,224 references: 1,772 in PubMed, 1,156 in Scopus, 268 in CINAHL, and 2 in Cochrane. After removing 852 duplicates, 2,372 articles remained, of which 2,347 were excluded based on title and abstract for not meeting the PICOS criteria. Of the remaining 25 articles, 10 were removed due to a mixed population (e.g. physicians and nurses). 12 articles were included in the final selection, analyzing conceptual models of nursing organizational well-being. Table 1 reported the quality appraisal of the full-texts, expressed as a “+” sign for “Yes” and a “-” sign for “No” by each reviewer. Most manuscripts have been evaluated as moderate methodological quality, lacking the identification of confounding variables and related strategies to manage them. Wang Y. and Yuan H. (2020) has been excluded for poor methodological quality.

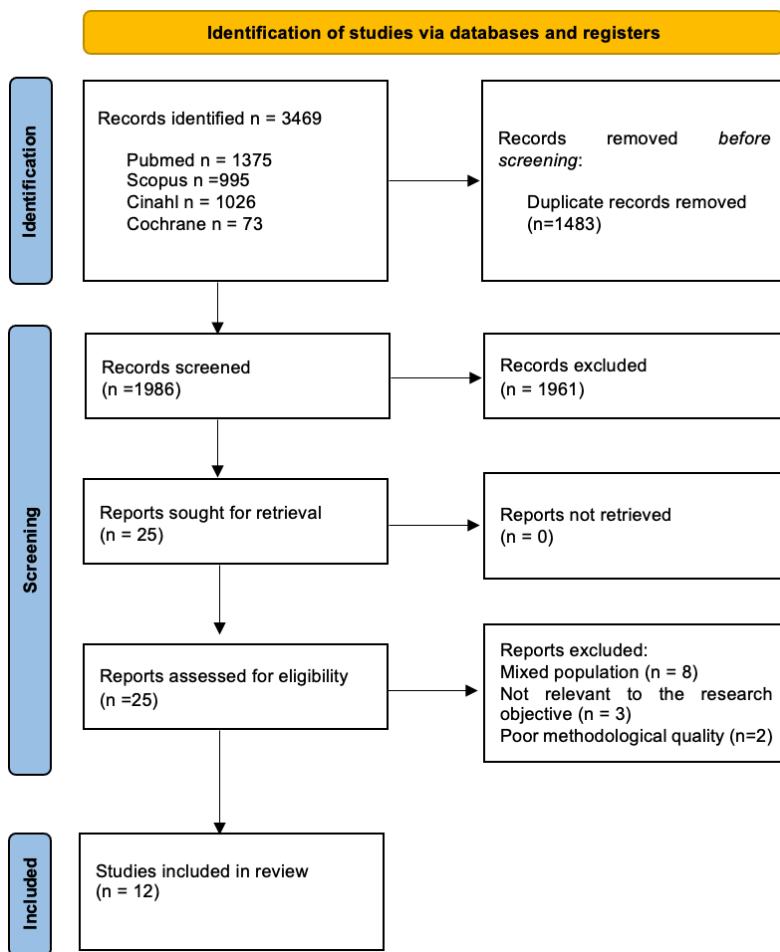
Table 1: Quality assessments

TITLE	AUTHOR(S)	YEAR	1	2	3	4	5	6	7	8	OVERALL QUALITY	DECISION
Quality of work-life and turnover intentions among the Ghanaian nursing workforce: A multicentre study	Poku I C.A. et al.	2022	+	+	+	+	+	+-	+	+	High	INCLUDED
Factors affecting nurses' intention to leave their current jobs in Saudi Arabia	Albougami A.S. et al.	2020	+	+	+	+	+	+	+	+	High	INCLUDED
Emotional Labor, Burnout, Medical Error, and Turnover Intention among South Korean Nursing Staff in a University Hospital Setting	Kwon C. et al.	2021	+	--	+	+	+	+-	+	+	Moderate	INCLUDED
Nurse practice environment, perceived organizational support, general well-being, occupational burnout and turnover intention: A moderated multi-mediation model	Sheng H. et al.	2023	--	+	+	+	--	+	+	+	Moderate	INCLUDED
Nurses' intention to leave their jobs in relation to work environment factors in polish hospitals: cross-sectional study	Malinowska-Lipień I. et al.	2023	+	+	+	+	+	--	--	+	Moderate	INCLUDED
What is behind high turnover: a questionnaire survey of hospital nursing care workers in Shanghai, China	Wang Y. and Yuan H.	2020	+	+	--	--	--	--	--	+	Poor	EXCLUDED
Nurse Staffing, Work Hours, Mandatory Overtime, and Turnover in Acute Care Hospitals Affect Nurse Job Satisfaction, Intent to Leave, and Burnout: A Cross-Sectional Study	Bae S.	2024	+	+	+	+	--	--	+	+	Moderate	INCLUDED
A cross-sectional study on turnover intention of nurses in eastern China	Huang H. et al.	2024	+	+	+	+	--	--	+	+	Moderate	INCLUDED
Investigating the Effective Factors in Nurses' Intention to Leave the Critical Care Unit	Khoshfetrat M. et al.	2023	+	+	+	+	--	+	+	+	High	INCLUDED
The associations among nurse work engagement, job satisfaction, quality of care, and intent to leave: A national survey in the United States	Wei H. et al.	2023	+	+	+	+	+	+-	+	+	High	INCLUDED
Indicator of Job Satisfaction Related to Intention to Quit in Peruvian Nurses	Sato A. et al.	2023	--	+	+	+	--	--	+	+	Moderate	INCLUDED
Predictors of the intentions to leave among nurses in an academic medical center	Paredes K.M.S. et al.	2023	--	+	+	+	+	+-	+	+	Moderate	INCLUDED
Nurses' turnover intention in secondary hospitals in China: A structural equation modelling approach	Zhang Y. et al.	2021	+	+	+	+	--	--	+	+	Moderate	INCLUDED

Legend: 1 = Were the criteria for inclusion in the sample clearly defined?, 2 = Were the study subjects and the setting described in detail?, 3 = Was the exposure measured in a valid and reliable way?, 4 = Were objective, standard criteria used for measurement of the condition?, 5 = Were confounding factors identified?, 6 = Were strategies to deal with confounding factors stated?, 7 = Were the outcomes measured in a valid and reliable way?, 8 = Was appropriate statistical analysis used?

Note: The overall quality was obtained by calculating the percentage of positive evaluations out of the total evaluations by two blinded researchers: if $\geq 80\%$ = High, if $50\% - < 80\%$ = Moderate, if $< 50\%$ = Poor.

Figure 1: PRISMA-Scr flow diagram



Characteristics of the studies

All included studies were cross-sectional, conducted in countries such as China (n=3)²⁴⁻²⁶, South Korea (n=2)^{27,28}, Ghana (n=1)²⁹, Saudi Arabia (n=1)¹¹, Poland (n=1)¹³, Iran (n=1)³⁰, the United States (n=1)¹², Peru (n=1)³¹, and Japan (n=1)³². Four studies were rated as high quality^{11,12,29,30}, seven as moderate quality^{13,24-28,31,32}, and one study was rated as poor quality and excluded from the final list³³. The studies adopted various theoretical frameworks to guide their research, including the Job Demand-Resource Model^{5,26,29}, Van der Heijden's model^{28,34}, Donabedian's model^{27,35}, the Convergent Care Theory^{12,36}, and the Multidimensional Staff Turnover Model^{25,37}. However, six of the included studies did not adopt any theoretical framework^{11,13,24,30-32}. The studies included nurses working in public and private healthcare settings and various clinical contexts, with some studies referencing nurses involved during the COVID-19 pandemic²⁹. Most studies evaluated the nursing organizational well-being focusing on different aspects of this construct and about the intention to leave the

profession, a summary of this analysis is reported in Table 2.

Intention to leave the nursing profession and the organizational well-being

The review process revealed a frequent desire among nurses to leave the job with different percentages. For example, in the study by Poku et al.²⁹, 47.7% of the sample indicated their intention to leave their job. Furthermore, 40.0% stated they no longer wished to pursue a nursing career, and 44.2% reported actively seeking other employment. Bae et al.²⁷ studied a sample of nurses across 28 hospitals. The article reports a turnover rate of 15.49% over six months, significantly higher than the national annual average (15.2%). Malinowska-Lipień et al.¹³ report that 48.84% of the nurses surveyed expressed willingness to leave their current hospital. Additionally, 9.01% of respondents considered leaving the nursing profession altogether. Huang et al.²⁴ found that 43% of the nurses in their study reported a high willingness to leave their positions. The research results highlight the relationship

between organizational well-being and the intention to leave the job and/or the nursing profession. The desire to leave the profession and the relationship between job well-being and intention to leave were reported across all the studies reviewed. Four major categories of variables were identified: job satisfaction, working conditions, psycho-physical-social health, and economic and professional recognition.

Job Satisfaction

The relationship between job satisfaction and the intention to leave nursing is an emerging theme in several studies. In the article by Poku et al.²⁹, the turnover intention is closely linked to satisfaction with professional career ($r = -0.358$, $p < 0.001$), highlighting how a negative perception of this aspect can fuel the desire to leave the profession. Malinowska-Lipień et al.¹³ emphasize that higher job satisfaction significantly reduces the intention to leave, with a 46% decrease in this variable among the studied sample. However, the organizational climate and

work motivation remain essential determinants of satisfaction, as indicated by Paredes et al.³¹, who found that many nurses reported medium to low satisfaction levels. This hypothesis is also supported in the study by Albougami et al.¹¹, where the results indicate a moderate level of job satisfaction (Mean satisfaction = 29.99, SD = 8.56) and an average TIS-6 score of 2.91 (SD = 0.81), suggesting a moderate intention to leave their job. Khoshfetrat et al.³⁰ identify poor nursing management and workload overload as the main factors eroding job satisfaction and increasing the intention to leave the profession. These findings confirm that improving the work climate and reducing stress could significantly impact retaining nursing staff. Finally, in the studies by Bae et al.²⁷, job satisfaction was lower when nurses worked in departments with higher turnover rates.

Working Conditions

Among the emerging themes in the selected studies, working conditions strongly influence the intention to leave. A poor work environment, characterized by high workloads and more significant conflicts between work and family life, increases the intention to leave the job^{26,29}. Poku et al.²⁹ report that the intention to leave the profession is negatively correlated with working conditions ($r = -0.356$, $p < 0.001$) and control over one's work ($r = -0.266$, $p < 0.001$). This association is also found in the study by Khoshfetrat et al.³⁰ where workload overload, overtime, and staff shortages significantly impact the intention to leave. Extended working hours are also highlighted in the studies by Bae et al.²⁷ and Sato et al.³². The authors state that extended working hours, mandatory overtime, and workplace harassment are associated with a higher intention to turnover. The type of shift worked by nurses also influences their intention to leave. Huang et al.²⁴ identify frequent night shifts and poor work organization as two causes that lead nursing staff to want to leave, highlighting the importance of social and managerial support in reducing turnover. Differences related to the nurses' workplace setting can influence their intention to leave. In the study by Albougami et al.¹¹, nurses working in outpatient clinics and obstetrics departments showed a lower turnover intention than those working in medical and surgical wards or intensive care units.

Psycho-physical-social health

The relationship between nurses' mental,

physical, and social health, promoted by their work environment, is a recurring theme in many studies analyzed. Zhang et al.²⁵, describe that work stress directly impacts the intention to leave, even more so than job satisfaction and engagement. On the other hand, Poku et al.²⁹ and Sheng et al.²⁶ highlight that nurses' overall well-being strongly influences the intention to leave. Albougami et al.¹¹ delve into the impact of health on turnover intention, noting that better physical health predicts a higher intention to leave ($\beta = 0.012$, $p < 0.01$), while better psychological health is associated with a lower intention to leave ($\beta = -0.011$, $p < 0.01$). Kwon et al.²⁸ focus on nurses' health, stating that night shifts contribute to reduced physical health, influencing their intention to leave. Shift nurses in their sample reported more frequent sickness than nurses with regular daytime hours²⁸. Sato et al.³² examine the social aspect of health, noting that a compromised work-life balance significantly increases the intention to leave, further exacerbating stress and negatively affecting overall well-being.

Professional and Economic Recognition

Economic and professional recognition can influence nurses' intention to leave. Zhang et al.²⁵ argue that the value nurses place on their profession, which is essential for their ability to care for patients, can alter turnover intention. Similar results were found by Huang et al.²⁴, where 39.2% of the sample left their job due to inadequate recognition and a poor professional environment. Poku et al.²⁹ addressed economic factors related to turnover intention. The authors highlight the crucial role of economic incentives in reducing nurses' intention to leave. Adequate compensation helps improve job satisfaction, protecting the organization from excessive staff turnover²⁹. This hypothesis is also supported in the study by Albougami et al.¹¹, where a negative correlation was found between a nurse's gross monthly salary and their intention to resign ($r = 0.24$, $p < 0.001$). The crucial role of salary in promoting nursing staff retention is an emerging theme in the study by Malinowska-Lipień et al.¹³ Results showed that a significant percentage of nurses (75.72%) expressed their willingness to leave the hospital due to dissatisfaction with their salary. In the study, increased hospital pay significantly reduced the risk of leaving the job by 21% (OR = 0.79, CI 95% 0.70-0.90)¹³.

Table 2: Summary of organizational well-being variables intention to leave related

TITLE (AUTHOR, YEAR)	ORGANIZATIONAL WELL-BEING VARIABLES			
	Job Satisfaction	Working Conditions	Psycho-physical-social health	Professional and Economic Recognition
Quality of work-life and turnover intentions among the Ghanaian nursing workforce: A multicentre study. (Poku C., et al., 2022)	X	X	X	X
Factors affecting nurses' intention to leave their current jobs in Saudi Arabia (Albougami AS et al., 2020)	X	X	X	X
Emotional Labor, Burnout, Medical Error, and Turnover Intention among South Korean Nursing Staff in a University Hospital Setting. (Know, C.Y., et al., 2021)			X	
Nurse practice environment, perceived organizational support, general well-being, occupational burnout and turnover intention: A moderated multi-mediation model. (Sheng H., et al, 2023)		X	X	
Nurses' intention to leave their jobs in relation to work environment factors in Polish hospitals: Cross-sectional study (Malinowska-Lipień, I. et al., 2023)	X			X
Nurse Staffing, Work Hours, Mandatory Overtime, and Turnover in Acute Care Hospitals Affect Nurse Job Satisfaction, Intent to Leave, and Burnout: A Cross-Sectional Study. (Bae S.H. et al., 2024)	X	X		
A cross-sectional study on turnover intention of nurses in eastern China. (Huang H. et al., 2024)		X		X
Investigating the Effective Factors in Nurses' Intention to Leave the Critical Care Unit. (Khoshfetrat M., et al., 2023)	X	X		
The Associations among nurse work engagement, Job Satisfaction, quality of care, and Intent to leave: A National Survey in the United States (Wei H., et al., 2023)	X			
Indicators of Job Satisfaction Related to Intention to Quit in Peruvian Nurses (Paredes K.M.S. et al., 2023)	X			
Predictors of the intentions to leave among nurses in an academic medical center (Sato A. et al., 2022)		X	X	
Nurses' turnover intention in secondary hospitals in China: A structural equation modelling approach (Zhang Y. A. et al., 2021)			X	X

Discussion

The nursing staff shortage is a persistent global issue exacerbated by high nurse turnover rates¹. This study aimed to explore the relationship between organizational well-being and the intention to leave the nursing profession. The findings demonstrate a significant connection between nurses' well-being and their intention to leave the profession, with implications for management policies and improvements in working conditions³⁸. Job satisfaction emerges as a crucial variable in determining nurses' intent to leave, supported by international literature that confirms job satisfaction as one of the key factors influencing nurses' desire to leave their profession. These results align with the RN4CAST study³⁹, which surveyed²³,159 nurses across 385 hospitals in 10 European countries. The RN4CAST study reports that 9% of nurses intend to leave due to job dissatisfaction, with percentages ranging from 5% in the Netherlands and Spain to 17% in Germany. The availability of satisfied and engaged nursing resources ensures quality outcomes regarding patient safety, suggesting that healthcare organizations should implement programs to improve job satisfaction to achieve better retention results¹³.

Working conditions, including management and workload overload, emerge as significant determinants of turnover intention. Work environments characterized by high workloads, overtime, ineffective relationships, lack of supervisor support, and scarce resources are identified as factors influencing nurses' desire to leave the profession^{24,26,27,29,30}. As expected from current conceptual models for analyzing organizational well-being in nursing³, working environments with high work demands and limited nursing resources may lead to adverse outcomes regarding nursing retention, confirming the results of this review. There is a clear need for healthcare organizations to improve working conditions to encourage nurses to remain with their employers²⁴. In the future, reducing nurses' intention to leave the profession can be achieved by improving the nursing work environment, offering adequate professional development plans, and improving treatment conditions. This approach can help maintain the stability of nursing teams²⁴.

Nurses' physical and mental health strongly correlates with their intention to leave the profession. Studies by Poku et al.²⁹ and Albougami et al.¹¹ show that a deterioration in psychological health is associated with an increased intention to leave. Work-related stress and burnout, significant risk factors for mental health, negatively impact job satisfaction and increase the desire to leave. Sato et al.³² note that an imbalance between work and personal life and prolonged working hours exacerbate stress, negatively affecting health and, consequently, turnover intention. Protecting the physical and mental health of nursing staff is essential for individual well-being and plays a strategic role in ensuring nursing retention. Investing in mental health support programs, improving work conditions, and promoting better work-life balance can significantly reduce turnover and improve the quality of care provided⁴⁰.

Professional and economic recognition are also significant determinants in mitigating turnover intention. Zhang et al.²⁵ suggest that the perception of professional value and economic rewards affects turnover intention. Studies by Poku et al.²⁹ and Albougami et al.¹¹ highlight that adequate compensation can reduce the intention to leave, while inadequate pay is associated with a greater propensity for turnover. However, Malinowska-Lipień et al.¹³ reports that despite increased financial incentives, nurse satisfaction was not significantly improved. The results of this review underline the importance of recognizing nursing staff, both professionally and economically. Providing financial incentives may not be sufficient to reduce turnover. As proposed by current conceptual models for analyzing work well-being, healthcare organizations should focus on ensuring a proper balance between working conditions and professional and economic recognition³.

Limitations

Despite the findings, this literature review has limitations. The studies analyzed include multiple variables and do not always use the same tools to measure similar concepts. Additionally, there is a lack of a clear definition of organizational well-being in the literature which guides research³. Therefore, comparing study results through secondary analysis is

complex. Each of the studies included in the research employed a cross-sectional design, capturing different variables in relation to the cultural values of the specific continent where the research was conducted. The selected studies, in fact, represent the global landscape, and the influence of cultural biases within this review must be taken into consideration. Despite this potential bias, the findings reached by the different authors converge around a central concept: a low degree of organizational well-being—characterized by poor job satisfaction, suboptimal working conditions, low financial and professional recognition—can lead nurses to consider leaving their profession.

Conclusion

This review underlined a relationship between the nursing organizational well-being and the intention to leave the profession. The findings of this study identify several aspects of organizational well-being that can significantly impact nurses' intention to leave. The desire to leave the profession is more common among nurses who experience lower job satisfaction and work in environments with limited resources, inadequate social relationships, and high job demands. The effects of working well-being on the nurses' mental, physical, and social health are also significant in predicting the intention to leave. Nurses experiencing work-related stress and burnout, along with poorer physical, mental, and social health, may be more inclined to leave their jobs. Finally, a lack of professional and economic recognition can also contribute to the desire to leave one's position. The increasing attention to organizational well-being and the intention to leave the nursing profession suggests further research, using standardized instruments that evaluate similar organizational aspects.

Implications for Management

Understanding the organizational factors influencing nurse turnover can help improve nurses' intention to stay and reduce turnover rates⁴¹. The findings highlight the importance of organizational well-being in promoting nurse retention and provide healthcare managers with a framework to investigate the causes of turnover intention. Hospital managers should address nurses' needs to remain in the workforce and enhance their organizational well-being by improving the work environment, general health, and job satisfaction. Allocate

nursing human resources reasonably to reduce nurses' workload appropriately, strengthen the protection of nurses during work, and create a harmonious working atmosphere that prevents nurse turnover intention²⁵. Nurse managers should also program supportive interventions to ensure nurses' psychological health and promote job satisfaction among nursing personnel²⁸. Therefore, implementing strategies to improve organizational culture, such as strengthening supervisor support and promoting organizational justice, can have long-term effects on staff organizational well-being, preventing nurses from leaving⁴². Addressing organizational well-being variables will allow managers to achieve recruitment and retention results, reducing turnover costs and the need for new staff training.

© The Author(s), under exclusive licence to infermieristica Editore Limited 2024.

References

1. Sili A, Fiorini J. Gli infermieri nei luoghi di cura: Il nuovo paradigma del benessere organizzativo. infermieristica Editore; 2024.
2. International Labour Organization. Workplace well-being. Published online 2009. https://www.ilo.org/safework/areasofwork/workplace-health-promotion-and-well-being/WCMS_118396/lang--en/index.htm#:~:text=Workplace%20Wellbeing%20relates%20to%20all,at%20work%20and%20work%20organization.
3. Della Bella V, Fiorini J, Gioiello G, Zaghini F, Sili A. Towards a new conceptual model for nurses' organizational well-being: An integrative review. *J Nurs Manag.* 2022; 30:2833-2844. doi:10.1111/jonm.13750
4. Gioiello G, Zaghini F, Della Bella V, Fiorini J, Sili A. Measuring Nurses' Organizational Well-Being: A Systematic Review of Available Instruments. *Eval Health Prof.* Published online October 19, 2023:01632787231207018. doi:10.1177/01632787231207018
5. Bakker AB, Demerouti E. Job demands-resources theory: Taking stock and looking forward. *J Occup Health Psychol.* 2017; 22:273-285. doi:10.1037/ocp0000056
6. Bui T, Zackula R, Dugan K, Ablah E. Workplace Stress and Productivity: A Cross-Sectional Study. *Kans J Med.* 2021; 14. doi:10.17161/kjm.vol1413424
7. Fiorini J, Zaghini F, Mannocci A, Sili A. Nursing leadership in clinical practice, its efficacy and repercussion on nursing-sensitive outcomes: A cross-sectional multicentre protocol study. *J Nurs Manag.* 2022; 30:3178-3188. doi:10.1111/jonm.13739
8. Zaghini F, Biagioli V, Prandi C, Fida R, Sili A. [Nurses and Organizational Citizenship Behavior: contribution to the Italian validation of the Podsakoff et al. scale]. *Med Lav.* 2015; 106:460-471.
9. Bordignon M, Monteiro MI. Predictors of nursing workers' intention to leave the work unit, health institution and profession. *Rev Lat Am Enfermagem.* 2019;27. doi:10.1590/1518-8345.3280.3219
10. World Health Organization. Global Strategy on Human Resources for Health: Workforce 2030. World Health Organization; 2016. Accessed November 11, 2024. <https://iris.who.int/handle/10665/250368>
11. Albougami AS, Almazan JU, Cruz JP, et al. Factors affecting nurses' intention to leave their current jobs in Saudi Arabia. *Int J Health Sci.* 2020; 14:33-40.
12. Wei H, Horsley L, Cao Y, et al. The associations among nurse work engagement, job satisfaction, quality of care, and intent to leave: A national survey in the United States. *Int J Nurs Sci.* 2023; 10:476-484. doi:10.1016/j.ijnss.2023.09.010
13. Malinowska-Lipień I, Gabryś T, Kózka M, Gniadek A, Brzostek T. Nurses' intention to leave their jobs in relation to work environment factors in Polish hospitals: Cross-sectional study. *Med Pr.* 2023; 74:377-387. doi:10.13075/mp.5893.01426
14. Bahlman-van Ooijen W, Malfait S, Huisman-de Waal G, Hafsteinsdóttir TB. Nurses' motivations to leave the nursing profession: A qualitative meta-aggregation. *J Adv Nurs.* 2023; 79:4455-4471. doi:10.1111/jan.15696
15. Fang P, Liu X, Huang L, Zhang X, Fang Z. Factors that influence the turnover intention of Chinese village doctors based on the investigation results of Xiangyang City in Hubei Province. *Int J Equity Health.* 2014; 13:84. doi:10.1186/s12939-014-0084-4
16. Christensen JO, Knardahl S. "I'm too old for this!": A prospective, multilevel study of job characteristics, age, and turnover intention. *Front Psychol.* 2022; 13:1015313. doi:10.3389/fpsyg.2022.1015313
17. Choi H, Shin S. The Factors That Affect Turnover Intention According to Clinical Experience: A Focus on Organizational Justice and Nursing Core Competency. *Int J Environ Res Public Health.* 2022; 19. doi:10.3390/ijerph19063515
18. Zaghini F, Fiorini J, Moons P, Sili A. Cardiovascular nurses and organizational well-being: a systematic review. *Eur J Cardiovasc Nurs.* 2024; 23:213-220. doi:10.1093/eurjcn/zvad078
19. Watson CE, Bernabeu-Tamayo MD, Giménez-Díez D, Lillo-Crespo M, Leyva-Moral JM. Factors Contributing to Nurses' Intention to Leave the Profession: A Qualitative Study in Catalonia, Spain, following the Latest Waves of COVID-19. *J Nurs Manag.* 2024; 2024:7971020. doi:10.1155/2024/7971020
20. Moher D, Liberati A, Tetzlaff J. [Linee guida per il reporting di revisioni sistematiche e meta-analisi: il PRISMA Statement]. *Evidence.* 2015; 6. doi:10.4470/e1000114
21. Tricco AC, Lillie E, Zarin W, et al. PRISMA Extension for Scoping Reviews (PRISMA-ScR): Checklist and Explanation. *Ann Intern Med.* 2018; 169:467-473. doi:10.7326/M18-0850
22. Aromataris E, Lockwood C, Porritt K, Pilla B, Jordan Z, eds. *JBIMES-24-01*. JBI Manual for Evidence Synthesis. JBI; 2024. doi:10.46658/JBIMES-24-01
23. Ouzzani M, Hammady H, Fedorowicz Z, Elmagarmid A. Rayyan—a web and mobile app for systematic reviews. *Syst Rev.* 2016; 5:210. doi:10.1186/s13643-016-0384-4
24. Huang H, Wang L, Qian R, Zhang Y. A cross-sectional study on turnover intention of nurses in eastern China. *BMC Health Serv Res.* 2024; 24. doi:10.1186/s12913-024-10849-9
25. Zhang YA, Zhang XN, Xu N, Yun E. Nurses' turnover intention in secondary hospitals in China: A structural equation modelling approach. *J Nurs Manag.* 2021; 29:2216-2224. doi:10.1111/jonm.13379

26. Sheng H, Tian D, Sun L, Hou Y, Liu X. Nurse practice environment, perceived organizational support, general well-being, occupational burnout and turnover intention: A moderated multi-mediation model. *Nurs Open*. 2023; 10:3828-3839. doi:10.1002/nop2.1641
27. Bae SH. Nurse Staffing, Work Hours, Mandatory Overtime, and Turnover in Acute Care Hospitals Affect Nurse Job Satisfaction, Intent to Leave, and Burnout: A Cross-Sectional Study. *Int J Public Health*. 2024; 69. doi:10.3389/ijph.2024.1607068
28. Kwon CY, Lee B, Kwon OJ, Kim MS, Sim KL, Choi YH. Emotional Labor, Burnout, Medical Error, and Turnover Intention among South Korean Nursing Staff in a University Hospital Setting. *Int J Environ Res Public Health*. 2021; 18:10111. doi:10.3390/ijerph181910111
29. Poku CA, Alem JN, Poku RO, Osei SA, Amoah EO, Ofei AMA. Quality of work-life and turnover intentions among the Ghanaian nursing workforce: A multicentre study. *Stamov Roštnagel C, ed. PLOS ONE*. 2022; 17:e0272597. doi:10.1371/journal.pone.0272597
30. Khoshfetrat M, Dahmardeh AR, Hosseini BMK, Keykha A. Investigating the Effective Factors in Nurses' Intention to Leave the Critical Care Unit. *Arch Anesthesiol Crit Care*. 2023; 9:294-303. doi:10.18502/aacc.v9i4.13519
31. Paredes KMS, Rodriguez SKT, Arévalo-Ipanaqué JM, et al. Indicator of Job Satisfaction Related to Intention to Quit in Peruvian Nurses. *Acad J Interdiscip Stud*. 2023; 12:75-83. doi:10.36941/ajis-2023-0096
32. Sato A, Sato Y, Sugawara N, et al. Predictors of the intentions to leave among nurses in an academic medical center. *Psychiatry Clin Neurosci Rep*. 2022; 1. doi:10.1002/pcn5.48
33. Wang Y, Yuan H. What is behind high turnover: a questionnaire survey of hospital nursing care workers in Shanghai, China. *BMC Health Serv Res*. 2018; 18:485. doi:10.1186/s12913-018-3281-9
34. Van Der Heijden B, Mahoney CB, Xu Y. Impact of job demands and resources on nurses' burnout and occupational turnover intention towards an age-moderated mediation model for the nursing profession. *Int J Environ Res Public Health*. 2019; 16. doi:10.3390/ijerph16112011
35. Donabedian A. *The Definition of Quality and Approaches to Its Assessment*. Health Administration Press; 1980.
36. Wei H. The development of an evidence-informed Convergent Care Theory: Working together to achieve optimal health outcomes. *Int J Nurs Sci*. 2022; 9:11-25. doi:10.1016/j.ijnss.2021.12.009
37. Price JL. Reflections on the determinants of voluntary turnover. *Int J Manpow*. 2001; 22:600-624. doi:10.1108/EUM0000000006233
38. Heinen MM, Van Achterberg T, Schwendimann R, et al. Nurses' intention to leave their profession: A cross sectional observational study in 10 European countries. *Int J Nurs Stud*. 2013; 50:174-184. doi:10.1016/j.ijnurstu.2012.09.019
39. Sermeus W, Aiken LH, Van den Heede K, et al. Nurse forecasting in Europe (RN4CAST): Rationale, design and methodology. *BMC Nurs*. 2011;10:6. doi:10.1186/1472-6955-10-6
40. Jun J, (Martelly) Ojemeni M, Kalamani R, Tong J, Crecelius M. Relationship between nurse burnout, patient and organizational outcomes: Systematic review. *Int J Nurs Stud*. 2021;119:103933. doi:10.1016/j.ijnurstu.2021.103933
41. Wu F, Lao Y, Feng Y, Zhu J, Zhang Y, Li L. Worldwide prevalence and associated factors of nursing staff turnover: A systematic review and meta-analysis. *Nurs Open*. 2024; 11:e2097. doi:10.1002/nop2.2097
42. Pedrosa J, Sousa L, Valentim O, Antunes V. Organizational culture and nurse's turnover: A systematic literature review. *Int J Healthc Manag*. 2021; 14:1542-1550. doi:10.1080/20479700.2020.1801160