

Scientific Paper Entitled: The Reality Of Work Turnover In The Government Health Sector In The Kingdom Of Saudi Arabia And Its Impact On The Performance Of Health Personnel

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Summary

Turnover in the healthcare industry has gained international attention and is a major factor affecting how financially sound healthcare systems are. The problem has an impact on healthcare expenses, but it also affects accessibility and quality. One country that stands out for having a health care system plagued by high rates of employee turnover and intention to leave is Saudi Arabia. The most important factors influencing the departure of foreign healthcare professionals were discovered to be wage benefits and workload factors, closely followed by subpar hospital facilities and housing. The purpose of this study is to look into the factors that lead to employees' intents to leave their jobs as well as the

connection between job satisfaction and work stress among Saudi Arabian healthcare workers.

Keywords: Work Turnover, Government Health Sector, Kingdom Of Saudi Arabia, Performance, Health Personnel.

Introduction

The concepts of nurse turnover and turnover intention are not well operationalized or understood by all parties, despite the fact that nurse turnover is a crucial indicator for health care systems. Furthermore, migration both inside and outside the organization, as well as voluntary and/or involuntary departure, are included in the measurement of turnover in nursing literature. Inconsistencies in the measurement of turnover among studies have led to variation in turnover rates, aside from changes in sample characteristics (e.g., primary care nurses vs. critical care nurses). Additionally, a number of words, such as the intention to quit, the intention to depart, and projected turnover, are used in nursing literature to describe the intention to turnover. Interestingly, one of the nations with the most troublesome health care systems is Saudi Arabia, which has high turnover and intention rates. The shortage of medical experts in the region poses a problem to the Saudi health care system. Because most health workers are foreign nationals, there is a significant turnover rate and disruption in the workforce. Investing in trained medical personnel is one of the biggest expenses for health care providers (Falatah & Salem, 2018).

Because there are more opportunities and training facilities in Western nations, a significant number of doctors, nurses, and paramedical staff members in the Kingdom of Saudi Arabia tend to relocate there. Furthermore, because there are now little resources available, the Saudi restrictions about hiring and Saudization are driving up labour costs. In order to enhance the number of health care professionals in the area and encourage competent Saudis to pursue careers, the government plays a significant role in setting up career-focused educational institutions. In order to close this gap and draw in skilled workers from outside, the government must strengthen employment laws and finance the private sector. The kingdom now has a greater need for registered nurses due to the rapid growth of its population and the expansion of its healthcare system. The quantity of Saudi nurses does not keep up with the rising demand, despite numerous government programs and

initiatives aimed at augmenting it. Consequently, foreigners make up the majority of Saudi Arabia's nursing workforce. There is no denying that the cost and quality of medical services are impacted by the reliance on foreign nurses. Few studies have looked into nurse turnover in Saudi Arabia, despite the fact that it prevents the country's health care system from expanding (Aboshaiqah, 2016).

These days, companies are facing a labor scarcity as well as a high rate of employee attrition. The global employee turnover rate peaked in the recent ten years. One of the most crucial pillars of the healthcare system is its workforce. The aim of healthcare personnel turnover is still a global problem and is regarded as one of the most significant problems facing businesses. Lack of qualified workers and an uneven distribution of health professionals across the workforce are caused by high turnover rates. The annual report of the Ministry of Health in Saudi Arabia states that the country's health sector has a high employee turnover rate, with 4% of 274,637 medical and non-medical staff leaving their jobs in 2019. As a result, it suggests that in addition to making greater efforts to keep employees in the health sector, inquiries into the reasons behind these high turnover rates are necessary. By acknowledging their human side, organizations may become more effective, productive, foster brand loyalty, produce better work, and attain greater success. As a result, it is thought that businesses with superior human capital management will succeed more frequently. Recruiting, training, and career development in human resource management would allow employees to do higher-quality work. Turnover is one criterion used to evaluate the effectiveness of an organization. The operations of the business are negatively impacted by employee turnover, which can result in decreased revenue, dissatisfied customers, expensive training expenses, and wasted time and effort during the hiring process. Employee turnover will therefore have an impact on the overall performance and productivity of the company. Organizations should look at the things that influence an employee's decision to quit. The literature indicates that work stress and job satisfaction are closely correlated with turnover intention; taking advantage of this relationship could significantly alter the future of the health sector (Saragih et al., 2020).

Study Problem

Exploring the reality of work turnover in the government health sector in the Kingdom of Saudi Arabia and its impact on the performance of health personnel.

Study questions:

1. What are the factors leading to work turnover in the government health sector in the KSA?
2. What is the impact of work turnover on health personnel performance?
3. What are the strategies to address turnover and improve retention?

Study objectives:

1. To investigate the antecedents of turnover intentions.
2. To study the relationship between work stress and job satisfaction among health care staff in Saudi Arabia.
3. To overview impact of work turnover on health personnel performance.
4. To show strategies to address turnover and improve retention.

Study limitations:

- Geographical limitations: The study will be applied in the Kingdom of Saudi Arabia.
- Time limitations: The study will be implemented in 2022.
- Human limitations: The study will be applied to a sample of health personnel in the government health sector in the Kingdom of Saudi Arabia.
- Subject limitations: limited to studying the "The reality of work turnover in the government health sector in the Kingdom of Saudi Arabia and its impact on the performance of health personnel".

Literature Review

Turnover intention is the probability that a worker will leave a company. One of the biggest challenges that companies confront is turnover intentions, which are defined by experts as "the conscious and deliberate willingness to leave the organization." It has been demonstrated that there is a high correlation between intended and actual turnover (Nassani et al., 2021).

Work Turnover in the Saudi Health Sector

One of the biggest issues facing many healthcare companies is turnover intention, which can result in understaffing of nurses, higher levels of stress at work from heavier workloads, decreased productivity, job unhappiness, and the desire to leave and join another healthcare company. Increased attrition is detrimental to patients' health as well (Albougami et al., 2020).

- **Work Stress and turnover intention**

One important issue that could be the cause of an employee's intention to leave the company is work stress. Researchers discovered that turnover intention is positively impacted by work stress. Furthermore, a large body of research shown that job stress raises the intention to leave. Research suggests that a high level of job stress is caused by a bad emotional state and a heavy workload, which in turn leads to a high intention to leave the company. Additionally, working hours have been found to be a noteworthy and significant element that influences health workforce members' intentions to remain in or leave their jobs. High-stress employees frequently have strong intentions of quitting their jobs. Organizations must enhance their selection process since, while they strive for the finest candidates, this creates a demanding and stressful work environment where individual traits account for the majority of the stress. Turnover costs can be decreased by enhancing the organization management system and the selection procedure. According to studies, offering flexible work schedules to staff members lowers their stress levels at work and, consequently, their desire to leave. Researchers advise businesses to design initiatives that allow staff members to participate in their work. Furthermore, offering a flexible work schedule and a desirable compensation helps reduce stress at work and discourage employees from considering quitting (Ferdian et al., 2020).

- **Job satisfaction and turnover intention**

Job satisfaction is a significant predictor of employee turnover. Job satisfaction is described as "an affective or emotional response to various aspects of one's job that represents the degree to which one enjoyed one's job". Job satisfaction is described as a combination of cognitive, physiologic, and environmental factors that cause an individual to be satisfied or dissatisfied with his or her work. Employee job satisfaction is influenced by the subjective nature of the work they do. Workers will have a positive attitude about their job if they are satisfied with it, and vice versa. The job satisfaction study

examines ways to discourage voluntary job turnover of employees. To reduce turnover organizations should implement strategies to improve worker satisfaction. When workers have negative emotional reactions to hygiene factors on the employment, job dissatisfaction drives employee turnover. Similarly, when performance and motivation are high, so job satisfaction is high. In the turnover literature, the relationship between work satisfaction and voluntary turnover has received considerable attention (Cote, 2017).

The most notable finding of the association between work happiness and turnover is that employees who are not happy with their jobs are more likely to leave than those who are. Researchers discovered that executives must acknowledge the need for increased job satisfaction. In addition, it's critical to lower turnover costs, improve instruction, and hold onto qualified personnel. Workers continue to demand more from their supervisors. Employee satisfaction will rise when someone advances and gets promoted in the company. Hence, regardless of their line of work, an individual who achieves self-actualization might have a high degree of job satisfaction. A strong feeling of work accountability is lacking, which contributes to employee dissatisfaction and desire to quit. After a long period of service, an employee is less likely to want to leave the organization. Research indicates that when companies prioritize their workers' health and happiness, their loyalty and attrition rates decrease. In their study, the researchers discovered a significant inverse association between intentions to leave one's employment and job happiness. Furthermore, they discovered that a low level of job satisfaction could be a sign that a worker plans to quit. Thus, managers that increase employee work satisfaction will see a decrease in staff turnover (Huang & Su, 2016).

Impact on Health Personnel Performance

Numerous nations' health organizations have experienced challenges such as a lack of medical specialists and a rise in employee turnover, particularly among nurses. Delivering high-quality treatment and meeting patient demands are negatively impacted by nurse turnover. Furthermore, a lack of nurses results in understaffing, which puts more strain and responsibility on other employees. As a result, there could be significant differences in how nurses behave in their line of work, which would result in low productivity and work satisfaction before they leave for another company. Poor

patient outcomes, including as higher patient mortality and infection and mistake rates, are also caused by understaffing nurses. These difficulties and other organizationally related factors put nurses under a lot of stress, which lowers the quality of their working lives (Kaddourah et al., 2018).

Strategies to Address Turnover and improve retention

- **Salaries and Wages Adequate and Fair Compensation**

An employee's base salary for work-related activities is known as their wage, and it's common to think of this as their main source of income, helping them to satisfy their basic necessities. Receiving just compensation and benefits is a key factor in inspiring employees to put in a lot of effort to meet organizational objectives. It is also thought to be among the most important sources of motivation. Bonus and compensation selections are usually made by companies based on an employee's work history, educational background, and personal abilities. Wages are a key factor in determining an individual's quality of working life (QWL) since they show how well-off they are relative to their needs and wants. Bonuses are given to employees who believe they are in the right company and view their jobs as their main source of income. These employees are also compensated properly. Numerous studies have demonstrated that income is one of the factors used to evaluate quality of work life (QWL) since there is a positive and significant association between correct remuneration, fair bonus schemes, and QWL (Chanana & Kumar Gupta, 2016).

- **work-life balance policies**

The services and tools that offer personal protection are included in the occupational safety conditions that make up the work environment. Employees in good health are more productive, which means they are extremely important to the company. The workplace offers a range of secure, healthy, and psychologically sound working environments, as well as appropriate work schedules, personal care time, opportunities for professional growth, and access to work-related data. The company should aim to lower medical risks and physical injuries while also fostering a safe and healthy work environment so that staff members can work without fear of illness or injury (Al-Otaibi, 2020).

- **Opportunities for Promotion and Advancement**

The reallocation of a person to a higher level and a position with more duties, responsibilities, and authority than their

current one is known as promotion. One of the most significant things that inspire employees to raise their game, develop their skills, and attain functional stability is the possibility of advancement. As a result, these are factors related to job satisfaction that have a big influence on worker morale and performance. They also provide a strong incentive to advance and grow, which boosts productivity and helps the organization accomplish its goals. Opportunities for promotion are seen to be one of the primary factors in determining QWL (Rani, 2016).

Aim of the study:

To detect the reality of work turnover in the government health sector in the Kingdom of Saudi Arabia and its impact on the performance of health personnel.

Methods

Research design:

In the Kingdom of Saudi Arabia, a descriptive analytic cross-sectional research design was conducted with the purpose of detecting The reality of work turnover in the government health sector in the Kingdom of Saudi Arabia and its impact on the performance of health personnel. This design is a method that is both systematic and organized, and it is used to gather data from a sample of individuals or entities that are part of a larger population. The major objective of this design is to provide a comprehensive and accurate description of the characteristics, behaviors, perspectives, or attitudes that are present within the target group.

Research Setting:

The study will be conducted in in the government health sector in the Kingdom of Saudi Arabia.

Subject:

A sample of 800 health cadres selected for a specific purpose, Those health cadres who are employed in the government health sector in the Kingdom of Saudi Arabia, both male and female, will be required to meet specific inclusion criteria in order to be considered for inclusion in the sample.

Sample size:

Study sample was 800 of health cadres selected via the systematic random sampling method.

When conducting an empirical research with the purpose of drawing conclusions about a population based on a sample, the size of the sample is an essential component to consider. In actual fact, the sample size that is used in an investigation is established by taking into consideration the cost of data collection as well as the need to have enough statistical power.

Inclusion Criteria:

The inclusion criteria were set as follows:

- (1) health cadres who working in the government health sector in the Kingdom of Saudi Arabia.
- (2) female and male.
- (3) from Saudi Arabia.

Sampling Technique:

Participants submitted data through a survey. Data will be collected by questionnaire.

Tools for data collection:

It will deal with Participants demographic such like age, gender, marital status and educational level. Also issues concerning the reality of work turnover in the government health sector in the Kingdom of Saudi Arabia and its impact on the performance of health personnel.

Ethical considerations

Data was submitted by individuals via questionnaires. Participants were notified that participation in the research would be elective and that their anonymity would be preserved. Data will be acquired using a self-reported questionnaire. The ethics committee will offer clearance for this initiative. Before the questionnaire was conducted, each participant supplied signed informed consent.

Results

Validity and Reliability Tests:

Internal Consistency Reliability Calculation:

After determining the legitimacy of the internal consistency between the statements of each objective and the overall score for the corresponding axis, Pearson's Coefficient Correlation was computed in order to validate the validity of

the statement. Following the construction of the research instrument and the establishment of its apparent validity by the presentation of the instrument to a panel of arbitrators who were both knowledgeable and experienced in the area, this step was taken.

For the purpose of determining whether or not the questionnaire has an internal reliability, it was administered to a pilot sample that consisted of thirty members of the healthcare staff. After that, the researchers determined the correlation coefficients in order to assess the internal validity of the research instrument, as the tables that follow demonstrate:

Table (1): Correlation coefficients of items in the first axis with the total score.

Statement number	r	Statement number	r
1	0.496**	7	0.757**
2	0.868**	8	0.456**
3	0.632**	9	0.721**
4	0.646**	10	0.301**
5	0.891**	11	0.759**
6	0.654**		

****:** p value <0.001

It is clear from the previous table that all of the statements are significant at the 0.01 level, as the values of the dimensional correlation coefficients ranged between (0.301 - 0.891), which are excellent correlation coefficients, and this offers a hint of strong internal consistency coefficients as well. It provides strong validity indications that may be relied in utilizing the present research technique.

Reliability of the study tool:

As for testing the reliability of the questionnaire, we utilized Cronbach's alpha coefficient, and the accompanying table illustrates the reliability axis of the research instrument as follows:

Table (2): Cronbach's alpha coefficient reliability coefficient for the total score of the questionnaire

	No. of statements	Cronbach's alpha

comprehensive quality standards questionnaire	11	0.856
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The table showed that the Cronbach's alpha reliability coefficient for the total score of the questionnaire was (0.856), which is a good reliability coefficient suitable for the study.

Application Method of the Study Tool:

After collecting the study data, the researchers reviewed it in preparation for inputting it into the computer for statistical analysis. Subsequently, they transcribed it onto appropriate tables, provided commentary, and linked it to previous studies. Responses were given five levels: strongly agree (5 points), agree (4 points), neutral (3 points), disagree (2 points), and strongly disagree (1 point). To determine the length of the pentavalent scale cells used in the study Phrases, the range (5-1=4) was calculated and divided by the number of questionnaire cells to obtain the correct cell length (4/5=0.80). This value was then added to the lowest value on the scale (or the beginning of the scale, which is one) to determine the upper limit of the cell. The following table illustrates the method for correcting the Likert pentavalent scale.

Table (3): Method for correcting the scale.

Scale	The weight	The average arithmetic mean value ranges
Strongly Disagree	1	From 1 to less than 1.80
Disagree	2	From 1.81 to less than 2.60
Neutral	3	From 2.61 to less than 3.40
Agree	4	From 3.41 to 4.20
Strongly agree	5	From 4.21 to 5.

Table (4): Socio demographic characteristics of the studied participants

Sociodemographic variables	Cases (n=500)	
	No.	%
Age category (years)		
Less than 25 years	100	20%

From 26 to 35 years	120	24%
From 36 to 47 years	90	18%
More than 47 years	190	38%
Gander		
Male	300	60%
Female	200	40%
Marital status		
single	180	36%
married	160	32%
absolute	158	31.6%
Job		
doctor	50	10%
pharmaceutical	40	8%
specialist	180	36%
Technical	130	26%
nurse	65	13%
Administrative	35	7%
Educational status		
Diploma or less	160	32%
Bachelor's	200	40%
Postgraduate studies (PhD - Master)	140	28%
Years of experience		
1 – 5 years	130	26%
6 – 10 years	120	24%
11 - 15 years	140	28%
16 – 25 years	110	22%

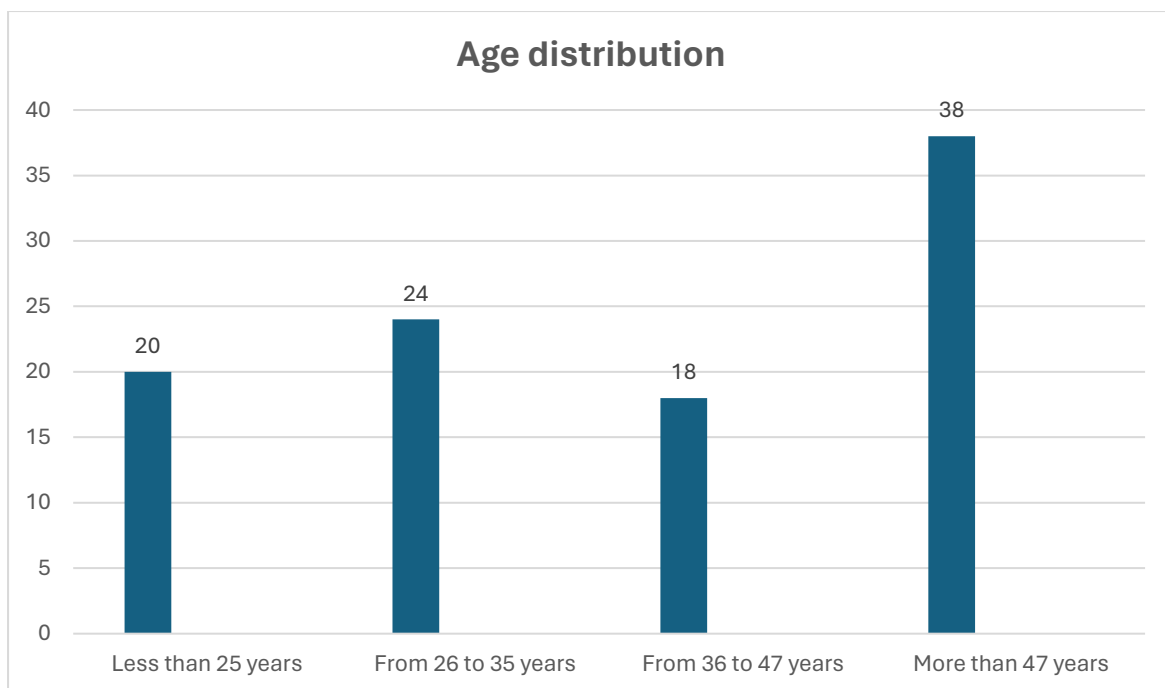


Fig (1): Age distribution among the studied participants

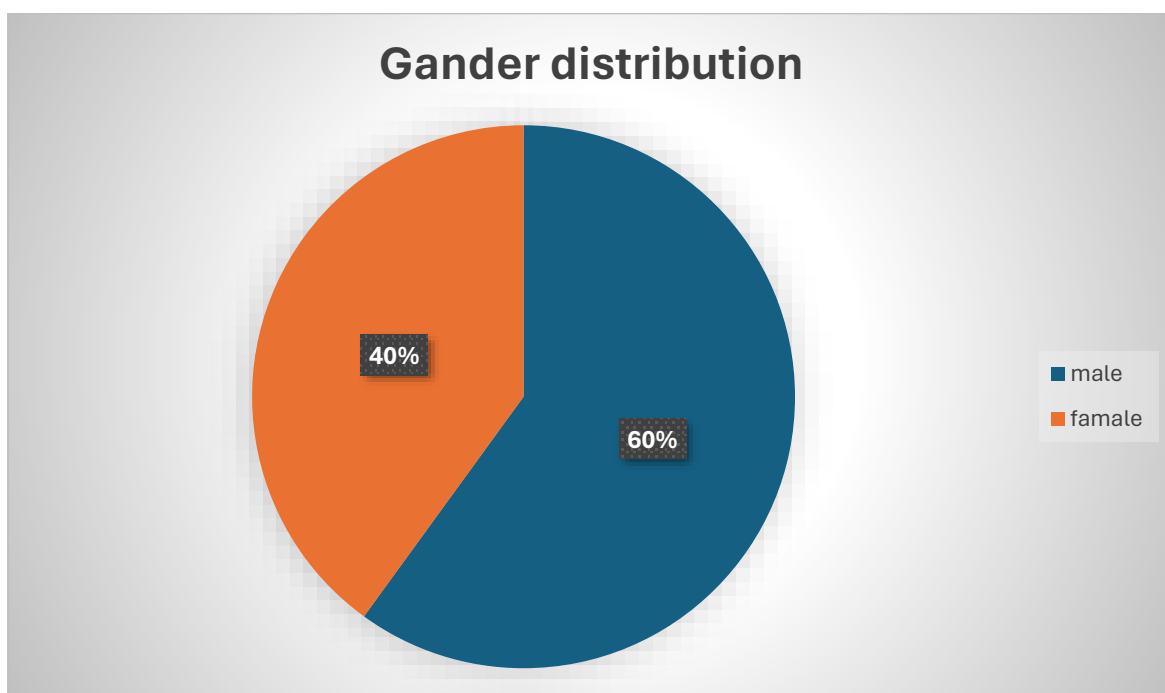


Fig (2): gander distribution among the studied participants

Table (1) & Figure (1-3) showed that 18% and 24% of the studied participants were aged 36 -47 years and 26-35 years respectively. Regarding to the gander, more than half (60%) were males and 40% were females. 36% of the studied participants were specialist while only %26 was Technical. As

regard to years of experience, 24% of the studied participants worked from 6 – 10 years.

Secondly: Results Related to the Axes of the Questionnaire:

Table (5): response of the studied participants regarding to the first axe (Work Turnover) of Questionnaire

No.		Cases (n=500)			
		Mean	SD	Category	Rank
1-	have you been working in the government health sector for long time?	4.23	0.865	Strongly agree	3
2-	Have you personally experienced or witnessed turnover among health personnel in your department/organization in the past year?	3.58	0.824	Agree	7
3-	Low salary and benefits contribute to turnover among health personnel in the government health sector	3.75	0.722	Agree	6
4-	Limited career advancement opportunities contribute to turnover among health personnel in the government health sector	4.11	0.67	Agree	5
5-	Heavy workload contributes to turnover among health personnel in the government health sector	4.52	0.865	Strongly agree	1
6-	Lack of recognition/appreciation contributes to turnover among health personnel in the government health sector	4.26	0.758	Strongly agree	2

7-	Burnout and stress contribute to turnover among health personnel in the government health sector	4.22	0.657	Strongly agree	4
8-	Inadequate training and support contribute to turnover among health personnel in the government health sector	3.42	0.642	Agree	8
Total score		3.93	0.788	Agree	

From the results shown in Table (5), it is evident that there is variation in the agreement among the study participants regarding the comprehensive quality standards and the productivity of health personnel in the government health sector in the Kingdom of Saudi Arabia. The participants' agreement averages ranged from (3.42 to 4.52), falling into the fourth and fifth category of the Likert scale, indicating agreement to strongly agreement with the study tool. This demonstrates consistency in agreement among the study participants regarding the reality of work turnover in the government health sector in the Kingdom of Saudi Arabia and its impact on the performance of health personnel.

Phrase (5): Heavy workload contributes to turnover among health personnel in the government health sector? ranked first with an average agreement of (4.52)

Phrase (6): Lack of recognition/appreciation contributes to turnover among health personnel in the government health sector. ranked second with an average agreement of (4.26)

Phrase (1): have you been working in the government health sector for long time? Ranked third with an average agreement of (4.23)

Table (6): response of the studied participants regarding to the second axe (Impact on Performance) of Questionnaire

No.		Cases (n=500)			
		Mean	SD	Category	Rank
1-	you perceive the impact	4.132	0.699	Agree	2

	of turnover on your own performance and job satisfaction somewhat positive				
2-	Have you observed any changes in the quality of patient care as a result of turnover in your department/organization?	3.735	0.741	Agree	3
3-	do you think turnover affect the overall performance of health personnel in the government health sector?	4.612	0.831	Strongly Agree	1
Total score		4.31	0.821	Strongly agree	

Phrase (3): do you think turnover affect the overall performance of health personnel in the government health sector? ranked first with an average agreement of (4.612)

Phrase (1): you perceive the impact of turnover on your own performance and job satisfaction somewhat positive. ranked second with an average agreement of (4.132)

Phrase (2): Have you observed any changes in the quality of patient care as a result of turnover in your department/organization? Ranked third with an average agreement of (3.735)

Discussion

One of the most serious challenges that the government health sector in the Kingdom of Saudi Arabia faces is employee turnover, which has far-reaching ramifications for both the health care of patients and the workers who provide it. The reality of turnover, which is impacted by variables such as low compensation, restricted career growth prospects, hard workloads, and burnout, causes disruptions in the stability of healthcare teams. The state of morale, motivation, and overall work satisfaction among health staff is negatively impacted as a result of this volatility (Ferdian et al., 2020).

The effect that employee turnover has on performance is significant. The quality of patient treatment is diminished,

workflow and continuity of care are disrupted, the workload of the remaining staff is increased, and the workload of the personnel is increased. In addition, employee turnover leads to the loss of key institutional knowledge and experience, which in turn hinders the effectiveness and development of the business (Albougami et al.,2020).

Conclusion

In conclusion, the health industry needs to acknowledge the demands of its workers and provide a suitable working environment. This study found that although health care professionals were somewhat stressed out, they were happy with their jobs. Physicians and hospital employees are the backbone of the health sector. The performance of the hospital is the responsibility of the physicians and medical staff. Health sector training departments should be in charge of giving hospital staff basic training so that tension among medical and non-medical staff may be decreased and high job satisfaction can be increased. The medical staff should work in a welcoming and encouraging environment in the health care departments and centres. They can easily increase job satisfaction by continuing to provide their medical workers with remuneration and appraisals.

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