



## The Role of Quality Work of Life on Turnover Intention in Gading Pluit Hospital

Kartika Lilisantosa<sup>1</sup>, Rokiah Kusumapradja<sup>2</sup>, Rina Anindita<sup>3</sup>, Endang Ruswanti<sup>4</sup>

<sup>1,2,3,4</sup>Master of Hospital Administration Program, Faculty of Health Esa Unggul University, Jakarta, Indonesia

[rokiah.kusumapradja@esaunggul.ac.id](mailto:rokiah.kusumapradja@esaunggul.ac.id)

**Abstract:** Turnover is a problem, often faced by an organization, including hospital organizations. High nurse turnover will disrupt hospital productivity, and increase hospital budgets to carry out recruitment, selection and training. Nurses might have the desire to move (Turnover Intention) which results in the nurse's decision to leave her job. Nurse turnover at Gading Pluit Hospital showed an increase from 9.3% (in 2019) to 15.5.0% (in 2020) with the largest percentage coming from inpatient nurses (86.7%). This study was conducted to identify the effect of Quality Work of Life (QWL), work stress, and organizational citizenship behavior (OCB) of inpatient nurses on turnover intention (TOI) at Gading Pluit Hospital. This research used mixed methods. Proof of the hypothesis using the causality method with SEM-PLS analysis then followed by qualitative method. The study was carried out from May to August 2021 using a saturated sample of 101 out of 107 nurses, followed by random inter-interviews with 5 nurses. The results showed that there was an influence of Quality of Work Life and Organizational Citizenship Behavior on Turnover Intention. OCB increased the effect of QWL in lowering TOI. Work stress with medium index has not affected OCB and TOI. Efforts to reduce Turnover Intention can be done by improving the Quality of Work Life and regulating the OCB behavior to increase a positive impact on nurses in carrying out their duties and functions. Interview results indicate the need to adjust the remuneration system, health insurance, and improve communication between management and nurses.

**Keywords:** quality of work life; turnover; intention

### I. Introduction

Health services are complex and their quality is influenced by many factors. The quality of medical care depends on the people working within the system; the most valuable resource in a health system is not the latest technology or the most modern facilities, but the workers who are human resources. The largest and most diverse workforce in the health care system is health care nurses.

The problem that is also an issue in the field of human resources (HR) in various organizations or companies is the nurse turnover rate which tends to be high. A high level of turnover intention can make organizations need to budget higher costs to carry out recruitment, selection, and carry out new nurse training where the high costs for all of these things can hamper financial performance and hospital services. Mobley (1986) describes that nurse turn-over can incur relatively high costs, and organizations should analyze the real value of these costs carefully. Even if an organization is fully committed to making its environment a great place to work, there will still be nurses who leave. According to Gillies, the normal turnover of nurses is about 5-10% per year. There is an increase in nurse turnover in Gading Pluit Hospital from 9.8% (in 2019) to 15.5.0% (in 2020). Where 86.7% (26 people) came from inpatient nurses, so the total inpatient room nurses in 2021 was 107 people. This TOI is quite high compared to the normal limit for nurse turnover in hospitals according to Gillies. The number of nurses in the inpatient

room is calculated not to be suitable for the average bed capacity that is actively used around 147 units. According to the Ilyas method, the ideal number of nurses in the inpatient room is 175 people. If using the PPNI workshop method, the ideal number of nurses in the inpatient room is 204 people. Lack of nurses in the inpatient room at the hospital. Gading Pluit due to high turnover can increase work stress.

In this thesis, the author conducts research at Gading Pluit Hospital, located in North Jakarta. This hospital is a privately owned type B hospital, which was established in 2005. Gading Pluit Hospital succeeded in achieving a plenary assessment given by the Hospital Accreditation Commission (KARS). Results of interviews with the nursing department, there are several complaints regarding the quality of work life, for example in the overtime payment system, nurses will be given additional overtime pay with a shift count, so that if the nurse works several hours past the shift time, it will not be counted as overtime. There are no achievement opportunities, such as a reward system for nurses. However, the thing that supports nurses to work is good cooperation between nurses and seniors. Good cooperation in an organization can be formed from Organizational citizenship behavior (OCB). These attitudes are referred to as a set of discretionary behaviors in the workplace that exceed one's basic job requirements. They are often described as behavior that goes beyond the call of duty. Research on OCB has been extensive since its introduction nearly twenty years ago (Bateman & Organ, 1983). Most OCB research focuses on the effects of OCB on individual and organizational performance. There is a consensus in this particular field that OCB addresses silent behavior for organizational firms (Barbuto, Brown, Wilhite, & Wheeler, 2001). Successful organizations have employees who take responsibility beyond their formal jobs and devote their time and energy to the success of their assigned work. However, some controversies were found in several studies regarding organizational citizenship behavior on turnover intention.

The purpose of this study is to analyze the effect of the quality of work life (Quality of Work Life) and work stress on the Turn Over Intention of nurses in the inpatient room of the Gading Pluit Hospital with Organizational citizenship behavior as an intervening variable. The benefits of the results of this study are as material for consideration for management in determining policies to reduce the Turnover Intention of inpatient nurses and as an evaluation tool for current hospital management policies.

## II. Research Methods

The relationship between the dependent variable turnover intention (Y) with the independent variable / exogenous quality of work life (X1) and work stress (X2) with the intervening variable Organizational Citizenship Behavior (Z). Research Model Design, shows that the Turnover Intention (TO) variable as the dependent latent variable has three manifest indicators, namely Y1 (thinking out of work), Y2 (intentions to quit work), Y3 (Intention to find work as an alternative). ). The latent variable Quality Work of Life (QWL) is an independent variable, with 4 (four) manifest variables, namely X1.1 (Dimension of Work Life/Home Life), X1.2 (Dimension of Work Design), X1.3 (Dimension of Context Work), X1.4 (the dimensions of the world of work). Another latent variable Job Stress is an independent variable, with 6 (six) manifest variables, namely X2.1 (Behavioral Support), X2.2 (Social Support), X2.3 (Role Conflict), X2.4 (Work Environment) . ), X2.5 (Workload). Organizational Citizenship Behavior (OCB) is a latent variable free intervening, has 5 (five) manifest indicators, namely: altruism (Z1), Conscientiousness (Z2), Sportmanship (Z3), Courtesy (Z4), Civic Virtue (Z5).

This research method uses mixed methods where quantitative associative with hypothesis testing to see the effect between variables, and followed by qualitative using in-depth inter-views (narrative). This variable will be examined using several dimensions in the form of quanti-tative primary data using a questionnaire. The research location is Gading Pluit Hospital in North Jakarta, Indonesia. The study was con-ducted from May to August 2021. Informed consent and the confidentiality of the respond-ents were maintained. The research population is inpatient room nurses. Questionnaires were col-lected by 101 nurses from 107 saturated sample nurses who worked in the inpatient room. Quan-titative data was processed using the Structural Equation Model (SEM) method with the Partial Least Square (PLS) approach using Smart PLS verse 3 software. The independent variables found to have an effect on turnover intention with the lowest index will be used as interview material. Interviewed nurses were selected randomly.

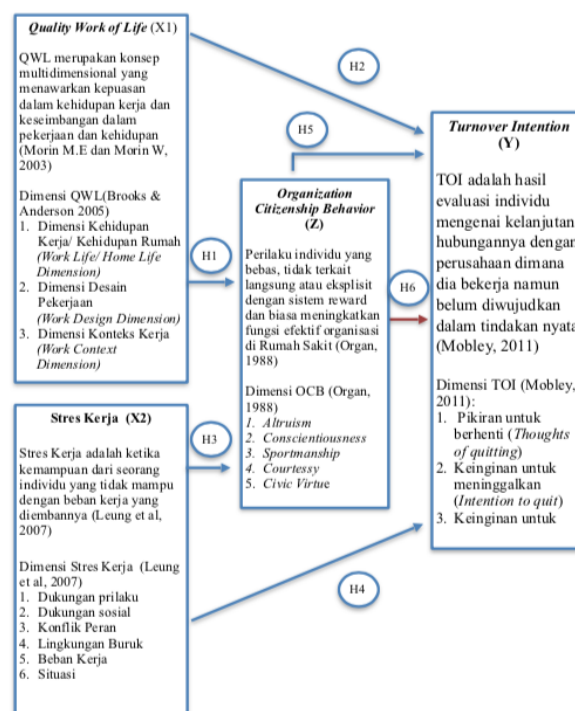


Figure 1. Research Concept Framework

### III. Results and Discussion

#### 3.1 Results

##### a. Characteristics of Respondents

The general description of 101 respondents includes age, gender, marital status, education, inpatient rooms, employee status and length of work. Table 1 shows that most of the respondents are of productive age, ie 49.5% of 20-30 years old and 43.56% of 30-40 years old. Respondents with employee status as permanent employees with a total of 82 people from 101 people with a percentage of 81.19% and the service period of the respondents is 2-5 years with a total of 40 people from 101 with a percentage of 39.60%, while nurses who <2 years of work is only 7.92%. The results of the study on the description of the characteristics of the respondents are presented in the following table:

**Table 1. Respondent Profile**

No.	Factor		n	%
1.	Age	20 - 30 years	50	49,50
		30 - 40 years	44	43,56
		41 - 50 years	4	3,96
		> 50 years	3	2,97
Total			101	100,00
2.	Gender	Male	1	0,99
		Female	100	99,01
Total			101	100,00
3.	Marital Status	Married	57	56,44
		Single	40	39,60
		Others	4	3,96
Total			101	100,00
4.	Education	Vocatioanl School	4	3,96
		Diploma	87	86,14
		Bachelor	10	9,90
Total			101	100,00
5.	Ward	Bougenvile	17	16,83
		Gladiola	18	17,82
		ICU	18	17,82
		Lotus	12	11,88
		Edelweis	10	9,90
		Mawar	9	8,91
		Melati	17	16,83
Total			101	100,00

No.	Factor		n	%
6.	Employee Status	Permanent	82	81,19
		Contract	19	18,81
Total			101	100,00
7.	Length of work	< 2 years	8	7,92
		2 - 5 years	40	39,60
		6 - 10 Tahun	22	21,78
		> 10 Tahun	31	30,69
Total			101	100,00

The survey results are expected to obtain valid and reliable manifest data variables that will describe the latent variables studied so that it is possible to describe the condition of each research variable. Furthermore, quantitative data processing will be carried out using the structural Equation Model (SEM) statistical test method with the Partial Least Square (PLS) approach using Smart PLS verse 3 software to determine the effect of one variable on another variable.

Data collection techniques: Description of variables used to determine respondents' an-swears. The number of respondents' answers starts from the number 1 minimum and maxi-mum 5. To get the tendency of respondents' an-swears to each variable will be based on the aver-age score (index) which is categorized into a score range based on the calculation of the three-box method [5]. Upper limit of score range: ( $\% F \times 5$ ); if all respondents answered 5. Lower limit of score range: ( $\% F \times 1$ ); if all respondents answered 1. With  $\% F$ : is the frequency of each respondent's answer to each question.

#### **b. Instrument Testing**

Validity and reliability tests were carried out on the four research variables. for discrimi-nant validity testing is done by looking at the AVE (Average Variance Extracted) value. The AVE value is good if it has a value greater than 0.50 (Ghozali & Latan, 2012). The AVE value for all research variables was above 0.5. Thus, the Discriminant Validity test has been fulfilled as well as the Convergent Validity test so that it can be concluded that the research model is val-id.

**Table 2.** TOI, QWL, Job Stress, and OCB, Reliability Tests

Latent Variables	CR	AVE
TOI	0,969	0,913
QWL	0,900	0,694
Stres Kerja	0,923	0,668
OCB	0,886	0,664

**c. Level of Kidney Function Disorder**

The next stage of reliability testing is testing Cronbach's alpha value. A construct is said to be reliable if it has Cronbach's alpha value above 0.60 (Ghozali, 2012). The cronbach's alpha value of each variable has a cronbach's alpha value above 0.6, thus each variable is reliable. From the model above, it can be concluded that the model has met the criteria of Composite Reliability and Cronbach's Alpha so that the re-research model has met the criteria of reliability and is a reliable and reliable measuring instrument.

**d. Goodness of Fit Analysis**

The goodness of fit test or model feasibility test is used to measure the accuracy of the sample regression function in estimating the actual value. Goodness of fit test or model feasibility test can also be analyzed from the results of the F test. The basis for decision making is based on the significance value, if the calculated F value is greater than F table or significantly less than the 5% error rate (sig. < 0.05), then Ho is rejected.

**Tabel 3. The Goodness of Fit**

No.	Variable	Mean Index			Total	Total Mean Index	Category
		Low	Moderate	High			
1.	Quality Work of Life	-	25	7	<sup>3</sup> 206	72,05	Medium
2.	Work Stress	-	22		<sup>1</sup> 908,8	65,82	Medium
3.	Organizational Citizenship Behavior	-	2	3	<sup>1</sup> 152,4	76,83	High
4.	Turnover Intention	-	9	-	<sup>5</sup> 49	61	medium

Based on the table above, it shows that the results of the simultaneous hypothesis test or F test resulted in a significant value (sig.) of 0.003 < 0.05. It can be concluded that this research model is feasible or has a good goodness of fit.

**e. Three Box Method Result Description**

From the results of the collection of questionnaires from 101 respondents, descriptive analysis was carried out by tabulating the questionnaire with the Three-box Method scoring technique. The index values obtained are grouped into 20.2-47.13 low, 47.14-74.06 moderate, and 74.07-101 high. The results of the three-box method show that QWL, work stress and turnover intention have a medium average index and OCB has a high average index.

**Table 4. Matrix of Research Variables**

No.	Variable	Mean Index			Total	Total Mean Index	Category
		Low	Moderate	High			
1.	Quality Work of Life	-	25	17	3206	72,05	Medium
2.	Work Stress	-	22	7	1908,8	65,82	Medium
3.	Organizational Citizenship Behavior	-	2	13	1152,4	76,83	High
4.	Turnover Intention	-	9	-	549	61	Medium

**f. Structural Model Analysis**

The direct effect of Quality of Work Life (QWL) on Turnover Intention (TOI) is (-0.274), while the indirect effect of QWL on Turnover Intention through OCB as an intervention is (-0.089). In other words, the direct effect is greater than the indirect effect. The total effect is (-0.363), meaning that there are other factors (-0.637). Other possible causes such as labor market conditions and alternative opportunities are important barriers to leaving the existing job (Mosadegrad, 2008).

The direct effect of work stress on turnover intention is 0.144, while the indirect effect is -0.054, with a total value of 0.09. The effect of work stress is not significant on the turnover intention of nurses at Gading Pluit Hospital

**Table 5. Total Model Analysis**

Effect	Direct	Indirect	Total
Quality of Work Life -> Turnover intention	-0,274	-0,089	-0,363
Work Stress -> Quality of Work Life	0,144	-0,054	0,09

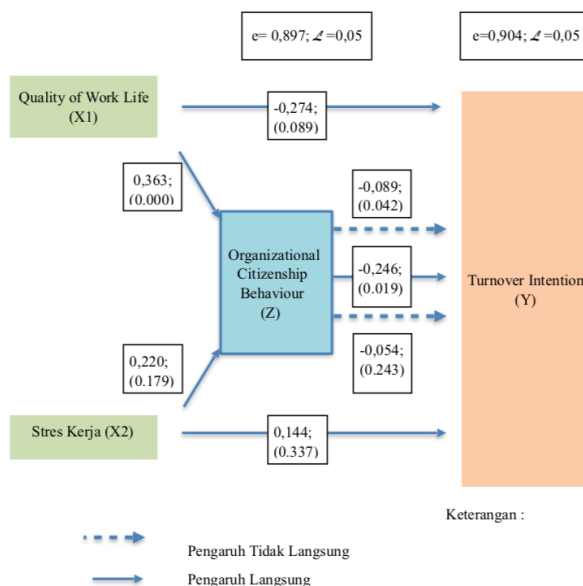
**g. Hypothesis Testing Analysis**

From the results of hypothesis testing, it appears that an increase in QWL and OCB has a significant effect on reducing turnover intention. Medium level work stress has no significant effect on OCB or on turnover intention.



**Table 5.** Results of Hypothesis Testing Analysis

Hypothesis	Original Sample (O)	T Statistics ( O/S TDEV )	P Values	Explanation
Quality work of life - > organization citizenship behavior	0,363	5,206	0,000	Hypothesis Accepted
Quality work of life - > turnover intention	-0,274	2,654	0,008	Hypothesis Accepted
Work Stress -> organization citizenship behavior	0,220	1,344	0,179	Hypothesis Rejected
Work Stress -> turnover intention	0,144	0,961	0,337	Hypothesis Rejected
Organization citizenship behavior - > turnover intention	-0,246	2,350	0,019	Hypothesis Accepted
Quality work of life - > organization citizenship behavior - > turnover intention	-0,089	2,041	0,042	Hypothesis Accepted
Work Stress -> organization citizenship behavior - > turnover intention	-0,054	1,170	0,243	Hypothesis Rejected



**Figure 2.** Total Model Path Chart



### **3.2 Discussion**

#### **a. Effect of Quality of Work Life on Organizational Citizenship Behavior of Nurses**

Based on the results of the hypothesis test, Quality work of life on organizational citizenship behavior has an influence with a P value of 0.000 ( $p < 0.05$ ). These results indicate that the quality of work of life of nurses in the inpatient room of the Gading Pluit hospital directly has a significant effect on organizational citizenship behavior with a positive relationship direction. This shows that the higher the quality of work of life, the more organizational citizenship behavior will increase.

Quality of work life (QWL) is a multidimensional concept building that offers satisfaction in work life and balance in work and life, where this is reflected in the feeling of belonging to a work group, a sense of being yourself, a sense of being rewarded and respected. (Morin M.E and Morin W, 2003). OCB is individual behavior that is independent, not directly or explicitly related to the reward system and usually enhances the effective functioning of the organization. (Organs, 1988). Based on the definition of the quality of work life is what appears in the job satisfaction of nurses, in relation to OCB nurses will feel free and work well if they have a quality of work life in accordance with expectations, so nurses also feel comfortable and safe in carrying out their duties.

From the results of the nurse's questionnaire in the inpatient room said that according to them, the highest QWL is that friendship with fellow co-workers is very important. This is in line with the findings of high Organizational Citizenship behavior among hospital inpatient nurses. Therefore this culture needs to be maintained

#### **b. Effect of Quality of Work Life on Turnover Intention of Nurses**

The quality of work of life directly has a significant effect where the P value is 0.008 ( $p < 0.05$ ) on turnover intention with a negative relationship direction. This shows that the higher the quality of work of life, the lower the turnover intention.

According to Brooks & Anderson (2005), QWL is defined as "the degree to which registered nurses are able to meet important personal needs through their experience in work organizations while achieving organizational goals". Therefore, the notion of staff satisfaction is a broad concept that includes issues that are more important than simply providing some jobs and wages to individuals. According to Chang (2008), Turnover intention is a nurse's desire or perception to find a new job and have the motivation to leave her current work environment because she is not satisfied. Therefore, it is expected that with the high quality of work life, nurses will feel comfortable working, causing turnover intention to decrease.

In a study conducted by Rokhman (2013) on nurses working at Baitul Mal Wat Tamwil (BMT) it was found that Quality of Work Life has a negative influence on turnover intention or nurses' desire to move from the organization. The higher the quality of life of nurses in an organization will reduce the desire of a nurse to look for alternative jobs in other organizations. In Almaki's research (2012) regarding the relationship between QWL and TOI in nurses at primary care centers in Saudia Arabia, it was found that nurses were dissatisfied with their work life and around 40% showed turnover intention. Turnover intention was significantly related to QWL.

#### **c. The Effect of Work Stress on Organizational Citizenship Behavior of Nurses**

Based on the results of the hypothesis test, job stress has no direct effect on increasing organizational citizenship behavior where the P value is 0.179 ( $p > 0.05$ ). This is in accordance with Agheli et al's research (2017) on nurses where it was found that there was no significant relationship between nurses' work stress at work and OCB.

#### **d. The Effect of Job Stress on Turnover Intention of Nurses**

Based on the results of the hypothesis test, it was found that the work stress of the inpatient nurse at the Gading Pluit Hospital has no significant effect on turnover intention with a P value of 0.337 ( $p > 0.05$ ). According to Quick and Quick (1984) stress is divided into 2, namely eustress and distress. Eustress is stress that is healthy, positive and constructive (constructive). This includes individual as well as organizational well-being which is associated with individual well-being, organizational growth, organizational flexibility and adaptability.

This can also be caused because nurses have good resilience. Resilience is a person's ability to bounce back in overcoming all pressures. This can be seen in research on teachers where resilience has an effect on reducing work stress (Nurmitasari, 2012)

Stress experienced by inpatient hospital nurses can be included in the eustress category so that it does not have a direct effect on turnover intention. This can be seen in the questionnaire "I will take the positive side of the problems that occur" which is 82.8 and is included in the high category.

#### **e. Effect of Organizational Citizenship Behavior on Turnover Intention of Nurses**

Based on the results of hypothesis testing, it was found that Organizational Citizenship Behavior had a significant effect on Turnover Intention at Gading Pluit Hospital with a significant value of less than 0.05, namely  $P = 0.019$  with a negative relationship direction.

This is in accordance with the research by Susanti R et al (2020) in hospitals on nurses, where the turnover intention of nurses is influenced by job satisfaction and OCB. Where the indirect effect through OCB is 1.43 times greater than the direct effect of job satisfaction on turnover intention. These results are also in accordance with the research of Kasraie et al (2014), where the study was conducted on employees of the Oshnaviyeh Hospital. This study shows a significant positive relationship between QWL, job stress, job satisfaction and OCB. QWL is the most important variable among the independent variables. However, this result is not in accordance with the research by Wibowo PS (2019) on employees of the production division of the Manufacturing Sector, where there is no effect of OCB on TOI. This could be due to the fact that Wibowo PS's research was conducted on factory employees and not on nurses.

The behavior that is demanded by organizations today is not only in-role behavior, but also extra-role behavior. This extra-role behavior is also known as Organizational Citizenship Behavior (OCB). This behavior tends to see a person as a social being (becoming a member of an organization), rather than as an individual being who is selfish. Meanwhile, turnover intention is the desire or perception of nurses to find a new job and have the motivation to leave their current work environment because they are not satisfied. Therefore, it appears that if a nurse shows high organizational citizenship behavior and is loyal to the hospital where she works, the nurse's intention to leave will decrease.

#### **f. The Effect of Organizational Citizenship Behavior Mediating between Quality of Work Life and Job Stress on Turnover Intention of Nurses at Gading Pluit Hospital**

Based on the results of hypothesis testing, it was found that Organizational Citizenship Behavior had a significant effect mediating the Quality of Work Life on Turnover Intention at Gading Pluit Hospital with a significant value of less than 0.05, namely  $P = 0.042$ . These results indicate that the quality of work of life mediated by organizational citizenship behavior has an effect on decreasing turnover intention.

However, there was no significant effect of Organizational Citizenship Behavior

mediating between work stress and turnover intention in inpatient ward nurses at the hospital. Gading Pluit with a significant value of more than 0.05, namely  $P = 0.237$ . These results indicate that work stress mediated by organizational citizenship behavior has no effect on decreasing turn-over intention.

OCB has become a popular organizational factor in the organizational literature over the past few years (Podsakoff et al., 2000) and, perhaps because of that popularity, is generally considered a desirable employee behavior in work life; however high and uncontrolled OCB can have negative consequences. This can be seen in the results of research on school teachers by dividing two factors of OCB based on the theory of Williams and Anderson (1991), namely OCB towards the individual (OCB-I) and OCB towards the organization (OCB-O). In this study, it was found that OCB had a significant effect on co-workers' social laziness, and social laziness on nurses themselves and had a negative impact on organizational commitment (Sesen H, et al, 2014).

OCB-I has a positive and significant effect on co-workers' social laziness, but OCB-O has a negative and insignificant effect on co-workers' social laziness. According to Kerr and Brunn (1983), OCB-O involves actions such as voluntary contributions to organizational activities and the decision not to complain about common problems in the organization, co-workers do not consider that behavior as an excuse to slack off, because the action is not directed at them. Thus, managers should be careful about OCB and should define behavior in each employee's role. Otherwise, voluntary helping behavior can easily lead to social loafing behavior.

Organizational Citizenship Behavior increases the effect of quality of work life in reducing turnover intention of nurses. Organizational Citizenship Behavior with a high average index can be maintained in the organizational culture of the hospital, but this high OCB attitude needs to be monitored by the manager. Therefore, regulations need to be carried out in order to remain controlled to avoid the negative effects of OCB in the organization.

The presence of social support in the organization provides an additional resource that enables and empowers nursing staff to better cope with the stress of their work. According to Almendra, it is easier and more practical to provide a supportive work environment for employees than trying to reduce stress or stress at work.

At Gading Pluit Hospital, it appears that organizational citizenship behavior has a high category average index which means that inpatient nurses have high social support. OCB is generally regarded as a positive organizational behavior and affects the perception of turnover intention. While the work stress of inpatient nurses has a medium average index so that in this study there was no significant effect between work stress and turnover intention and also no mediating effect of OCB was found on the relationship between work stress and turn over intention.

Referring to the statements on the Quality Work of Life variable, the lowest is the item condition indicator "I feel that the salary given by the hospital is in accordance with the work I do and the current labor market conditions", which is 53, 4. The second lowest index is "I feel protected by security and health insurance working in this hospital", which is 55.4 and is included in the moderate category, so depth interviews were conducted on 5 nurses randomly on this topic.

From the results of the interviews, it can be concluded that some nurses complained about incentives such as non-existent nursing care services, health insurance which was fully submitted to the BPJS system so that nurses could not be handled in Gading Pluit hospital, which has not collaborated with BPJS, has improved communication between the management and nurses.

In this study, several differences were found from previous research, while the findings were:

1. Judging from the tree box in this study, it was found interesting things where moderate work stress did not affect Turnover Intention and did not affect high Organizational Citizenship Behavior. This is different from other studies and shows that factors such as quality of work of life or other external factors that affect Organizational Citizenship Behavior and Turnover Intention
2. There is a difference in the results where the work stress of the inpatient nurse at Gading Pluit Hospital which is in the moderate category does not affect Turnover Intention. This shows that the level of work stress of nurses has not caused a nurse to make a decision to switch hospitals.
3. Another difference is that Organizational Citizenship Behavior which is in the high category of inpatient room nurses at Gading Pluit Hospital cannot mediate the effect of work stress on Turnover Intention. This can be caused because work stress which is in the moderate category also does not affect the nurses' organizational citizenship behavior.
4. Quality Work of Life is the most influential factor compared to other variables in reducing the Turnover Intention of nurses in the Gading Pluit Hospital inpatient room.

This research has been attempted and carried out with scientific procedures, however, it still has limitations, namely there are many other variables that also affect turnover intention that are not used in this study, the population is very limited (slightly) so that the conditions are different from the object of different types of industries, other objects and a larger population can give different results, there are questionnaires that are not collected, the pandemic conditions make research a little hampered, because they have to undergo a very strict protocol, so the interview process is quite difficult to do.

#### **IV. Conclusion**

There is an influence of Quality of Work Life and Organizational Citizenship Behavior in reducing the Turnover Intention of nurses in Gading Pluit Hospital. There is a positive effect of QWL on OCB. There is no effect between work stress on OCB and TOI of nurses. There is an effect of OCB mediating between QWL on TOI but OCB has no effect mediating work stress on TOI.

#### **Implication**

Quality of Work Life (QWL) is a multidimensional concept that offers satisfaction in work life and balance in work and life (Morin M.E and Morin W, 2003). The results of this study illustrate the need for implementation to reduce turnover intention through increasing the quality of work life, especially in the dimensions of the world of work. Job stress has no effect on turnover intention. This is supported by the theory of Quick and Quick (1984) which states that stress is divided into two, namely eu-stress and distress. Responses to stress that are still in the eustress category are healthy, positive and constructive (constructive). These include individual and organizational well-being associated with individual well-being, organizational growth, organizational flexibility, and adaptability. The results of this study are in line with other studies that OCB affects the desire to leave (Lee et al., 2004; in Khalid & Ali, 2005, Susanti, 2020). OCB can also increase the effect of quality of work life on decreasing turnover intention.

## References

- Agheli R, Roshangar F, Parvan K, Sarbakhsh P, Shafeh S. (2017). Work stress and organizational citizenship behaviors among nurses. *Ann Trop Med Public Health* 16;10:1453-9.
- Akbar RE, Elahi N, Mohammadi E, Khoshknab MF. (2017). How Do The Nurses Cope with Job Stress? A Study with Grounded Theory Approach. *J Caring Sci.* 6(3): 199–211.
- Almaki MJ, Gerald GF, Clark M. (2012). The Relationship Between Quality of Work Life and Turnover Intention of Primary Health Care Nurses in Saudi Arabia. *BMC Health Services Research* 12, Article number: 314.
- Andriani R. (2020). Pengaruh Organizational Citizenship Behavior, Komitmen Organisasi, Stres Kerja dan Kepuasan Kerja terhadap Turnover Intention pada PT. Kuala Mina Persada. *Widya Cipta: Jurnal Sekretari dan Manajemen* Volume 4 No. 1. <https://doi.org/10.31294/widyacipta.v4i1>
- Armstrong, M., Taylor, S. (2014). *Human Resource Management Practice*, 13th edition, Typeset by Graphicraft Limited. Hong Kong : Jellyfis.
- Azizah JA. (2018). Hubungan antara stres kerja dengan produktivitas kerja pada perawat di Rumah Sakit Umum Darmayu Ponogo-ro Tahun 2018. *Stikes Bhakti Husada Mulia Madiun*.
- Bolbanabad AM, Shirkhani B, Mohammadi S, Asadi H, Aghaei A. (2016). Relationship between quality of work life of medical staff and quality of patient care. *Hospital Practices and Research* 1(2):61-63
- Brooks AB, Ohlson S, Storfjell J, Shaver J. (2007). Assessing the Quality of Nursing Work Life. *J Nurs Care Qual* 19(3): 269–275. <https://www.researchgate.net/publication>
- Cascio, WF. *Managing Human Resources: Productivity, Quality of Work Life*, Prof-its. New York, McGraw-Hill International Edition
- Hemanathan R, Sreelekha, Prakasam P, Golda M. (2017). Quality of work life among nurses in a tertiary care hospital. *JOJ Nursing Health Care* 5:1-8
- Hermawati A, Mas N. (2016). *Quality of Work Life dan Organizational Citizenship Behaviour Sebuah Kajian Empiris*. Malang: Universitas Widyagama
- Husnah I, Hasyim, Supriyanto. (2020). Pengaruh Stres Kerja dan Lingkungan Kerja Terhadap Turnover Intention dengan Komitmen Organisasional sebagai Variabel Mediasi. 2020. *Esa Unggul*
- Kasraie S, Parsa S, Hassani M, Zadeh AG. (2014) The Relationship between quality of Work Life, Job stress, Job Satisfaction and Citizenship Behavior in Oshnaviyeh Hospital's Staff. *Patient Saf Qual Improv*, Vol. 2, No. 2, Spr
- Khani A, Dyrekvandmogadam A. (2008). Quality of Nursing Work Life. 2008. *Journal of Clinical and Diagnostic Research* 2:7
- Kim YJ, Lee SY, Cho JH. (2020). A Study on the Job Retention Intention of Nurses Based on Social Support in the COVID-19 Situation. *Sustainability* 12, 7276; doi:10.3390/su12187276. [www.mdpi.com/journal/sustainability](http://www.mdpi.com/journal/sustainability)
- Miner, JB. (1992). *Industrial Organizational Psychology*. 1992. Singapore: Mc Graw Hill.
- Momeni B, Shafipour V, Esmaeili R, Charati JY. (2016). The relationship between the quality of work life and sleep in nurses at the intensive care units of teaching hospitals in Mazandaran, Iran. *Journal of Nursing and Midwifery Sciences* 3(1):28-34
- Mosadeghrad Am, Ferlie E, Rosenberg D. (2008). A Study of the Relationship Between Job Satisfaction, Organizational Commitment, and Turnover Intention among

- Hospital Employees. *Health Services Management Research* 21: 211–227. DOI: 10.1258.
- Nayeri ND, Noghabi AAA, Salehi T. (2011). Quality of Work Life and Productivity Among Iranian Nurses. *Contemporary Nurse* 39 (1):116-128
- Nurmalitasari, Femmi. (2012). Hubungan antara resiliensi dan stres kerja pada guru di SMA Negeri 2 Lumajang. <http://karya-ilmiah.um.ac.id/index.php/Fak-Psikologi/article/view/20344>
- Organ, D. W. (1988). *Organizational Citizenship behavior: The good soldier syndrome*. Lexington, MA: Lexington Books
- Organ D, Near JP. (2004). Organizational Citizenship behavior: Its nature and antecedents. *BRAC University Journal* 1(2):75-85
- Pakpahan HM. (2014). Hubungan budaya organisasi dengan produktivitas kerja perawat pelaksana di Rumah Sakit Kota Medan. Universitas Sumatera Medan
- Pooja AA, Clercq DD, Belausteguigoitia. (2016). Job Stressors and Organizational Citizenship Behavior : The Roles of Organizational Commitment and Social Interaction. *Human Resource Development* 27(3): 373-405.
- Ramesh N, Nisha C, Josephine AM, Thomas S, Joseph B. (2013). A Study on Quality of Work Life Among Nurses in A medical College Hospital in Bangalore. *National Journal of Community Medicine* 4(3):471-74.
- Rokhman W. (2013). Pengaruh Quality of Work Life terhadap Kepuasan Kerja, Komitmen Organisasi, Turnover Intention dan Stres Kerja: Studi pada BMT di Kudus. *Equilibrium* 1(2): 200-16.
- Ruhan I, Astuti ES, Utami HN, Afrianti TW. (2019). The effect of Quality of Work Life (QWL) on Job Satisfaction and Organization Citizenship Behavior (OCB) (A Study of Nurse at Numerous Hospital in Malang, Indonesia). *JPAS* 4(2): 51-8.
- Sesen H, Soran S, Caymaz E. (2014). Dark side of Organizational Citizenship Behavior (OCB): Testing a Model between OCB, Social Loaffing, and Organizational Commitment. *International Journal of Business and Social Science* vol. 5 No.5. 125-135.
- Suryatiningsih T, Haryono S, Zami A. (2018). Effects of Quality of Work Life (QWL) and Organizational Citizenship Behaviour (OCB) on Job Performance Among Community Health Centre Paramedics in Bekasi City, Indonesia. *Journal of Economics and Sustainable Development*. 9(6)
- Susanti R, Hasyim, Rita K. (2020). Turnover Intention and Behavior Organizational Citizenship on Indonesian Hospital Case. *EJBMR, European Journal of Business and Management Research* 5(4):1-6. <http://dx.doi.org/10.24018/ejbmr.2020.5.4.434>
- Tinggogoy DRM. (2010). Pengaruh Quality of Work Life terhadap produktivitas perawat ruang rawat inap Rumah Sakit Umum FK UKI. Universitas Indonesia
- Wibowo, PS. (2019). Pengaruh Kepuasan Kerja dan Organizational Citizenship Behavior (OCB) terhadap Turnover Intention Perawat Divisi Produksi Sektor Manufaktur. 2019. Universitas Negeri Yogyakarta. <http://eprints.uny.ac.id/id/eprint/67510>
- Wulandari P. Pengaruh Kepuasan Kerja dan Komitmen Organisasi Terhadap Organizational Citizenship Behavior Perawat Rumah Sakit Islam Yogyakarta. 2015. Fakultas Ekonomi Universitas Negeri Yogyakarta.