

Risk Factors Associated with Nursing Managers Burnout Syndrome At Ministry of Health Hospital At Jeddah City in 2016

*¹AmmunahTajuddin,²Raniah H. Alharthi

Corresponding Author: Dr. Tagwa Omar

This research has been conducted to fulfillment of requirement of nursing research coordinator program which was prepared by Nursing Research Department in Nursing Administration in Jeddah Province, Kingdom of Saudi Arabia.

Abstract:

Background: Nursing is a humanitarian and respectful profession, nurses scarifies themselves for others, they face a lot of problems in their career life, these problems can cause a lot of consequences on individual and work. Facing client, overload work, emotional exhaustion and bad management contribute to these work problems. Nurses manager's role in caring for the patients is by observing the quality of nursing care given to the patients, stabilize their area, solving staff, patients, relatives and administration conflicts. She/ He is the link among the health providers, patients and higher authority. This kind of "helping" profession cause numerous stress in work, lack of enthusiasm, low production and fatigue which are all signs and symptoms of occupational burnout

Aim: This study aimed to investigate the risk factors associated with nursing managers burnout syndrome and how these factors led those managers to burnout in their work.

Methods: This study utilized a cross- sectional survey analytic and descriptive design.

Result: There is a significant statistical and positive relation between workload increases will lead burnout of nursing managers. Whereas, there is a statistical significant and inverse relationship between community and nursing manager's burnout. However, there is no significant relationship between controlling work, fairness, rewarding system and reaching burnout syndrome.

Conclusion and Recommendations: The nursing administrations should establish strategies, put plan and promote incentives to reduce nursing manager's burnout.

Keywords: Nurses, Nursing Profession, Burnout syndrome, Nursing managers burnout, leaders burnout, Saudi Arabia

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I. Background

Nursing is a humanitarian and respectful profession, nurses scarifies themselves for others, they face a lot of problems in their career life, these problems can cause a lot of consequences on individual and work. Facing client, overload work, emotional exhaustion and bad management contribute to these work problems. Nurses managers role in caring for the patients is by observing the quality of nursing care given to the patients, stabilize their area, solving staff, patients, relatives and administration conflicts. She/ He is the link among the health providers, patients and higher authority. This kind of "helping" profession cause numerous stress in work, lack of enthusiasm, low production and fatigue which are all signs and symptoms of occupational burnout(Jennings, 2008).

This term was created by American psychologist Herbert Freudenbergerin the 1970s "Burnout" has become a popular term since then. The signs and symptoms are more recognized in human services field professions (social worker, nurses, teachers, lawyers. Police officers...ect) because they work and face human emotions like sadness and pain (Bajurna and Marcinkowski, 2015).

This research will study the Risk factors associated with burn out of nurses managers at MOH hospitals in Jeddah to understand the ways of decreasing these risk factors. According to Maslach study (1982), The risk factors make nurses at high risk of burnout (Queiros, Carlotto, Kaiselel, Dias and Pereira, 2013). These factors such: Lack of social support, conflict with peers & other professions, increase work tension, lack of management support, work overload, chronic work stress, emotionally exhaustion, age, gender, education level, length of experience in nursing profession and personal characteristics such as hardiness, communication& coping strategies (Jennings, 2008).

In this study we are using the (Maslach Tool of burn out inventory). It's important to understand these risk factors because it could lead to low productivity in general which affects the quality and delivery of patient care, absenteeism ,punctuality, negative self-concept, suspicious attitude and lack of anger management. Burn out syndrome is a psychological and emotional exhaustion which cause a deterioration in work productivity, quality of patient care, professional, personnel relationships and may cause physical and psychiatric diseases. According to Batista, Batista, Barros, Lopes, Medeiros, Morais (2013) the word Burn Out was first created on 1953 after studying a psychiatric case of a nurse who was exhausted with her work but it was identified in the early 1970s in human service professionals as mentioned above. It is common in careers or persons whom takes care of other people and its considered as an epidemic occupational disease in some countries. More ever, burn out affect nurses work places both public & private which results is more sick leave, diminished work effectiveness and more informal absenteeism (Brinkert, 2010; Clausen et al, 2012; Schmidt and Diestel,2012)(Cimiotti, Aiken, Sloane, and Wu, 2012).

Professional burnout usually appears with following sign and symptoms sever fatigue, psychosomatic problems such abdominal ache, weakness and insomnia, feeling frustrated and useless emotional problems for instance anxiety and depression, attitude problems appear like hostility, apathy and distrust. Finally, behavioral problems appear on nurses as aggressiveness, irritability and isolation (Cimiotti, Aiken, Sloane, and Wu, 2012). The chronic stress and burnout syndrome in our health care environment Ministry Of Health organizations will be as a result of many causes such as job dissatisfaction, bureaucratic procedures, lack of social supporting, conflicts with peers, doctors and the organizational structure, family or tradition issues and work environment and system conflict (Verdugo, Patricia, Bocanegra and Migdolia, n.d.).

Research Problem

Health care organizations are effected badly when the managers (especially nurses) are suffering of stress and burnout syndrome. The quality of care decreases due to this phenomena. Nursing managers because of the burnout suffer of miscommunication, unable to control the area, stressed and impatience, which cause a lot of conflicts among physicians, staff, patients and patients family(Darawad, Nawafleh, Maharmeh, Hamdan-Mansour and Azzeghaiby, 2015). Nurse manager is the link and the communication center among all of them. So the problem can be concluded in the question of what are the risk factors associated with burnout syndrome among nurse managers and how can we decrease it(Jennings, 2008).

Research Justification

Its obvious how managers affect health services in the organizational health centers. Being a manager in a large health institutes especially he/she has a lot of challenges to face. It may affect them psychologically, mentally, socially or physically. It's important for us to understand these challenges, risk factors which may cause stress and burnout syndromes among them. Hoping that our research may expo

II. Objectives

This research paper aims to achieve the following goals

To identify :

- 1.The impact of workload on nursing mangers and how leads to burnout syndromes.
2. The effect of controlling the work on nursing mangers.
3. The effect of rewarding system on nursing mangers and how leads to burnout.
4. The impact of fairness at work on nursing mangers burnout.
5. The impact of work community on nursing mangers burnout.

Research Hypothesis

According to each independent variable, hypothesis determined as following:

- 1- There is a statistically significant relationship between nurses managers workload and reaching those managers to burnout.
- 2- There is a statistical significant relationship between controlling the nursing mangers their work and reaching those managers to burnout.
- 3- There is a statistical significant relationship between rewarding system and reaching the nursing managersto burnout.
- 4- There is a statistical significant relationship between fairness at work and reaching the nursing managers to burnout.

5- There is a statistical significant relationship between work community and reaching the nursing managers to burnout.

III. Methods

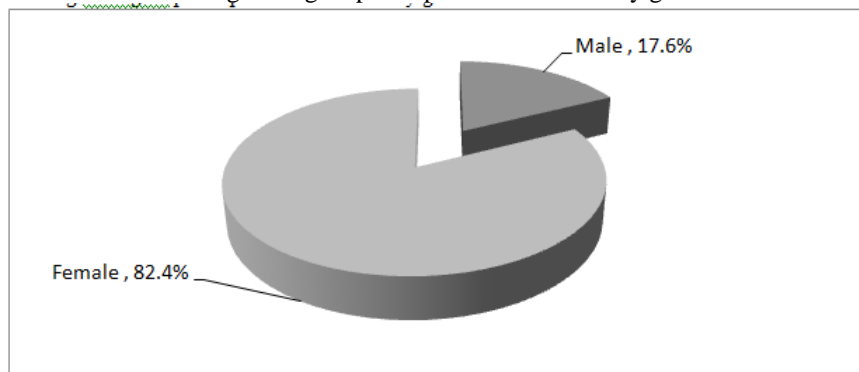
Quantitative descriptive approach, whereby the hypotheses of the proposed research framework can be tested. Using a survey of (Maslach Burnout Inventory (MBI) and Areas of Worklife Survey). The research is a cross-sectional study (case control) to assess the risk factors that lead nursing managers in Ministry of Health Hospitals to burnout. The cover five Ministry of Health (MOH) hospitals at Jeddah city.

Ethical Consideration

- The researcher obtained the approval from regional research ethics committee and medical studies administration MOH, Jeddah.
- The research gained the approval to use Maslach Burnout Inventory (MBI) tool.
- Approval obtained from the five targeted hospitals to collect the data from the concerned sample.
- Participants signed on informed consent without providing their names.
- All information collected in this study remained confidential and used for research purpose only.

IV. Result And Discussion

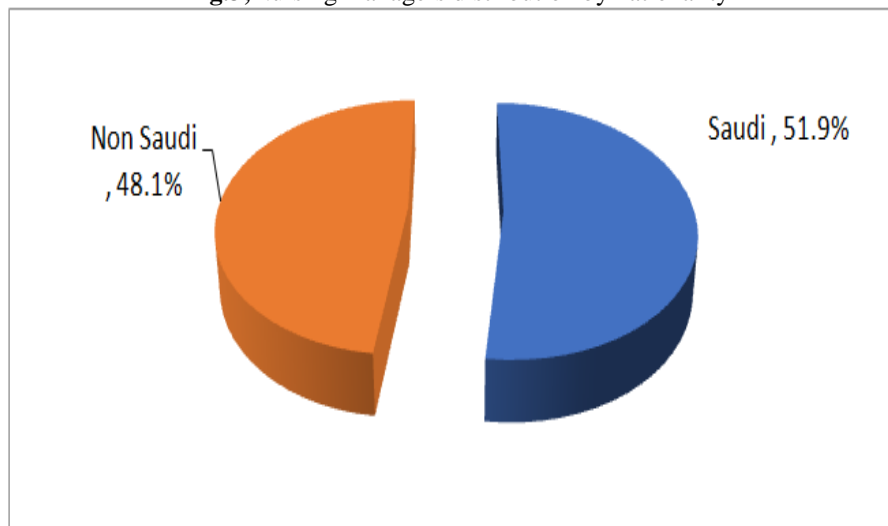
Nursing managers participants distribution by gender.



Source: survey data 2017

Nursing managers sample of the study distribution by nationality; the nursing managers distribution according to nationality showed that the Saudi nursing managers represent more than half the participants with 51.9%, while non-Saudi nursing managers constituted about 48.1%.

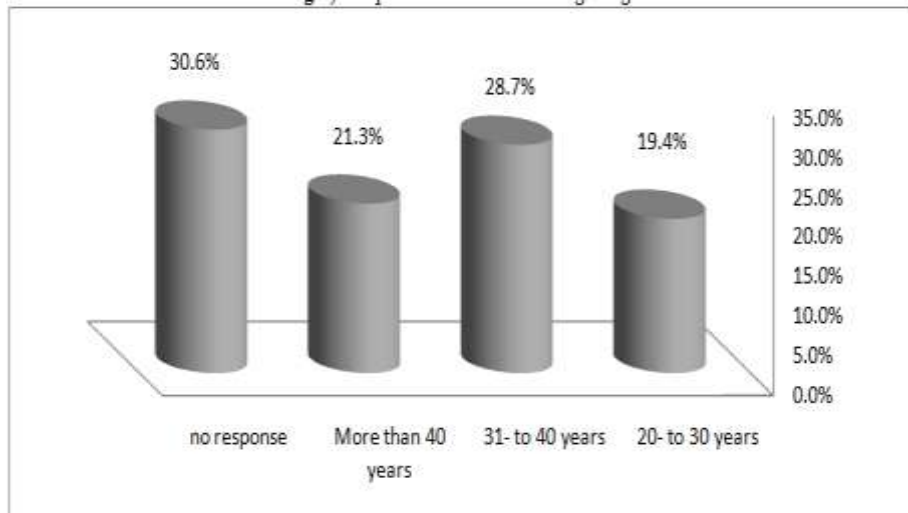
Fig.3; Nursing managers distribution by nationality



Source: survey data 2017

Regarding sample distribution by age; the nursing managers sample of the study distribution by age, revealed that there is about 19.4% at the age class between (20-to 30) years old, while 28.7% at the age class between (31-to 40) years , whereas 21.3% at the age class more than 40 years, where it was noticed there is about 30.6% of the participants don't specified their age. Thus, it could be concluded that most nursing managers participants of the study were at the age of better productivity which can help them to bear work-load.

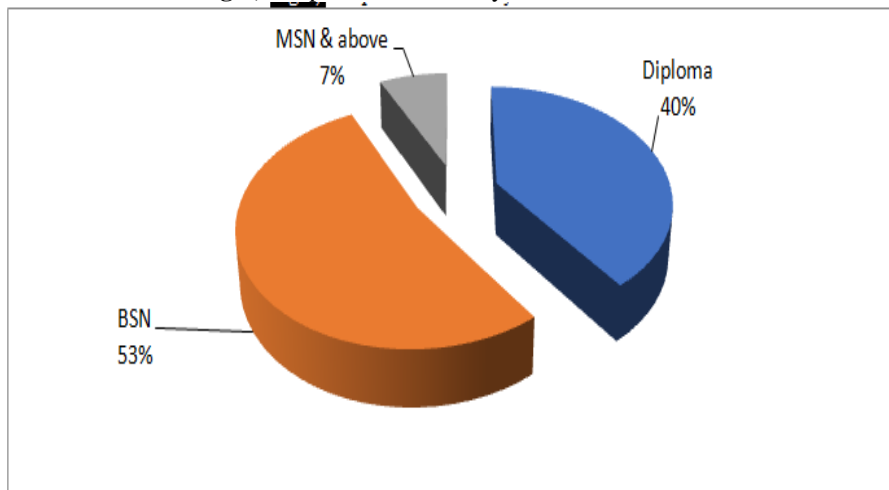
Fig.4; Sample distribution according to age



Source: survey data 2017

Nursing managers distribution by level of their education; The results in table 4.1 showed that there were 39.8% of sample their level of education is diploma, while 52.8% hold bachelor of science in nursing , whereas only 7.4% hold master of science in nursing. Thus, it could be concluded that the majority of nursing managers hold bachelor of science in nursing and master of science in nursing, which can support them to carry on their duties effectively.

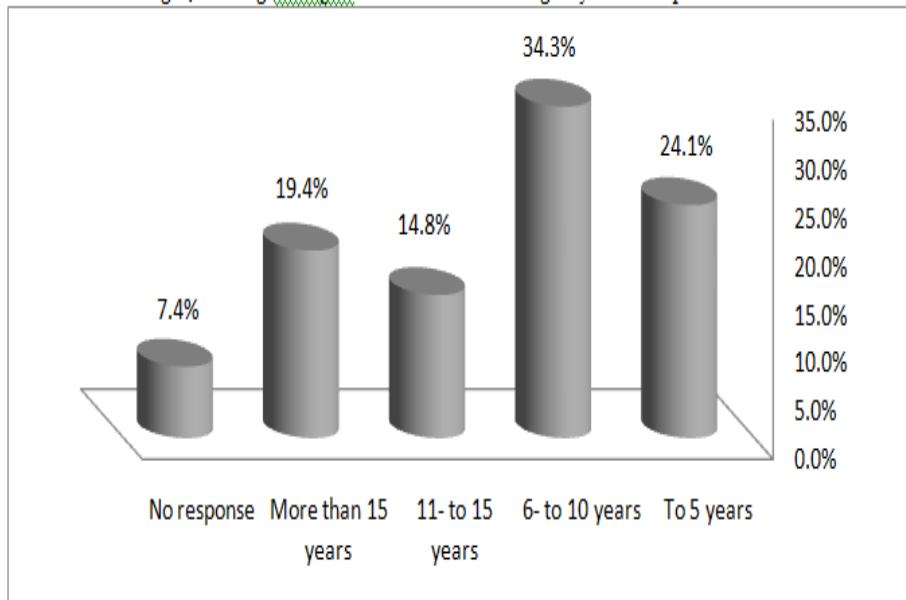
Fig.5; Sample distribution by level of education.



Source: survey data 2017

Nursing managers distribution according to years of experience as a nurse; The results in table 4.1 revealed that there are about 24.1% of the nursing managers their years of experience as a nurse between (1-5) years, while 34.3% their experience is between (6-to 10) years, whereas 14.8% their experience is between (11- to 15) years, where 19.4% their years of experience is more than 15 years, while there was about 7.4% not determining their years of experience as a nurse.

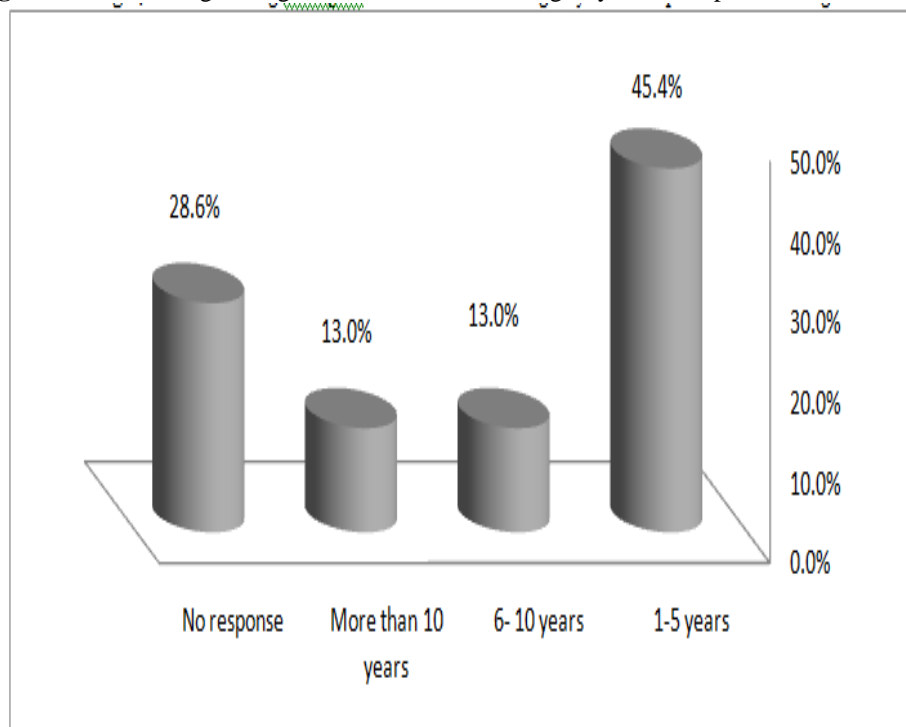
Fig.6;Nursing managers distribution according to years of experience as a nurse



Source: survey data 2017

Nursing managers distribution according to years of experience as a manager; The results in table 4.1 showed that there are about 45.4% of the nursing managers their years of experience as a manager between (1-5) years, while 13.0% their experience is between (6-to 10) years, whereas 13.4% their years of experience is more than 11 years, while there was about 28.7% don't determine their years of experience as a manager.

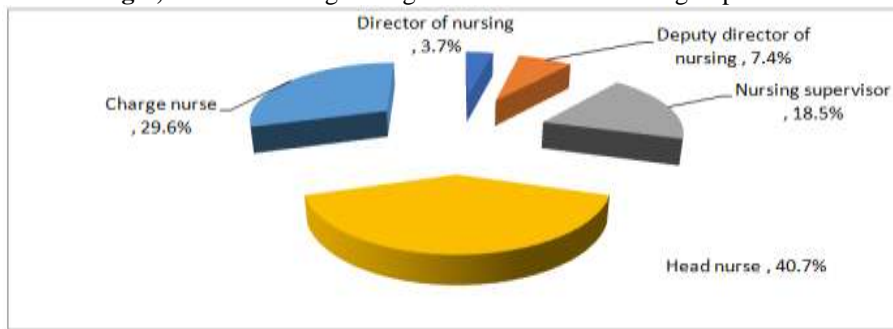
Fig.7; showed nursing managers distribution according to years of experience as a manager



Source: survey data 2017

Nursing managers distribution by position; The results in table 4.1, showed that the majority of the participants of the study position was head nurse with 40.7%, while there was 29.8% as charge nurse, whereas 18.5% their position is nursing supervisors, where director of nursing comprised 7.4% and director of nursing represent only 3.7%. Therefore, the head nurse and charge nurse comprised the majority with 70.5% of the total participants .

Fig.8; showed nursing managers distribution according to position.



Source: survey data 2017

Section Two: descriptive analysis to assess sample responses

In this section of data analysis, the researchers would concentrate on the analysis and interpretations of the sample responses regarding the factors that impact nursing managers, and contributed in causing burnout to them. The assessment of the sample responses will be based on the mean values and standard deviation according to the table 5, Lickert -5 scale points method, which constructed as follows.

Table 5;Lickert Scale points.

Likert scale	Level of assessment
1 – to 1.79	Strongly disagree
1.80- to 2.59	Disagree
2.60- to 3.39	Hard to determine
3.40- to 4.19	Agree
4.20- to 5	Strongly agree

The factors that have an effect on nursing management that would be discussed here will include: work-load, control , reward, community, fairness, and values. In addition to that the sample responses will be evaluated according the level of burnout, that they perceived in the work life, as will be shown in the following tables:

Table 6; assessment of participants responses regarding if they were affected by work-load

No.	Statements	Mean	Standard deviation	Level of agreement	Ranking
4	I have enough time to do what's important in my job	3.62	0.92	agree	1
2	I work intensely for prolonged periods of time	3.32	1.05	Neutral	2
3	I have so much work to do on the job that it takes me away from my personal interest	3.26	1.10	Neutral	3
1	I don't have time to do the work that must be done	2.82	1.12	Neutral	4
5	I leave my work behind when I go home at the end of the workday	2.56	1.11	disagree	5
	Overall mean value	3.11	0.59	Neutral	

The results in table 6, demonstrated the nursing managers participants of this current study regarding the effect of work-load on their work, and it was obvious that the overall mean value is reaching (3.11) with standard deviation (0.59) which indicated that some nursing managers feel that they were affected by work-load, while others don't feel that. Furthermore, the results in the above table, showed the majority of participants feel that they have enough time to do what's important in their job, as the mean value of their responses is reaching (3.62) with standard deviation (0.92). While when participants were being asked to express their thought if they work intensely for prolonged periods of time, the results revealed that the majority feel that it was hard to decide, as the mean value reaching (3.32) with standard deviation (1.05). this results confirmed that some nursing managers think that they work intensely for prolonged periods of time, while others do not. Whereas, when nursing managers were being required to show if they leave their work behind when they go home at the end of the workday, the results confirmed the majority were disagree that they leave their work behind when they go home at the end of the working day, as the overall mean value is reaching (2.56) with standard deviation (1.11).

Thus, generally it could be concluded that workload have a moderate effect on nursing managers, which indicated that some nursing managers may be affected by the workload, where others don't . This might be related to the nature of the job for each nursing manager.

Table 7;Assessment of participants responses regarding if they were affected by controlling their work.

No.	Statements	Mean	Standard deviation	Level of agreement	Ranking
6	I have control over how to do my work	3.75	0.81	agree	1
9	I have influence in the decisions affecting my work	3.57	0.78	agree	2
8	I have professional autonomy independence in my work	3.53	0.94	agree	3
7	I can influence management to obtain the equipment & space I need for my work	3.46	0.80	agree	4
	Overall mean value	3.58	0.62	Agree	

The results in table 7, demonstrated the nursing managers participants of this study regarding the effect of controlling the work nursing managers, and it was obvious that the overall mean value is reaching (3.58) with standard deviation (0.62) which indicated that the nursing managers thought that they have controlled their work on accurate way. Furthermore, the results in the above table showed most nursing managers, when they being asked to express their views if they have control over how to do their work, it was obvious that the majority feel that they have control over how to their work, as the overall mean value is reaching (3.75) with standard deviation (0.81). In addition to that the results in the above table, showed nursing managers were able to influence in the decision affecting their work, beside that they have autonomy independence in their work, and they can influence on management to obtain the equipment & space needed for their work. As the mean values of their responses ranged between (3.57 – to 3.46).

Thus, with regarding to controlling the work, the study found nursing mangers have the ability to control on their work effectively , and the most important indication supporting that is that most nursing mangers believed that , most nursing have the ability to control over how to do my work, in addition to that they have the ability tp influence in the decisions affecting my work.

Table 8; Assessment of participants responses regarding if they were affected by rewarding system in the work.

No.	Statements of rewarding system	Mean	Standard deviation	Level of agreement	Ranking
11	my work is appreciated	3.73	0.91	Agree	1
10	I receive recognition from others for my work	3.60	0.91	Agree	2
12	my efforts usually go unnoticed	2.84	1.16	Neutral	3
13	I do not get recognized for all the things i contribute	2.61	0.94	Neutral	4
	Overall mean value	3.18	0.47	Neutral	

The results in table 8, demonstrated the nursing managers view with regard to the effect of rewarding system in the work , and it was clear observed that the overall mean value is reaching (3.18) with standard deviation (0.47), the mean value indicated that generally nursing managers stand at the crossroad, that is they neither agree that rewarding system affect them nor disagree. That means participants were agreed about some elements of the rewarding system, and they hesitate to agree about other elements. The detailed analysis of nursing managers attitudes about rewarding system can be brought as follows:

When nursing managers were being asked to present their views if their work is appreciated, it could be noticed that the majority thought that their work is appreciated, as the mean value is reaching (3.73) with standard deviation (0.91). therefore, appreciation for the best work done is available in the work environment what support nursing managers to contribute more to improve their work. While, when nursing managers were being asked to present their views regarding if they receive recognition from others for their work, the results in the table revealed that the majority feel that they receive recognition from other for their work, as the mean value to their responses is reaching (3.60) with standard deviation equal to (0.91). That means nursing managers were satisfied with the level of recognition they received from other about the work they done. Whereas regarding other two statements which aimed to assess whether efforts usually go unnoticed, and nursing managers not getting recognitions for all things they contribute, the results showed that participants stand at the cross, that means they neither agree nor disagree, as the mean values of the sample responses have come successively with the values 2.84, and 2.61.

Thus, it could be concluded that nursing managers were satisfied with the level of rewarding received from the organization management, which indicated that there is no negative effects of the rewarding system on nursing managers working in the government hospitals under study.

Table 9; Assessment of participants responses regarding if they were affected by the community in the work.

No.	Statements of community	Mean	Standard deviation	Level of agreement	Ranking
15	I am a member of a supportive work group	4.03	0.90	Agree	1
16	members of my work group cooperate with one another	3.86	0.89	Agree	2
17	members of my work group communicate openly	3.82	0.89	Agree	3
14	people trust one another to fulfill their roles	3.62	0.81	Agree	4
18	I don't feel close to my colleague	2.22	1.08	Disagree	5
	Overall mean value	3.51	0.55	Agree	

The results in table 4.6, showed the nursing managers views with regard to the effect of community on the work they done , and it was noticed that the overall mean value is reaching (3.51) with standard deviation equal to (0.55), the mean value indicated that generally nursing managers agree that they were being affected the community in the work place. Which indicated that there a positive effect of the community on nursing managers. The detailed analysis of the sample of nursing managers, in concern with the effect of the community on their work can be conducted as follows:

When nursing managers were being asked to present their thoughts regarding membership of supporting team work, the statistics in table 4.6, showed that the majority of participants agreed they were being as a member of a supportive teamwork, as the mean value to their responses is equal to (4.03) with standard deviation equal to (0.90). This means that there is a positive effect of support teamwork on nursing managers in the hospital focus of the study. While when nursing managers sample of the study were being required to show their responses regarding that if “ members of their work group cooperate with one another, the results in table 4.6, revealed that the mean value of the sample responses is reaching (3.86) with standard deviation equal to (0.89). This result indicated the majority of nursing managers agreed that their work group cooperate with one another, which would have a positive effect on the work they did in the work environment. With regard to sample attitudes in concern with the openness of communication between members of work group in the hospitals focus of the study, the results in table 4.6, have shown that the majority of nursing managers subjects of the study believed that there is an open communication between members of the work group, which was supported by the mean value equal to (3.82) with standard deviation (0.89). While when participants of the study were being required to express their views regarding the statement No.18” I don't feel close to my colleague” the results in the table 4.6, showed that the majority of nursing managers don't agree, as the mean value to their response is equal to (2.22) with standard deviation (1.08). This result confirm that colleagues are closed to each other in the hospitals under study, which would have a positive effect on nursing manager while performing their work .

Therefore, it could be concluded that nursing managers feel that the community or people working in the hospitals under study are supportive and working under the philosophy of team work, and cooperating in the work place, and they communicate openly with each other, which would have a positive impact on nursing managers.

Table 10; Assessment of participants responses regarding if they were affected by the fairness in the work.

No.	Statements of fairness	Mean	Standard deviation	Level of agreement	Ranking
19	resources are allocated fairly here	3.45	3.05	agree	1
20	opportunities are decided solely on merit	3.42	0.91	agree	2
21	there are effective appeal procedures available when I question fairness of decision	3.37	0.82	Neutral	3
22	management treats all employees fairly	3.27	1.18	Neutral	4
23	favoritism determines how decisions are made at work	3.23	0.93	Neutral	5
24	it is not what you know but who you know that determines a career here	3.19	1.16	Neutral	6
	Overall mean value	3.28	0.50	Neutral	

The results in table 10, showed the nursing managers views with regard to the effect of fairness available in the hospitals sample of the study, and it was noticed that the overall mean value is reaching (3.28) with standard deviation equal to (0.50), the mean value generally indicated that nursing managers neither agree nor disagree that fairness was affecting on them while doing their work.

The detailed analysis of the sample responses to the elements of fairness in the hospitals under study as follows:

The statistics in table 10, revealed that, when nursing managers sample of the study were being asked about resources allocated fairly in these hospital, it was seen that the mean value to their responses is reaching (3.45) with standard deviation (1.05). The mean value indicated that the majority of nursing managers agree that resources are allocated fairly in these healthcare organization. Whereas when nursing managers were being required to provide their views in concern with the statement “opportunities are decided solely on merit” the statistics in the table 4.7, showed that the majority of participants do agree that opportunities are decided solely on merit, as the mean value is equal to (3.42) with standard deviation equal to (0.91). Where when nursing managers were being asked to present their thoughts regarding that “favoritism determines how decisions are made at work” the results showed that the majority of participants found it hard to decide, as the mean value to their responses is equal to (3.23) with standard deviation (0.93). Therefore, this result confirmed that nursing managers are different with regard to that favoritism determines how decisions are made at work in the hospitals under study.

Finally, when participants were being asked to present their views regarding that “it is not what you know but who you know that determines a career here” the statistics in table 4.7, revealed that the majority found it hard to decide, as the mean value is equal to (3.19) with standard deviation (1.16). Thus, based on the previous analysis of the nursing managers responses regarding the fairness available at hospitals under study, it could be concluded that there are some positive indications showing that resources are allocated fairly in the hospitals case of the study, and opportunities are decided solely on merit, whereas other elements of fairness, the participants were different in opinions.

Table 11; Assessment of participants responses regarding if they were affected by the values in the work.

No.	Statements of values	Mean	Standard deviation	Level of agreement	Ranking
26	the organization' goal influence my day to day work activities	3.75	0.73	agree	2
28	the organization is committed to quality	3.68	0.89	agree	4
25	my values and organization's values are alike	3.59	0.93	agree	1
27	my personal career goals are consistent with the organization's stated goals	3.50	0.84	agree	3
	Overall mean value	3.63	0.67	Agree	

The results in table 11, showed the nursing managers views with regard to the effect of values on the work in the hospitals under study, and it was noticed that the overall mean value is reaching (3.63) with standard deviation equal to (0.67), generally it could be said that nursing managers believed that values found in these hospital affect positively on the work environment. The results in the above table confirmed nursing managers agreed that the organization’s goal influence their day to day work activities, as the mean value of their responses is reaching (3.75) with standard deviation (0.73). On the other hand, when participants were being asked to present their views if the organization is committed to quality, the results revealed that the organization is committed to quality in these hospitals greatly, as the mean value of their responses is equal to (3.68) with standard deviation (0.89). While when participants were being required to show their response in concern with whether their values and organization's values are alike, the results revealed the majority of nursing managers confirmed that their values and the organization’s values are alike, which would expected to have a positive effect on performing their work. This positive effect was supported by the mean value equal to (3.59) with standard deviation equal to (0.93).

Whereas, in last when participants were being asked to show their views regarding that their personal career goals are consistent with the organization's stated goals, the results confirmed the majority of nursing managers agreed about that as the mean value to their responses is equal to (3.50)with standard deviation equal to (0.84). Hence, it could be concluded that most nursing managers confirmed that their personal career goals are consistent with the organization’s stated goals, which have a positive effect on the accomplish of work in a corrected way.

In conclusion and with regard to the effect of values in work place on nursing managers job, the results showed that values play a significant role to effect on nursing managers work in the hospital under study, in particularly in terms of organization’s goals influence on day to day work, and the commitment of organization to quality.

Section Three : descriptive analysis to nursing management burnout elements.

This part of data analysis was specified to examine, how, and to what extent do nursing managers feel that they were burnout, as a result of the factors that affect their work in the hospitals under study, as will presented in the table below:

Table 12; Assessment of nursing managers burnout.

No.	Statements of fairness	Mean	Standard deviation	Level of burnout	Ranking
16	at my work, I feel confident that I am effective at getting things done.	3.43	0.97	always	1
5	I can effectively solve the problems that arise in my work	3.27	1.00	always	2
10	In my opinion I am good in my job	3.25	1.13	always	3
7	I feel I am making an effective contribution to what this organization does	3.06	1.18	always	4
11	I feel exhilarated when I accomplished something at work	3.03	1.20	always	5
12	I have accomplished many worthwhile things in this job	2.78	1.26	A few time a week	6
13	I just want to do my job and not be bothered	2.42	1.52	A few time a week	7
2	I feel used up at the end of the workday	2.22	1.27	A few times a month	8
1	I feel emotionally drained from my work	2.20	1.18	A few times a month	9
6	I feel burned out from my work	1.77	1.24	A few times a month	10
3	I feel tired when I get up in the morning and have to face another day on the job	1.76	1.35	A few times a month	11
14	I have become more cynical about whether my work contributes anything	1.71	1.44	A few times a years	12
4	working all day is really a strain for me	1.68	1.30	A few times a years	13
15	I doubt the significance of my work	1.36	1.39	A few times a years	14
9	I have become less enthusiastic about my work	1.28	1.30	A few times a years	15
8	I have become less interested in my work since I started this job	1.24	1.27	A few times a years	16
	Overall mean value	2.28	0.62		

The results in table 4.9, demonstrated the nursing managers views with regard to the of their burnout in the work environment in the hospitals under study, and it was noticed that the overall mean value is reaching (2.28) with standard deviation equal to (0.62), therefore, generally it could be said that nursing managers believed that they might be burnout a few times a year. This results showed that actually nursing managers don’t suffer from burnout widely while performing their duties. The detailed analysis of nursing managers regarding the level of burnout, can be conducted as follows:

The most important indication showing that nursing managers, don’t feel of burnout while performing their work in the hospitals, is that the majority confirmed that, they feel confident that they are effective at getting things done, as the overall mean value is reaching (3.43) with standard deviation (0.97). The second important indication showing that nursing managers were not burnout, is that they always, can effectively solve the problems that arise in their work, as the mean value to their responses is equal to (3.27) with standard deviation equal (1.00). This , confirmed that nursing managers can contribute positively and effectively to solve work environment problems that facing them or their staff working in the hospital. A third indication, showed that nursing managers are far away from being burnout is that the majority of them feel that they always are good in doing their jobs, as the overall mean value of their responses is equal to (3.25) with standard deviation (1.12). One the other hand, when nursing managers were being asked to provide their views regarding the statement “I have become less enthusiastic about my work” the results showed that the majority believed that this might happen a few times at a year or less, as the overall mean value is equal to (1.28) with standard deviation (1.30).Whereas when nursing staff were being questioned to show their views regarding the statement “I have become less interested in my work since I started this job” it could noticed that the majority of the participants thought that that might happen a few times at a year or less, as the mean value to their responses is equal to (1.24) with standard deviation equal to (1.27). Therefore, based on the previous analysis to the nursing views regarding the elements of burnout, the results found that there are positive indication showing nursing managers don’t suffer from burnout in the work, the most important of these indication include : most participants feel confident they were effective at getting things done, most participants effectively solve the

problem that arise in work environment, most of them feel that they were good in their jobs, most of the participants feel that they were making effective contribution to what this organization did, and most of them feel exhilarated when they accomplish something at work.

Section four : Testing research hypotheses

This section was specified to test the research underlined hypotheses which are as follows:

1. There is a statistically significant relationship between nurses managers workload and reaching those managers to burnout.
2. There is a statistical significant relationship between controlling the nursing mangers their work and reaching those managers to burnout.
3. There is a statistical significant relationship between rewarding system and reaching the nursing managers to burnout.
4. There is a statistical significant relationship between fairness at work and reaching the nursing managers to burnout.
5. There is a statistical significant relationship between work community and reaching the nursing managers to burnout.

To test the previous hypotheses, multiple regression analysis was conducted examine if there is a statistically significant relationship between the dependent variables (burnout) and the five independents variables including : (workload, controlling, rewarding system, fairness, and community) .

The results of multiple regression was presented as in the following table:

Table 13;The results of multiple regression analysis to measure the effect of job satisfaction on employee turnover intention

Factors	Coefficients	Beta	T-test		F-test		R	R2	Adj R2
			Value	sig	value	Sig			
Constants	1.041		1.827	0.07	14.31**	0.00	0.75	0.565	0.526
Workload	0.774	0.673	7.11**	0.00					
Controlling	-0.024	-0.025	-0.241	0.81					
Reward	0.136	0.109	1.112	0.27					
Community	-0.247	-0.240	-2.377*	0.02					
Fairness	-0.196	-0.158	-1.571	0.12					

** indicated that the value of (t, f) statistically significant at the (0.01) level.

*indicated that correlation is significant at the (0.05) level.

From the result in table (4.10), it was found that the value of F-statistics is very high reaching (14.31) which is statistically significant at the (0.01) significant level, while R square value is reaching (0.565), therefore, it could be concluded that the multiple regression model was quite sufficient to measure the effects of five independents variables including (workload, controlling , rewarding, community and fairness) on nursing managers burnout .

From the results of multiple regression model in the above table, it could be observed that the multiple correlation coefficient (R) between independents variables, and the dependent variable (nursing managers burnout) is reaching (0.5) which is a high and positive value indicating that there is a significant and positive correlation relationship between the independents and nursing managers burnout . In addition to that as the value of F-statistics is high enough and statistically significant at the (0.01) level, and the value of the coefficient of determination (R²) is equal to (0.565), this means the regression model is highly efficient in estimating and predicting the main factors that could contribute in the change of burnout in the hospitals case of the study.

Furthermore, it could be seen as the value of (R²) is equal to (0.565) this means that the five independents have the efficiency to predict and were responsible of the changes that happen in nursing managers burnout, by (0.57%) approximately if other things remain equal .

Analysis of factors effects on employees turnover

In this part researchers will investigate the effect of the factors that impact on nursing managers burnout the included in multiple regression model which include : (workload, controlling, reward system, community, and fairness).

Hence the multiple regression equation can be written as follows:

$$\text{Burnout} = a + b_1 X_1 + b_2 X_2 + b_3 X_3 + b_4 X_4 + b_5 X_5$$

Whereas $X_1 = \text{workload}$, $X_2 = \text{controlling}$, $X_3 = \text{reward}$, $X_4 = \text{community}$,
 $X_5 = \text{fairness}$,

Therefore, after substitution in the previous equation by values of coefficient the equation will become as follows:

$$1.04 + 0.774 X_1 - 0.024 X_2 + 0.136 X_3 - 0.247 X_4 - 0.198 X_5$$

To investigate the most important factors that are statistically significant and have crucial effects on nursing managers burnout, the researcher would conduct as follows the analysis of relationship between each independent factor, and nursing managers burnout in order to test the research hypotheses:

Hypothesis One : stated that

“There is a statistically significant relationship between nurses managers workload and reaching those managers to burnout”.

It could be observed from the statistics in the table 4.10 that the regression coefficient of the independent variable (workload) was equal to (0.774), and as the value of T-test was reaching (7.11) and statistically significant at the (0.01) level, this indicating that there is a significant and positive relationship between workload and nursing managers burnout. That means if workload increases will lead burnout to increase among nursing managers in the work environment. Therefore the previous results proved this hypothesis.

Hypothesis Two: stated that

“There is a statistical significant relationship between controlling the nursing mangers their work and reaching those managers to burnout”.

It was noticed from the table 4.10 that, the regression coefficient of the independent variables (controlling) is equal to (-0.024) which is less than unity and negative, and as the value of T-test was not statistically significant, this means that there is no significant relationship between controlling and burnout. Therefore, based on the previous, the results don't found any statistically relationship between controlling and burnout. This means nursing managers are effective to control their work in a good way.

Hypothesis Three: stated that

“There is a statistical significant relationship between rewarding system and reaching the nursing managers to burnout”.

It could be seen from the result in table 4.10, that the value of regression coefficient for the independent variable (rewarding system) is equal to (0.136), which is less than unity, as the value of T-test was equal to (1.112) and not statistically significant at the (0.05) level, that means there was no a significant relationship between rewarding system and nursing managers burnout .so this results don't prove hypothesis three .

Hypothesis four: stated that

“There is a statistical significant relationship between fairness at work and reaching the nursing managers to burnout”.

Regarding the relationship between fairness and nursing managers burnout, it could be noticed from the statistics in table 4.10, that the regression coefficient of the independent variable fairness was equal to (-0.198), which is negative and less than unity, and as the value of T-test is equal to (-1.571) and which is not statistically significant, this indicated that there was no statistically significant relationship between fairness and nursing managers burnout.

Hypothesis five: stated that

“There is a statistical significant relationship between work community and reaching the nursing managers to burnout”.

The results of multiple regression in table, 4.10, showed the value of regression coefficient of the independent variable community is reaching (-0.247), which is negative, and T-test value is equal to (-2.377) which is statistically significant at the (0.05) significant level. Therefore, there is a statistically significant and inverse relationship between community and nursing managers burnout. This means that the community affect negatively on nursing managers in the work environment.

V. Conclusion

Based On Data Analysis Conducted In Chapter Four, The Study Concluded With The Following Outcomes :

1- The study showed that workload have a moderate effect on nursing managers, which indicated that some nursing managers may be affected by the workload, where others don't. That means nursing managers seem that they were doing good job, and what supporting this , that most nursing managers feel that they have enough time to do what's important in their job.

2- With regarding to controlling the work, the study found nursing mangers have the ability to control on their work effectively and the most important indication supporting that is that most nursing mangers believed that , most nursing have the ability to control over how to do their work, in addition to that they have the ability to influence in the decisions affecting my work.

3- The study found that , nursing managers were satisfied with the level of rewarding received from the organization management, which indicated that there is no negative effects of rewarding system on nursing mangers working in the government hospitals under study.

4- The showed that, nursing managers feel that the community or people working in the hospitals under study are supportive and working under the philosophy of team work, and cooperating in the work place, and they communicate openly with each other, which would have a positive impact on nursing managers.

5- Based on the analysis of the nursing managers responses regarding the fairness available at hospitals under study, the study concluded that there are some positive indications showing that resources are allocated fairly in the hospitals case of the study and opportunities are decided solely on merit, whereas other elements of fairness, the participants were different in opinions.

6- With regard to the effect of values in work place on nursing mangers job, the results showed that values play a significant role to effect on nursing managers work in the hospital under study, in particularly in terms of organization's goals influence on day to day work, and the commitment of organization to quality.

In Conclusion, The study proved that, there is a significant and positive relationship between workload and nursing managers burnout. That means; if workload increases, it will lead burnout to increase among nursing managers in the work environment. Secondly, the study found that, there is a statistically significant and inverse relationship between community and nursing managers burnout. This means that the community affect negatively on nursing managers in the work environment. While testing the relationship between nursing managers controlling to their work, and burn out, the study did not found any statistically relationship between controlling and burnout. This means nursing managers are effective to control their work in a good way. On the other hand the study revealed that, there is no statistically significant relationship between nursing mangers burnout, and fairness, and rewarding system in the hospitals case of this study. The results of multiple regression analysis revealed that the variables included in the model (workload, controlling, reward system, community and fairness) as independent variables have the ability to estimate and be responsible of about 56.5% of the variation in nursing managers burnout.

VI. Recommendations

1- Final results showed that there is a significant and positive relationship between increase workload and the increase of burnout for managers, most of their workload are caused by urgent orders from higher authorities, large amount of paper works, meetings & communications among health care workers. We recommend preparing Advance Management Courses to refresh and update the managers' information's & skills from highest authority managers to the first line managers and develop their administration skills in time management, motivation, communication and chain of command and it also increase socialization opportunities among the managers.

2- We recommend having a nursing managers' consultation office for those who have stress & burn out and in need for someone to listen to them, advice and support.

3- The irrespective way of communication from the staff nurses of new generation, can cause stress and burnout, with low quality and poor productive nurses now a day we recommend training them and create courses to develop them professionally and personally and also put a strict regulations and disciplinary actions for those whom are unprofessional in their career and their attitudes.

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