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The Impact of Leadership Components on Turnover Intent: The Case of Nurses

Maria da Graça Batista
Luís Furtado
Francisco Silva

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Maria da Graça Batista
Universidade dos Açores (DEG e CEEAplA)

Luís Furtado
Departamento de Cirurgia Geral
Hospital do Divino Espírito Santo, EPE

Francisco Silva
Universidade dos Açores (DEG e CEEAplA)

RESUMO/ABSTRACT

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This study aimed to identify nurses' leadership behavior in management functions and determine if leadership has a direct impact on turnover intention or career abandonment. This descriptive and inferential study was conducted in two public hospitals. Head nurses and nurses in general and specialist health care were invited to participate, except those working in operating or clinical services. The final sample consisted of 266 individuals (22 head nurses and 244 staff nurses) that responded to a questionnaire, which was organized into three distinct sections: (1) sample characterization; (2) the Leadership Effectiveness and Adaptability Description (LEAD), which was used to determine the situational leadership components; and (3) four closed questions relating to different turnover intentions. Data was collected in May 2009. The most expressive leadership styles are the S2 (persuading) and S3 (sharing) in both groups. In terms of turnover, the results showed strong positive associations with profile S2-S3 and with effective adaptability. Leaders' with S2-S3 profiles easily delegate tasks and enhance the functional and emotional development of their collaborators. Effective adaptabilities requires that chief nurses tailor their leadership style to the situation and environment they are working, allowing that their actions meet the expectations of their subordinates. These two dimensions contribute positively to nurses' retention.

Maria da Graça Batista
Universidade dos Açores
Departamento de Economia e Gestão
Rua da Mãe de Deus, 58
9501-801 Ponta Delgada

Luís Furtado
Departamento de Cirurgia Geral
Hospital do Divino Espírito Santo, EPE
Rua Grotinha
9500-3701 Ponta Delgada

Francisco Silva
Universidade dos Açores
Departamento de Economia e Gestão
Rua da Mãe de Deus, 58
9501-801 Ponta Delgada

THE IMPACT OF LEADERSHIP COMPONENTS ON TURNOVER INTENT:

THE CASE OF NURSES

MARIA DA GRAÇA BATISTA
Departamento de Economia e Gestão
Universidade dos Açores
CEEAplA
Apartado 1422
9501-801 Ponta Delgada, Azores; Portugal
Tel.: 296 650 084
Fax: 296 650 083
mbatista@uac.pt

LUÍS FURTADO
Departamento de Cirurgia Geral
Hospital do Divino Espírito Santo, EPE
Rua Grotinha
9500-3701 Ponta Delgada, Azores; Portugal
Tel.: 296 203 000
Fax: 296 650 090
furtado_luis@sapo.pt

FRANCISCO SILVA
Departamento de Economia e Gestão
Universidade dos Açores
CEEAplA
Apartado 1422
9501-801 Ponta Delgada, Azores; Portugal
Tel.: 296 650 084
Fax: 296 650 083
fsilva@uac.pt

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ABSTRACT

This study aimed to identify nurses' leadership behavior in management functions and determine if leadership has a direct impact on turnover intention or career abandonment. This descriptive and inferential study was conducted in two public hospitals. Head nurses and nurses in general and specialist health care were invited to participate, except those working in operating or clinical services. The final sample consisted of 266 individuals (22 head nurses and 244 staff nurses) that responded to a questionnaire, which was organized into three distinct sections: (1) sample characterization; (2) the Leadership Effectiveness and Adaptability Description (LEAD), which was used to determine the situational leadership components; and (3) four closed questions relating to different turnover intentions. Data was collected in May 2009. The most expressive leadership styles are the S_2 (persuading) and S_3 (sharing) in both groups. In terms of turnover, the results showed strong positive associations with profile S_2-S_3 and with effective adaptability. Leaders' with S_2-S_3 profiles easily delegate tasks and enhance the functional and emotional development of their collaborators. Effective adaptabilities requires that chief nurses tailor their leadership style to the situation and environment they are working, allowing that their actions meet the expectations of their subordinates. These two dimensions contribute positively to nurses' retention.

INTRODUCTION

Changes in the labor world have made a career more than just a series of steps to move forward on a particular hierarchy. To Balsanelli and Cunha (2006), careers are now an individual growth process that requires the continual acquisition of knowledge and skills, with employers obligated to provide the needed requirements for this progression.

Turnover, particularly in nursing, implies high economic and human costs. According to Tallman and Bruning (2005), hospitals, particularly those in peripheral or in rural areas, have some difficulty retaining nurses because of high bureaucracy and difficulty meeting the career development expectations.

Studies that deal with leadership complexity applied to nursing are scarce, and there are even fewer studies that try to connect the different aspects of leadership with turnover among nurses. Nursing as a fundamental part of health organizations' structure must be alert to key issues related to how things evolve within hospitals. One of the main areas where the nurse as a coordinator of multidisciplinary teams must have total control is leadership, knowing its full scope and actual impact on followers.

We aim to study and identify head nurses' leadership behavior and determine its impact on turnover and career abandonment. It is hypothesized that turnover and career abandonment is independent from leadership profile, versatility and adaptability perception.

With this goal in mind, we organized this paper around the following blocks: First, we relate situational leadership and turnover. Next, we advance to the empirical part, explaining how the study was carried out. The paper closes with a discussion of the results and implications, namely the S2-S3 leadership profile and the effective leadership adaptability that apparently contribute to lower nurses' turnover.

SITUATIONAL LEADERSHIP AND TURNOVER

Hersey and Blanchard (2005) define leadership as the process of influencing the activity of an individual or group in order to achieve a given specific purpose.

Leadership style is defined as the leader's behavioral pattern when acting to influence others and involves the combination of two types of behaviors: task and relationship.

The Situational Leadership Model, developed by Hersey and Blanchard (2005) is based on the interplay of three essential characteristics: (1) the level of supervision made by the leader; (2) the level of socio-emotional support provided by the leader; and (3) the subordinate's maturity level to carry out a specific job. The last characteristic is the core of the model (Hersey and Blanchard, 1974).

The model considers the concepts of leadership style, profile, versatility, and adaptability. Hersey and Blanchard (1981) define four basic styles of leadership that extent gradually from high task orientation and low socio-emotional support and ends inversely: determining (S_1), persuading (S_2), sharing (S_3), and delegating (S_4).

Hersey and Blanchard (1982) consider it as the leader's responsibility to vary her/his leadership style. Thus, there are more rigid leaders that use a smaller range of styles and more flexible ones. Hersey and Blanchard (1981) argue that leadership adaptability is related to the extent to which leaders are able to adjust and vary their leadership style according to the needs of a particular situation. Hersey and Blanchard (2005) also presented the concept of leadership profile, which includes a basic style and a support style. Thus, there are six leadership profiles: S_1-S_2, S_1-S_3, S_1-S_4, S_2-S_3, S_2-S_4 and S_3-S_4.

According to Gibson *et al.* (2006), managers can easily assume that low turnover is synonymous with an efficient organization, yet we need to expand this linear approach, considering that this phenomenon should also focus on who is stepping away from the organization and not only the frequency by which people leave. Robbins (2006) refers to work force stability as an important variable that explains turnover. The longer an individual stays in a particular job, the lower the probability of resigning.

In addition to stability, there are other factors that are relevant for turnover. Luthans (1998) identifies organizational commitment and economic factors. When the economy is growing and there is not much unemployment, turnover rates will increase. On the other hand, if the economy is slowing down, or even entering recession, and the labor market is no longer favorable, individuals will remain in their jobs whether or not they are satisfied. Newstrom (2008) argues that excessive turnover can originate negative

consequences for the organization, such as separation costs, new employees' training costs, waiting time from new employee related costs, replacement costs, and effects on morale and motivation.

Turnover is a natural phenomenon in organizations as long as it has functional effects. Similarly to what occurs in any other type of organization, turnover is both a positive and negative phenomenon in health organizations. According to Järvi and Uusitalo (2004), consider that environmental and labor changes in hospitals require permanent training and a shift in employees' expectations; that is, people cannot expect their jobs to remain unchanged throughout their career. Nurses' capabilities and competencies tend to be very limited if they are only familiar with their unit's practices.

However, in most cases, turnover among nurses has a negative impact on health organizations. For Naude and McCabe (2005), nursing professionals' excessive turnover causes several problems, from high financial costs to lack of care quality provided to patients. They argue that it is vital to promote effective policies to retain these professionals, such as friendly and mutually supportive colleagues, efficient management, job satisfaction, and opportunities for professional development.

Phillips (1987) draws attention to the fact that high turnover has a deeper impact beyond financial and organizational dynamics and argues that the psychological impact is crucial in patient caring, leading to an increase in the hospitalization period when there are higher turnover rates in nurses. As Gullatt and Jirasakhiran (2005) mention, there should be an effort to build a retention culture in hospitals. For this to occur, the head nurse is the key to the team's cohesion and commitment. Thus, the question of head nurses' retention must be considered and appreciated as a tool in operational management and as a vital element for hospital functioning.
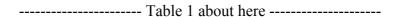
METHOD

This prospective, descriptive and inferential study sought access to head nurses' and staff nurses' perceptions concerning leadership styles (dominant and alternative), profiles, versatility and adaptability, and determination of turnover intention (external

and internal) as well as career abandonment. The goal of the study was to establish a cause and effect relationship between these phenomena.

HYPOTHESES

The definition of the research hypotheses required a thorough review of the literature that established the main guidelines of this study. The hypotheses are presented in Table 1.

----------------------- Table 1 about here ---------------------

The hypotheses set out above were based mainly on Kleinman's (2004) study, which attempted to search for causal relationships between different leadership styles and turnover intent. The theoretical model used by Kleinman (2004) did not include concepts like leadership profile, versatility, and adaptability, but we still found it to be relevant for this study, testing the different components of theoretical model of situational leadership in the face of staff turnover. The works of Newman, Maylor, and Charsarkar (2002) as well as Tallman (2007) were also used, since they demonstrate the importance of leadership behaviors as environmental and organizational behavior constraints, thus helping to sustain the relevance of the research hypotheses.

POPULATION AND SAMPLE

This study was conducted in two public hospitals that have a total of approximately 636 beds. All nurses in management and care were invited to participate, except those who work in the operating blocks and outpatient units. A total of 451 questionnaires were distributed, and 289 were collected. We disposed of 23 because they were not properly filled, so the final sample consisted of 266 head and staff nurses. The overall rate of participation in the study was 58.9%.

DATA COLLECTION QUESTIONNAIRE

The questionnaire used in data collection consisted of three different sections. The first section aimed to characterize the study sample, focusing on biographical and workforce data. The second section was designed to determine the performance of nursing leadership, using the Leadership Effectiveness and Adaptability Description (LEAD) and the assessment of self and others' perception adapted for the original study

developed by Hersey and Blanchard (1981). The third part of the questionnaire focused on determining the turnover intent (considering similar and better working conditions, in terms of employment status, hours, and pay), the internal turnover for performing similar functions, and the intention to abandon the career.

PROCEDURES AND DATA ANALYSIS

We sent a request to distribute the questionnaire to the Chairmen of the Board of both hospitals and a letter explaining the scope, context, and goals of the study. We also attached a copy of the questionnaire to be analyzed by the Administration. We conducted a pre-test to a similar population and prepared some changes that led to the final version of the questionnaire.

Data were processed and analyzed using SPSS 15.0 for Windows. We started with data descriptive analysis after checking for outliers and missing data. Then, we conducted the inferential analysis (hypothesis testing and correlation), fulfilling the requirements for each specific statistical test. The inferential statistical analysis focused on the determination of statistically significant relationships between leadership perceptions and the different turnover intentions.

RESULTS

The sample comprised 22 nurses in management positions and 244 staff nurses. Table 2 presents biographical and job related data. The average head nurse is a female nearly 47 years old with 26 years of professional experience, 12 years in operational management and 8 years at the head the current service unit. The average employee is also a female, 31 years old with 7 and a half years of professional experience and an average length of stay in their current unit of 5 years. Regarding education and training in operational leadership in head nurses, most individuals hold a degree and a diploma of specialization in nursing. In the staff, there is a clear dominance of licensed nurses.

----------------------- Table 2 about here ---------------------

Head nurses, on average, work 42 hours per week, two hours more than their staff, and most of them work in shifts. There is a wide diversity of employment relationships, although the two dominant groups are definite or permanent links.

PERCEPTION OF SITUATIONAL LEADERSHIP

Regarding perceptions of leadership components, there was a connection between head nurses' and staff vision on leadership styles (dominant and alternative), profiles, and versatility. The results are presented in Tables 3 and 4.

----------------------- Table 3 about here ---------------------

The dominant leadership style most often identified by both groups was "persuading" (S_2), followed by "sharing" (S_3). For the alternative leadership styles, we also noticed a similar trend in the operational chief and staff groups, "sharing" (S_3), followed by "persuading" (S_2). Another important component of the model is the profile. There is a large concentration of head nurses in only two profiles, S_2-S_3, followed by S_1-S_2. In the staff group, there is dispersion in all possible profiles, although S_2-S_3, followed by the S_1-S_2 was the most frequently mentioned.

Data analysis found a clear prevalence on the identification of "moderate versatility" by both groups, followed by "strong versatility" and "poor versatility". There were no leaders "without versatility". As for leadership adaptability, there was a sharp trend reversal identified by leaders and followers. Head nurses assume that their leadership is mostly effective, while their staff regard their leaders as ineffective (Table 4).

----------------------- Table 4 about here ---------------------

TURNOVER INTENT PERCEPTION

One of the key goals of this research was to determine the turnover and career abandonment intentions of nursing professionals. The data for this analysis are shown in Table 5.

----------------------- Table 5 about here ---------------------

Analysis of Table 5 on different turnover intentions shows some differences between managerial and operational staff. With regard to leaving the hospital where they currently work without an actual increase in salary or an improvement of working conditions, both head and staff nurses choose to remain in their current positions.
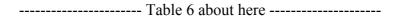
The situation is different when there is the possibility of salary increase and improvement of working conditions. Although operational leaders choose to maintain their current positions and remain where they are, staff nurses totally reverse the trend, with the vast majority choosing to work in another hospital.

Regarding turnover intention when similar conditions are maintained, there is a common pattern among head nurses and providing care nurses. It appears that the majority chooses to remain in their current jobs. As for the intention to abandon the nursing career, both groups state that such a scenario has not been considered.

INFERENTIAL ANALYSIS

The inferential analysis aims to validate or reject the research hypotheses in order to provide consistency and robustness to the study findings. Several hypotheses have been subjected to statistical tests (parametric and nonparametric) and then to hypothesis testing. We assumed as the null hypothesis (H_0) the non-existence of a relationship between variables.

The four hypotheses presented in this study (H_1, H_2, H_3, and H_4) were tested using the Chi-Square Test. Table 6 presents the results for determining of leadership profile influence in turnover intention for similar working conditions (H_{1a}).

----------------------- Table 6 about here ---------------------

There seems to be a statistically significant relationship between the variable "turnover for similar working conditions" and leadership profile, so we reject H_0. Thus, nurses' retention when there are no external attractive conditions seems to be related to the S_2-S_3 leadership profile.

Related to leadership versatility, there is a lack of a statistically significant relationship. Therefore, we cannot reject the null hypothesis (H_0) (Table 7).

----------------------- Table 7 about here --------------------

Similarly to versatility, leadership adaptability does not seem to relate to the desire to abandon the current position when there is not a salary increase and improved working conditions. So, we do not reject H_0 (Table 8).

----------------------- Table 8 about here --------------------

Turnover intention was also tested but considering a wage increase and improvement in working conditions (Table 9).

----------------------- Table 9 about here --------------------

There is not a significant relationship that can sustain the influence of the leadership profile in the turnover intention, so we do not reject H_0.

The results regarding leadership versatility influence in the turnover intention for improved working conditions are shown in Table 10.
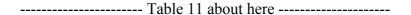
----------------------- Table 10 about here --------------------

We could not identify a statistically significant relationship that constitutes a causal relationship between the tested variables. Thus, we do not reject the null hypothesis (H_0).

We found a statistically significant relationship with turnover intent when there are improved working conditions, so H_0 is rejected (Table 11).

----------------------- Table 11 about here --------------------

In addition to turnover intention, this study also determined the components of leadership influence in internal turnover when similar conditions are considered.

Data from Table 12 reveals that there is a statistically significant relationship between the two variables, so we reject the null hypothesis (H_0). Leadership profile, namely S_2-S_3, has the potential to promote nurses' retention in the current service units.

----------------------- Table 12 about here --------------------

The results of leadership versatility influence on internal turnover intention are shown in Table 13, after using a Chi-Square test.

---------------------- Table 13 about here --------------------

For the test shown in Table 13, we do not reject H_0, and we assume that head nurses' leadership versatility does not influence the staff's will to exit to another service unit within the hospital.

The leadership adaptability influence on internal turnover is presented in Table 14.

---------------------- Table 14 about here --------------------

Faced with internal turnover intention, head nurse efficiency does not seem to influence staff nurses' intention of leaving or staying in the current service unit. Thus, we do not reject the null hypothesis (H_0).

Issues related to nursing career abandonment, although inexpressive, were also tested for potential links with nurses in management positions leadership profile, versatility and adaptability perceptions.

We began by studying the influence of leadership profile in career abandonment intention. The results are presented in Table 15.

---------------------- Table 15 about here --------------------

From the analysis of Table 15, it is possible that there is a statistically significant relationship between leadership profile and intention to abandon the career by care providing nurses, so we reject H_0. This means that the S_2-S_3 profile is related to nurses maintaining their profession.

Table 16 presents the results regarding the influence of leadership versatility on the intention that staff nurses expressed to abandon their profession.

---------------------- Table 16 about here --------------------

There is no relationship between the variables "leadership versatility" and "intention to abandon the nursing career," so we do not reject H_0.

Finally, Table 17 presents the results regarding the influence of leadership adaptability on the possibility of abandoning the nursing practice.

---------------------- Table 17 about here ---------------------

From the figures in Table 17, there is no statistically significant relationship between the variables, so the null hypothesis (H_0) is not rejected.

DISCUSSION

Concerning leadership phenomena, leaders and followers were on the same page when it comes to styles (dominant and alternative), versatility, and profile. There is, however, a discrepancy related to adaptability: head nurses assume that their leadership is effective, while staff nurses do not. Two studies conducted by Galvão *et al*. (1998) and Wehbe and Galvão (2005) in Brazilian public hospitals also identified these leadership behavioral trends.

Kosinska and Niebró (2003) argue that leadership versatility is essential, since nurses must assume different roles and match them when they deal with changes and unexpected work scenarios. Head nurses' adaptability is also important, as mentioned by Jooste (2004), because these professionals are facing the challenge of a shifting paradigm in health care and are required to adjust behaviors in order to lead and influence those on their teams.

Reviewing the different turnover intentions tested in this study, we can highlight some key findings. In the absence of external and attractive benefits such as a real salary increase and better working conditions, head nurses and staff do not appear interested in leaving the hospital where they currently work. However, faced with a job offer that increases their paycheck and working conditions, head nurses maintain the same trend, but staff nurses would opt to cease the current contract they hold with their employer.

We did not find any differences regarding internal turnover intent in head nurses and staff nurses, whose tendency was to stay in the service units where there they currently perform. Regarding willingness to give up the nursing practice, this was not a significant intention in either group, although it was slightly higher among staff nurses.

The inferential analysis focused on finding relations between situational leadership components (profile, versatility, and adaptability) and the different turnover intentions expressed by the respondents. It was found that the leadership profile S_2-S_3 seems to be related to nurses' retention in hospitals when they face similar conditions in another hospital. The same profile is also related to nurses' willingness to remain in their service units.

Regarding internal turnover, we note that it often occurs due to organizational needs and is designated as internal mobility. Infante (1981) states that organizational needs must be balanced, since nurses' continuing development and aspirations also have to be met. Richardson *et al.* (2003) reinforce the idea that turnover should focus on the quest for balance, which is possible to achieve through concessions on both sides.

As for turnover intent when facing better wages and working conditions, we found it to be only dependent on leadership adaptability. In this study, we verify that staff nurses that consider their hierarchical superior as an ineffective leader could easily cease their current contract.

The nursing career abandonment intent was also tested, and only one statistically significant relationship was found with S_2-S_3 profile as a retention promoter. Head nurses' leadership influence is related to what Richards (2004) referred as professional concerns to ensure training and continuous development of their staff, through assertive and consistent behaviors. Kleinman (2004)'s study is also consistent with the results of this research, as it identified that leaders who have high socio-emotional support behaviors promote staff retention of nurses in their departments and hospitals.

STUDY LIMITATIONS AND FUTURE RESEARCH

The first and main limitation of this study is connected to sampling. Although a participation rate of 58.9% is quite satisfactory, we could have expanded the sample to other hospitals. Another limitation is related to the questionnaire, which comprised 59 questions distributed through 7 pages; this may have discouraged respondents' participation. A final limitation has to do with the determination of turnover intent, which was reduced to similar and improved working conditions and not any other option. This happened because the questionnaire was already too long, and data collection could have been compromised if we added an additional response hypothesis,

thus lowering the participation rate. We also recognize that this study could have gone deeper into the nurses' turnover approach and suggest a deeper analysis that addresses other work dimensions to better understand what factors truly promote retention.

CONCLUSIONS

The main purpose of this paper was to understand the leadership phenomena among nurses and relate it to different turnover intentions. Knowledge obtained in this area is of great relevance to different management levels and for political decision-making.

Turnover in hospitals, besides provoking high financial costs, will reduce the quality of care provided to patients and their families, affecting health gains that could potentially be achieved. Nurses in leadership positions play an important role in staff nurses' retention, motivating them, involving them, and enhancing their individual and professional development. For this reason, it is essential that nurses in chief positions have the skills that meet the needs of the group.

There has been a shift in the health sector in Portugal with an increasing influence and control from private hospitals. This is advantageous, since more and better services can now be provided. This can also boost a nurses' and other health professional's turnover wave, since the private health sector tends to be more attractive and provide better wages and working conditions than public health hospitals. A balance will have to be found, and hospitals need to develop effective retention strategies that meet individual nurses' aspirations.

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Table 1. Research hypothesis

HYPOTHESIS 1

Turnover intent for equal labour conditions is independent from:
    a. Leadership profile perception
    b. Leadership versatility perception
    c. Leadership adaptability perception

HYPOTHESIS 2

Turnover intent considering better labour conditions is independent from:
    a. Leadership profile perception
    b. Leadership versatility perception
    c. Leadership adaptability perception

HYPOTHESIS 3

Internal turnover intent for a similar job is independent from:
    a. Leadership profile perception
    b. Leadership versatility perception
    c. Leadership adaptability perception

HYPOTHESIS 4

Nursing career abandonment intent is independent from:
    a. Leadership profile perception
    b. Leadership versatility perception
    c. Leadership adaptability perception

Table 2. Sample distribution according to biographical data

Variables		Operational Chief (%)	Staff (%)
Sex	Male	13,6	15,2
	Female	86,4	84,8
	Total	**100**	**100**
Age Groups	< 25 years old	-	23,0
	[25-30[years old	-	31,1
	[30-35[years old	-	19,3
	[35-40[years old	-	11,1
	[40-45[years old	31,8	9,4
	[45-50[years old	36,4	4,5
	[50-55[years old	27,1	1,2
	≥ 55 years old	4,5	0,4
	Total	**100**	**100**
Professional and Academic Qualifications	Degree	13,6	96,7
	Degree and Specialization	63,6	2,9
	Masters	-	0,4
	General Course and Specialization	18,2	-
	Masters and Specialization	4,5	-
	Total	**100**	**100**
Professional Category	Level I	-	53,7
	Level II	-	1,2
	Graduate	13,6	42,2
	Specialist	4,5	2,0
	Chief	81,8	-
	Total	**100**	**100**
		N = 22	**N = 244**

Table 3. Sample distribution according to the dominant and alternative styles and leadership profiles perception

Variables		Operational Chief (%)	Staff (%)
Leadership Styles			
Dominant	S₁	4,5	17,2
	S₂	63,6	48,8
	S₃	31,8	19,7
	S₄	-	6,6
	No style	-	7,8
	Total	**100**	**100**
Alternative	S₁	18,2	24,2
	S₂	36,4	30,3
	S₃	45,5	31,6
	S₄	-	5,7
	No style	-	8,2
	Total	**100**	**100**
Leadership Profiles			
Leadership Profile	S₁-S₂	22,7	30,7
	S₁-S₃	-	4,9
	S₁-S₄	-	4,1
	S₂-S₃	77,3	39,3
	S₂-S₄	-	2,9
	S₃-S₄	-	4,5
	No style	-	13,5
	Total	**100**	**100**
		N = 22	**N = 244**

Table 4. Sample distribution according to leadership versatility and adaptability

	Variables	Operational Chief (%)	Staff (%)
Leadership Versatility			
Versatility	No versatility *(1 style)*	-	-
	Weak versatility *(2 styles)*	9,1	14,8
	Moderate versatility *(3 styles)*	68,2	54,9
	Strong versatility *(4 styles)*	22,7	30,3
	Total	**100**	**100**
Leadership Adaptability			
Effectiveness	Ineffective *[-24;0]*	9,1	90,2
	Effective *[0;24[*	90,9	9,8
	Total	**100**	**100**
		N = 22	**N = 244**

Table 5. Sample distribution according to different turnover intent

Variables		Operational Chief (%)	Staff (%)
TWNILC	No	90,9	84,4
	Yes	9,1	15,6
	Total	**100**	**100**
TWILC	No	59,1	23,4
	Yes	40,9	76,6
	Total	**100**	**100**
ITTSJ	No	72,7	73
	Yes	27,3	27
	Total	**100**	**100**
NCA	No	95,5	82,4
	Yes	4,5	17,6
	Total	**100**	**100**
		N = 22	**N = 244**

TWNILC – Turnover with no improvement of labour conditions
TWILC – Turnover with improvement of labour conditions
ITTSJ – Internal turnover to a similar job
NCA – Nursing career abandonment

Table 6. Chi-Square test result for determining leadership profile influence in turnover intent for similar working conditions

H₁a						
Profile	**Turnover Intent**		**Value**	**Degrees of Freedom**	***p.***	**Decision**
	No	**Yes**				
S_1-S_2	64	11				
S_1-S_3	12	0				
S_1-S_4	8	2	15,265	6	0,018*	Reject H_0
S_2-S_3	86	10				
S_2-S_4	6	11				
S_3-S_4	6	5				
Significance * $p. < 0,05$						

Table 7. Chi-Square test result for determining leadership versatility influence in turnover intent for similar working conditions

H₁b						
Versatility	**Turnover Intent**		**Value**	**Degrees of Freedom**	***p.***	**Decision**
	No	**Yes**				
Weak	31	5				
Moderate	113	21	0,102	2	0,950	Not reject H_0
Strong	62	12				
Significance * $p. < 0,05$						

Table 8. Chi-Square test result for determining leadership adaptability influence in turnover intent for similar working conditions

H₁c						
Adaptability	**Turnover Intent**		**Value**	**Degrees of Freedom**	***p.***	**Decision**
	No	**Yes**				
Ineffective	21	3	0,191	1	0,662	Not reject H_0
Effective	185	35				
Significance * $p. < 0,05$						

Table 9. Chi-Square test result for determining leadership profile influence in turnover intent for better working conditions

H₂a						
Profile	Turnover Intent		Value	Degrees of Freedom	*p.*	Decision
	No	Yes				
S_1-S_2	12	63				
S_1-S_3	3	9				
S_1-S_4	3	7	5,390	6	0,495	Not reject H_0
S_2-S_3	27	69				
S_2-S_4	2	5				
S_3-S_4	1	19				
Significance * $p. < 0,05$						

Table 10. Chi-Square test result for determining leadership versatility influence in turnover intent for better working conditions

H₂b						
Versatility	Turnover Intent		Value	Degrees of Freedom	*p.*	Decision
	No	Yes				
Weak	7	29				
Moderate	37	97	3,048	2	0,218	Not reject H_0
Strong	13	61				
Significance * $p. < 0,05$						

Table 11. Chi-Square test result for determining leadership adaptability influence in turnover intent for better working conditions

H₂c						
Adaptability	Turnover Intent		Value	Degrees of Freedom	*p.*	Decision
	No	Yes				
Ineffective	1	23	5,477	1	0,019*	Reject H_0
Effective	56	164				
Significance * $p. < 0,05$						

Table 12. Chi-Square test result for determining leadership profile influence in internal turnover intent for a similar job

H₃a						
Profile	**Internal Turnover Intent**		**Value**	**Degrees of Freedom**	**_p._**	**Decision**
	No	**Yes**				
S_1-S_2	50	25				
S_1-S_3	7	5				
S_1-S_4	7	3	15,288	6	0,018*	Reject H_0
S_2-S_3	82	14				
S_2-S_4	5	2				
S_3-S_4	5	6				
Significance * _p._ < 0,05						

Table 13. Chi-Square test result for determining leadership versatility influence in turnover intent for a similar job

H₃b						
Versatility	**Internal Turnover Intent**		**Value**	**Degrees of Freedom**	**_p._**	**Decision**
	No	**Yes**				
Weak	20	7				
Moderate	98	36	1,667	2	0,435	Not reject H_0
Strong	51	23				
Significance * _p._ < 0,05						

Table 14. Chi-Square test result for determining leadership adaptability influence in turnover intent for a similar job

H₃c						
Adaptability	**Internal Turnover Intent**		**Value**	**Degrees of Freedom**	**_p._**	**Decision**
	No	**Yes**				
Ineffective	1	23	5,477	1	0,019*	Not reject H_0
Effective	56	164				
Significance * _p._ < 0,05						

Table 15. <u>Chi-Square test result for determining leadership profile influence in nursing career abandonment intent</u>

H$_4$a						
Profile	**Abandonment Intent**		**Value**	**Degrees of Freedom**	***p.***	**Decision**
	No	**Yes**				
S$_1$-S$_2$	61	14				
S$_1$-S$_3$	8	4				
S$_1$-S$_4$	5	5	17,194	6	0,009*	Reject H$_0$
S$_2$-S$_3$	87	9				
S$_2$-S$_4$	5	2				
S$_3$-S$_4$	7	4				
Significance * $p. < 0,05$						

Table 16. <u>Chi-Square test result for determining leadership versatility influence in nursing career abandonment intent</u>

H$_4$b						
Versatility	**Abandonment Intent**		**Value**	**Degrees of Freedom**	***p.***	**Decision**
	No	**Yes**				
Weak	27	9				
Moderate	112	22	1,584	2	0,453	Not reject H$_0$
Strong	62	12				
Significance * $p. < 0,05$						

Table 17. <u>Chi-Square test result for determining leadership adaptability influence in nursing career abandonment intent</u>

H$_4$c						
Adaptability	**Abandonment Intent**		**Value**	**Degrees of Freedom**	***p.***	**Decision**
	No	**Yes**				
Ineffective	20	4	0,017	1	0,897	Not reject H$_0$
Effective	181	39				
Significance * $p. < 0,05$						