



WHY DO SAUDI NURSES LEAVE BEDSIDE NURSING: FINDINGS FROM A PILOT STUDY

By

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Abstract

Aim: To explore the salient factors that account for Saudi nurses leaving bedside nursing to work in other fields of nursing.

Method: A non-experimental descriptive quantitative design was used to answer the research question of this pilot study. A valid and reliable questionnaire was used as an instrument for data collection. A snowball / purposive sample was used to collect the data from 46 Saudi nurses who had left bedside nursing in three hospitals in the Aseer region in southwest of Saudi Arabia. Data were analyzed by a professional statistician using descriptive statistics.

Findings: The salient factors for Saudi nurses' decision to leave bedside nursing that were identified included: income (including allowances and financial incentives), administrative regulations, job satisfaction, and other miscellaneous factors

Conclusion: Although this pilot study has several limitations, the findings indicate that health care planners and policy staff, and nursing leaders in the Kingdom of Saudi Arabia need to develop strategies to address the issues expressed by Saudi nurses in regard to bedside nursing, particularly the need to improve (a) financial allowances and incentive systems, (b) the bedside work environment (e.g., by decreasing weekly working hours), and (c) the image of bedside Saudi nurses in the eyes of Saudi society.

Keywords: Saudi Nurses, Pilot Study, Bedside Nursing

Although the Kingdom of Saudi Arabia (KSA) is experiencing unprecedented social and economic development, and profound progress has been observed in various sectors, the nursing sector is still struggling to provide optimum nursing care because many Saudi nurses desire not to work directly with patients; instead, they prefer administration and office nursing work. Despite the recent policy and related strategic efforts by the Saudi Ministry of Health to control this phenomenon, bedside nursing continues to not be the first choice of Saudi nurses to work for

reasons that remain unclear. There is a dearth of knowledge about this issue and no published Saudi studies or reports could be found about it. The studies on this topic that were identified were conducted in countries outside the KSA. Furthermore, the latter research tended to focus more on why nurses are leaving the profession permanently, as opposed to not working in bedside nursing. Therefore, the aim of this pilot study was to explore the salient factors that account for Saudi nurses leaving bedside nursing to work in other fields of nursing more distant from the patients.

Like other countries worldwide, KSA faces a challenge to manage the shortage in **Saudi** educated nurses. Although there are many governmental and private institutions teaching nursing, and there are many graduate Saudi nurses, no unemployment could be found among Saudi nurses. However, the pattern of leaving bedside nursing for work in administration or related domains shortly after graduation continues. This shortage influences negatively the patients' care, and costs the government money and efforts to prepare other Saudi nurses and to recruit internationally prepared nurses to cover the shortage.

A number of studies have focused on reasons nurses leave the profession. Gök and Kocaman (2011), who conducted a descriptive study to explore why Turkish nurses leave their profession, found that the main two reasons were not satisfied with the working conditions, and that the Turkish society still perceives nurses negatively. These authors found that 27.6 percent of Turkish nurses who had left the profession chose teaching as an alternative choice to nursing. These results coincide with what Black, Spetz, and Harrington (2013) found in their study, which aimed to investigate the reasons that force nurses to work in non-nursing fields. They found that job dissatisfaction with the nursing workplace was the main reason for nurses to leave the profession. A cross-sectional study conducted by Jourdain and Denis_Chênevert(2010) indicated that the most significant reasons for registered nurses to leave bedside nursing care or leave the profession are related to their psychological and emotional health status which is negatively influenced by the physical and social workplace environment and nursing workload. Psychologically and emotionally exhausted nurses tend to be less motivated to continue in bedside nursing care. Nurses who are dissatisfied with shifts work, schedule and hours, salary and benefits found they were at risk to change from bedside nursing to another less stressful nursing position (Flinkman,Laine,Leino-Kilpi,Hasselhorn, & Salanterä , 2008; Sjögren, Fochsen, Josephson, & Lagerström, 2004) . All the above mentioned authors recommended improving the nursing workplace environment and nurses' working conditions in a holistic manner.

Therefore, a group of undergraduate bridging nursing students at Taibah University- KSA were very interested to explore the salient reasons that entice Saudi nurses to leave bedside nursing. Under supervision of their instructor (the first author), they used the quantitative research method described for this study.

Method

A non-experimental, descriptive cross-sectional quantitative research design (pilot study) was used to answer the research question, which was formulated as follows: What are the underpinning factors that entice the Saudi nurses to leave bedside nursing? Data were collected using a valid and reliable questionnaire (the reliability rate was 0.7457 according to Cronbach's alpha coefficient) developed by Al-Easa (2011) after getting consent from the author. A five-point Likert scale instrument was used in the study. The survey collected demographic data, including age, qualifications, job title, years of experience, and the salary. The second part of the survey asked questions related to income (including allowances and financial incentives), administrative regulations, job satisfaction, and possible factors influencing nurses' decisions to leave bedside nursing.

Data were collected from 50 participants chosen by a purposive snowball sampling technique of both male and female Saudi nurses, aged 25 to 45, who had left bedside nursing for another nursing field. Data were collected from three governmental hospitals located in southwest region of KSA called Aseer region between March and May, 2015. These hospitals were Khamees Mushyt general hospital (200 bed), Maternity and Pediatrics hospital (200 bed), and Aseer central hospital (500 bed). Research ethics requirements were taken into consideration, and proper permissions to conduct the study were obtained from the College of Nursing at Taibah University, from hospitals' directors, and verbal permission from participants after explaining to them the goal, risks and benefits of participating with emphasis on voluntary withdrawing from the study without penalty and on participants' anonymity. The collected data were analyzed by a statistician using SPSS (version 22). In addition to descriptive statistics and percentages, overall mean (M) and standard deviation (SD) were calculated for each part of the survey. The results were as follows.

The Results

Sample Characteristics

Fifty participants who met the inclusion criteria were invited to participate in this pilot study. The response rate was 92% (46 participants); 22 participants (47.8%) had a 2 year nursing diploma, 20 participants (43.5%) had a 3 year nursing diploma, and 4 participants (8.7%) had a bachelor degree in nursing. 52.2% of participants were male nurses (24 participants), 47.8% were female nurses (22 participants). Participants' monthly salary was as follows: 19 participants (41.3%) earned less than 10000 Saudi Riyal (SR) (about 2,666 US \$, currency rate when data collected was 1 US\$ =3.75 SR), 20 participants (43.5%) earned between 10000 – 13000 SR (2,666- 3,466 US \$), 3 participants (6.5%) earned 13000-16000 SR (3, 466-4,266 US \$) and 4 participants (8.7%) earned more than 16000 SR .

Factors that Entice the Saudi Nurses to Leave Bedside Nursing

1- Income (including allowances and financial incentives)

As shown in Table 1, employers' paying incentives for other health team members but not for Saudi nurses and lack of the financial incentives for nurses for working during their holidays were ranked as very high factors that entice Saudi nurses to leave bedside nursing (54.3% for both factors). In comparison with non-Saudi nurses who work hand in hand with Saudi nurses, participants indicated that the employer pays extra incentives and allowances for foreign (expatriate) nurses. While 43.5% of participants ranked this reason as very high, 41.3% left bedside nursing because the employer pays much more overtime allowance to other health team members (e.g., physicians, pharmacists...etc.) than for them. In conclusion, income (including allowances and financial incentives) were ranked by the participants as the first reason for leaving bedside nursing (M =2.01, SD =1).

Table 1: POSSIBLE FACTORS FOR LEAVING BEDSIDE NURSING: INCOME (INCLUDING ALLOWANCES AND FINANCIAL INCENTIVES)

Possible Factor for Leaving Bedside Nursing Related to the Income (including allowances and financial incentives)	Very High	High	Medium	Low	Very Low
Employer pays incentives and allowances to other health team members such as physicians and lab. technicians but not to nurses *(infection allowance, housing allowance, hazard... etc.)	54.3 %	21.7%	8.7%	4.3%	10.9%
Employer pays much more overtime allowance to other health team members than to nurses.	41.3 %	39.1%	10.9%	0 %	8.7%
The lack of financial incentives for working during holidays and events.	54.3 %	21.7%	8.7%	0%	15.2%
Employer pays incentives and allowances (e.g., housing allowance, tickets, schools, etc.)for non-Saudi nurses but not for Saudi nurses	43.5%	32.6%	10.9 %	2.2 %	10.9%

Over all Mean (M): 2.01*

Standard Deviation (SD): 1:00*

*Calculations for allover Ms and SDs were based on all above values

2- Administrative Regulations

The concentration of the systems and procedures to get the job done without considering human factors was ranked by participants as a very high (47.8%) reason to leaving bedside nursing, followed by the complexity of the administrative procedures related to professional development (45.7%), and increasing the weekly working hours (50%) (see Table 2). Administrative regulations factor was ranked as the second reason for Saudi nurses to leave bedside nursing (M = 1.97, SD = 0.72).

**Table 2: POSSIBLE FACTORS FOR LEAVING BEDSIDE NURSING:
ADMINISTRATIVE REGULATIONS**

The factor for Leaving Bedside Nursing Related to Administrative Regulations	Very High	High	Medium	Low	Very Low
The concentration of the systems and circulars to get the job done without considering all of the humanity and social side in the life of the nurses.	47.8 %	28.3%	17.4%	6.5%	0%
Increasing weekly working hours laboriously.	32.6	50 %	15.2	0 %	2.2%
The complexity of the administrative procedures in case of desire for self-development such as (not to encourage the study during working hours, not to facilitate the attendance of courses and educational programs) .	45.7 %	30.4 %	17.4 %	2.2 %	4.3 %
Difficulty of getting break during working hours .	39.1 %	34.8 %	21.7 %	2.2 %	2.2%
The overall Mean (M): 1.97					
Standard Deviation (SD): 0.72					

3- Job Satisfaction

Participants indicated that they were not satisfied with their job because they are at high risk for exposure to infections more than other professions, and this reason ranked as a very high factor by 63% of participants for leaving bedside nursing. Other reasons that influenced nurses' job satisfaction and ranked equally (58.7%) as very high factors to leave bedside nursing were the following: nurses face work problems and difficulties more than any other profession, and administration staff do not retain the outstanding employees to stay at bedside but they assign them to do administrative work. Absence of motivation and encouragement for innovation and creativity in the work place was ranked by participants (54.3%) as a very high factor that influenced their decision to leave bedside nursing. The overall mean of job satisfaction was (1.67), which ranked as the third factor that influenced Saudi nurses to leave bedside nursing (see Table 3).

TABLE 3: POSSIBLE FACTORS FOR LEAVING BEDSIDE NURSING: JOB SATISFACTION

	Very High	High	Medium	Low	Very Low
Nurses at high risk for exposure to infections more than other professions.	63 %,	34.8%	2.2%	0%	0%
Nurses face work problems and difficulties more than any other profession .	58.7 %	26.1 %	13%	2.2%	0%
Administration staff do not retain the outstanding employees to stay at bedside but they assign them to do administrative works.	58.7 %	21.7 %	17.4 %	2.2 %	0%
Absence of motivation and encouragement for innovation and creativity in work place.	54.3 %,	32.6 %	6.5%	4.3 %	2.2%
The overall Mean (M): 1.67					
Standard Deviation (SD): 0.63					

4- Miscellaneous factors

Table 4 shows the miscellaneous factors that help us understand why Saudi nurses leave bedside nursing to work in other nursing fields (e.g. administration). It appears that Saudi society perceives non-Saudi nurses as more skilled than Saudi nurses. Additional factors included: (a) the families of Saudi nurses perceived the profession as not a *family friendly one* because of the rotating work shifts. The latter were ranked by participants as one of the major reasons for leaving bedside nursing (43.5 % and 41.3% respectively). A related salient factor pertained to the need for bedside nurses to deal directly with patients and their families, which in turn sometimes evoked conflicts and problems, which resulted in many leaving this field of nursing (45.7 %)(See Table 4).

TABLE 4: POSSIBLE FACTORS FOR LEAVING BEDSIDE NURSING: MISCELLANEOUS FACTORS

	Very High	High	Medium	Low	Very Low
Society perceives non- Saudi nurses as more skilled than Saudi nurses.	43.5 %,	39.1%	13%	4.3%	0%
Nurses’ families perceive the profession as not family friendly because of the rotating work shifts	41.3 %,	32.6%	17.4%	6.5%	2.2%
Dealing directly with patients and their families more than any other profession leads to many conflicts and problems.	30.4 %,	45.7%	19.6%	2.2%	2.2%

Discussion

This pilot study indicated that four major factors entice Saudi nurses to leave bedside nursing. These factors are the income (including allowances and financial incentives), administrative regulations, job satisfaction, and other factors related to the negative perception of the society and family toward the profession and toward Saudi nurses. These factors will be discussed simultaneously from the researchers’ experience and from the literature. However, to understand and contextualize these results according to the cultural and social status of the nursing profession in KSA, see Miller-Rosser, Chapman, and Francis (2006). Miller-Rosser et al. explained the historical, cultural and social factors that influence both Saudi women and the nursing profession in Saudi Arabia with an emphasis on the impact of the shortage of Saudi nurses at the bedside.

Participants conveyed that they were still interested in nursing as a profession, but bedside nursing is not their first choice to work in. Although this is a good sign, it raises a hidden shortage in Saudi nurses who provide direct nursing care to patients. In other words, although the Saudi Ministry of Health records show there are enough nurses in each health facility, in reality many of those nurses work away from the bedside (e.g., in clinical education or administrative position). The severe shortage of Saudi nurses is one of challenges that face Saudi health sectors in which about 81% of nurses are expatriate nurses (Almalki , FitzGerald , & Clark, 2011). The departure of Saudi nurses from bedside nursing practice for the reasons mentioned before will worsen the current shortage of Saudi nurses and impacts negatively safe patient care including

problems with a high rate of deaths, poor or ineffective patient care, and increased operating and labor costs (Buerhaus et al., 2007).

Previous Saudi studies and published articles about the challenges facing Saudi nurses reported approximately the same challenges and factors luring Saudi nurses away from the bedside as reported in the results section. This means that Saudi nurses have been struggling for years without a comprehensive solution to manage their struggles. For example, Saudi nurses are still working in poor unhealthy work conditions related to the low paid salary and lack of financial incentives, long work hours and rotating shifts, extra load of patients, miscommunication with hospital administration, and low job satisfaction. Moreover, nursing in KSA is still perceived as unacceptable profession in the eye of the society and the nursing profession is not within the family expectations (Aljohari, 2001; Gazzaz, 2009; Lamadah & Sayed, 2014; Rothrock, 2007). Nursing turnover and shortage is a natural result of these factors that ends with less quality patient care, increasing the mortality rate, and decreasing patients' and families' satisfaction (Gazzaz, 2009). This explains why participants in this study reported a high rate of conflicts with patients and families and why they chose not to be on the frontline with patients and families by leaving bedside nursing.

Participants also indicated that the bureaucracy of administration procedures was one of reasons to leave bedside nursing. In contrast to administration in North America that has been described as an "interactive management system, with a decentralized organizational structure, competitive personal policies, professional practice development" (Huerta, 2003, as cited in Lamadah & Sayed, 2014, p. 22). In a hierarchical health system in Saudi Arabia where the physicians and pharmacists occupy the top of the pyramid, nurses, unfortunately, are ranked in the very bottom of that pyramid. Therefore, nurses' salary and other financial incentives are much lower in comparison with other health specialties.

In summary, the achievement of various employee rights, and enhanced social status for Saudi nurses who chose to provide bedside nursing care continues to be a salient issue. We believe that what is needed to address this situation is effective actions by nursing leaders and decision makers in hospitals administration, who will work in a collaboration with nursing students and new graduates.

Limitations of the Study

This pilot study used a self-report questionnaire to collect data from a very small sample in the southern region of Saudi Arabia. Thus it is limited by inaccuracy of self-reported data and small sample size, which in turn limits the generalizability of the findings. Secondly, this study was conducted primarily by undergraduate nursing students who were educated only to conduct small clinical projects but not research projects like this one. Despite these limitations, the results were compatible with previous studies and indicated clearly the most salient factors that entice

Saudi nurses away from bedside nursing and raise an urgent need for nursing and health care planners and policy makers to develop strategies to address these factors, and thereby attract Saudi nurses to remain in the field of bedside nursing.

Conclusions and Recommendations

The results of this pilot study send a clear message to health decision makers and nursing leaders in the Kingdom of Saudi Arabia that action is needed to minimize the challenges faced by Saudi nurses and to address the factors that entice them away from bedside nursing into other fields of practice. By addressing these factors, the government and health care leaders will save money, improve patient care, and reduce the need to recruit internationally prepared nurses to cover the nursing shortage in the Kingdom of Saudi Arabia

A major study using a large sample of Saudi nurses from different Saudi regions is needed where findings can be generalized. Nursing leaders have to advocate nurses' rights to improve their income and enhance their incentives like other health specialties. Improving the hospital administrative regulations to be supportive to nurses, enhancing their workplace environment, decreasing working hours and working to raise nurses' job satisfaction are essential requirements to be done by Saudi health authorities. And finally, enhancing the image of nursing in the eye of Saudi society using different media and social media techniques is required by nurses themselves and by decision makers.

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This paper is based on results from a pilot study conducted as an undergrad graduation nursing project by authors 2 through 8 under supervision and guidance of the first author. The major work of this paper has been performed by the first author; however, authors 2 through 8 who ordered alphabetically worked equally to make the final draft of this paper. Authors 2 through 8 with the first author agreed and signed a written authorship statement for this paper.

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