

Examining The Relations between Organizational justice, Turnover and Burnout among Staff Nurses

Rasha Mohammed Nagib Ali^{1*}, Fatma Nagi Kotb^{2*}, Noha Mohammed Rashed^{3*}

²Lecturer of Nursing Administration, Faculty of Nursing, Minia University, Egypt

³Lecturer of Psychiatric Mental Health Nursing Department, Faculty of Nursing, Minia University

01003541439

¹Lecturer of Nursing Administration, Collage of Applied Medical Science (Nursing Major) at Misr University of Science and Technology, Egypt

Corresponding Author: Rasha Mohammed Nagib Ali

Tamem.ali23@yahoo.com

01099348644

Abstract

The aims of study were concerned on to investigate the relationship between organizational justice, burnout and intention to leave of nurses of Minia Hospital. A convenience sample of (46) staff nurses were recruited in the study. Descriptive correlational research design was used in this study. This research was carried out at Minia Hospital for psychological health and addiction. Four tools were used in this study (i) the Personnel characteristics data questionnaire (ii) Burnout scale (iii) Intention to leave (v) Organizational justice. The finding of the present study revealed that there were negative statistically significant correlations between organizational justice and intension turnover and organizational justice, burnout. In addition, there were fair positive statistically significant correlations between intension turnover and burnout. Therefore, it recommended that , it is important for the hospitals to design the strategies to improve their support to minimize the turnover intentions and burnout among staff nurses which may lead to the organizational effectiveness.

Keywords: Organizational justice, Turnover, Burnout , Staff Nurses

1. Introduction

Organizations are public or social systems where human resources are the most essential factors for efficiency and efficiency. agencies need effective managers and employees to realize their objectives. Organizations cannot succeed without their personnel efforts and commitment (Rad&Yarmohammadian, 2006). Employee job performance and satisfaction are considered to be core concepts that effect the performance of organizations. In highly competitive global businesses must strive to identify factors that influence the job performance and satisfaction of employees (DeConick, (2010)). Employees in most organizations were more satisfied when they felt they were fairly rewarded for the responsible work they have done by make assurance these rewards were for genuine contributions to the agencies and consistent with the policies of rewarding. Employees with higher job satisfaction were important as they believed that the agencies would be of enormous future in the long run and care about the quality of their work; hence they were more cultivated to the organization, have higher retention rates and tend to have higher productivity (Fatt, Khin and Heng 2010).

Staff nurses in organizations in all of the world are probably undervalued staff members despite the fact that these are the people who take care of our loved ones around the clock when they are hospitalized. Many of the staff nurses even take on the responsibilities of the medical supervisors or the doctors in command, and this makes them a very important part of the medical system (National Nurse united, 2015). Saini , Kaur &Das ,(2011) further says that, staff nurses are the one who have variety of jobs to perform and need to juggle with many jobs at many places in the hospital or in medical centers and still are under paid and undervalued.

Organizational justice is means, the fair treatment of employees (Randeree, 2008). The term organizational justice was first coined by Greenberg (2011) which explore individual's perceptions and responses to fairness towards the organization. Nasscom. (2014) define "justice" as an decision or action that is ethically and morally right. fairness in agencies or organizations may include cases related to perceptions of fairness in the opportunities for promotion and the processes of employee selection (Matin, Kalali , Reza & khavan Anvari ,2012). Managers should conduct actions to increase employees' job satisfaction and commitment to organization so to limit employees' turnover intension with the assistance of distributive and procedural justice (Randeree, 2008).

There were three dimensions of organizational justice identified by Alsalem and Alhaiani, (2007) distributive justice, procedural justice, and interactional justice. "**Distributive justice**" is the fairness of the distribution of resources and decision outcomes. Distributive justice refers to the perceived fairness of the outcomes that an individual receives from organization. Outcomes may be distributed on the basis of equality, need or contribution and individuals determine the fairness of distribution through comparison with others (Carolina,2010).

"**Procedural justice**" refers to participants' perceptions about the fairness of the rules and procedures that regulate a process (Nabatchi,2007). Whereas distributive justice suggests that satisfaction is a function of outcome, procedural justice suggests that satisfaction is a function of process. Among the traditional principles of procedural justice are impartiality, voice or opportunity to be heard, and grounds for decisions (Bayles, 1990). Procedural issues such as neutrality of the process (Tyler and Lind, 1992), treatment of the participants (Bies and Moag, 1986; Lind and Tyler, 1988), and the trustworthiness of the decision making authority (Surya &Pankaj,2010). are important to enhancing perceptions of procedural justice. Extensive literature supports procedural justice theories of satisfaction. In general, research suggests that if organizational processes and procedures are perceived to be fair, then participants will be more satisfied, more willing to accept the resolution of that procedure, and more likely to form positive attitudes about the organization (Ying Xue,2014).

According to Bies (1986) there is another branch stemming from the tree of organizational justice labeled as **interactional justice** which focuses on employees' perceptions of the interpersonal behavior exercised during the representation of decisions and procedures. Whitman (2012) stated that, the interactional justice involves various socially sensitive actions, such as when supervisors respond employees with dignity and respect (e.g., providing sufficient explanations for decisions, paying attention to an employee's concerns, and showing empathy for his predicament) .

Interactional justice reflects concerns about the fairness of the non-procedurally dictated aspects of interaction. Interactional justice includes various actions displaying social sensitivity, such as when supervisors treat employees with respect and dignity(Yan & Su (2012).). Mikula et al. (1990) reported that a considerable proportion of perceived injustices did not concern distributional or procedural issues in the narrow sense, but instead referred to the manner in which people were treated interpersonally during interactions and encounters.

Turnover of highly skilled staff nurses is a major problem for many psychiatric hospitals. Nurses staff are the professional staff for psychiatric patients; without them, the reservation of high-quality care is difficult. When a member evolve the intention to leave a job, it becomes the strongest direct foreteller of actual departure (Alexander et al., 1998). In addition, by inspect predictors of intention to leave, hospital administrators authorities may be able to take procedure to retain skilled nursing staff. Several causes related to psychiatric nurses' intention to leave their job. One of them was staff nurses' perception of the risk of assault by patients. Assault has been a concern for staff in psychiatric hospitals (Nijman et al., 1998), and as primary caregivers, staff nurses have been at a highly risk of assault among staff (Tai & Robinson, 1998). Also, Job satisfaction has a strong relationship with retention. Moreover, In a study about the factors affecting Psychiatric nurses' intention to leave their current job, about half of the nurses intended to leave their work with a higher rate than expected, fewer previous job changes, less managers supervisory support, higher job dissatisfaction, and risk of assault were significant predictors of intention to leave were perceived by nurses (Hiroto et al., 2001).

A type of psychological stress is "**burnout**". Occupational burnout or job burnout is characterized by exhaustion, lack of enthusiasm and motivation, feelings of ineffectiveness, and also may have the dimension of frustration or cynicism, and as a result reduced efficacy within the workplace (Ruotsalainen., 2014). In addition, Occupational burnout is typically and particularly found within human service professions as social workers, nurses, engineers, medical practitioners, and police officers, one reason why burnout is so prevalent within the human services field is due in part to the high-stress work environment and emotional demands of the job.

A growing body of evidence suggests that burnout is clinically and nosologically similar to depression Ahola et al., (2014). In a study that directly compared depressive symptoms in burned out workers and clinically depressed patients, no diagnostically significant differences were found between the two groups; burned out workers reported as many depressive symptoms as clinically depressed patients (Bianchi et al., 2013). Work-related causes of burnout are feeling like you have little or no control over your work, lack of recognition or reward for good work, unclear or overly demanding job expectations, doing work that's monotonous or unchallenging, and working in a chaotic or high-pressure environment (Melinda et al., 2016).

Work overload and personal conflict for workers lead to emotional exhaustion, making it difficult for these individuals to face another work day (Kudo, et al., 2010). Emotional exhaustion is a result of acute or chronic burnout, resulting in feeling emotionally drained and is the primary stress component of job burnout (Maslach, et al., 2001). Employee burnout has been correlated with a number of negative organizational measures, including reduced commitment to the organization negative attitudes, and often absenteeism and turnover (Stalker & Harvey, 2002). Satisfaction with professional support was a significant predictor of nurses' intention to leave which means an employee's expressed intention of leaving their current job in the near future (Kudo, et al., 2010).

According to Laschinger and Finegan (2005), nurses staff may be dissatisfied and intended to leave because of perceived lack of respect and trust in the work climate such as the management method, communication style, organizational decisions making and failure to share or address their concerns regarding the implications of organizational decisions. This may create detrimental impacts on the agency and commitment of nurses. Some researchers have found and supported that when staff nursing management values staff contribution, relationships based on trust and respect, and autonomy, these aspects can promote retention (Cummings et al., 2008). In Germany, Kozak, et al., (2013) investigated personal burnout they found that work–privacy conflict, emotional demands, role conflict, job insecurity and feedback were related to personal burnout. Intention to leave was significantly linked to higher levels of personal burnout, while low personal burnout was related to greater job satisfaction and better health. Moreover, Job satisfaction has been linked to health worker motivation, stress, burnout, absenteeism, intention to leave, and turnover (Kudo, et al., 2010).

2. Methodology

2.1. Research question: What is the relationship between organizational justice, burnout and intention to leave of nurses of the Minia Hospital for psychological health and addiction?

Aim of the Study: The aim of this study was to investigate the relationship between organizational justice, burnout and intention to leave of nurses of Minia Hospital for psychological health and addiction.

2.2. Research Design: A descriptive correlational research design was utilized to achieve the aim of the study.

2.3. Sample: A convenience sample consisted of 46 nurses who work in the hospital.

2.4. Setting: This study will be conducted in Minia Hospital for psychological health and addiction which developed in 1997; the capacity for the hospital was 53 beds. The hospital serves Minia governorate.

2.5. Tools of data collection:

2.5.1. Socio-demographic data questionnaire: this developed by the researchers to collect data such as age, sex, marital status, qualification, years of experience, current position, and hours/shift.

2.5.2. Burnout scale: (Maslach & Jackson, 1984) and was revised by Maslach Burnout Inventory: Hu et al. (2011). The Maslach Burnout Inventory measures symptoms of emotional exhaustion, depersonalisation and reduced personal accomplishments that can occur among individuals who serve others, especially in stressful situations. The Maslach Burnout Inventory has 21-items with three subscales. *Emotional Exhaustion* contains eight items (1, 2, 3, 6, 8, 13, 14 and 16). *Depersonalisation* contains five items (5, 10, 11, 15 and 21). *Personal Accomplishment* contains eight items (4, 7, 9, 12, 17, 18, 19 and 20).

2.5.3. Intention to leave: The intent to leave scale is scored using a 5-point Likert scale, from 1 (*I definitely will not leave*) to 5 (*I definitely will leave*). 10 Summed scores give an overall intention to leave score which can be divided into three groups :low intent to leave (5 to 11), uncertain about intent to leave (12 to 17), and high intent to leave (18 to 25) (Barrett & Yates, 2002). The participants were asked to circle the score that best described their feelings about their current employment in the critical care unit. In this study the scale possessed satisfactory internal reliability ($\alpha = .78$).

2.5.4. Organizational justice : it consisted of three dimensions" Procedural Justice, distributive Justice, Interactional Justice"

- Distributive Justice: Perceptions of distributive justice were measured with a 5-item scale developed by Neihoff and Moorman (1993). Respondents indicated the extent of their agreement or disagreement with each item on a scale from 1 (strongly disagree) to 5 (strongly agree). The Cronbach's alpha for this scale in Western studies was (0.90), (moorman et al., 1998), the reliability coefficient alpha for distributive justice in this study was (0.79).

- Procedural Justice: Perceptions of procedural justice were measured with a 6-item scale developed by Neihoff and Moorman (1993). Employees responded to each item using a 5-points Likert scale. The alpha coefficient for this scale in Western studies was (0.90), Neihoff and Moorman (1993), the reliability Cronbach's alpha for distributive justice in this study was (0.82).

-Interactional Justice: Perceptions of Interactional justice were measured with 11-items measuring the degree to which employees felt their needs were considered, and adequate explanations were made for job decisions. All items used a five-point format. The alpha coefficient for this scale in Western studies was (0.90), Neihoff and Moorman (1993), the reliability Cronbach's alpha for distributive justice in this study was (0.80).

6. Procedures The researchers received permission to conduct the study from the Administrator of the hospital, also from the Head nurse of the hospital. Afterwards, the researchers arranged with the Head of hospital for planning schedule to interview members to fill in the questionnaires in the presence of researchers to clarify any unclear statements. The purpose of the study was explained for nurses to gain their support and cooperation.

7. Ethical Considerations After obtaining the official approval from the research ethics committee at Faculty of Nursing, Minia University, and the participants received written information about the study purpose and procedure and the voluntary nature of participation. They were assured complete confidentiality. Code numbers were created and kept by the researchers for each participant.

III. Data analysis

Data were collected and analyzed by using SPSS (Statistical Package for the Social Sciences), version (20) for windows. Frequency and percentage were used for numerical data as well as mean \pm standard deviation, median, minimum and maximum; for relational statistic; Analysis of Variance ANOVA was, correlation coefficient were used, Probability (p-value) less than 0.05 was considered significant and less than 0.001 considered as highly significant .

3. Results

Table (1) Distribution of the staff nurses demographic characteristics (N= 46).

Characteristics	(N=46)	%
Age		
20-29 year	28	60.9
30-39 year	13	89.1
More than 40 year	5	10.9
Sex		
Male	11	23.9
Female	35	76.1
Qualification		
-Diploma	31	67.4
-Bachelor	14	3.4
-Master	1	2.2
Years of experience		
0-5	15	32.6
6-11	17	37.0
12-20	14	30.0
Work hours		
-12 hours	21	45.7
-8 hours	24	52.2

Table (1) shows that, the majority (89.1%) of staff nurses were in the age group from 30-39 years. While, about thirty quarter percentage of staff nurses was female (76.1). In addition, regarding to staff nurses qualification; nearly two thirds percent of nurses were diploma. About, above one third percent of nurses go to year of experience from 6-11 years. Moreover, (78.3%) of staff nurses were nurses and 21.7% were head nurses. Finally about (52.2%) from staff nurses attend 8 hours in their work.

Table (2) Frequency of staff nurses related to their organizational justice (N=46)

Items	Organizational justice									
	SD		D		N		A		SA	
	N	%	N	%	N	%	N	%	N	%
Destructive justice	31	67.4	9	19.6	4	8.7	2	4.3	-	-
1-My work schedule is fair										
2-Overall the rewards I receive are quite fair	35	76.1	7	15.2	3	6.5	1	2.2	-	-
Procedural justice	36	78.3	6	13.0	4	8.7	-	-	-	-
1- Job decisions are made by my supervisor in a biased manner										
2-My supervisor clarifies decisions and provides additional information when requested by employees	33	71.7	8	17.4	5	10.9	-	-	-	-
3- Employees are allowed to challenge or appeal job decisions made by their supervisors	37	80.4	6	13.0	3	6.5	-	-	-	-
Interactional justice	37	80.4	6	13.0	3	6.5	-	-	-	-
1-When decisions are made about my job, the manager treats me with kindness and consideration										
2- When decisions are made about my job, the manager deals with me in a truthful manner	36	78.3	7	15.2	2	4.3	1	2.2	-	-
3-The manager offers adequate justification for decisions made about my job	34	73.9	9	19.6	2	4.3	1	2.2	-	-
4-When making decisions about my job, the manager offers explanations that make sense to me	41	89.1	3	6.5	2	4.3	-	-	-	-

Table (2) reveals that, the majority of the staff nurses exhibited the opinion of "strongly disagree "and "disagree" in a high percentage for items related to destructive, procedural, and interactional justice, as in item of "Overall the rewards I receive are quite fair (76.1), "Employees are allowed to challenge or appeal job decisions made by their supervisors (80.4%), and " When making decisions about my job, the manager offers explanations that make sense to me (89.1%) respectively.

Table (3) staff nurses level of their responses regarding to organizational justice

Dimension	Low		Moderate		high	
	N	%	N	%	N	%
1-justice destructive	40	87	6	13.0	-	-
2-Procedural Justice	44	95.7	2	4.3	-	-
3-interactionalJustice	45	97.8	1	2.2	-	-

It is clear from table (3) that, the staff nurses were rated " low " in high percentage for all the three dimensions of organizational justice which include" destructive justice (87%), procedural justice (95.7%) and interactional justice (97.8%), followed by moderate level of their responses of all the same dimensions in low percentage related to organizational justice which include" destructive justice (13 %), procedural justice (4.3%) and interactional justice (2.2%)

Table (4) Frequency distribution of staff nurses related to their intention turnover (N=46)

Items	Intention turnover				
	Definitely not leave	Rarely	Sometimes	always	Definitely leave

	N	%	N	%	N	%	N	%	N	%
1-I will look for a new job outside psychiatric hospital in the near future	4	8.7	-	-	1	2.2	24	52.1	17	37.0
2-I will remain in psychiatric hospital nursing for the next year	-	-	-	-	12	26	17	37.0	17	37.0
3-I often think about quitting this specialty	4	8.7	-	-	20	43.5	22	47.8	22	47.8
4-I would like to remain in the field of psychiatric hospital nursing	-	-	3	6.5	10	21.7	20	43.5	13	28.3
5-I will leave the psychiatric hospital within the next 12 months	7	15.2	-	-	8	19.9	17	37.0	14	27.9

Table (4) reveals that, more than half of the staff nurses exhibited the opinion of "always "and "definitely leave" for the five items related to intention turnover in a high percentage as in items of " I will look for a new job outside psychiatric hospital in the near future (52.1), "often think about quitting this specialty (47.8)" respectively. In addition, the same table explore the contrast, that the staff nurses exhibited the opinion toward five items of turnover in low percentage to "definitely not leave and rarely"

Table (5) Frequency distribution of staff nurses related to their burnout in relation to emotional dimension (N=46)

Items	Burnout													
	Never		Many times in year		One time in month		Many times in month		One time in week		Many times in week		Every	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Emotional burnout	-	-	-	-	1	2.2	1	2.2	32	69.6	7	15.2	5	10.9
1- I Feel emotionally drained from my work.	-	-	-	-	1	2.2	3	6.5	38	82.6	-	-	4	8.7
2- I feel used up at the end of the workday.	4	8.7	-	-	8	17.4	-	-	24	58.7	6	13	4	8.7
3- I feel burned out from my work.	6	13	-	-	11	23	4	8.7	23	50.0	1	2.2	1	2.2
4- I feel frustrated by my job.	7	15.2	-	-	-	-	2	4.3	23	50.0	14	30	-	-
Depersonalization burnout	5	10.9	4	8.7	1	2.2	8	17.4	16	34.8	10	21.7	2	4.3
1- I feel I treat some patients as if they were impersonal objects.	5	10.9	-	-	-	-	-	-	23	50.0	15	32.6	3	6.5
2- I don't really care what happens to some patients.	4	8.7	10	21.7	26	56.5	5	10.9	1	2.2	-	-	-	-
3- I feel patients blame me for some of their problems.	3	6.5	11	23.9	25	54.3	6	13	1	2.2	-	-	-	-
accomplishment	6	13	12	26.1	26	56.5	1	2.2	1	2.2	-	-	-	-
1- I can easily understand how my patients feel about things.	13	28.3	13	28.3	15	32.6	2	4.3	3	6.5	-	-	-	-
2- I deal very effectively with the problems of my patients.														
3- I feel very energetic.														
4 In my work, I deal with emotional problems very calmly.														

Table (5) denoted that, nearly sixty percent of the staff nurses responses go to "one time in a month " for the all items related to emotional, and depersonalization burnout in a high percentage as in items of I feel used up at the end of the workday (82.6%), and I feel I treat some patients as if they were impersonal objects (50.0%) respectively. In addition, more than fifty percent of the staff nurses responses go to "many time in a year" for the all items related to accomplishment burnout in a high percentage_ as in item of I can easily understand how my patients feel about things (56.5%).

Table (6) Frequency distribution by percentage for organizational justice, burnout and turnover levels

Dimension	Low		moderate		high	
	N	%	N	%	N	%
Organizational justice	31	65.2	6	13	10	21.7
Intension turnover	5	10.9	11	23.9	30	65.2
Burnout	-	-	18	39.1	28	60.9

It is clear from table (6) that, the first line manager were rated "Low" in high percentage (65.2%) for organizational justice. In addition in the same table, the contrast appear in the intention turnover and burnout, in which the majority of the first line managers were rated "high" in intension turnover "65.2%" and Burnout "60.9%".

Table (7) analysis of variance of organizational justice, intension and burnout in relation to the personal data of age

Variable	Age				
	20-29	30-39	< 40	F	P
	Mean± SD	Mean± SD	Mean± SD		
- Organizational justice	24.4+5.31	23.23+3.24	25.40+5.59	0.45	.639
- Intension turnover	15.64+3.28	17.15+2.57	16.15+3.05	1.11	.339
-Burnout	99.25+12.69	107.38+10.98	91.00+13.63	3.64	.034

Table (7) shows that, there were no statistically significant differences of the first line managers between mean score of organizational justice, intension turnover and burnout regarding to their age .

Table (8) analysis of variance of organizational justice, intention turnover and burnout in relation to the personal data of years of experience

Variable	Years of experience				
	Mean± SD	Mean± SD	Mean± SD	F	P
	0-5	6-11	12-20		
- Organizational justice	24.87+6.23	24.00+4.06	23.79+4.09	.204	.816
- Intension turnover	16.93+2.34	15.47+3.72	16.14+2.82	.910	.410
-Burnout	102.53+11.39	101.35+13.15	97.79+14.90	.507	.606

Table (8) shows that, there were no statistically significant differences of the first line managers between mean score of organizational justice, intension turnover and burnout regarding to their years of experience

Table (9) analysis of variance of justice, turnover and burnout in relation to the socio-demographic characteristics of working hours

Variable	Working hours			
	Mean± SD	Mean± SD	T	P
	12 hrs	8 hrs		
- Organizational justice	24.43+5.88	24.04+3.85	1.25	.268
- Intension turnover	16.57+2.99	15.92+3.13	.716	.402
-Burnout	104.10+12.59	97.38+13.07	.255	.616

Table (9) shows that, there were no statistically significant differences of the first line managers between mean score of organizational justice, intension turnover and burnout regarding to their working hours.

Table (10) the correlation between organizational justice, turnover and burnout

Variable	Organizational justice	Turnover	Burnout
Organizational justice	1	.776- .143	.858- .127
Turnover	-	1	.456 .171
Burnout	-	-	1

Table (10) reveals that, there were negative statistically significant correlations between organizational justice and intension turnover (.776-) and organizational justice, burnout (.858-). In addition, there were fair positive statistically significant correlations between intension turnover and burnout (.456).

4. Discussion

An organization's winning depends on how it can process its human resources effectively. One of the concepts that feature this success is organizational justice. This study examines the organizational justice as perceived by nurses and its effect upon burnout, and turnover intention.

The present study revealed that the majority of the staff nurses were in the age group between 30-39years old. As regards the staff nurse qualification, nearly two thirds percent of nurses were diploma degrees, in addition, about above one third percent of nurses go to year of experience from 6-11 years. Moreover, the majority of staff nurses were nurses. Finally more than half of the sample was attending 8 hours in their work.

The current study presented that, the majority of the staff nurses exhibited the opinion of "strongly disagree" and "disagree" in a high percentage for items related to distributive justice, as it presented in overall the rewards they receive were quite fair, and their work schedules were fair. This result may be related to the organization don't provide the employee with the needed positive work environment in order to feel committed toward their organization in addition the work in psychiatric hospital increase the work load on employee which need more flexibility and secure work environment.

This result in contrast to study by Zakaria and Gheith (2009) who stated that the staff nurses at King Abdullah Hospital perceived organizational justice distribution as the highest organizational justice, while Lambert (2003), found in his study, that distributive justice was the lowest. In addition, Cropanzano et al. (2001), suggested that staff nurses not only consider the several types of justice which consisted of "distributive, procedural, and interactional" but also consider the factor of the situation that is perceived as fair or unfair. In this sense, the distributive justice are based on the interchange principle: in which employees value the organizational outputs they receive compared with their inputs to locate whether it is a fair outcome. In addition, it is in agreement with Lambert et al. (2008), found that distributive justice and procedural justice are linked with increased job satisfaction and organizational commitment among staff nurses and distributive justice influence performance when efficiency and productivity are implicated.

As regards the organizational justice toward procedural justice, the majority of the staff nurses exhibited the opinion of "strongly disagree" and "disagree" in a high percentage for items such as employees are allowed to challenge or appeal job decisions made by their supervisors, and my supervisor clarifies decisions and provides additional information when requested by employees. This results may be related to procedural justice affects performance as a result of its impact on employee attitudes so when employees feel that organization is

least cared about them and their contribution, also working in psychiatric hospitals this need all staff members to share in decision making related to the patients which is not achieved in this hospital to relieve their anxiety and stress that present in nurses working with those patient.

This result is in the same line with Posthuma et al. (2007) who stated that employee involvement and control in decision making processes through managers should allow staff to provide information to the decision maker before a decision is made leading to quality service. Beecroft et al. (2008), also stated that allowing staff nurses to participate and involved in decision making and providing them empowered behavior, communication, autonomous, collaboration, and openness in linked with other increased job satisfaction of employees, improved the quality of care, and simplify the recruitment and retention. Moreover, Jafari et al., (2011) stated that, nursing staff perceived procedural justice as the lowest organizational justice. This means that procedural justice towards organization employees is a foundation for employee commitment. Procedural justice effect employee's perceptions of fairness with consideration to pay raises and promotions as well as commitment to organization and job satisfaction.

As regards organizational justice toward "Interactional justice, the majority of the staff nurses exhibited the opinion of "strongly disagree "and "disagree" as it showed in items the manager treats me with kindness and consideration, When decisions are made about my job, the manager deals with me in a truthful manner, the manager offers explanations that make sense to me. This finding may be due to the result that many nurses considered their superior treating them with less dignity and respect by supervisors. Moreover, nurses in psychiatric hospitals need special care to relieve their tension while working with psychiatric patients to allow them to help in reliving the psychological problems of those patients.

This supported by Colquitt et al. (2006). Interactional justice considers the degree to which employees are handle with politeness, dignity, and respect by administrative authorities. The experience of interactional justice can change reactions to decision outcomes, because sensitivity can make employees feel better about an unfavorable outcome.

In relation to staff nurses levels toward organizational justice, the current study presented that most of staff nurses were rated "low "in high percentage for all the three dimensions of organizational justice. These results might be related to organizational justice is an umbrella in which individuals' perceptions about the fairness of decisions and decision making processes within organizations and the influences of those perceptions on behavior. So, when the organization didn't provide their employees with all of these, they are in turn feel frustrated, stressed and decrease their initiation and motivation to deliver care to psychiatric patients who need especially and primarily the motivation and interest of nurses who work with them.

As regards the distribution of staff nurses related to their intention turnover, more than half of the staff nurses exhibited the opinion of "always "and "definitely leave" in a high percentage for five items. This results may be related to while Flexibility in the workplace, positive work environment, ample opportunity for growth, transparency about compensation and better relationship reduces turnover intentions, those in contrast to what happened in this organization as illustrated before they receive low organizational justice so, their commitment towards the work reduces and they may feel insecure, which leads to the turnover.

This result is congruent with (Rana et al. 2014) who observed that, hospital policies, job characteristics, work place environment are forerunners of staff nurses engagement, which impact job performance and employee turnover intentions. In addition, it is with the same line with Yang et al. (2014), who illustrated that, agencies must enhance ethical climate within the advancement and once employee smells that authorities management is attention about the employees, their motive towards work enhances, so that employee turnover can be limited.

As regards to staff nurses burnout in relation to emotional, and depersonalization dimension the present study illustrated that, nearly sixty percent of the staff nurses responses go to "one time a week " in a high percentage as presented in which they feel used up at the end of the work day, Feel emotionally drained from my work, and they feel patients blame them for some of their problems respectively. In addition, as regards to staff nurse's burnout in relation to accomplishment dimension, more than fifty percent of the staff nurses responses go to "many times in a month" in a high percentage as presented in their work, they deal with emotional problems very calmly.

These results may be due to, burnout might lead employees to inferior job performance and sacrificing different aspects of personal live and perception of injustice can threaten employees' resources and give them a feeling of inappropriate rewards for an investment of personal resources, frustrate them, and even wear them out, which eventually translate into burnout. so, if employees experience burnout and imbalance (due to injustice, in this instance), they will likely aspire to regain and maintain balance. In addition, in psychiatric hospital burnout may be present related the stress of working with psychiatric patients and especially if nurses not interested in working in this areas and they are were obligated on it, so, burnout increased more and more with unachieved organizational justice.

This result in accordance within Poghosyan et al., (2010), the study conducted with nurses in differant

countries including the USA, Germany and Japan. Japanese nurses obtained the highest mean scores in the emotional exhaustion, depersonalization and personal accomplishment dimensions. Also, it is congruent with Hakanen&Schaufeli, (2012) who illustrated that; burnout has several negative results or outcomes for employees, such as turnover, absenteeism, less working safely and depressive symptoms. Moreover, this result in the same line with Maslach et al (2012). Also, it congruent with Browning et al (2007) which adds that the diffusion of burnout among staff nurses who work in specialty areas such as oncology, mental health, emergency medicine and critical care are higher.

Moreover, Studies on this issue have revealed that burnout is closely related with fatigue, depression, sleep problems, low self-esteem, reduced work performance and reduction in the provision of quality health care, satisfaction with life, health problems, intention to retire early, reduced tolerance to frustration and intention to leave, , [Adriaenssens, de Gucht&Maesc 2015).

In relation to distribution of organizational justice, burnout and turnover levels, the present study revealed that, the staff nurses were rated "Low" in high percentage for organizational justice. In addition, the contrast appears in the intention turnover and burnout, in which the majority of the first line managers were rated "high" in intension turnover and burnout. This results indicated that, when work environment are stressful exhausted, and didn't provide the organizational justice this effects on employees interest, satisfaction, achievement which leads to work burnout and finally turnover.

This result is congruent with Tepper, (2001) who repoted that, a negative connection was found between organizational justice and burnout, and a sense of unfairness from the perceptions of staff nurses which lead to burnout. In addition, referencing the conservation of resources theory depletion of resources over time can be a stressor that eventually leads to burnout. This supports the proven link between organizational justice and burnout. So that , the organization should be aware of the significance of organizational justice from the perceptions of its employees, their embodiments to hastening the burnout process at all levels of the organization, and the influence on its operations (Van Dierendonck, &Buunk, 2001).

As regards, analysis of variance of organizational justice, intension and burnout, the present study illustrated that, there were no statistically significant differences of the staff nurses between mean score of organizational justice, intension turnover and burnout regarding to their years of experiences, working hours. These results indicated that, while the employees have different years of experiences and different working hour all of them have a high level of turnover intention, burnout, and perceived the unachieved justice of the organization this because they work in the same hospital, its stressors and unsafe area of working. This result is congruent with Sokhanvar, Tourani et al., (2016) who stated that, null relationship was found between demographic variables such as" year of experience, working hours ,age and work experience" with organizational justice, and turnover intention.

As regards the correlation between organizational justice, turnover and burnout, the present study revealed that, there were negative statistically significant correlations between organizational justice and intension turnover and organizational justice, burnout. In addition, there were fair positive statistically significant correlations between intension turnover and burnout. This result may be related to, when the organization didn't provide the employees with needed support, fairness, respecting their dignity, authority, this affecting the employees loyalty to the organization and increase their psychological stress and increase their need for leaving the hospital especially if they work in a psychiatric hospital which increase level of stress due to the risk of dealing with psychiatric patients on employees so they need more support, justice, stable and safe work environment.

This result is congruent with Owolabi (2012), which observed that, organizational justice have a great effect on staff nurses turnover intentions. It means, agencies justice determines the decision, whether to stay or leave the organization. Also, it is in accordance with the study by *Bianchi, et al*, (2014) in which a cross-sectional study conducted in multi-country of European countries, who reported that, there were high levels of burnout among nurses in different countries: 42 % England, 22% Finland, Belgium 25 %, Germany 30%, Poland 40%, Ire-land 41%, Norway 24%, Spain 29%, Netherlands 10%, and Switzerland 15%. In addition, the intention to leave the profession was also higher among the staff nurses experiencing burnout. Moreover, In Michigan, 42% of staff nurses reported wanting to quit the nursing profession after one to 10 more years according to a 2013 survey by the Michigan Center for Nursing (National Nurses United 2015).

5. Conclusion and recommendations The findings of the current study affirmed that, there were negative statistically significant correlations between organizational justice and intension turnover and organizational justice, burnout. In addition, there were fair positive statistically significant correlations between intension turnover and burnout .therefore, it was recommended that, for effective hospital human resources management, nursing and hospital organizations must change the system and design of the organization so that the perception of nurses' about organizational justice will become excellent. In addition, it is also important for the hospitals to design the strategies to improve their support to minimize the turnover intentions and burnout among staff nurses

which may lead to the organizational effectiveness.

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