"The impact of organizational change on employee turnover intentions at private hospitals: The moderating role of emotional intelligence"

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## THE IMPACT OF ORGANIZATIONAL CHANGE ON EMPLOYEE TURNOVER INTENTIONS AT PRIVATE HOSPITALS: THE MODERATING ROLE OF EMOTIONAL INTELLIGENCE

#### Abstract

The objective of this study is to examine whether employees' reactions to organizational change can affect employees' turnover intentions at private hospitals in Jordan, as well as a moderating impact of emotional intelligence on this relationship. The analysis is quantitative, using a questionnaire that was distributed online among private hospital employees. A total of 408 respondents completed the questionnaires and were included in the analysis. The results of the first hypothesis testing show that  $\beta = 0.960$ , t = 0.69.4, p < 0.00 and prove that organizational change significantly influences employee turnover intentions. Concerning organizational change dimensions, the results of cognitive reaction were  $\beta = 0.656$ , t = 0.17.5, p < 0.00, for emotional reaction,  $\beta =$ 0.680, t = 0.31.1, p < 0.00, while for behavioral reaction,  $\beta = 0.718$ , t = 0.22.7, p < 0.00. Finally, moderation results show that emotional intelligence has a significant effect, thus moderating the relationship between organizational change and turnover intentions ( $\beta = 0.828$ , t = 0.11.3, p < 0.00).

#### Keywords

change management, turnover intentions, emotional intelligence, healthcare management, private healthcare, Jordan

JEL Classification M10, M12, M14

## INTRODUCTION

Recently, hospitals have encountered challenges such as rapid technology advancement, strategic and organizational fluctuations, and increasing changes among their employees and consumers. To address these challenges, management of hospitals should concentrate on change and how it will deal with it. Employees working in healthcare institutions in general and hospitals, in particular, are facing more challenges than other sectors, ranging from working conditions, conflict between work and family life, emotional tiredness, depression, working stress, overloading, role conflict, organizational justice, and many other causes that increase turnover intentions. To cope with internal and external changes, hospitals turn to change management practices such as changing organizational structures and overall goals and strategies and redesigning the work conditions at an operative level to improve service efficiency and effectiveness. What distracts hospital top management is the turnover of talented and highly skilled employees. Hospitals are more complicated than other organizations, and services are concerned with healthcare, considered critical and must be provided by a professional and irreplaceable healthcare workforce.

Jordan is a developing nation characterized by different economic settings, cultural trends, and business environments than developed countries. Alkarabsheh et al. (2022) asserted, "One of the main reasons for the low number of nursing staff is the high turnover rate that leads to a severe shortage of nurses in Jordan." Hayajneh et al. (2009) reported, "The overall turnover rate among nurses in Jordan was 36.6%, which is considered extremely high." Al-Nawafleh (2015) found that 93% of nurses depart Jordan to work in GCC countries. Amarneh et al. (2021) indicated that the deficiency of nurses in the healthcare system in Jordan is approximately 50,164 persons (61%). These numbers can be agonizing indicators of employee turnover concerning the critical job that deals with the healthcare system since it affects the quality of patient service.

## 1. LITERATURE REVIEW AND HYPOTHESES

An essential topic of concern in previous research is to capture the impact of organizational change on the employees' reactions inside the organization. Vaishnavi et al. (2019) asserted, "Organizational change is a continuous change process in streams like workflow, staffing, decision making, communication, and reward system, and for the execution of change, an organization needs to concentrate on psychological and structural factors". Von Treuer et al. (2018) stated, "Organizations are undergoing rapid and significant transformation, with frequent organizational change being the rule rather than the exception; however, studies on employee outcomes of these changes are sparse." Previous research focusing on organizational change has primarily directed toward organizational aspects that compose change and has overlooked personal-mediated problems (Mathur et al., 2023; Oreg et al., 2011).

George and Jones (2001) and Greenhalgh et al. (2004) concur, "Every organizational change is the result of a combination of employee activities, and it will considered from a "micro-level" viewpoint." Therefore, this current study will focus on the micro-level perspective and investigate the impact of organizational change on turnover intentions from an individual's perspective. Anders and Cassidy (2014) show that organizational change in hospitals emerges based on several external factors and needs to upsurge the quality of the existing hospital services.

Organizational change may arise at different levels and in various forms. Organizations may embark on a massive restructuring of organizational processes and structures or take gradual, progressive steps in search of novel techniques and opportunities. Change can be planned strategically or happen as a reaction to unpredictable external elements, counting upon the particular potency that initiates the change and aims for change (Malopinsky & Osman, 2006).

Shin et al. (2015) define organizational change as "a process that allows the organization to alter behavior or way of working and to achieve the desired outcome". Sengupta et al. (2006) considered organizational change as "the adoption of a new idea or behavior." While Herold et al. (2008) viewed organizational change as "a procedure in which an organization improves its present structure, work practices, plans, or culture, which may have significant effects on the organization." In a hospital context, Pomare et al. (2020) defined a successful organizational change as "an initiative having long-term sustainability, and with minimal disruption to the quality and safety of patient care."

Organizational change occurs because of a force or cause that arises within or manifests itself in many ways. Ambitious leadership imbued with modern ideas is searching constantly for how to make a quantum leap and revolution in the performance of employees and the whole organization by motivating employees and improving the work environment to raise motivation to work and be loyal to the organization. In addition, the continuous growth of organizational structure puts pressure on organizations to review management techniques and redesign their policies to cope with technological, market size, and competitor challenges. Typically, massive external factors or internal driving forces, such as market shifts, the rise of globalization, or new leadership, cause organizational transformation

(Malopinsky & Osman, 2006). Organizational life cycles include changes in the organizational design, structure, responsibilities, growth in the organization, higher workforce diversity, control of process management, and communication deficiencies that can be the main driving forces for change (Schermerhorn et al., 2003).

Literature on organizational change contains notable descriptions of individually centered situations, such as workers' beliefs about whether they would profit or agonize personally because of the instigated change (Sung et al., 2017). Employees may be concerned about their capability to execute innovative occupations, deviations in incentives, and losing their authority or power due to extreme organizational change (Van Dick et al., 2006). Borges and Quintas (2020) conclude, "Organizational changes create an environment of uncertainties because individuals are not yet sure about the outcomes." Westerberg et al. (2021) found that perceived organizational changes correlated positively with turnover intention.

Previous research acknowledges that organizational change reactions are complicated, and using assorted dimensions techniques to study organizational change is better suited in this case (Tsaousis & Vakola, 2018). Piderit (2000) described explicit responses to change using a three-part classification of change resistance that incorporates affective, cognitive, and behavioral elements as a change reaction. Oreg et al. (2011) utilize a criterion to examine if a variable is a recognized reaction that is directly related to the way change receivers feel (emotion), think (cognition), or anticipate to do (behavior) as they react to the changes. According to Nicolaidis and Katsaros (2011), "The emotional dimensions are related to the feelings individuals express under organizational change." Emotions can be expressed orally or nonverbally and can be praised, for example, pleasure and enthusiasm, or unfavorable, like worry and despair (Szabla, 2007). Piderit (2000) defined the cognitive dimension as "the ideas and values expressed in organizational change scenarios, while the behavioral dimension refers to the articulated attitudes toward the change."

Tsaousis and Vakola (2018) urge in-depth awareness of the cognitive, behavioral, and emotional rationales in people's responses to potential changes. Stouten et al. (2018) contend, "Little systematic attention has been given to how employees perceive organizational change." In addition, Zaheer et al. (2019) indicated that the prevalence literature on turnover intention in healthcare environments has concentrated on detecting nurses' beliefs and attitudes, leaving other healthcare specialists' views unexplored.

Cunningham (2006) asserted, "One potential outcome of organizational change efforts is employee turnover; therefore, due to the change process, turnover intentions included as an outcome of commitment to change." Mengstie (2020) considered the turnover of healthcare employees as one of the primary aspects of the lack of healthcare employees, mainly medical doctors. According to Hayes et al. (2012), "significant personnel turnover has a detrimental direct and indirect economic impact on the health industry." Employee turnover affects organizations negatively via training new hires, recruiting, administrative expenses, exit interview costs, and severance pay (Holtom et al., 2005). Jaros (1997) defined intention to leave as "an employee's tendency to stop being an organizational member." While Tett and Meyer (1993) described turnover intentions as "a conscious and deliberate willingness to leave the organization." The significance of a turnover intention is its ability to predict actual turnover, which Fugate et al. (2012) defined as "the willingness to leave the organization voluntarily." Rafferty and Griffin (2006) reported that employees perceived that change occurred frequently and firmly allied with turnover intentions via heightened psychological vagueness. Rafferty and Restubog (2010) related employee turnover intentions to the anxiety and tension from organizational change. Similarly, Raza et al. (2018) show that all different types of change were correlated significantly and positively with employee turnover intentions. Finally, Lundmark et al. (2021) found "a statistically significant positive relationship between organizational change and employees' turnover intentions."

Concerning the pioneer conception of emotional intelligence thought, Salovey and Mayer (1990) were the first to present a systematic theory of emotional intelligence, a type of ability or in-

telligence found in humans. Bar-On (1997) described emotional intelligence based on the situation of personality traits found in humans. The study defined emotional intelligence based on non-cognitive capabilities and inherent individual skills and competencies, which make him capable of dealing with organizational stress, burdens, and anxiety. Salovey and Mayer (1997) defined emotional intelligence as "the ability to perceive emotion, integrate emotion to facilitate thought, understand emotions and regulate emotions to promote personal growth." This upsurge in interest in emotional intelligence is also linked to increased organizational environmental instability and change, usually related to emotional disagreement (Downing, 1997). Currently, the psychological underpinnings of organizational change are not fully understood. It is imperative to know the essential job of emotions and how workers practice or deal with them in their reactions to changes in different organizational settings. Riaz et al. (2018) asserted, "Employees' emotional intelligence not only decreases frustration and stress in the workplace but also helps others to have less intention to quit."

Brunetto et al. (2012) found that "employees with higher emotional intelligence can cope with negative stress and manage their emotions toward the intention of quitting." Results of previous research show that emotional intelligence has a significant and positive relationship with turnover intentions (Zahedi, 2015; Riaz et al., 2018; Majeed & Jamshed, 2021; Wang et al., 2023). Arthi and Sumathi (2018) found that emotional intelligence moderates the relationship between transformational leadership and turnover intentions. Based on these results, Riaz et al. (2018) consider emotional intelligence as "a significant factor in predicting the turnover intentions of employees, which leads to actual turnover."

E. Park and H. Park (2020) sought to discover traits that impact nurses' intention to quit in South Korean emergency departments. Results show that emotional intelligence and emotional labor were essential determinants of turnover intentions. It is clear from the preceding indications that the personal-difference interpretation of emotional intelligence can lead to a more thorough understanding of emotional consequences on employee turnover intentions. Finally, Khraim (2023) found that emotional intelligence directly affects the job performance of employees at private hospitals in Jordan. The bulk of research indicates that emotional intelligence is an essential factor that affects different aspects of employees in various areas and divisions, and this makes it a critical factor for this study, especially in the healthcare sector, where high workload, exhaustion, and organizational change are consistent with job descriptions.

This study aims to investigate organizational change affecting employees' turnover intentions by examining organizational change in a relatively new context of Jordanian hospitals, where limited research addressed this area of concern. Moreover, the study will investigate the moderating impact of emotional intelligence on the relationship between organizational change and turnover intentions to understand this critical factor and how it leads to lessening turnover intentions. Figure 1 shows the relationship between the study variables, and accordingly, the following hypotheses are proposed:

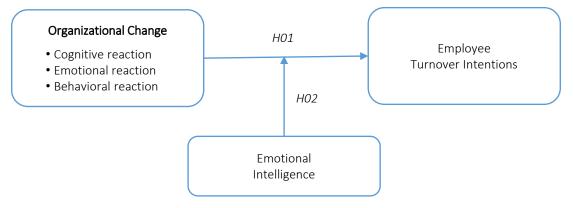


Figure 1. Research model

- H01: Organizational change has a statistically significant impact on turnover intentions at  $\alpha =$ 0.05 level.
- H1.1: Cognitive reaction has a statistically significant impact on turnover intentions at  $\alpha = 0.05$  level.
- H1.2: Emotional reaction has a statistically significant impact on turnover intentions at  $\alpha = 0.05$  level.
- H1.3: Behavioral reaction has a statistically significant impact on turnover intentions at  $\alpha = 0.05$  level.
- H02: Emotional intelligence moderates the relationship between organizational change and turnover intentions at  $\alpha = 0.05$  level.

## 2. METHOD

This quantitative analysis uses a questionnaire to solicit private hospital employees' responses. Questions used to measure the individual reaction to organizational change developed by Edwards and Lambert (2007) contain 18 statements that measure the three factors of organizational change: cognitive reactions, affective reactions, and behavioral reactions. For emotional intelligence, Wong and Law's (2002) scale was used, and contained sixteen statements that measure the four factors of emotional intelligence: "self-emotional appraisal, use of emotion, others emotional appraisal, and regulation of emotion." Turnover intentions are measured using the TIS scale (TIS-6) adopted from Bothma and Roodt (2013), a scale of six items applied to a five-point Likert scale. Bothma and Roodt (2013) asserted, "TIS-6 appeared to have good criterion-predictive validity, differential validity, and reliability."

The survey method was employed using a questionnaire to collect the data. The questionnaire contains two sections; the first concerns the respondents' demographics, while the second is designed to measure the study variables. An email was sent to all the employees at seven private hospitals in Amman City. HR departments in designated hospitals were requested to inform the employees about the study and the online questionnaire. The email contains a cover letter about the research aims, instructions, and the questionnaire link. In the cover letter, assurance was given to responses that the questionnaire is voluntary and that answers will be confidential. The sample consists of administrative staff from different levels, physicians, and nurses to cover comprehensive perspectives on the issue understudy. The total number of completed questionnaires was 408 and entered into the final analysis. Cronbach's alpha coefficient reliability was used to test the study variables to ensure the validity of the questionnaire. All variables were higher than the acceptable rate, as exhibited in Table 1.

Table 1	L. Cron	bach's	alpha
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Variables	Dimensions	No. of Items	Cronbach's alpha	
	Cognitive reaction	6	81.2	
Organizational Change	Emotional reaction	6	80.4	
enange	Behavioral reaction	6	89.2	
Emotional Intelligence	Use of emotion (UOE)	4	85.5	
	Self-emotional appraisal (SEA)	4	81.1	
	Other's emotional appraisal (OEA)	4	82.7	
	Regulation of emotion (ROE)	4	84.7	
Turnover Intentions		6	81.4	

## 2.1. Respondents' demographic profile

Table 2 reveals the respondents' demographic profiles. Clearly, the number of female respondents is more than male and reflects the reality that female employees oversee males in the healthcare sector. The highest age category ranged between 31-40 years, with 47.7%. Concerning education, 54.6% of respondents hold a bachelor's degree, and only 5.6% hold a Ph.D. degree. About 42.8% of respondents were nurses, and 38.2% were physicians. Finally, employees with 3-5 years scored the highest rate concerning the number of working years, with 36.2%, followed by 1-2 years with 26.9%, and this low percentage can be an indicator of the tenure of employees.

Variables	Frequency	%				
Gender						
Male	139	34.1				
Female	269	65.9				
	Age					
22- 30	52	12.7				
31-40	195	47.8				
41-50	96	23.6				
More than 51	65	15.9				
Ec	lucation					
Diploma	46	11.2				
Bachelor	223	54.7				
Master	116	28.5				
Ph.D.	23	5.6				
Pr	ofession					
Administrative staff	77	18.9				
Physician	156	38.3				
Nurse	175	42.8				
Number o	of working years					
1-2 years	110	26.9				
3-5 years	148	36.3				
6-10 years	99	24.2				
More than 10 years	51	12.6				

#### Table 2. Respondents' demographic profile

### 3. RESULTS

#### 3.1. Hypotheses testing

To test the first hypothesis, a multiple regression coefficient analysis was used by entering the predicted variables to identify the presence of a statistically significant effect of organizational change and its dimensions on turnover intentions. Therefore, the values of multiple linear regression coefficients and their squares were extracted. The amount of change interpretation in those coefficients is depicted in Table 3.

Table 3 reveals the outcomes of the model summary that test the first hypothesis. It shows that the value of the correlation coefficient between the independent variable of organizational change with its dimensions and the dependent variable of turnover intentions as a total variable combined reached R = 0.862. These results prove a strong and positive correlation between organizational change and turnover intentions. As presented, results show that R2 = 0.755, which means that organizational change with its dimensions explained 75.5% of the total variation in turnover intentions. At the same time, the remaining can be attributed to other factors. Table 3 shows the value of the F test calculated for the model, which amounted to 195.9 with a significance level of 0.000, designates the fittingness of the model for the regression test and that the relationship between the two variables (independent and dependent) follows the linear model at the significance level of  $\alpha \leq 0.05$ . The decision rule states that the model is considered appropriate if the value of the significance level is less than 0.05.

Table 4 shows the values of the standard coefficients (Beta) for the effect of each dimension of organizational change on turnover intentions, as it is clear that the highest value of Beta reached was for the behavioral reaction dimension (Beta = 0.718), followed by the emotional reaction dimension (Beta = 0.680). The cognitive reaction came in third place (Beta = 0.656). Table 4 also presents the results of the coefficients for the impact of organizational change dimensions on the turnover intentions, where the calculated t-test values for each (cognitive reaction, emotional reaction, and behavioral reaction), sequentially are 17.5, 31.1, and 22.7, with a significant level of 000, 000, 000, respectively.

**Table 3.** Impact of organizational change on turnover intentions

First Hypothesis	R	R²	В	F	Sig.	т	Sig.	Results	
H01	0.862	0.755	.960	195.92	.000	69.48	.000	Accepted	

Table 4. Impact of organizational change dimensions on turnover intentions

Sub-Hypothesis	R	R <sup>2</sup>	В	F	Sig.	т	Sig.	Results
H1.1 Cognitive reaction	.602	.411	.656	299.65	.000	17.52	.000	Accepted
H1.2 Emotional reaction	7820	.605	.680	369.83	.000	31.14	.000	Accepted
H1.3 Behavioral reaction	.738	.560	.718	216.69	.000	22.72	.000	Accepted

Dependent	In demondent versiehle		First step			Second step		
Variable	Independent variable	В	t	Sig	В	t	Sig	
	Cognitive reaction	0.288	3.21	.000	0.019	4.19	.000	
Employee	Emotional reaction	0.185	2.180	.003	0.035	3.97	.001	
Turnover Intentions	Behavioral reaction	0.246	2.960	.000	0.202	3.84	.000	
	Emotional Intelligence (Moderating V)			•	0.828	11.34	.000	
3			0.740			0.810		
R <sup>2</sup>		0.636			0.701			
R²Δ		0.852			0.115			
Δ	241.3		15.12					
Δ Sig			.000			.000		

Table 5. Multiple hierarchical regression analysis

# 3.2. Moderating effect of emotional intelligence

Investigating the potential moderating impact of emotional intelligence on the causal relationship between organizational change and turnover intentions was the last hypothesis for this study. As shown in Table 5, the multiple hierarchical regression analysis was performed to test hypothesis 2 to determine if emotional intelligence will mitigate the association between organizational change and turnover intentions.

Table 5 exhibits the hierarchical multiple regression outcomes conforming to the two models. The first step in the model manifests the direct impact of independent variables (cognitive reaction, behavioral reaction, and emotional reaction) on turnover intentions at private hospitals in Jordan. Step two signifies the impact of emotional intelligence as a moderator variable on the relationship between organizational change and turnover intentions. As exhibited in Table 5, the interaction terms between emotional intelligence and each organizational change dimension significantly contributed to the prediction of turnover intentions. Section two of the table validates the influence of emotional intelligence on the relationship between organizational change dimensions and cognitive, emotional, and behavioral reactions. As shown in Table 5, the overall model in the second step was R2 = 0.701 for all dimensions, showing a significant difference from the model in the first step (R2 = 0.636), and this means that emotional intelligence has a significant moderating influence on the relationship between organizational change dimensions and turnover intentions; accordingly, H02 is accepted.

## 4. DISCUSSION

This quantitative study employs a questionnaire to solicit answers from employees at private hospitals in Amman City. The final number of completed questionnaires was 408. The first hypothesis stated that organizational change has a significant statistical impact on turnover intentions at  $\alpha$  = 0.05 level. The results of the first hypothesis ( $\beta =$ 0.960, t = 0.69.4, p < 0.00) indicate that organizational change in hospitals significantly influences employees' turnover intentions. Top management must ensure the preparedness and willingness of the organization's employees to change before starting the change process to confirm the employees' readiness and acceptance of change. That implies that hospitals need to depend on planned change rather than unplanned, which may cause anxiety and put the employees under pressure, which forces them to think about turnover. These results prove the prominence of the psychological patterns of the employees in the organizational change that reduce employees' resistance to change as commitment increases. This result concurs with Rafferty and Griffin (2006), Rafferty and Restubog (2010), Raza et al. (2018), and Lundmark et al. (2021).

Concerning organizational change dimensions, the findings indicate that the three dimensions were significant; the result for the cognitive reaction was  $\beta = 0.656$ , t = 0.17.5, p < 0.00, for the emotional reaction  $\beta = 0.680$ , t = 0.31.1, p < 0.00, while for behavioral reaction  $\beta = 0.718$ , t = 0.22.7, p < 0.00. When assessing organizational change in organizations, it is critical to consider all three dimensions. By evaluating cognitive, emotional, and

behavioral reactions, the results will provide more comprehensive knowledge that profoundly uncovers the factors that hamper the success of organizational change and reduce turnover intentions. This result concurs with Szabla (2007), Tsaousis and Vakola (2018), and Borges and Quintas (2020). Finally, emotional intelligence also exhibits a significant effect and moderates the relationship between organizational change and turnover intentions ( $\beta = 0.828$ , t = 0.11.34, p < 0.00). Inbound to this, the interaction of organizational change with emotional intelligence positively moderates employees' turnover intentions. This result shows that it is crucial for managers to understand the potential impact of emotional intelligence on employees' turnover intentions during organizational change since the administration has more authority over elements bonded to the operational setting than employees. That allows them to use and regulate emotional and behavioral reactions.

## CONCLUSION

This result concurs with Arthi and Sumathi (2018) and Khraim (2023).

The study demonstrates that turnover intentions caused by organizational change are multidimensional, including cognitive, emotional, and behavioral reactions that can result in favorable or opposing attitudes. Therefore, researchers should consider each of these factors while investigating the effects of organizational change. By understanding those factors, hospital managers can acquire competencies that more deeply and profoundly expose the factors that prevent the success of different organizational changes and raise employee turnover intentions by examining certain beliefs, emotions, and goals. Hospital managers should promote open communication with employees to enhance the hospital's organizational culture generally, particularly during organizational change.

The goal of this paper is to investigate the impact of organizational change on employee turnover intentions at private hospitals, as well as to examine the moderating effect of emotional intelligence on this relationship. The result of the main hypothesis shows that organizational change in hospitals significantly influences employee turnover intentions. Concerning organizational change dimensions, the results of cognitive reaction, emotional reaction, and behavioral reaction were all significant. Regarding the moderating role of emotional intelligence on the relationship between organizational change and turnover intentions, results indicate that emotional intelligence significantly impacts this relationship. That means individuals who use and regulate their emotions better will cope well with their unfavorable turnover intentions and adjust well to organizational change. These results assume that at the individual level, organizational change and emotional intelligence can be considered primary predictors of employee turnover intentions at private hospitals, and this result concurs with other studies in different countries. Therefore, hospital management should support designing and planning realistic goals that fit employees' system values, abilities, and lifestyles. Finally, it is recommended that new research focus on exploring what factors cause turnover intentions to occur during the organizational change, for example, explaining how stress related to changes in job demands contributes to turnover intentions and what organizational resources help lessen motivations for turnover intentions.

## AUTHOR CONTRIBUTIONS

Conceptualization: Hamza Khraim. Data curation: Hamza Khraim. Formal analysis: Hamza Khraim. Investigation: Hamza Khraim. Methodology: Hamza Khraim. Project administration: Hamza Khraim. Resources: Hamza Khraim. Software: Hamza Khraim. Validation: Hamza Khraim. Visualization: Hamza Khraim. Writing – original draft: Hamza Khraim. Writing – review & editing: Hamza Khraim.

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