*Original Article*

# Organizational Culture as Mediator on the Relationship Between Job Stress and Employee Retention in a Public Healthcare Institution : COVID-19 Context

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***Abstract*** *- This study's primary goal is to determine organizational culture's role in mediating the relationship between job stress and employee retention in a public healthcare institution during COVID-19. The researcher uses a non-experimental quantitative research design with a mediation approach. Adapted survey questionnaires are distributed to 202 respondents from Tagum City's affiliated government hospitals. Stratified sampling is used to select the respondents. Mean, Pearson r and Sobel test are the statistical tools utilized to determine the results. The statistical findings reveal a high level of job stress and an extremely high level of employee retention and organizational culture. It also displays a significant relationship between job stress and employee retention, job stress and organizational culture, and employee retention and organizational culture. Furthermore, organizational culture partially mediates the relationship between job stress and employee retention.*

***Keywords*** *- Organizational culture, Job stress, Employee retention, Public healthcare institution, COVID-19, Mediation study, Philippines.*

## 1. Introduction

Over the years, healthcare workers delivered quality health services to patients seeking medical assistance. Their existence has taken more attention from the public as the pandemic rises. When COVID-19 became a global phenomenon, it negatively affected the state of well-being among healthcare workers. In public healthcare institutions, they were considered the common denominator of unhealthy work environments and insufficient allocation of resources and workforce. Because of it, employee retention has become an unsettling problem for healthcare organizations [23]. With the increasing complexity of health care, bed capacity, and work responsibilities, the need for even more highly trained staff continues. Moreover, as the cutback in the workforce tends to increase, this degrades the quality of patient care and the work-life balance among healthcare workers [44].

Among the challenges faced by the healthcare sector is attrition, resulting in a shortfall of nearly 7.2 million health professionals. The global shortage is poised to affect 12.9 million people by 2035. In addition, the Philippine Overseas Employment Administration reported that approximately 20% of professional nurses emigrated between 2004 and 2010. With a lack of trained healthcare workers, patient mortality and medical and personal errors have increased. This harms the ability to deliver effective healthcare services. Furthermore, if the critical shortage of health workers is not addressed, this could decimate vulnerable healthcare systems [23],[36].

According to the literature, healthcare nurses were known to be the light amidst the pandemic as they empowered and provided quality care to patients. Because of the poor conditions during the COVID-19 disease outbreak, these workers reported relatively substantial amounts of job stress. However, they have been working with resilience, which helped them overcome and adapt to complex and stressful situations [49]. Carrying out these positive values in the organization enabled healthcare workers to establish their professional identity and battle through job stress, thus, reducing their vulnerability to leave their workplace.

The researcher has not found any local studies on job stress and employee retention. Also, only a few studies predict how organizational culture influences the relationship between job stress and employee retention. The potential disparity between these variables may make it difficult for healthcare administrators to determine which organizational elements can be used to address the issue. In this context, the

researcher seeks to determine organizational culture's mediating role in the relationship between job stress and employee retention. This enables administrators to develop interventions that could improve the state of well-being among workers in a public healthcare institution during the pandemic.

## 2. Review of Related Literature

### 2.1. Job Stress

Job stress is environmental stimuli that cause a series of physiological and behavioral responses in individuals due to their interactions with work environments. The nature of the work, the individual's role, career advancement responsibilities, and management style are all significant elements that affect this condition [39]. Job stress is identified as the independent variable in this study, which includes the following indicators: job demand, job control, social support, and work and life satisfaction.

Several stressors, including unfair pressure, staff shortages, co-worker conflicts, and low pay, can cause job stress. High job demands, increased culpability, inadequate control, a lack of peer support, and poor management styles are all major stress factors. While the medical field is inherently stressful, with extended hours of work, difficult labor conditions, facing challenging patients, and various health and safety hazards, most stressed employees do not carry out their duties properly due to the tension and disparity between the demands of work and their capacity to complete the work [25].

Furthermore, according to one study, job stress is unavoidable in any workplace. It usually occurs when a person feels pressured to respond to a situation but cannot meet its demands. This means that stress is determined by its nature and degree and a person's psychological well-being. Sasidharan and Dhillon [59] concluded that there is a need to destigmatize work-related mental health issues and redefine their role with appropriate education, protection, and compensation after recognizing the cohesion of job stress among healthcare workers during the pandemic.

Reader's Digest and Nielsen Media Research conducted the First Asia Health Survey, involving 24,000 Asians from Hong Kong, India, Malaysia, Philippines, Singapore, Taiwan, and Thailand. Filipinos were identified to be the most strained people, with more than two out of every five (43%) affected by stress, defying the commonly held view that they are the most laid-back people in Asia. Nurses, in particular, are widely acknowledged as a strenuous profession since they are exposed to an incredibly demanding work environment, affecting their health and delivering quality services to patients [15].

A study conducted in Turkey during the pandemic found that health workers were stressed. Another study from Greece found that nurses had a moderate total stress mean score, similar to the research done by Rakhshani et al. [52]. In China, job stress is the most risk factor among nurses. Furthermore, according to a recent study, job stress caused by COVID-19 has a massive effect on frontline Saudi healthcare workers thinking about changing jobs in the months ahead [39], [58], [73].

Nurses play an indispensable role during the pandemic as they are the closest contact with COVID-19 patients, so they mostly experience tremendous psychological and work-related pressure. Nursing labor shortages in most countries, associated with ever-increasing professional demands, are causing significant strain and even burnout. Their physical and mental stress has become a problem, affecting their health and how they perceive employee satisfaction and quality of care [21], [40].

One of the most profound theories developed was the (JDCS) Job Demand/ Control/ Social Support Model by Johnson and Hall. Job demand is viewed broadly as a stimulus, which can be physical, social, or organizational components that require continuous efforts and are linked with psychological responses [9]. Items found on this indicator depict the level of work that needs to be done by the staff in the required time and how the staff overcomes the pressure and demand of work.

According to the findings, job stress occurs when job demand is triggered by environmental pressures that exceed the employee's resources and ability to complete the task. It is also frequently precipitated by psychological stressors such as work overload, time constraints, and competing demands. If not managed properly, high job demand can lead to high job stress, which can lead to exhaustion, decompensation, and overfatigue. Furthermore, a moderate increase in job demand on workers with very low demands is a beneficial and opportunistic aspect of employment. However, increased job demands on employees who already work under high demands can harm their well-being [6], [28].

One factor contributing to job stress among healthcare workers is increased patient care demand [59]. As patients come in and out of the hospital, most critically ill patients require intensive medical assistance. Furthermore, with significant responsibility for their patient's health outcomes, healthcare workers must work long shifts to get things done. Increased clinical responsibility hours can contribute to an increased workload associated with high task demands and the efforts required to deliver these tasks efficiently.

Job control influences one's work and work environment to create a less stressful and rewarding workplace. It entails the employees' ability to organize their work and take the initiative. It also promotes health improvements by providing

more opportunities for workers to take action to mitigate the negative effects of high job demands and create a buffering effect against the impact of work stressors [16], [28].

In a theoretical model, job control is the capacity to make decisions and use specific skills to get the job done. Those with high job control have more time to engage in physical activities. Furthermore, a study found that it significantly influenced minimizing the adverse effects of job demands on nurses providing palliative care. This means that when employees have high job control, they can perform appropriate mental and bodily responses, allowing them to not only complete the high-demand task but also effectively utilize the potential energy elicited during the state of demand. However, with limited job control, the work environment constrains the worker's ability to take the necessary action to manage the stressful situation [28], [31], [50].

Social support is a broad concept that refers to the valuable assistance provided to those in need. It is a powerful determinant in coping with stressful situations because it helps people realize they are appreciated, comforted, and respected by others. The more assistance employees receive, the better they can cope with environmental pressures, making them more relaxed. The supervisor and co-workers are regarded as the primary sources of social support in healthcare [20].

Social support is one psychosocial factor that protects workers in the workplace by allowing them to cope and deal effectively with various stressors. Adequate social support is critical in assisting hospital workers in successfully managing stressful events, including crises, disasters, and disease outbreaks, particularly during COVID-19. Its role is to mediate the relationship between high job demand and job stress through ways of emotion-focused coping. Furthermore, social support is thought to be an important aid that strengthens personal efforts through emotional support and informational guidance [38], [63].

Work Satisfaction refers to a general, positive engagement in one's work, which a high income, professional prestige, and employee age can influence. On the other hand, life satisfaction is a component of overall life satisfaction that personality traits, life events, and current moods can influence. These two factors influence medical staff attitudes toward work, patients, and service quality [65].

Overall, health workers are essential in managing patients and prevention and control measures within healthcare institutions [73]. Nurses, in general, are subjected to various stressors in their physical, psychological, and social working environments, which have increased significantly during the COVID-19 outbreak. The most significant stressors are associated with the physical working environment, where healthcare workers spend extra time protecting patients and themselves [57]. This demonstrates how critical it is for health leaders to develop organizational strategies for managing stress among healthcare workers to create a sustainable working environment in response to a pandemic or in any circumstances.

## 2.2. Employee Retention

Over the years, the retention of healthcare workers has become a persistent challenge. The clinical shortage of health workers continues despite local and global efforts for ethical recruitment. The World Health Organization has recognized this growing global crisis as having significant public health consequences in low-resource settings [44]. In this study, employee retention is the dependent variable which comprises the following indicators: organizational commitment, job satisfaction, person-organization fit, and job stress.

Employee retention encourages workers to stay in the company for as long as possible. It is a systematic approach that encourages employees to work while integrating policies and practices that support their necessities. The health sector, particularly hospitals and clinics, rely on providing trained healthcare professionals. As a result, both management and health authorities are concerned about employee retention [22], [23].

Previous research has shown that over the last decade, the healthcare industry's turnover rate has increased by nearly 5% across all jobs, for which 31% of millennial workers will quit within the next two years, while 44% feel disconnected and unhappy at work. Approximately 40% of hospitals polled in the same report are expected to expand their workforce in 2018. Unfortunately, at least 57 countries have experienced a critical shortage of skilled health workers. Nurse turnover rates are approximately 20% in Canada, 10% in England, and 12% to 21% across 10 European countries. Based on these findings, the number of staff leaving their current job is expected to increase continually in the months or years ahead [23], [68].

According to the Philippine Statistics Authority's Labor Turnover Survey [35], under the service of Human Health and Social Work Activities, the percentage of employee-initiated (4.3%) was higher than the percentage of employer-initiated (0.4%). Meanwhile, Davao Regional Medical Center had 32 resigned employees in the local setting in 2017, which escalated quickly by 2018 with 35 resigned employees, and in 2019 with 40 resigned employees. This denotes how most healthcare workers choose to leave their workplace intentionally rather than wait for retirement or for their employers to get them out of their jobs.

The situation has deteriorated during the COVID-19 pandemic, which has overburdened the healthcare system by

crowding hospital beds, lowering the quality of care, limiting admissions, and hastening patient discharges. During the pandemic, the demand for healthcare workers increased dramatically, even more so in low-resource countries than elsewhere. Furthermore, this phenomenon exacerbated the nursing retention crisis. Frontline nurses caring for COVID-19 patients in Canada and Israel reported low levels of job satisfaction and a strong desire to leave their jobs. Concerns among nurses about job insecurity include the number of contact hours with patients and the availability of personal protective equipment (PPE) [44], [61].

Walker (2001) identified several factors that can increase employee retention, which include reward and recognition; provision of career growth; pleasant working conditions; a balanced approach to personal and professional life; and positive co-worker relations. It was also suggested that the manager's integrity and involvement, advancement opportunities, and empowerment are all essential factors in employee retention. In healthcare, hospital staff has an appreciative mindset, with positive and loyal feelings toward their workplace. Surprisingly, some older frontline nurses prefer encouraging words and actions from managers and supervisors over increased pay. Better communication strategies have also become a strategy for employees to consider staying in the organization [11], [61].

Employee retention has become one of the most difficult challenges confronted by hospital industries. With several factors driving this trend, including high patient-nurse ratios, lack of career opportunities, and lax enforcement of policies and guidelines, the nursing workforce's instability has become a significant concern for nurse managers and hospital administrators [37]. Moreover, this challenge stems from the following determinants that may affect and contribute to employee turnover.

Organizational commitment is the strong desire to stay with the organization by making enormous efforts to achieve organizational goals. High organizational commitment, according to Cohen, leads to favorable outcomes such as improved job performance and reduced dereliction of duty. This also promotes a high standard of living and job security. Healthcare workers can work more effectively and efficiently to cope with stressful situations as the organization takes the initiative to support their needs and welfare adequately. Furthermore, a psychological association between employees and organizations can result in positive work behaviors and employee engagement. Employees with solid commitment and ethical responsibility are less likely to leave their current organization [12], [43].

Previous literature has found a connection between organizational commitment and nursing turnover. Higher levels of organizational commitment, for example, significantly contribute to work effectiveness and engagement, increased job performance, decreased work fatigue, and lower absenteeism and quitting behaviors. In China, nurses who are happy and committed to their jobs tend to stay in their current position longer [37].

Job satisfaction is commonly defined as a unidimensional construct of evaluative judgments made by employees based on the nature of their job. It refers to fame or financial gains and employees' mental, physical, and environmental pleasure from their jobs. Thereby, it is considered the art of finding fulfillment, gratification, and enjoyment while at work. [41], [69], [75].

Job satisfaction is a broad concept that includes job characteristics and the work environment. It expresses how satisfied a person is with various job characteristics, such as the nature of their work and career advancement opportunities. Furthermore, it is one of the most critical factors influencing employee retention. It is a popular metric for assessing employees' work behaviors as they are shaped by organizational change [23], [41], [75].

Job satisfaction is critical in healthcare for employee retention and low turnover intention. Employees more capable of adapting to changing work environments have better in-role behavior in fulfilling tasks. Nurses are the most numerous professional groups among healthcare workers. When they feel successful and well-suited to their profession, their job satisfaction improves. On the other hand, low job satisfaction occurs when employees experience work-related stress and a decline in physical functioning. Nurses obtain satisfaction from the services and departments they are assigned to, allowing patients to receive appropriate and effective care [24]; [31], [41], [75].

Job satisfaction is linked to organizational success, professional commitment, and quality care. Yu et al. conducted a cross-sectional study and discovered that job satisfaction among health workers was already high before the COVID-19 pandemic. Similarly, a study about emergency nurses who received substantial support during the pandemic has increased their level of job satisfaction than those who did not receive any recognition. Another study found that nurses experienced high levels of job satisfaction due to greater job control and lower depression during the pandemic. Previous research has also linked job satisfaction and absenteeism to emotional exhaustion in Japanese and Chinese nurses [24], [13].

The person-organization fit is one type of fit that has dominated the person-environment relationship. This model implies that people are drawn to, selected by, and remain in organizations that match their characteristics. It is also defined as identifying and aligning individual values with organizational values and goals. This means that if an employee's preferences harmonize with those of the company

or peers, that employee will perceive a good workplace with increased security and more meaningful work [12], [66], [70], [72].

Individuals with a high Person-Organization Fit (POF) are happier at work and, as a result, are less likely to leave their jobs. This means that a valued employee gets bound to repay the institution by going above and beyond job adverts and meeting demands. Therefore, an influential person's organizational fit primarily meets employees' needs and organizational demands. In contrast, a lack of commitment between the employee and the organization reduces one's satisfaction which leads to provoking and planning to quit [47], [72].

Employees in an organization align with their needs, values, and personalities, which define organizational structures, processes, and culture. Unfortunately, the current economy forces employees into situations they may have yet to want to be in at first, potentially leading to increased misfits at work. This means people need help adapting to environments that do not meet their needs and values [66]. Implementing gender equality in an organization is one example to argue the situation. When this value is practiced, gay and lesbian employees find it easier to "fit in" at work, leading them to stay longer in an organization.

Employee retention remains a persistent challenge in the health industry. With a shortfall of health practitioners, workforce gaps are expected to impact healthcare services significantly. This means that if an organization does not have a reliable strategy for sustaining its employees, it may inevitably face attrition [23]. Furthermore, failure to implement effective staff retention strategies during COVID-19 may have a negative effect on patient care, strategic performance, work productivity, and employee well-being.

### 2.3. Organizational Culture
A system of shared actions, principles, and perceptions that develops and guides the behaviors of its members are referred to as organizational culture. It entails connecting the company's activities and goals with social norms and analyzing attitudes and movements among individuals. This is significant in developing an organization's structure with acquired sustainable growth [71]. In this study, organizational culture is used as the mediating variable, which comprises the following indicators: managing change, achieving goals, coordinated teamwork, customer orientation, and cultural strength.

According to Thi and his colleagues, organizational culture is influenced by various factors such as the company's goals, working practices, employee cultural beliefs, and the working environment. The rule and norms established in the organization serve as a tool to guide employees to act accordingly and prevent them from committing deviant behavior. Moreover, understanding the culture in an organization as its role becomes clear in obtaining competitive advantage. At present, results about organizational culture have practical implications concerning performance measures [25], [32], [46].

Nursing organizational culture is put in place to ensure a resilient and dedicated workforce. One of the many elements promoted by their profession is continuity of quality patient care, organizational efficacy, performance, and productivity. Similarly, nurses influence many other factors related to satisfaction with care and a sense of security. Furthermore, healthcare organizations are constantly forced to adapt to dramatic changes and reforms while maintaining service quality, particularly as the COVID-19 pandemic spreads. In dealing with COVID-19, important goals include developing health protocols, ensuring their effectiveness, and disclosing the practice among healthcare professionals. This creates new challenges for nurses in meeting their personal and organizational objectives [3], [27], [37].

Organizational culture is essential in comprehending one's job performance, motivation, and coping behaviors. At the same time, it teaches them to behave appropriately as expected by the organization. This culture is critical in facilitating or impeding development processes throughout the health organization. This includes teaching employees how to manage change, achieve organizational goals, coordinate peer teamwork, build cultural strength, and meet client expectations. These functions are supported by morals and convictions that help determine whether the system will lead to organizational success or failure [64].

The perspective of managing change is associated with employee adaptability, which affects employee work performance. The ability of an employee to adapt to changes and deal with new environmental situations is referred to as adaptability. Employees with this element are more responsive in dealing with various situations and changing environments [32]. The specific items in this scale deal with the actual success of the change. Notably, it depicts whether the staff is flexible and adaptable enough to changes in hospital policies and guidelines when necessary. With this, it politely shows their complete understanding of how most change results from pressures imposed by the higher offices of the organization.

Companies with an extremely functional nature are known to be action-oriented and highly flexible to change. Because of this, workers' adaptability significantly results in increased development and career success. Deal and Kennedy (2016) infer that organizational culture is static rather than evolving and is resistant to change. It implies that newly hired employees will continue to work like before rather than bring new ideas and work methods. Reay and others also contend that physicians and managers solve

critical problems in healthcare by utilizing the existing knowledge before adapting to new ways and conventional ideas [3], [32], [75)].

Previous research has found that the primary value or need to achieve something underpins organizational achievement. This means the employees' shared beliefs and values help the organization achieve its goals. They become more dedicated to a workplace with clear and purposive goals. This facilitates the development of standard success criteria and recognition for employees who perform ethical working values [32]. The items on this scale describe how the staff is familiar with the unit's aims and how the staff is measured and rewarded when goals are met.

Organizational goals and objectives are critical to achieving an organization's mission, linked to job attitude and performance. Strategic direction and intent are essential to organizational culture because they represent an organization's purpose and efforts to achieve its goals. Adapting the "rewards and incentive" system is another important component that increases employee motivation to achieve their goals. Institutions can set better goals and ensure employee performance through dedication and hard work [34].

Within an organization, coordinated teamwork delineates task completion and employee interaction. This means that this culture highly values group connection and consensus. Employees are fearless in working together with others to complete tasks. This implies that team dynamics are as important as individual work [32]. Furthermore, the items on this scale assess how effective the organization is in people and team coordination and how each staff member participates and compromises with one another in achieving operational goals.

Organizations with a strong culture foster and encourage employees to work with collaborative efforts. This means that teams, rather than individuals, organize and carry out all work activities in the institution. Employees in the organization work together to solve problems and achieve the organization's objectives. As a result, teamwork is critical to achieving the best organizational performance. In healthcare, hospital administration promotes an extrinsic-intrinsic culture of employee engagement and shares new knowledge across the organization for continuous learning [3], [32], [34].

Customer orientation is a crucial predictor of organizational effectiveness and is believed to be integral to the company's long-term success. This behavior concerns how well customers are served and assisted in meeting specific demands. Employees with this skill can recognize customer needs and determine the best way to satisfy them. Furthermore, this promotes a customer-focused

organizational culture in which customer satisfaction is at the core of the process of every employee [32]. This scale's items assess how well organizational activities are directed toward determining the demands and goals of clients or customers. It also determines how to open the unit to explore new methods for serving their customers and how they believe they can meet demands through their innovative ideas and involvement.

Organizational customer orientation is defined as meeting customers' preferences and taking their interests into account in order for them to be well-encouraged, supported, and rewarded. Its influence is concentrated on service quality and customer attitudes and behaviors. Some studies have found that customer orientation improves performance, while others have found that it does not always produce positive results. Furthermore, customer-oriented companies utilize the "customer is always right" policy, with client satisfaction as one of their major goals. However, this invariably places employees in an unfair and powerless position compared to the customers [52].

According to Maswani and Rina, solid and reliable cultures can foster brilliant individual performance, whereas weak and negative cultures demotivate employees and discourage them from reaching their full potential. When a company possesses a robust organizational culture and is accepted and respected by employees, this leads to good employee and organizational performance [3], [25], [32]. The items on this scale evaluate the effectiveness of the organization's culture in terms of how well people agree on values and back up their claims with facts. For example, staff would identify whether their strong belief in the shared values of teamwork would help solve everyday problems and issues and reach mutual objectives for the entire department.

Unfortunately, the organizational culture developed by Filipino nurses over the ages needs to be healthier to satisfy their growth, integrity, and broad scope of knowledge. As an administrator, examining those areas and investigating issues affecting the organization's staff is critical. This can serve as the foundation for them to create an evidence-based stress reduction program that will aid in developing competent employees [15].

### 2.4. Correlation between Variables

Job stress in healthcare has become a major organizational factor contributing to employees' intentions to quit. The stress-causing factors had significantly grown, especially during COVID-19, when medical professionals were tested with knowledge gaps, insufficient PPE, and other personal challenges. Working long hours was also implemented in some hospitals due to the risk of infection. Stress is expected to persist due to the addition of COVID-19 responsibilities to the health workers' usual challenges [56].

High-stress levels among nurses negatively impact their physical and mental health, resulting in poor performance, dissatisfaction with work, a high level of burnout, and an increased desire to leave the profession. On the other hand, nurses with high resilience levels can recover successfully even after stressful events without considering quitting. It gives them a positive impact to work well and be productive. Social support is one way to help ease the contribution of work stressors. Having people around who understands and sympathizes in the workplace can mitigate the effects of stressors, which prevents them from leaving their job. If the welfare of the health workers is ignored, this can build a negative impact on their behavior and perceptions, which increases work stress and intentions to quit [2], [5], [14], [21], [49].

Considering the existing stress, emotional exhaustion, and turnover issues, the COVID-19 pandemic has dramatically exacerbated the nurses' lived experiences. This increased their demand and workload in an extreme work environment, which added to their stress. Nursing managers and leaders should develop strategies to reduce the effects of job stress and improve predictors of employee retention. Participation in stress management strategies, for example, can positively impact employee productivity, reduce labor turnover, improve human relationships, reduce absenteeism, and promote physical and mental health [18], [32].

According to Kim and Jung [32], perceived stress management is linked with organizational cultures and employee knowledge and skills. The concept of job stress shows an interactive relationship between the individual and the individual's work environment, which can be associated with organizational culture. This leads to the conclusion that solid organizational culture may decrease employee work-related stress. Furthermore, organizational culture and situational factors have been found to influence nurses' job stress levels. Various health threats, such as strain, despair, and depression, have reached frontline nurses in dangerously high numbers, adversely affecting their task performance during the pandemic [49].

According to Sheridan (1992), an organizational culture that emphasizes the values of personal relations strongly influences employee retention. Churintr (2010) discovered that company culture significantly impacted employee retention. Early studies also found the affective dimension of work commitment adopted by nurses, which is a strong linkage in preventing them from leaving their respective workplaces [11], [37].

Ahmad (2012), on the other hand, discovered a substantial adverse connection between organizational culture and employee turnover intention. Unpredictable challenges arise due to organizational change, where employees must deal with new tasks and regularly communicate with groups from other departments. Because of this, employees may feel insecure about their careers due to role ambiguity, which could cause them to consider leaving the company rather than staying. As these organizations face the difficult challenge of reducing turnover, there is a strong need for hospital organizations to devise and execute employee retention strategies [11], [41].

Despite the lack of literature, empirical studies prove how organizational culture can effectively mediate the relationship between two variables. According to Srimulyani and Hernanto [62], organizational culture mediates the entire relationship between transformational leadership styles and effective corporate governance. According to Bija, Tunas, and Purwana [8], leadership style indirectly impacts employee engagement when mediated by work culture. Yuliastuti and Tandio [74] also stated that organizational culture mediates the relationship between charismatic leadership and good corporate governance.

The supporting literature above give importance to healthcare employees who are experiencing work stress and commit to staying in the workplace. When neglected, job stress can decrease the effectiveness and productivity of the remaining staff in an organization. Additionally, organizational culture aligns with the significant role of the administrators as they impart and influence cultural work values among employees to deliver quality healthcare services. While the upsurge of the novel coronavirus has significantly disrupted the global health industry, it mainly affects the workforce [26]. In the context of COVID-19, it is imperative to be aware of the determinants and relationship of these variables to restore the organizational foundation, improve the retention of healthcare employees and augment their effectiveness in a public healthcare institution.

## 3. Methods and Data Collection

This study used a non-experimental quantitative method with a descriptive correlation and mediation approach. A quantitative methodology entails conducting an empirical analysis of information gathered from a group of people in a specific population to develop a generalizable interpretation based on the measure of relationships for the general public. This focuses on the current condition emanating from an environment that provides an essential understanding of the origins of people and things [46].

The researcher used the descriptive correlation method to collect the necessary information for analysis and review. According to Bryant [10], this approach examines possible relationships among two closely related variables without experimental manipulation or assignments to research groups. This means that using this method allows the researcher to assess the relationship between two or more variables by describing the current characteristics of a specific population.

Moreover, the researcher used a mediation approach to identify how organizational culture significantly intervenes in the relationship between job stress and employee retention. This technique provides a high level of validity and reliability of results. This study assesses potential relationships, mediations, and variances among variables determined by the researcher's questionnaire.

### 3.1. Research Locale

The following measures were tailored to the context of the government healthcare workers at Davao Regional Medical Center, Tagum City. Figure 2 depicts a map of the Philippines highlighting Davao del Norte with an area of 3,426.97 square kilometers. This is bounded to the south by Davao City, east by Compostela Valley, north by Agusan del Sur, and west by Bukidnon. A map of Davao del Norte is also shown, emphasizing Tagum City, the region's provincial capital and the coastal component city in Southern Mindanao. This city is predominantly agricultural and is the center of the economic and administrative locality of Region XI. Further, Tagum is subdivided into 23 barangays with boundaries such as Asuncion, B.E. Dujali, Carmen, Maco, Mawab, and New Corella.

In particular, the study was conducted at Davao Regional Medical Center. This government hospital is located at Apokon, Tagum City. This tertiary government healthcare institution is widely known for serving mainly the population of Davao Province with an official 600-bed capacity. Since 2016, the institution transitioned and evolved exponentially with an improved medical facility, continually increasing bed capacity, and approved ISO accreditation. The problem emanated from the high influx of patients, making the standard nurse-patient ratio challenging. A total number of 31 resigned nurses was recorded from the year 2017, and it escalated quickly by the year 2018 with 43 resigned nurses and in 2019 with 51 resigned nurses, respectively.

### 3.2. Population and Sample

The nursing staff of Davao Regional Medical Center is the main participant in the study. The healthcare nurse population meeting the inclusion criteria determined a total sample size of 202 survey respondents. The Slovin formula with a stratified sampling technique was used to determine the appropriate size of randomly selected samples [4]. The researcher arrived at a large sample size of respondents close to the total population. As the number of nurses from each department in a total population size was counted and selected with a margin of error of 0.0025, this led to a total sample size of 202 respondents.

The researcher utilized a stratified sampling technique for the selection process. The total population was first divided into subgroups based on their similarities or unique group classification. Then from each group, the members were selected randomly, and they all had an equal chance of being selected. Using this technique gives better accuracy in results and ensures a fair and even selection of units across variations of groups, thereby reducing sampling bias [7]. In this study, 410 healthcare nurses were identified and classified according to their designated departments or wards.

The total population was based on the inclusion and exclusion criteria provided. The following criteria included were as follows: frontline nursing staff with a length of service reaching one year and above; can perform standard nursing services; and any gender role with ages ranging from 23 to 50 years old. These inclusion criteria depicted healthcare nurses' actual job performance, making them more susceptible to job stress or employee retention. On the other hand, the following criteria excluded were healthcare nurses assigned in the administrative department, nurses with a length of service of less than a year, and nurses aged 51 years old and above. These exclusion criteria showed the gap in their job performance, roles, and functions despite being affiliated with a nurse in this institution. Additionally, instances of the withdrawal requested by the selected participants are considered under the condition that the staff was temporarily augmented to another department and can go back to where he/ she is mainly assigned respectively.

### 3.3. Research Instrument

The study employed adapted questionnaires which were given to identified respondents. The three sets of questionnaires were modified to fulfill the study's objectives. They were completed using a structured Likert Scale with five levels of measurement: 1 (Strongly Disagree) to 5 (Strongly Agree) (Strongly Agree). The questionnaire for Job Stress is based on the 1998 Brief Job Stress Questionnaire (BJSQ) derived from Karasek's Demand/ Control/ Support Model cited by Wada et al. [67]. This questionnaire is a 58-item composed of multidimensional job stress viewpoints and is subdivided into four parts, particularly: work-related stressors, response to stress, environmental factors, and life and job satisfaction. However, in adapting this questionnaire, the indicator for work and life satisfaction was no longer included since it is composed of only two-item statements, which did not bear a strong influence during the validation of results per variable.

The second set was based on the instrument for Employee Retention, which was measured and adapted from Muhammad Rizwan [55] in Pakistan. The survey originally contained four latent variables subdivided: organizational commitment, job satisfaction, person-organization fit, and job stress. Using this questionnaire contributed to identifying the determinants of employees' intention to stay. However, in adapting this questionnaire, the indicator for job stress was excluded since this was already identified as an independent variable in this study.

The third and last instrument was adapted from the Organizational Culture Assessment Questionnaire (OCAQ) by Sashkin & Rosenbach [59]. This set was subdivided into five parts representing the crucial indicators of organizational culture. The information obtained from this questionnaire demonstrated the disparities between how things were and how they should be in the organization.

Before implementing the research instrument, pilot testing was done on selected nursing staff who were not included as participants. The reliability of the survey questionnaires for the pilot test was assessed using the Internal Consistency Method. This was the preferred approach since the test involved branched-scored items indicating whether the examinee passed or failed an item. The consolidated results from the expert's content validation were 4.23, described as Very Good. The computed Cronbach reliability of the instruments revealed: 0.859 for Job Stress, 0.821 for Employee Retention, and 0.883 for Organizational Culture.

### 3.4. Data Collection

Before the study, an approval form from the panel was obtained. The researcher used three validated questionnaires for job stress, employee retention, and organizational culture among healthcare workers in a public healthcare institution. Permission to perform the study was requested by the Davao Regional Medical Center Research Committee, where activities for the conduct were indented for the convenience of the institution. Once approved, the researcher began with the pilot testing to ensure the validity of the questionnaires, which the statistician carefully handled. After being accepted, the researcher began with the actual distribution process. The adviser then re-checked the filled questionnaires to ensure that the required amount had been met before being passed on to the statistician for analysis. The gathered data were analyzed using appropriate statistical tools and viewed during the results and discussion.

The distribution of questionnaires to the participants took three months to complete the 202 targeted sample size. The encoding process began after collecting all the questionnaires, which took another three months. Though there were hardships during the process of administering the survey, especially during the pandemic when face-to-face interaction was not allowed due to safety protocols, the researcher was still glad and blessed to experience such challenges in the pursuit and continuance of this research.

### 3.5. Statistical Tools

The data were analyzed using the statistical tools listed below:

#### 3.5.1. Mean

This is characterized as the total number of values multiplied by their weights. This tool was utilized to identify job stress, employee retention, and organizational culture in a public healthcare institution.

#### 3.5.2. Pearson Correlation Coefficient

This tool was used to determine any significant relationship between job stress and employee retention, job stress and organizational culture, and organizational culture and employee retention in a public healthcare institution.

#### 3.5.3. Sobel Test

This tool was designed to assess mediation and strengthen the outcomes. This tool determines whether organizational culture significantly mediated the relationship between job stress and employee retention.

## 4. Results and Discussion

### 4.1. Level of Job Stress in a Public Healthcare Institution

The data on job stress in a public healthcare institution is presented in Table 1. The standard deviation was less than 1.00, denoting that the responses were consistent. The overall standard deviation is 0.28, and the mean score is 3.96, with a High descriptive equivalent. This indicates that job stress is experienced by most healthcare workers in this institution.

Distinctively, the level of job stress on the corresponding indicators was as follows: job demand, with a mean of 4.51, described as very high; job control, with a mean of 3.79, described as high; and social support, with a mean of 3.57 characterized as high. The quantitative information gathered from the respondents of the study explains that healthcare workers experience very high to high levels of job stress in a public healthcare institution. A very high rating of job demand indicates that healthcare workers experience high stress, especially when they feel obligated to react to an occurrence but cannot meet the situation's demands. A high rating of job control signifies that healthcare workers experience stress at work due to poor handling of tasks. Not being able to control the work may result in delayed delivery and poor-quality healthcare services, which can be associated with malpractice and negligence. Further, healthcare workers also experience a high level of stress due to minimal support from supervisors, co-workers, colleagues, friends and family members.

The high level of job stress was due to the very high marks of the research participants in terms of job demand and high ratings in terms of job control and social support. Healthcare workers face high-stress situations that can be mentally and physically tiring. Nurses, in particular, have been experiencing a high amount of stress relating to heavy workloads, shift work and lack of manpower.

**Table 1. Level of job stress**

| Indicator | SD | Mean | Descriptive Level |
|---|---|---|---|
| Job Demand | 0.17 | 4.51 | Very High |
| Job Control | 0.46 | 3.79 | High |
| Social Support | 0.57 | 3.57 | High |
| **Overall** | **0.28** | **3.96** | **High** |

According to previous research, job stress occurs when job demands exceed the employee's resources and abilities to complete the task. Employees' health and well-being are significantly affected as a consequence of the high level of stress. If not controlled, they may continually experience exhaustion, decompensation and overfatigue [2], [9], [60].

When healthcare workers can fully demonstrate their abilities, they gain control of the job. This makes work more interesting and encourages them to do their best rather than engage in dysfunctional behaviors. Furthermore, having a high level of job control reduces workload and stress, which benefits their health. As personal skills are applied in solving complex situations, this results in a better understanding of discrepancies and more control towards work and activities [6], [16], [60].

Lastly, social support from supervisors has proven to have a good effect on reducing staff burnout, giving them a feeling of belongingness and motivation to work effectively. The more aid nurses receive, the better they can manage stress. Furthermore, increased support allows workers to adapt to challenging situations on both a personal and professional scale. On the contrary, when they do not feel supported by their immediate supervisor, these feelings manifest in the opposite direction [16], [21], [63]. This occurs far too frequently in healthcare due to the fear of not getting the tasks right, despite the firm intention of promoting self-improvement and maintaining a reputation among nurses. Fear of transmitting diseases and infection, particularly during the COVID-19 pandemic, has caused them to separate from their families, making them feel isolated, vulnerable, and less confident and proud of themselves.

### 4.2. Level of Employee Retention in a Public Healthcare Institution

Shown in Table 2 is the level of employee retention in a public healthcare institution. Findings revealed an overall mean rating of 4.27 which has a descriptive level of Very High. This indicates that the level or employee retention among healthcare workers is mainly experienced in this institution.

Consequently, the results revealed a Very High for job satisfaction and person-organization fit, whereas High for organizational commitment. Person Organization Fit got the

highest mean score of 4.49, followed by Job Satisfaction with 4.25, respectively. This means that most healthcare workers are eager to work and feel happy doing the work. They think they are fit to do the job that allows them to finish and accomplish their tasks effectively. Further, healthcare workers feel that their values match well with the organizational values, which enables them to grow and be successful.

On the other hand, Organizational Commitment gained a mean score of 4.08. Healthcare workers are loyal and open to a long-term commitment to the institution. They are proud enough to stay, for they consider the institution as an excellent organization for work experience.

**Table 2. Level of employee retention**

| Indicator | SD | Mean | Descriptive Level |
|---|---|---|---|
| Organizational Commitment | 0.54 | 4.08 | High |
| Job Satisfaction | 0.80 | 4.25 | Very High |
| Person Organization Fit | 0.40 | 4.49 | Very High |
| **Overall** | **0.49** | **4.27** | **Very High** |

The very high level of employee turnover was based on the very high ratings of job satisfaction and person-organization fit and the high rating of organizational commitment. Job fulfillment is a key factor that significantly affects staff retention. It resonates from the worker's feelings, attitudes, and pleasant emotional states that positively contribute to achieving organizational goals. A very high level of job satisfaction implies the importance of a healthy emotional state and positive job experience among healthcare workers. There are expected lower turnover rates if these conditions persist [23], [29].

In contrast, a study by Yu et al. stated that work satisfaction among health workers was relatively high even before the COVID-19 pandemic. Nia et al. also stated that to improve job satisfaction, and nurses must be provided with adequate sleep and rest time. Other authors have argued for treatment programs to increase job satisfaction among staff members. Furthermore, research published by Halcomb et al. noted that COVID-19 had a significant effect on job security which compelled the majority of hired nurses to quit, taking over the idea of staying in their jobs [23], [24], [26].

On the other hand, a very high level of person-organization fit implied the importance of choosing adequate individuals to improve organizations' competitive edge. It relates to the suitability of personal values among health workers and their environmental conditions. This means that the majority of the health workers were placed in a working

environment that was presumed "fit" for them, as they felt confident in carrying out their duties at work [47], [72]. For example, nurses and nursing attendants assigned to the Pediatric Intensive Care Unit do their job effectively as they master the skills in performing IV insertions and Cardio-pulmonary resuscitations towards pediatric patients with impending arrest.

Lastly, the high level of organizational commitment has proven the willingness of healthcare workers to stay in the institution. It has been supported by Chen et al. [12] that as the relationship between healthcare workers and the organization goes strong, the commitment is high; in contrast, when the relationship becomes weak, the commitment is low. This proves that despite the high work intensity and occupational risks, healthcare workers have shown their full dedication to ensuring the continuous delivery of medical services.

### 4.3. Level of Organizational Culture in a Public Healthcare Institution

Presented in Table 3 is the level of organizational culture in a public healthcare institution. The standard deviation of less than 1.00 indicated that the responses were consistent. Results gained an overall mean of 4.40, characterized as Very High. This explains that healthcare workers practice organizational culture in a public health care institution.

As shown, the level of organizational culture revealed descriptive levels ranging from High to Very High. Indicators that showed a very high rating are: Achieving Goals, with a mean score of 4.39; Coordinated Teamwork, with a mean score of 4.51; Customer Orientation, with a mean score of 4.66; and Cultural Strength, with a mean score of 4.28. This signifies that healthcare workers view their organization with a long-term purpose and direction. They have a clear vision and mission to meet the clients' needs and expectations and have influential leaders setting shared values and realistic goals. They are also actively encouraged to collaborate with other departments to develop teamwork and skills. On the other hand, Managing Change has a mean score of 4.15, labeled as High. This indicates that healthcare workers perceive failure as a learning opportunity to improve as they cooperate with other departments to promote, manage or create change.

**Table 3. Level of Organizational Culture**

| Indicator | SD | Mean | Descriptive Level |
|---|---|---|---|
| Managing Change | 0.36 | 4.15 | High |
| Achieving Goals | 0.33 | 4.39 | Very High |
| Coordinated Teamwork | 0.31 | 4.51 | Very High |
| Customer Orientation | 0.26 | 4.66 | Very High |
| Cultural Strength | 0.35 | 4.28 | Very High |
| **Overall** | **0.24** | **4.40** | **Very High** |

The high level of organizational culture was based on the respondents' high ratings on achieving goals, coordinated teamwork, customer orientation, and cultural strength, and a high rating on managing change. This means that healthcare workers could grasp the organizational cultural characteristics and implications in the public healthcare institution.

Nurses, in particular, abide by the organizational goals as they are fully aware of their role in giving patients the utmost quality healthcare services. They value the importance of coordination and working together to achieve organizational goals. By serving their clients effectively, healthcare workers can meet the patients' needs and expectations. In addition, previous literature also supported the high influence of leaders and administrators in imparting strong and good values to their employees. Nurses should provide adequate and safe care to multicultural patients to prevent miscommunication and mistrust between the two parties [1], [15].

Kim and Jung [32] supported the high rating of managing change by stating that employees who acquire adaptability competency can adjust easily to transitions in the workplace. Employees can better cope with changes if the organization encourages organizational knowledge and proactive behavior. This shows how nurses possess the skills to handle several workloads and adapt to new policies as imposed in a public healthcare institution.

### 4.4. Correlation between Job Stress and Employee Retention

The test of the relationship between job stress and employee retention in a public healthcare institution is shown in Table 4.1. This was tested at the 0.05 significance level, as stated in the hypothesis. The overall r-value of 0.475 with a p-value of 0.000 indicates that the null hypothesis is rejected. This suggests a strong link between job stress and employee retention. This also implies that the job stress encountered by healthcare workers relates to their intention to remain in the institution.

Since the p-value is less than 0.05, results revealed that employee retention indicators are positively and negatively correlated with job stress. The overall r-value is 0.558 on job control, and 0.339 on social support, supporting the positive correlation. On the other hand, job demand has an overall r-value of -2.41 which shows a negative correlation. Therefore, data show the positive and negative association between the two variables. Furthermore, data show that all job stress indicators positively correlate with employee retention, with a p-value less than 0.05. The overall r-values are 0.388 for organizational commitment, 0.487 for job satisfaction, and 0.242 for person- organization fit. This demonstrates the two variables' positive relationship.

**Table 4.1. Relationship between job stress and employee retention**

| Job Stress | Employee Retention | | | |
|---|---|---|---|---|
| | Organizational Commitment | Job Satisfaction | Person Organization Fit | Overall |
| Job Demand | -.251[**] .000 | -.186[**] .008 | -.174[*] .013 | **-.241[**] .001** |
| Job Control | .459[**] .000 | .551[**] .000 | .324[**] .000 | **.558[**] .000** |
| Social Support | .292[**] .000 | .346[**] .000 | .156[*] .027 | **.339[**] .000** |
| **Overall** | **.388[**] .000** | **.487[**] .000** | **.242[**] .001** | **.475[**] .000** |

**Table 4.2. Relationship between job stress and organizational culture**

| Job Stress | Organizational Culture | | | | | |
|---|---|---|---|---|---|---|
| | Managing Change | Achieving Goals | Coordinated Teamwork | Customer Orientation | Cultural Strength | Overall |
| Job Demand | -.177[*] .012 | -.080 .255 | .029 .683 | -.068 .333 | .131 .063 | **-.045 .527** |
| Job Control | .445[**] .000 | .288[**] .000 | .187[**] .008 | .307[**] .000 | -.099 .159 | **.303[**] .000** |
| Social Support | .350[**] .000 | .269[**] .000 | .327[**] .000 | .152[*] .031 | .141[*] .046 | **.345[**] .000** |
| **Overall** | **.434[**] .000** | **.315[**] .000** | **.323[**] .000** | **.252[**] .000** | **.066 .354** | **.381[**] .000** |

The relationship between job stress and employee retention implied a direct correlation between the stress experienced by employees and their optimistic behavior to stay in the workplace. The findings are congruent with the proposition that work commitment results from employees' job satisfaction and work stress. Social support is another factor that encourages nurses to stay in the workplace. Having people who understand and sympathize in the workplace can mitigate high-stress levels and prevent them from leaving their job. In contrast, it was noted that ignoring the welfare of the health workers can build a negative impact on their behavior and perceptions, increasing the level of work stress and desire to leave their organization [5], [14], [49].

The increased workload among nurses imposed high-stress levels, greatly amplified during the COVID-19 pandemic. However, when provided with substantial support, they become aware of their emotions, allowing them to remain efficient and focused in handling stressful events [18], [23], [32].

### 4.5. Correlation between Job Stress and Organizational Culture

Table 4.2 displays the relationship between job stress and organizational culture. As stated in the hypothesis, the relationship was tested at the 0.05 significance level. The overall r-value of 0.381 with a p-value of 0.000 implies that the null hypothesis is rejected. This demonstrates a strong connection between work stress and organizational culture. This also signifies that the job stress experienced by healthcare workers is linked to the values and attitudes they develop in the workplace.

With a p-value of less than 0.05, results show that indicators of organizational culture are positively correlated with job stress except for job demand. The overall r- value is 0.303 on job control, and 0.345 on social support, proving the positive correlation. However, job demand has an overall r-value of -0.045 and a p-value of 0.527, which is beyond the significance level. This implies that organizational culture has no significant relationship with job stress in terms of job demand. The amount and workload level are independent of the values and culture developed by healthcare workers.

**Table 4.3. Relationship between organizational culture and employee retention**

| Organizational Culture | Employee Retention | | | |
|---|---|---|---|---|
| | Organizational Commitment | Job Satisfaction | Person Organization Fit | Overall |
| Managing Change | .523** .000 | .513** .000 | .400** .000 | **.582** .000** |
| Achieving Goals | .333** .000 | .285** .000 | .264** .000 | **.351** .000** |
| Coordinated Teamwork | .249** .000 | .271** .000 | .246** .000 | **.307** .000** |
| Customer Orientation | .413** .000 | .289** .000 | .454** .000 | **.435** .000** |
| Cultural Strength | .095 .180 | -.054 .447 | .139* .049 | **.045 .526** |
| Overall | **.437** .000** | **.354** .000** | **.403** .000** | **.465** .000** |

Likewise, with a p-value less than 0.05, data showed that indicators of job stress are positively correlated with organizational culture except for cultural strength. The overall r-value is as follows: 0.434 on managing change; 0.315 on achieving goals; 0.323 on coordinated teamwork; and 0.252 on customer orientation. It proves the positive association between the two variables. However, cultural strength has an overall r-value of 0.066 and a p-value of 0.354, which is beyond the significance level. This means that the organization's shared beliefs and principles do not affect the job stress experienced by healthcare workers.

The test revealed the significance between job stress and organizational culture. This implies that the concept of job stress reflects an interactive relationship between the individual and the work environment, which can be associated with organizational culture. The study's findings agree with those of the following authors (Daz-Fernández et al., 2013; Kang & Lee, 2021; Richard & Kang, 2018), who argued that stress reduction should be associated with employees' abilities and social determinants. This leads to the conclusion that organizations with an influential culture have a higher prevalence of work-related stress [32].

Furthermore, achieving customer satisfaction is an example of an organizational culture that contributes to the increasing demand for services while not increasing workplace stress. This happens when workers can manage the job appropriately and have control over given situations [32].

### 4.6. Correlation between Organizational Culture and Employee Retention

Table 4.3 exhibits the relationship between organizational culture and employee turnover, which was tested at the 0.05 significance level. The overall r-value of 0.465 with a p-value of 0.000 indicated that the null hypothesis was rejected. This shows a strong connection between organizational culture and employee retention. This also insinuates that the culture established by the organization is related to health providers' willingness to stay in the institution.

Consequently, since the p-value is less than 0.05, results show that indicators of employee retention are positively correlated with organizational culture except for cultural strength. The overall r-value is 0.582 on managing change; 0.351 on achieving goals; 0.307 on coordinated teamwork; and 0.435 on customer orientation. It proves the positive correlation between the two variables. However, cultural strength has an overall r-value of 0.045 and a p-value of 0.526 which is beyond the significance level. This implies that the employee's willingness to stay in the institution shows no significant bearing on healthcare workers' shared values and culture.

On the contrary, since the p-value is less than 0.05, the results show that all indicators of organizational culture are positively linked with employee retention. The overall r-values are 0.437 for organizational commitment, 0.354 for job satisfaction, and 0.403 for person-organization fit. As a result, the data reveals a positive relationship between the two variables. This means that the culture taught and developed by the organization significantly impacts healthcare workers' commitment to work in the institution for an extended period.

As cited in several studies, the test revealed a significant relationship between organizational culture and employee retention. Organizational culture is crucial for enhancing employee performance by defining goal achievement and

influencing interpersonal relationships among healthcare professionals. Organizations with strong cultures foster a positive work environment where employees acquire job efficiency and output while increasing their intention to stay. According to Sheridan (1992), an organizational culture that emphasizes the values of interpersonal relationships strongly influences employee retention. Churintr (2010) concluded a significant impact between organizational culture and employee retention. Early studies also found that the dimension of work commitment adapted by nurses serves as a strong linkage in preventing them from leaving their respective workplaces [11], [36], [32].

On the other hand, existing theoretical studies by Ahmad (2012), Choi et al. (2014), and Jacobs and Roodt (2011) discovered a significant adverse connection between organizational culture and turnover intention. This only means that organizations need to think of ways for employees to feel connected and stay in the company [11], [29], [23].

### 4.7. Mediation Analysis

The regression analysis on the mediating effect of organizational culture on the relationship between job stress and employee retention is shown in Table 5.1. Successfully, the following conditions of mediation cited by Preacher and Hayes (2020) appeared in the actual results of this study. Results revealed that Job Stress has an estimate of 0.815 and a p-value of 0.000 when regressed with Employee Turnover. This means that in every level of increase in Job Stress, there is a corresponding 0.815 increase in employee retention among healthcare workers. Hence, job stress (IV) has significantly impacted employee retention (DV) without the influence of the mediating variable.

As a matter of triangulation, the value of mediation analysis is supported with the medgraph and using the Sobel test. It was noted in the final step that the relationship

between the independent and dependent variables will no longer be relevant once they are controlled by the mediator (MacKinnon, Fairchild & Fritz, 2007). In other words, full mediation occurs when the IV's effect on the DV becomes non-significant, and the mediating variable directly affects all of the variables. Meanwhile, partial mediation can be achieved if the regression coefficient is considerably decreased while remaining significant. This means that while the MV mediates some indicators found under IV, other parts are mediated by variables not part of the framework.
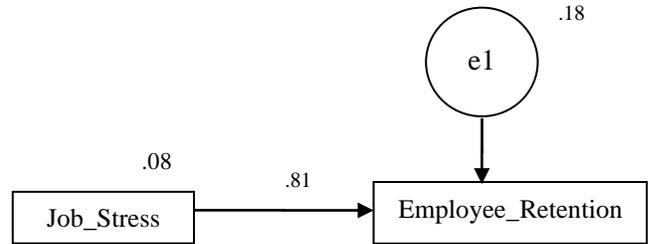


**Fig. 3 Direct Impact of Job Stress Towards Employee Retention**

The first regression in Table 5.2 shows that the independent variable (job stress) affects the mediator (organizational culture) with a beta coefficient of 0.315 and a p-value of 0. Second, at a beta coefficient of 0.597, the independent variable (job stress) affects the dependent variable (employee retention) with a p-value equal to 0, proving the relationship is significant. Consequently, employee retention has fallen back on job stress and organizational culture. The 95% confidence interval confirms that significant mediation did occur. It yielded a standard error (S.E.) of 0.054 on the job stress to organizational culture, 0.108 on job stress to employee retention, and 0.131 on organizational culture to employee retention. This justifies that the smaller the standard error, the more concise the coefficient estimate is.

**Table 5.1. Regression analysis on the direct impact of job stress towards employee retention**

| | | | Estimate | S.E. | C.R. | P | Label |
|---|---|---|---|---|---|---|---|
| Employee Retention | ←- | Job Stress | .815 | .107 | 7.647 | *** | |

**Table 5.2. Path analysis diagram**

| | | | Estimate | S.E. | C.R. | P | Label |
|---|---|---|---|---|---|---|---|
| Organizational Culture | <--- | Job_Stress | .315 | .054 | 5.842 | *** | |
| Employee Retention | <--- | Job_Stress | .597 | .108 | 5.531 | *** | |
| Employee Retention | <--- | Organizational Culture | .690 | .131 | 5.286 | *** | |

The researcher demonstrated that mediation of organizational culture is significant and that partial mediation exists using Kenny, Keshy, and Blogger's approach. The association between job stress and employee retention is significantly reduced from 0.815 to 0.597 due to the mediation of the organizational culture. Although the coefficient of job stress has been reduced in the subsequent regression, it is still deemed significant, as evidenced by the p-value of 0. As a result, the null hypothesis is rejected, signifying that organizational culture partially mediates the relationship between job stress and employee retention in a public healthcare institution.



**Fig. 4 Path Diagram Showing the Direct Impact of Job Stress toward Employee Retention**
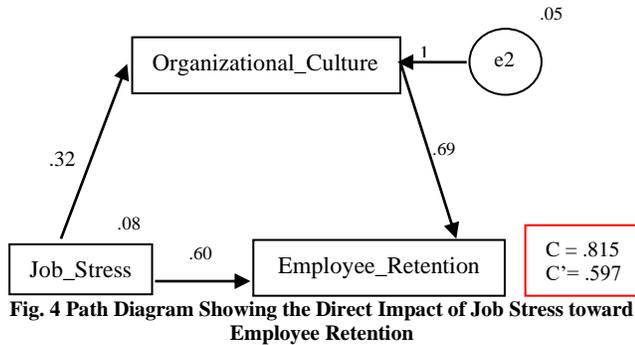
Although there have been several studies on the variables and their relationships, no studies that relate the three variables simultaneously have been found, making this study relevant. Direct positive effects were demonstrated that greatly assist the existing research [8], [62], [74] on organizational culture as a mediating variable.

Although organizational culture has limited influence, there is no doubt that there is partial mediation due to its significance. This provides clear support from the theory anchored by Professor Denison, where the key traits were independently reflected in the indicators and results of the study [17]. The questionnaires also proved to have a significant bearing on the mediator of the relationship between variables.

The mediation analysis determined the correlation between organizational culture and job stress, as well as organizational culture and employee retention. The analysis results have several implications for understanding healthcare workers' emotional responses to job stress and intentions to stay during the COVID-19 pandemic. Previous studies have discussed the value of recognizing job stress experienced by nurses, which are closely associated with organizational outcomes and workplace setting. On the other hand, employee retention has emerged as a critical component of organizational success. Since the health sector continually faces the problem of workforce shifting, retention has become a recurring endeavor to keep its competent manpower. Especially during COVID-19, it was pivotal for health workers to stay with their current jobs. These uncertainties have forced organizations to respond and ensure their safety and well-being [14], [22], [23].

## 5. Conclusion

In this section, conclusions are reached based on the key findings. The results show that job stress is essential in investigating employee retention. This also applies to examining job stress and organizational culture, employee retention, and organizational culture. Participants demonstrate a high level of job stress, a very high level of employee retention, and a very high level of organizational culture. This indicates that there is a significant relationship between job stress and employee retention, job stress and organizational culture, as well as employee retention and organizational culture. Finally, it is concluded that organizational culture partially mediates the relationship between job stress and employee retention in a public healthcare institution.

Based on Denison's Framework of Organizational Culture, the Job Control- Demand Model, and the Person-Environment Fit theory, the findings described the indicators influencing job stress, employee retention, and organizational culture, thereby filling the void left by previous literatures and providing rationality on the causality of variables. Furthermore, the results have benefited health leaders and administrators in learning how to handle their employees during a pandemic. The researcher also declares that there is no conflict of interest regarding the publication of this paper.

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