



Association on Patient Safety, Work-Life Balance, and Job Retention Among Nurses Doing 12-Hour Shifts in the Selected Level 2 Private Hospital in Metro Manila

Carl Anthony U. Pastor, RN¹, Dr. Erwin M. Faller, RPh., MSPharm., PhD EL., MMPS., PhDPharm, FRIPharm²

Graduate School, St. Bernadette of Lourdes College, Quezon City, Manila, Philippines

ABSTRACT

Patient safety was of utmost importance, with robust safety cultures associated with a decrease in adverse occurrences. This descriptive-correlational quantitative study sought to investigate the relationships among 150 Registered Nurses who worked 12-hour shifts in Level 2 private hospital in Metro Manila through purposive sampling. Data was collected via self-administered structured questionnaires using a 4-point Likert scale, covering perceived patient safety, work-life balance, and job retention outcomes. The demographic profile revealed a predominantly young (21-30 years: 45.7%), female (71.5%), single (79.5%), and early-career (1-2 years' experience: 47.0%) workforce, primarily Staff Nurses (81.5%) in Critical Care (22.5%) and Emergency Nursing (18.5%). Nurses reported high levels of perceived patient safety (Composite Mean = 3.69, "Strongly Agree"), with strongest agreement on thorough shift handovers (WM = 3.72) but slightly lower confidence in having sufficient time/resources for patient engagement (WM = 3.61). Work-life balance was also perceived positively (Composite Mean = 3.88, "Strongly Agree"), particularly regarding time for hobbies (WM = 3.92), though stress over family scheduling received the lowest (WM = 3.83). For job retention, nurses felt positive overall (Composite Mean = 3.67, "Strongly Agree"), with coworker support (WM = 3.77) being the highest factor and compensation (WM = 3.54) the lowest. Correlation analysis showed all relationships among patient safety, work-life balance, and job retention were statistically significant ($p < .001$). The strongest correlation was between Patient Safety and Job Retention ($Rho = .503$), followed by Patient Safety and Work-life Balance ($Rho = .414$), and then Work-life Balance and Job Retention ($Rho = .337$). Regarding demographic influence, work-life balance had no significant correlation with any demographic variable. However, job retention was significantly related to designation ($p = .047$) and specialization ($p = .002$). This study provided compelling empirical evidence, particularly within the under-researched context of Philippine Level 2 private hospitals, demonstrating the significant interplay between patient safety, work-life balance, and job retention for nurses on 12-hour shifts. Its originality lied in bridging these critical organizational outcomes with specific demographic influences, revealing that while individual characteristics had varied impacts, professional roles and organizational support are paramount. The research confirmed that fostering a culture of safety, supporting leadership and specialization, and implementing universal work-life balance strategies were key for hospital administrators. This study offered actionable, evidence-based guidance for developing sustainable staffing models and human resource policies that prioritized both nurse well-being and patient safety, ultimately enhancing the overall quality and efficiency of healthcare delivery.

Keywords: Association On Patient Safety, Work-Life Balance, Job Retention, 12-Hour Shifts

BACKGROUND OF THE STUDY

Work-life balance meant maintaining the well-being of healthcare workers (Putri et al., 2023). It has been established through research that lack of work-life balance creates rising levels of stress and burnout with detrimental effects on the mental well-being of HCWs as well as the quality of care delivered (Putri et al., 2023). Maintaining work-life balance would be a paramount in ensuring job retention, which precisely the stable and skilled healthcare workforce retained in their job (Lindquist, 2023). Aligned with this was the Patient safety in all aspect of healthcare that can improve patient outcomes, such as reduced surgical site infections, falls, and medication errors (Murray et al., 2024).

Yet, a continued staff turnovers intruded on the delivery of care to patients and exert a severe financial strain on health operations, including the high costs of employing new staff from recruitment to onboarding (Wilson, 2025). Frequent turnover hindered productivity and decreases employee job satisfaction, further affecting the delivery of quality patient care (Lindquist, 2023). And so, healthcare organizations then have to value retention efforts so as to conserve operational effectiveness while delivering consistent quality care (Wilson, 2025).

Since before, nurses worked 8-, 10-, or 12-hour shifts depending on their employers (Incredible Health, 2024). Most private practices required nursing staff to work 8 hours, while rehabilitation facilities may range between 8- and 10-hour shifts (Incredible Health, 2024).

Evidently, a research study in Indonesia during the COVID-19 pandemic identified the high level of stress among primary healthcare workers as a result of work-life imbalance (Putri et al., 2023). Likewise, in Uganda, flexible work schedules and social support systems were identified to enhance perceived work-life balance among health workers (Obina et al., 2024).

Moreover, nursing agency shifts and nursing shifts in hospitals were the most likely to run in 12-hour intervals (Incredible Health, 2024). Acute-care nurses can expect to work 12-hour shifts due to the level of care they provide patients and the urgency at which it was required (Incredible Health, 2024). Registered nurses were also on the shortlist for working extended shifts (Incredible Health, 2024). One of the most common 12-hour shifts was the 4 on 3 off schedule (Incredible Health, 2024).

Philippines had faced challenges in terms of job retention, as various healthcare professionals work abroad with an improved work environment and salary scale (Poku et al., 2025). The Philippine Labor Code, specifically under Presidential Decree No. 442, sets the legal groundwork for employment relationships, including the regulation of working hours (Respicio, 2024). The law defines the standard hours of work, allowable modifications, and the rights of employees related to work schedules (Respicio, 2024). Whereas Article 83 of the Labor Code stipulates that the normal working hours of an employee shall not exceed eight hours a day (Respicio, 2024). Exceptions to this rule, including flexible work arrangements, are subject to regulation by the Department of Labor and Employment (DOLE) (Respicio, 2024). Additionally, patient safety improvement efforts had been in progress, with actions like the National Patient Safety Goals by the Department of Health (Committed to Safety: Ten Case Studies on Reducing Harm to Patients., 2012). Globally, the Institute for Healthcare Improvement (IHI) and the Agency for Healthcare Research and Quality (AHRQ) had underscored the need for a robust safety culture in the Philippines.

To battle these gaps mention, there were strategies to improve job retention in the following manners, just like onboarding programs, mentorship, and a healthy culture (De Vries et al., 2023). Thus, the researcher initiated this study highlighting variables associated among Filipino Nurses doing 12-hour shifts in a selected Level 2 private hospital in Metro Manila and gather information that could be used in the future to develop policies and practices aimed at improving patient safety, work-life balance, and job retention, and to explore the associations between healthcare nurses' work-life balance, patient safety indicators, and their job retention, acknowledging the crucial position of the nurses that provided quality care.

METHODS

Research Design

This study used a quantitative descriptive-correlational research design. The purpose of using this design was to describe the level of patient safety, work-life balance, and job retention among nurses working 12-hour shifts and to determine whether there was a statistically significant relationship among these variables and the nurses' demographic profiles. The descriptive component aimed to assess the current status of the variables, while the correlational component examined possible associations among them.

Important Characteristics of the Study Design

The data were collected from a sample of twelve-hour shift nurses. This approach allowed the study of the state of the variables of interest at a given moment in time devoid of longitudinal follow-up. Along with their safety perception, work-life balance impression, and employee retention view in this study, descriptive statistics on the demographic profile of the respondents were given. This projected the scenario's general impression. Structured questionnaires allowed one to compile quantitative information on variables of interest. This let statistical processing found correlations and trends among the variables. With consideration for demographic elements, the study looked at the interrelationships among perceived patient safety, job retention, and work-life balance. This helped in the management practices and personnel policies to be informed by the discovery of possible connections. With a cross-sectional descriptive approach, the study aimed to provide important new perspectives on the consequences of 12-hour shifts on nurses' working conditions and patient care results, therefore enabling a more stable and efficient nursing workforce.

The Sample and Sampling of Data

For this quantitative descriptive-correlational study, purposive sampling was utilized to ensure that the sample consisted of nurses who were most relevant to the research objectives. The study was conducted in a designated Level 2 private hospital in Metro Manila, targeting 150 registered nurses who were currently and regularly working 12-hour shifts. The purposive aspect of the sampling design ensured that only nurses

meeting specific inclusion criteria, such as working in various hospital departments (not limited to medical-surgical units, intensive care units, and emergency departments) and having active, regular shift schedules were recruited for participation.

To further enhance representativeness within this purposively selected group, stratified random sampling was implemented. The nursing population was stratified according to years of experience (e.g., 0-1 year, 2-5 years, 6-10 years, 11+ years) and their respective departments. Proportionate allocation was used to determine the number of participants from each stratum, ensuring adequate representation of the diverse nursing workforce within the hospital.

Self-administered questionnaires were used to gather data. These were given to a small group of nurses during their off-duty hours to avoid interfering with patient care. Everyone who took part did it so freely and confidentially, and they all had to give their informed consent before any data was collected. This study used a combination of purposive sampling and stratified random sampling to give a full and accurate picture of the target nursing population. This method made it easier to thoroughly examine how patient safety, nurse job retention, and work-life balance were connected for nurses working 12-hour shifts in the research context.

RESULTS AND DISCUSSION

Table 1. Age of the respondents.

Age	Frequency	Percentage
21-30	69	45.7
31-40	65	43.0
41-50	13	8.6
51-60	4	2.6
Total	151	100.0

Table 1 presented the age distribution of the respondents, indicating the frequency and percentage of each age group. Most of the people who answered (45.7%) were between the ages of 21 and 30. The next most prevalent age group was 31 to 40 (43.0%). Most of the people that worked on the project were young to middle-aged professionals who were presumably just starting out in their careers. Moreover, 8.6% of the people that answered were between 41 and 50 years old, while only 2.6% were between 51 and 60 years old. This distribution illustrated that as people get older, fewer of them work. This happened in a lot of places when the workforce got older. Cernada and Jacinto (2021) did a study that showed that older healthcare workers often had health problems and physical disabilities that made it impossible for them to work long hours or in jobs that were very stressful. Villeneuve (2020) also noted that younger workers were more likely to take employment with long hours because they desired to get ahead in their careers and can handle physical stress better. These trends indicated how vital it was for hospital administration to hire personnel of all ages in a way that took their age into account.

Results revealed that companies should make regulations and procedures that include workers of all ages to aid both younger and older workers. Recent research showed that it was very vital to adjust the job requirements, training opportunities, and support systems at work to better fit the demands of a workforce that comprised people from diverse generations. According to Schullery and Iyer (2021), organizations that offered flexible hours, wellness programs, and specialized training programs had employees who were more engaged and loyal, both when they first start working there and later on. Yeves et al. (2021) also found that strategies that worked for people of all ages, like mentoring, matching skills, and giving psychological support, make people happier and more productive at work. By employing inclusive strategies, healthcare firms may find strong, dedicated workers.

Table 2. Sex of the respondents

Sex	Frequency	Percentage
Male	43	28.5
Female	108	71.5
Total	151	100.0

In Table 2, the number and percentage of male and female respondents were shown. The table also showed how the respondents were split between male and female. Only 28.5% of those who answered were men, while 71.5% of those who responded were women. This showed that most of the people working on the study were women. One reason for this might be that a lot of women work in fields like healthcare, education, and social services (McMullen et al., 2020).

Most of the people who answered were women, which was in line with earlier research that found that women held most of the jobs in caregiving and service-related fields. Most of the time, this was because of community norms and long-held gender stereotypes. According to Boniol et al. (2021), most nurses around the world were women. This was because of traditional gender roles and the idea that nursing is just another way to care for people. In their 2022 paper, Salazar and Neely also talked about how emotional work and relational care, two important parts of healthcare were seen as traits of women in society. This made it even more possible for women to work in the field. There were fewer men who answered, but the fact that they did shows that nursing has becoming more gender-balanced and that efforts to break down gender stereotypes and make the field more accepting were still going strong.

Companies might do better if they have rules that help both men and women employees, based on these findings. These rules would make sure that everyone had the same chances to get ahead in their job and have a good balance between work and life. Some new studies showed that there were gaps between men and women in terms of business advancement, pay, and job flexibility that needed to be fixed. Barry et al. (2021) said that companies that used fair HR practices and inclusive leadership made all of their workers happier, no matter what gender they were. Kalaitzi et al. (2021) also stated that mentorship programs, clear criteria for promotions, and flexible schedules can help fix gaps between men and women at work, especially in healthcare situations. Getting these kinds of programs going can help make the workplace friendlier and more useful for everyone.

Table 3. Civil Status of the respondents.

Civil Status	Frequency	Percentage
Single	120	79.5
Married	28	18.5
Widow	3	2.0
Total	151	100.0

Table 3 showed the marital status of the people who took the survey, indicating how many were single, married, or widowed and what proportion of the total they were. Most of the persons who answered were single (79.5%), next married (18.5%), and finally widowed (2.0%). This probably meant that a lot of the people who worked on the project were not married. This could impact how successfully people combine their professional and personal lives, how dedicated they were to their jobs, and how long they stayed at them.

Some studies demonstrated that those who were single had fewer family responsibilities, which gave them more time to work. This was really important in jobs where there was a lot of demand, like healthcare, where people typically had to work long hours and on schedules that were not always the same. Diomidous (2021) said that single healthcare workers were better at planning shifts because they did not have as much to do at home. Lee and Kim (2022) found that those who work alone may be more prone to feel worried and emotionally drained at work since, they did not have as much social support outside of work. This showed how important it was for companies to create health and wellness programs that were specific to the needs of each employee. In this manner, they were not fatigued, and they might keep their workers for a long time.

But married people typically had trouble balancing their work and family duties. Recent studies on work-family conflict suggested that married people were more likely to feel overwhelmed when they had to balance their work and home lives. This can make people angry and less able to do their jobs. Adisa et al. (2021) said that married professionals had a hard time integrating work and home life, especially in areas like healthcare where schedules were strict and emotional work was common. Yildirim and Eslen-Ziya (2020) also talked about how important it was for businesses to set policies that were good for families and help their workers took care of their dependents. They said that workers should be able to work flexible hours, to take time off to care for their children, and to get support with caring for their dependents. These tips can help people stay awake and find a better balance between work and life.

Only 2.0% of the people who answered were grieving, but this showed how important it was for people to have emotional and social support at work. Recent research showed that one of the best ways to keep people happy and productive, no matter what else was going on in their lives, to make their workplaces welcoming and healthy for their minds. Supported to this, Labrague & De Los Santos (2021) had mentioned that programs had helped people dealt with their feelings and got stronger, made them healthier and better at their jobs, especially for healthcare personnel who were dealing with personal or emotional problems. Osman and Nasrallah (2022) also emphasized that employees were more loyal and engaged when they worked for organizations that had cultures embracing and supporting people in different life situations, such as being a widow, a single parent, or a caretaker. Businesses can get their employees to be more involved, productive, and happy if they knew that each one has different needs.

Table 4. Years of experience of the respondents.

Years of Experience	Frequency	Percentage
1-2	71	47.0
3-4	36	23.8
5-10	19	12.6
11-15	25	16.6
Total	151	100.0

Table 4 indicated the number of years of experience each respondent and how many individuals there were according to how long they have worked. 47.0% of the responders had an experience of one year, and 23.8% had two to five years of experience. Fewer individuals had six to nine years (12.6%) and over ten years (16.6%) of experience. This spread indicated that the majority of the workers were new or in early stages of employment. This may influence how long individuals remained at their workplace, the type of training needed, and how well they adapted to the workplace.

Current studies indicated that new employees tend to struggle with adapting to their jobs, integrating into the workplace, and developing professionally. A large percentage of the individuals surveyed were only in their first or second year of employment, which means most of them were still learning new things and adjusting to the firm. Wong and Laschinger (2021) asserted that new nurses usually struggled to become familiar with their work and building relations with their colleagues, making them less self-assured and more probable to quit working. AlMekkawi and El-Sayed (2020) also emphasized that structured onboarding procedures and mentorship were highly significant in reducing the intention to leave a job and enhancing the performance of new healthcare professionals. Also, research on retaining employees indicated that inexperienced workers were more likely to seek other employment that

was better paid, provides greater opportunity, or allowed them to better balance their work and personal lives. Lee et al. (2022) recently discovered that new-career nurses were most likely to leave because their employers did not provide them with adequate support and did not live up to their expectations.

To repair this, hospital administrators must initiate career development initiatives, mentorship initiatives, and activities that may engage workers so new employees feel valued and motivated in the workplace. Conversely, three- to four-year responders (29.2% total) might be the ones who had been successfully adapted to the work demands and will tend to remain with the business. As stated by Shah et al. (2021), workers who had spent a reasonable length of time with a company were often happier with their work and more committed to the organization, provided they afforded opportunities to develop professionally and were valued. These findings emphasized the significance of long-term employee development plans that engaged and made them happy in the workplace.

Table 5. Designation of the respondents.

Designation	Frequency	Percentage
Staff Nurse	123	81.5
Senior Staff Nurse	15	9.9
Head Nurse	10	6.6
Nurse Supervisor	3	2.0
Total	151	100.0

The distribution of respondents by designations was presented in Table 5 and indicated the number and percentage of individuals in various nursing designations. The majority of the individuals who responded (81.5%) were Staff Nurses. Followed by Senior Staff Nurses (9.9%), Head Nurses (6.6%), and Nurse Supervisors (2.0%). This allocation suggested that the majority of individuals within the sample were frontline nurses, or nurses who were extremely valuable in caring for the patients and managing the hospital.

Recent studies supported the contention that the majority of nurses begin in entry positions and work their way up to such leadership positions as Senior Staff Nurse, Head Nurse, or Supervisor. The high proportion of Staff Nurses was in accordance with research which, indicated that nursing pyramids were comprised primarily of nurses in early to middle career, and relatively few nurses ascended to administration or leadership roles. Labrague et al. (2021) explained that structural limitations and insufficiently defined career progression routes mean that there were still inadequate leadership positions in nursing. Al Yahyaei et al. (2022) further emphasized that the ideal quantity of nurses to leaders was highly significant for quality supervision, mentoring, and staff growth. The low figures for Nurse Supervisors (2.0%) and Head Nurses (6.6%) could be due to the fact that they did not have much opportunities to advance their careers, which might make them less satisfied at work and less inclined to remain. A recent study by Al-Dossary (2021) indicated that nurse leaders were more committed to their organization, enjoy more autonomy, and have a better understanding of their role.

On the other hand, nurses at the staff level often feel more stressed because they had a lot of work to do and did not have many opportunities to move up in their careers. The majority of the respondents worked in staff-level positions; thus, healthcare organizations must prioritize investing in leadership development programs, formal mentorship, and transparent career advancement opportunities to retain skilled nursing professionals satisfied and employed.

Table 6. Specialization of the nurses.

Specialization	Frequency	Percentage
Outpatient Department	17	11.3
General Nursing	21	13.9
Oncology Nursing	0	0
Cardiovascular Nursing	14	9.3
Emergency Nursing	28	18.5
Critical Care Nursing	34	22.5
Surgical Nursing	18	11.9
Obstetrical Nursing	6	4.0
Pediatric Nursing	2	1.3
Others	11	7.3
Total	151	100.0

The distribution of nurse specializations was presented in Table 6, which highlighted the predominance of Critical Care Nursing (22.5%) and Emergency Nursing (18.5%), reflecting the increasing demand for healthcare professionals in high-acuity environments. These figures had matched what was occurring globally, illustrating how much the world needed specialized nurses within intensive and emergency areas, where patients required speed and complex treatment. Tang et al. (2021) indicated that the COVID-19 pandemic caused the world to rely increasingly on critical care and emergency nurses, demonstrating how much the world needed to train more individuals in these areas. General Nursing (13.9%) and Outpatient Department Nursing (11.3%) were also well-represented here. This confirmed Al Thobaity and Alshammari's (2021) findings that primary care services were highly crucial in the management of chronic diseases and to prevent them from occurring in the first place.

The statistics also indicated that there were hardly any Oncology Nurses (0%) and Pediatric Nurses (1.3%), which implied that there were not sufficient specialist nurses for cancer patients and children. Perhaps there were not sufficient oncology nurses because the schools that were involved might not have sufficient cancer-specific education and training. Yeh et al. (2022) conducted a recent review of the world that illustrates how necessary it was to enhance oncology nursing in order to cope with the increasing number of cancer cases worldwide. The absence of Pediatric Nursing also created concerns for the capability of the child healthcare profession to perform its function. Additionally, Al-Dossary et al. (2021) stated that an adequate number of pediatric nurses was extremely important in order to enhance outcomes during early childhood, to reduce the number of child deaths, and to ensure that vulnerable populations receive the developmental support they require. That there were numerous General and Outpatient Nurses means that first-line care services were extremely critical in preventing disease as well as in seeking individuals help at an early stage. As health systems become more focused on community-based and preventive care systems, generalist nurses played a more significant role in enhancing the population's health and reducing hospital admissions.

Al Thobaity and Alshammari, in 2021, pointed out that primary care nurses had proven highly helpful in the management of chronic diseases, in health education, and in coordination for preventive treatments, especially amid the COVID-19 pandemic. Still, it was also important to ensure adequate provision in other nursing specialties. A balanced nursing workforce led to improved quality and effectiveness overall in healthcare. Labrague and Ballard (2021) state that the incorrect combination of skills and inadequate personnel in high-acuity fields can be detrimental to patient outcomes as well as staff morale. To bridge the gaps that have been discovered, healthcare organizations ought to place professional development programs for underrepresented specialties such as oncology and pediatric nursing at the forefront of their agendas. In addition, providing Critical Care and Emergency Nurses with programs to manage stress and develop resilience enabled them to prevent burnout and remained on the job longer.

Recent findings by Zhang et al. (2022) highlighted the positive effects of resilience training and psychosocial supported on reducing emotional fatigue and turnover among high-risk nursing units. Investing in mentorship and interdisciplinary collaboration can also encourage nurses to explore specialized fields and enhanced workforce distribution in response to healthcare demands. Strengthening these areas contributed to a more adaptive and comprehensive nursing workforce, ultimately improving patient care and health outcomes.

Table 7. Patient safety

Patient Safety	Weighted Mean	Standard Deviation	Verbal Interpretation
"I am confident that I can administer medications safely and accurately during my 12-hour shifts"	3.69	.52	Strongly Agree
"I am able to consistently monitor patients effectively throughout my 12-hour shifts to ensure their safety"	3.70	.51	Strongly Agree
"I have sufficient time and resources to engage patients in their care, even during extended 12-hour shifts"	3.61	.56	Strongly Agree
"The handover process between shifts is thorough and ensures continuity of patient care".	3.72	.50	Strongly Agree
"The work environment is designed to support patient safety during my 12-hour shifts".	3.71	.57	Strongly Agree
Composite Mean	3.69	.43	Strongly Agree

(Numeric Lickert Scale: 4-Strongly Agree, 3-Agree, 2-Disagree, 1-Strongly Disagree)

Table 7 presented data on Patient Safety, highlighting the Weighted Mean and corresponding Verbal Interpretation of various statements related to patient care during 12-hour shifts. The results indicated that respondents generally had a strong level of confidence in their ability to ensure patient safety, as all statements received a "Strongly Agree" interpretation. The Composite Mean of 3.69 further supported this, suggesting an overall positive perception of patient safety practices in the workplace. These findings aligned with contemporary research showing that healthcare professionals' confidence in patient safety was closely linked to well-structured protocols and comprehensive staff training. For example, Gutierrez et al. (2023) found that nurses' high adherence to safety protocols ($M = 4.48$)—fostered through training and organizational support was associated with better detection and reporting of adverse events. Similarly, Smith et al. (2024) reported that management commitment to workplace safety, embedded in institutional systems and policies, had one of the strongest associations ($\beta = 0.95$) with a positive patient safety culture.

Among the statements, the highest Weighted Mean of 3.72 was recorded for the handover processed between shifts was thorough and ensures continuity of patient care. This confirmed that respondents highly valued the efficiency and effectiveness of shift handovers in maintaining patient safety. Recent studies supported this emphasis. Pun (2021) demonstrated that structured communication, especially via the Introduction, Situation, Background, Assessment, and Recommendation (ISBAR) protocol, significantly enhanced handover quality and patient safety during shift transitions. Similarly, Abo Seada et al. (2022) developed a 60-item standardized nursing handover tool ($\alpha = .905$) and found that its implementation in ICU settings notably reduced clinical risks and improved continuity of care.

On the other hand, the statement *"I have sufficient time and resources to engage patients in their care, even during extended 12-hour shifts"*, received the lowest Weighted Mean of 3.61. While still indicating overall agreement, it revealed a relative hesitancy compared to other safety-related aspects. This concern was well supported by contemporary evidence. Dall'Ora et al. (2020) found that nurses working longer shifts especially with limited control over scheduling and restricted breaks experience higher burnout, which diminished time and capacity to engage deeply with patients. Al Maqbali et al. (2023) also conducted systematic research that revealed that nurses with excessive hours, insufficient personnel, and lower autonomy provided less patient-centric care and experience more burnout. These findings indicated that for enabling effective patient interaction during 12-hour shifts, staffing ratios, scheduling flexibility, and resources should all be enhanced.

The findings indicated the significance of workload management and resource allocation to maintain high levels of patient safety. Research indicated that healthcare organizations need to implement strategies such as adjusting the nurse-to-patient ratio, enhancing scheduling, and providing nurses with appropriate tools to engage patients more and ensure they receive safe care (Griffiths et al., 2019). By addressing these issues, healthcare staff will be all the more capable of ensuring patients are safe, particularly when they had to work long shifts. Overall, the research demonstrates how vital it was that there were decent handover processes and sufficient resources in place for keeping patients safe.

Hospitals can improve patient care even further by improving rules of communication and providing sufficient time and resources to healthcare professionals. Future research may explore the long-term effects of longer shifts on patient safety and the well-being of healthcare workers. This would give the researcher more insight into managing healthcare workers in the best way

Table 8. Work-life balance

Work-life Balance	Weighted Mean	Standard Deviation	Verbal Interpretation
"The scheduling flexibility of 12-hour shifts allows me to more easily take longer vacations compared to when I worked shorter shifts."	3.89	.35	Strongly Agree
"The increased days off per month with 12-hour shifts allows me to schedule more personal appointments (e.g., doctor, errands) without taking additional time off."	3.89	.35	Strongly Agree
"Having extended schedules of rest days with 12-hour shifts alleviates my stress concerning the scheduling of personal commitments and family time."	3.83	.47	Strongly Agree
"I feel more rested and rejuvenated during my extended time off with 12-hour shifts, leading to a better overall work-life balance."	3.88	.36	Strongly Agree
"I am able to pursue hobbies and personal interests more effectively with the extended days off provided by 12-hour shifts."	3.92	.27	Strongly Agree
Composite Mean	3.88	.43	Strongly Agree

(Numeric Lickert Scale: 4-Strongly Agree, 3-Agree, 2-Disagree, 1-Strongly Disagree)

Table 8 presented the Weighted Mean, Work-life Balance, and Verbal Interpretation of the following statements about the impact of 12-hour shifts on personal time and health. The findings revealed that the majority of the individuals who responded to the question believe that 12-hour shifts were beneficial to them in the workplace and in life, as all the items received a "Strongly Agree" response. The Composite Mean rating of 3.88 supported this further, indicating that the majority of the individuals who responded believe that 12-hour shifts were useful and flexible. These findings were consistent with previous research that indicated that workers were able to balance their personal and working lives more effectively when they put in longer hours and fewer days per week (Griffiths et al., 2019). The most Weighted Mean comment of 3.92 was, *"I can spend more on my hobbies and personal interests with the additional free time 12-hour shifts provide me with."* This showed how much individuals appreciate having time free to spend on leisure activities they had love outside of work. Individuals had stated such things as, *"I can absent myself for 6 to 8 days per month, perhaps once or twice per month,"* to demonstrate that this is correct.

"I always feel better and have extra time to get things done that I love". Studies (Varghese et al., 2023) indicated that these types of schedules also led to more stress, burnout, and illness during shifts. So, while longer breaks obviously were healthy and happy-making, they must be accompanied by means for workers to manage fatigue and survive long shifts. The response *"Having long blocks of rest days with 12-hour shifts makes me less stressed about planning personal activities and family time"* scored the lowest Weighted Mean of 3.83. This outcome was less confident than in other work-life balance areas, but it remained *Strongly Agree*. Caruso et al. (2019) asserted that long rest days benefit workers, but some individuals were still struggling to balance long work hours with their other duties, particularly those with family commitments.

More so, this indicated that many of the respondents were still struggling to find an equilibrium between their work and personal lives, despite having longer breaks. The findings indicated the need for good scheduling cultures and workplaces that allowed individuals to make the best out of their 12-hour working day. Kampkötter et al. (2020) stated that their employers need to provide flexible work times, mental health programs, and family-friendly policies in order to enable employees to achieve even greater work-life balance. Employers made their employees healthier, less stressed, and happier by addressing the issues that arouse when individuals work extended hours.

Most of the research supported the notion that 12-hour shifts led to increasing independence and morale in regard to hobbies and other personal matters. It was challenging to completely restore work-life balance because it might be challenging to attend to family and personal obligations, even in a longer day off. Future studies can explore specific manners in which individuals in various professions may maintain a healthy balance between work and personal life. This would ensure that employees were able to spend their leisure time productively while remaining healthy and accomplishing work.

Table 9. Job retention

Job Retention	Weighted Mean	Std. Deviation	Verbal Interpretation
"I feel that the compensation I receive is fair considering the demands of my 12-hour shifts."	3.54	.66	Strongly Agree
"My supervisor provides adequate support and resources to help me manage the challenges of 12-hour shifts."	3.75	.45	Strongly Agree
"There is effective communication within my team, which helps me cope with the demands of 12-hour shifts."	3.70	.50	Strongly Agree
"My coworkers are supportive and collaborative, which makes working 12-hour shifts more manageable."	3.77	.45	Strongly Agree
"I receive adequate recognition and rewards for the extra effort required during my 12-hour shifts."	3.57	.60	Strongly Agree
Composite Mean	3.67	.43	Strongly Agree

(Lickert Scale: 4-Strongly Agree, 3-Agree, 2-Disagree, 1-Strongly Disagree)

The table showed information about Job Retention, like the Weighted Mean and Verbal Interpretation of certain statements about how happy workers are and how well they can handle 12-hour shifts. The results indicated that the majority of respondents who took the survey were satisfied with their working environments because all of them answered "Strongly Agree."

The Composite Mean of 3.67 indicates that employees believe that effective communication, teamwork, and support are necessary to maintain employment.

Later studies had supported such results. For instance, Al Sabei et al. (2020) explained that effective communication, teamwork, and managerial support were all necessary to prevent nurses from wanting to leave their jobs. Similarly, Labrague & De los Santos (2021) discovered that nurses who worked long hours in supportive and cooperative environments were more satisfied with their careers and less likely to leave them. These findings lend credence to the notion that maintaining positive relationships with colleagues and receiving support from the company were key to retaining health care workers on the job.

The highest Weighted Mean comment of 3.77 was *"My coworkers are team players and work together, which makes working 12-hour shifts bearable."* This informed that good working relationships with others and a pleasant working environment were most crucial in terms of job retention. Workers likely believe that having colleagues that were present for them made simpler to cope with the issues of working long hours. This made them more committed to their job. Bakker et al. (2020) discovered that being able to think that they belong and that they had close relationships with their colleagues can increase your motivation, leading to increased levels of workplace engagement as well as retaining staff. Conversely, the response *"I feel that the pay I receive is fair in light of the demands of my 12-hour shifts"* received the lowest Weighted Mean of 3.54. This still receives a "Strongly Agree" rating, but it indicated that cooperation and support at work were perceived as more essential to maintaining a job than compensation. This also implied was that the majority of employees were satisfied with their compensation, but that there could still exist room for improvement in how much they were compensated for what they did. Recent studies supported the notion that money was not the sole factor why individuals enjoyed working, but competitive and equitable pay remained an extremely critical factor in retaining nurses. As an example, Kim and Shin (2020) demonstrated that hospital nurses, who

believed their compensation was equitable were less likely to wish to switch jobs. AlMakhaita et al. (2020) also stated that although praise and favourable working conditions can keep individuals cheerful, equitable compensation was the most critical factor that ensured nurses were motivated and cheerful in high-demand professions. These findings indicated how crucial it was to create an employee-friendly workplace that promoted communication to retain workers. Current studies indicated that firms need to prioritize employee health by instituting systematic peer-support mechanisms, fostering psychological safety, and providing employees with opportunities to grow professionally. García-Sierra et al. (2021) stated that positive working environment and leaders were highly crucial to maintain the nurses, particularly when they needed to work long shifts such as 12 hours. Al Sabei et al. (2022) further stated that nurses were more joyful at work and did not leave more often if they have positive working relationships with others and can receive mental health services.

When employees feel valued, valued, and supported, they tended to remain committed to their job even when things were not so great in the workplace. Generally, the studies indicated that teamwork and support at work were very important to retaining a job, while compensation was somewhat less significant but still essential. Employees preferred working with others, but businesses need to consider reorganizing their pay scales in order to keep up and to ensure that they reflected the demands of the position. Future research might examine how working 12-hour shifts will impact retention as well as overall health in the long run. This would allow businesses to develop new plans for keeping their employees content and motivated.

Table 10. Relationship between patient safety, work-life balance, and job retention

Variables	Rho-value	p-value	Interpretation
Patient Safety vs Work-life Balance	.414	<.001	Significant
Patient Safety vs Job Retention	.503	<.001	Significant
Work-life Balance vs Job Retention	.337	<.001	Significant

The table showed a correlation study between Patient Safety, Work-life Balance, and Job Retention. It used Rho-values and p-values to show how important these connections were. All of the relationships had a p-value of less than .001, which meant that the variables were statistically significant. The Rho-values show how strong and in what direction these associations were, showing that all three elements were linked in how they affected outcomes at work. These results were in line with more recent research that showed how supportive work environments, manageable workloads, and enough staff can make nurses safer, help them balanced their work and personal lives better, and kept their jobs longer (Shin et al., 2022; Labrague et al., 2020).

The strongest link between the two was between Patient Safety and Job Retention (Rho = .503), which meant that improving patient safety was substantially linked to keeping your job. This backs up recent research that showed how a good safety culture made healthcare staff happier at work and less likely to leave. Al-Amer et al. (2021) said that nurses who felt safer at work were more confident in their jobs and less likely to quit. Kim and Park (2021) also said that a favorable safety climate kept employees by lowering emotional weariness and building trust in the firm. A safe workplace lowered stress, builds trust in the company, and makes people more committed to their jobs, which in turn lowers turnover rates.

The link between Patient Safety and Work-life Balance (Rho = .414) was also strong, which meant that places that put safety first made the work environment more balanced for their employees. Recent studies back up the assumption that nurses who work in a safe and well-organized atmosphere were less likely to burn out and to have a better work-life balance. For instance, Labrague & Ballad (2020) found that nurses who worked in places with strong patient safety cultures said they were less stressed and had a better work-life balance. Çelik and Taşdelen (2021) came to the same conclusion: hospitals that promoted safety and had enough staff, allowed nurses to do their jobs without putting their own health at risk, which made them happier at work overall.

Work-life balance and job retention had the smallest connection (Rho = .337), yet it was still important. This result was in lined with other studies that had showed work-life balance was an essential factor in job satisfaction. But it may not be the main reason people stayed at their jobs. Wei et al. (2022) discovered that while work-life balance was good for job satisfaction, things like organizational support and leadership were more important for keeping employees. In the same way, Shah et al. (2021) found that flexible work arrangements can improve employee well-being, but they need to be paired with good pay and teamwork to really lower turnover. Still, companies that let employees set their own hours and give them enough time off can greatly improve their well-being, which will help them stay with the company for a long time.

Overall, the results showed how important patient safety and work-life balance were for keeping a career. Recent research showed that making the workplace better, enforcing strong safety rules, and creating a friendly environment all make employees much more likely to stay on the job and be happy with it. For example, Al Sabei et al. (2022) said that psychological safety and supportive management methods make nurses stayed longer, especially during stressful times like the COVID-19 epidemic. García-Sierra et al. (2021) also discovered that regular schedules and empowered work environments assist nurses kept a healthy work-life balance, which made them more committed to the company. To keep a motivated and productive workforce, employers should focus on finding a balance between taking care of patients and making sure their employees are happy. Future studies may look into other elements, like support from leaders and institutional policies, to learn more about how they affected retention rates.

Table 11. Relationship between work-life balance and demographic profile of the respondents.

Work-life Balance vs	Rho-value	p-value	Interpretation
Age	.102	.212	Not Significant
Sex	.034	.680	Not Significant
Civil Status	.159	.051	Not Significant
Years of Experience	.086	.295	Not Significant
Designation	.103	.207	Not Significant
Specialization	-.031	.709	Not Significant

Although the p-value for civil status was near the cut point (.051), additional research should examine how it might influence work-life balance, as being married or having family obligations could alter what individuals perceive as balance. For example, Weldehawaryat et al. (2024) concluded that health workers with bigger families perceived less work-life balance. Khamisa et al. (2020) also identified family caregiving burden and number of dependents as robust predictors of increased work-family conflict, which subsequently diminished nurses' job satisfaction and perceived care quality. All these findings in combination indicate that even relatively minor statistical variations (such as $p = .051$) can conceal real-world differences pertaining to family role dynamics, which must be investigated further. Current studies that emphasize structural and organizational features as key factors impacting work-life balance validate that demographic factors lack statistically significant correlations with work-life balance. Alreshidi et al. (2022) and Nguyen et al. (2023) concluded that institutional support mechanisms, flexible working schedules, and managerial approaches exert greater influence on nurses' work-life balance compared to their age or marital status.

Although civil status almost reached a point of being important, its impact remains uncertain and can perhaps call for further study. That individuals across groups share similar perceptions regarding work-life balance indicates that shift duration and workload allocation, rather than individual demographics, determine satisfaction and balance (Santos et al., 2021).

Ultimately, what these findings are indicating is that demographic factors do not play a significant role in how nurses perceive their work-life balance when they work 12-hour shifts. Rather, organizational policies, support tools, scheduling systems, and coping resources exert a much greater influence (Zhang et al., 2023; Leknes et al., 2024). Therefore, rather than tailoring interventions according to demographic factors, efforts to enhance work-life balance ought to be directed towards making the workplace flexible, enhancing mental health, and modifying people's scheduling habits.

Table 12. Relationship between job retention and demographic profile of the respondents.

Job Retention vs	Rho-value	p-value	Interpretation
Age	-.011	.892	Not Significant
Sex	-.141	.084	Not Significant
Civil Status	-.003	.968	Not Significant
Years of Experience	.057	.486	Not Significant
Designation	.162	.047	Significant
Specialization	.249	.002	Significant

Table 12 indicated the impact of demographic profile of responders on job retention. The findings indicated that designation ($p = .047$) and specialty ($p = .002$) were the only two with statistically significant relationships to job retention. The implication here was that these two factors had a significant influence on whether nurses were likely to remain in their present jobs. Conversely, age, sex, marital status, and experience all shared poor connections to staying on the job, meaning they did not have a significant influence on whether nurses chose to remain in their positions.

Designation and specialty were the only factors that forecasted whether an individual would retain their place. Current studies indicated that nurses who had higher-ranking or specialized jobs were more likely to remain in their employment. This was due to them having more defined roles, more opportunities to progress in their careers, and more significant professional engagement. Heidari et al. (2021) stated that specialized nurses were happier in their workplaces because they could utilize their skills and enjoy more autonomy. In addition, designation was associated with access to recognition and leadership development, which were both critical for retention of employees (Gómez-Urquiza et al., 2020).

However, demographic factors such as experience and age did not significantly have an association with job retention. This confirmed evidence from recent employee studies of the labor force that retention is less of an issue of individual background and more of an issue of professional development, workplace culture, and recognition (Kim & Kim, 2021).

Specialization was a significant predictor of job retention ($p = .249$, $p = .002$), and this implied that nurses employed in specialized departments such as critical care or emergency nursing were more likely to remain in their job.

A lot of professional jobs required additional training and skill acquisition, which could make individuals happier in the workplace because they encountered occupational challenges and felt like they had achieved something. Bautista, Furtado, and Huntley (2024) established that nurses with specialist certificates, like Certified Critical Registered Nurse (CCRN) or Certified Post Anesthesia Nurse (CPAN), were 20% more active and had 15–25% higher retention compared to nurses without these certificates. Loft and Jensen (2020) demonstrated that nurses in specialty jobs also expressed high professional satisfaction and acknowledgment, which prompted them to remain. Conversely, demographic factors such as sex, age, experience, and marital status had little association with the retention of jobs. Rather, criteria tied to the organization and the profession, such as career advancement, leadership, institutional support, and work-life balance, proved to be more predictive of retention.

Kayhanfarahani et al. (2025) reported that 23% of the variation in nurse retention was due to transformational leadership and work-life balance, with positive leadership and recognition being highly critical. A UK review (Bradley et al., 2024) also reported that flexible scheduling, organizational support, and leadership engagement made a significant impact on healthcare workforce stability, but demographic factors made no impact. Therefore, to retain employees for longer periods of time, healthcare managers ought to emphasize policies that enhanced the work atmosphere, presented chances for professional development, and to enhance leadership abilities rather than policies that concentrate on demographic details.

CONCLUSIONS AND RECOMMENDATIONS

1. A youthful, early-career workforce dominates the study hospitals, with nurses clustered in entry-level roles and critical/emergency care areas. This workforce structure calls for robust training, mentorship, and support systems.
2. Patient safety is perceived positively, particularly due to effective shift handovers. However, time constraints during 12-hour shifts may hinder deeper patient engagement.
3. Work-life balance is rated favorably, primarily due to extended off-days. Still, family and personal obligations can strain this balance, especially among married and caregiving staff.
4. Supportive work environments and peer collaboration drive job retention more than compensation alone. Designation and specialization are strong predictors of retention, suggesting that professional identity and career growth are central to nurse satisfaction.
5. Demographics such as age, gender, and civil status have limited influence on work-life balance or job retention, reinforcing that organizational culture and role-based dynamics are the key drivers.

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