

Understanding Nurse Turnover Intentions: The Role of Perceived HRM, Leader-Member Exchange, and Presenteeism in Malaysia

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Abstract

This conceptual study seeks to establish a detailed framework that explores the relationships among perceived human resource management (PHRM), presenteeism, leader-member exchange (LMX), and employee turnover intention (ETI) in the context of Malaysia's healthcare sector. Drawing on Signalling Theory and Social Exchange Theory, the model suggests that supportive HR practices have a direct and indirect impact on nurses' behavioural intentions via presenteeism, while the quality of supervisor relationships (LMX) serves as a moderating factor in these effects. The framework highlights that strong LMX relationships can amplify the detrimental effects of PHRM on presenteeism while also mitigating the negative consequences of presenteeism on turnover intentions. This work, while theoretical, lays the groundwork for future empirical validation and presents important insights for healthcare practitioners and policymakers aiming to improve nurse retention and strengthen organisational resilience. This study enhances theoretical understanding by combining essential organisational and relational elements, while also providing practical insights for developing targeted strategies to promote sustainable workforce management in Malaysia.

Keywords: Turnover Intention, Leader-Member Exchange, Human Resource Management, Presenteeism

Introduction

The global health community is becoming aware of the critical need to solve the chronic nursing shortage, which poses a substantial danger to the stability and quality of healthcare systems globally. The International Council of Nurses (ICN, 2023) emphasises that long-term investment in a well-supported nursing workforce is critical for health-care systems to recover, rebuild, and thrive. The COVID-19 epidemic has exacerbated this problem, exposing the vulnerability of healthcare systems through worrisome statistics; 40% to 80% of nurses are experiencing psychological anguish, with over 20% considering leaving their profession, and hospital turnover rates top 10% (ICN, 2023).

Studying this issue is critical for establishing effective methods to increase nurse retention, protect healthcare quality, and assure system resilience. Well-supported nursing staff directly contribute to improved patient outcomes, safety, and organisational performance. Organisational and leadership strategies, particularly in human resource management, are critical in fostering a pleasant work environment that increases job satisfaction, decreases burnout, and reduces turnover.

Malaysia is facing similar issues, with forecasts of a nearly 60% nursing shortage by 2030 (Hospital Management Asia, 2024). Despite efforts to increase training capacity, provide scholarships, and recruit foreign-trained nurses, high workloads, burnout, and pandemic interruptions continue to undermine the health system's sustainability (MOH Malaysia, 2023). Understanding how organisational support, leadership quality, and presenteeism affect nurse retention can provide crucial insights for policy and practice improvements.

This article analyses these linkages in the Malaysian healthcare system, with the goal of providing useful insights into the organisational elements that enhance nurse retention. By focussing on these factors, the study contributes to the global urgency to invest in nursing as a foundation for strengthening, rebuilding, and assuring resilience in healthcare systems globally. Addressing these concerns benefits not only Malaysia, but also global efforts to maintain healthcare workforce stability and enhance patient outcomes.

Problem Statement

The nursing workforce in Malaysia is facing an extraordinary crisis that poses significant risks to the sustainability and quality of the healthcare system moving forward. In 2016, it was estimated that the country needed around 204,608 nurses to fulfil its healthcare requirements according to population demands as shown in Table 1.0. Current projections suggest that the demand for nurses is expected to rise by 32.07% over the next 14 years, ultimately reaching approximately 270,223 nurses by 2030. The increasing demand is further exacerbated by demographic changes, particularly an ageing population and the growing prevalence of Non-Communicable Diseases among older adults, which will impose additional strain on healthcare services (Ministry of Health Malaysia, 2021).

Table 1. 1

Nurse Requirement Projection Based on Need and Demand, 2016-2030 (MOH, 2021)

Year	Malaysia Population	Nurse Requirement (Need)		Nurse Requirement (Demand)	
		n	Density per 10,000 population	Density per 10,000 population	Density per 10,000 population
2016	30,875,400	204,608	66.3	199,391	64.6
2017	31,267,400	214,395	68.6	209,084	66.9
2018	31,659,700	223,034	70.4	217,659	68.7
2019	32,051,300	230,235	71.8	224,732	70.1
2020	32,441,200	235,880	72.7	230,277	71.0
2021	32,822,900	240,116	73.2	234,412	71.4
2022	33,200,600	243,986	73.5	238,178	71.7
2023	33,572,100	247,658	73.8	241,743	72.0

2024	33,936,900	251,195	74.0	245,173	72.2
2025	34,294,200	254,567	74.2	248,441	72.4
2026	34,644,700	257,874	74.4	261,644	75.5
2027	34,987,600	261,112	74.6	254,779	72.8
2028	35,322,700	264,257	74.8	257,825	73.0
2029	35,649,400	267,306	75.0	260,774	73.1
2030	35,965,700	270,223	75.1	263,594	73.3

Despite initiatives aimed at increasing recruitment, enhancing training capacities, and refining workforce planning, the availability of trained nurses remains insufficient. By 2021, Malaysia was facing a notable undersupply, with projections indicating that shortages could exceed 57% of the necessary workforce and around 61.9% in relation to population health requirements by 2030 as shown in Figure 1.1 and Table 1.2.

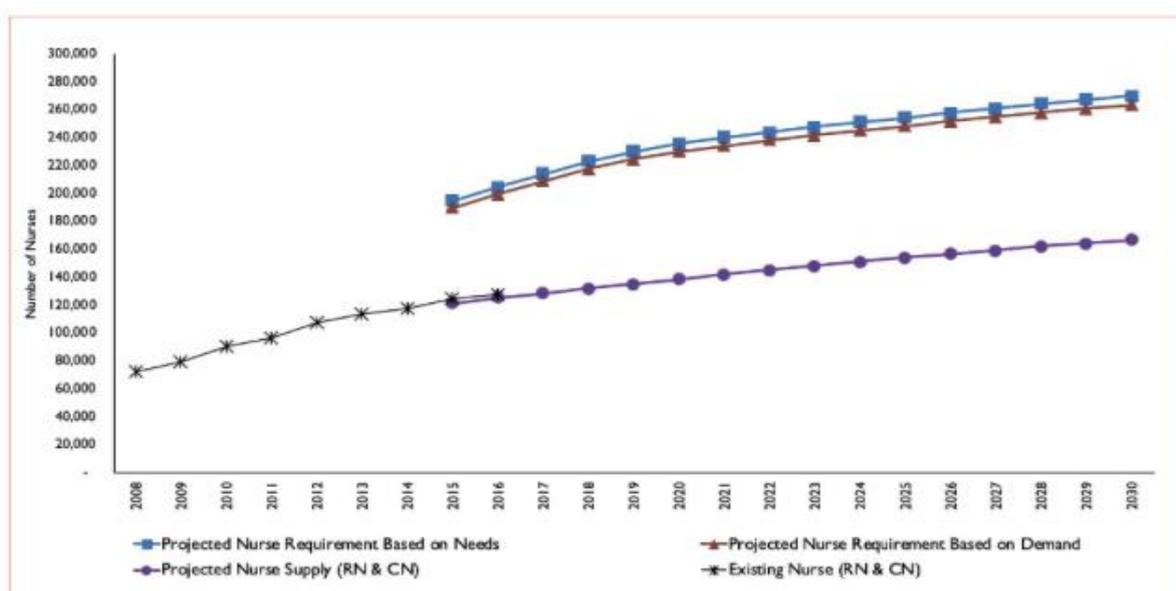


Figure 1. 1Projection of Nurse Supply and Nurse Requirement Based on Need and (MOH, 2021)

Table 1. 2

The Gap between Supply and Requirement of Nurse in Malaysia, 2016-2030 (MOH, 2021)

Year	Supply	Nurse Requirement (Need)		Nurse Requirement (Demand)	
		n	Gap (Supply-Need)	n	Gap (Supply-Demand)
2016	127,704	204,608	-76,904	199,391	-71,687
2017	128,701	214,395	-85,694	209,084	-80,383
2018	131,943	223,034	-91,091	217,659	-85,716
2019	135,377	230,235	-94,858	224,732	-89,355
2020	138,812	235,880	-97,068	230,277	-91,465
2021	142,091	240,116	-98,025	234,412	-92,321
2022	145,244	243,986	-98,742	237,178	-91,934
2023	148,303	247,658	-99,355	241,743	-93,440
2024	151,265	251,195	-99,930	245,173	-93,908
2025	154,126	254,567	-100,441	248,441	-94,315

2026	156,884	257,874	-100,990	251,644	-94,760
2027	159,536	261,112	-101,576	254,779	-95,243
2028	162,082	264,257	-102,175	257,825	-95,743
2029	164,519	267,306	-102,787	260,774	-96,255
2030	166,850	270,223	-103,373	263,594	-96,744

In comparison to Organization for Economic Co-operation and Development (OECD) nations, Malaysia's anticipated nurse density for 2030 is expected to reach merely around 50% of the OECD average from 2014, with countries such as Ireland and Denmark at the forefront of nurse staffing levels. This significant difference highlights the vast divide between supply and demand, emphasising Malaysia's urgent requirement for strategic workforce planning and focused intervention (MOH Malaysia, 2021). This concerning shortage is exacerbated by systemic issues, such as high-pressure work environments, prevalent presenteeism where nurses report to work even when unwell, and insufficient human resource management practices. The identified factors lead to heightened psychological distress, burnout, and elevated turnover intentions among nursing professionals (ICN, 2023; Sedrine et al., 2020). The elevated attrition rate poses a significant risk of worsening staffing shortages, compromising patient safety, and reducing the overall quality of healthcare services.

The way human resource management practices are perceived plays a vital role in organisational support, as they indicate nurses' views on how their organisation values, supports, and invests in their well-being and professional development. Effective HRM practices like equitable reward systems, adaptable policies, sufficient staffing, and training opportunities, indicate that the organisation values its employees. The understanding of these perceptions cultivates trust, boosts job satisfaction, and reinforces organisational commitment, all of which are crucial for minimising turnover intentions. Budur and Poturak (2021) emphasise that effective organisational support via HRM practices is crucial for fostering a positive work environment and ensuring nurse retention. Given Malaysia's anticipated nursing shortages and rising healthcare demands, enhancing organisational support through effective HR practices is essential for tackling workforce retention issues and maintaining the sustainability of quality healthcare services.

Research Gap

While there is a growing body of literature focusing on presenteeism and its effects on ETI, studies specifically addressing how perceived HRM practices and leadership styles interact in the context of nursing are limited. Many existing studies have examined HRM and leadership in isolation, failing to capture their combined effects on presenteeism and turnover intentions among nurses (Legood et al., 2020). Moreover, the moderating role of LMX quality, a critical relational dimension influencing employee commitment and well-being in this context has not been extensively explored, particularly in the Malaysian healthcare sector. Existing research has predominantly focused on Western healthcare settings, leaving a significant gap regarding how these dynamics play out in Asian contexts like Malaysia, where cultural and systemic differences may influence outcomes (Vujić et al., 2018).

Purpose and Scope of the Conceptual Paper

This conceptual paper aims to establish a thorough theoretical framework that clarifies the interconnections between PHRM, presenteeism, LMX, and ETI in the Malaysian healthcare sector. The main objective is to integrate current literature and theories, specifically Signalling Theory and Social Exchange Theory to develop a model that elucidates the impact of organisational support and relational dynamics on nurses' behaviours and intents.

This study is confined to conceptual development, establishing a basis for subsequent empirical research. The emphasis is on the Malaysian healthcare landscape, considering the distinctive cultural and systemic elements that shape nurses' attitudes and behaviours. This work aims to elucidate these links to address deficiencies in existing research, provide insights for healthcare management, policymakers, and organisational leaders, and inform future empirical validation efforts to improve nurse retention and organisational resilience in Malaysia.

Literature Review

This literature review examines the relationships between PHRM practices, LMX, presenteeism, and ETI in the healthcare sector, specifically focusing on the nursing profession. Each of these variables plays a critical role in influencing nurse retention, and understanding their interconnections is essential for addressing the ongoing nursing shortage, particularly in the Malaysian healthcare context.

Presenteeism

Presenteeism denotes the occurrence of employees reporting to work despite being unwell, and it is especially common in the nursing field due to organizational pressures, cultural expectations, and workload requirements. Studies demonstrate that presenteeism can result in considerable adverse effects for both nurses and patients. For instance, research indicates that presenteeism not only diminishes the health quality of nursing staff but can also lead to harmful patient outcomes, such as increased rates of medication errors and patient falls (Faraz et al., 2023; Wu et al., 2025).

A pivotal study by **Haque et al. (2019)** examined the correlation between Perceived Human Resource Management (HRM) practices and presenteeism, emphasizing that effective HRM practices can diminish turnover intentions by lowering presenteeism rates among nurses. When nurses view their organizations as supportive, reflecting favourable perceived HRM, they are less inclined to participate in presenteeism, consequently reducing their intentions to exit the profession (Wang et al., 2024). Similarly, **Li et al. (2023)** observed that presenteeism in high-stress settings like intensive care units often arises from insufficient staffing and performance pressure, which lead to detrimental health effects and increased turnover intentions (Budur & Poturak, 2021). These findings underscore the importance of addressing organizational stressors through supportive HRM and leadership initiatives to improve nurse retention and patient care quality.

The interplay between leadership quality and presenteeism is also critically important. The LMX theory highlights that strong, trusting relationships between leaders and nursing staff can significantly mitigate feelings of presenteeism. Specifically, **Shan et al. (2022)** found that healthcare environments characterized by high-quality LMX relationships foster greater

trust and support, which effectively reduce presenteeism and lower turnover intentions among nurses. Such supportive leadership plays a vital role in managing workload stressors and cultivating a work environment conducive to nurse well-being.

In conclusion, addressing presenteeism requires a multifaceted approach that includes supportive HRM practices, effective leadership through high-quality LMX, and the implementation of sound organizational policies. These elements are crucial for enhancing nurse well-being, reducing turnover rates, and maintaining high standards of patient care across healthcare systems, particularly in Malaysia and similar contexts. By prioritizing such frameworks, healthcare organizations can foster a more sustainable nursing workforce and improve organizational outcomes.

Employee Turnover Intention (ETI)

Employee Turnover Intention (ETI) is influenced by organisational and personal factors, including job satisfaction, work environment, and perceived support. It serves as a significant indicator of nurses' likelihood to voluntarily exit their roles. Research by Lyu et al. (2019) indicates that emotional exhaustion and job dissatisfaction significantly influence the intentions of nurses and other healthcare workers to leave their positions (Martono et al., 2020). Nurses who view their work environment as unsupportive or experience stressors like presenteeism are more likely to consider leaving their positions, which intensifies staffing shortages and further burdens healthcare systems (Faraz et al., 2023; Wu et al., 2025).

According to LMX Theory, robust and supportive relationships between nurses and their supervisors can effectively alleviate these negative impacts. Kim and Yi (2018) found that high-quality leader-member exchange (LMX) relationships improve job satisfaction and notably decrease turnover intentions, underscoring the significance of cultivating supportive workplace relationships. Recent research by Shan et al. (2022) and Pattali et al. (2024) demonstrates that positive leader-employee relationships serve as protective factors against organisational stressors, impacting nurses' retention decisions.

Gagnon et al. (2024) highlighted that transformational leadership, which fosters autonomy and motivation, is crucial in decreasing nurses' intention to leave. The findings indicate that engaged and motivated employees are less inclined to contemplate turnover. Gedik et al. (2023) emphasised the moderating role of perceived organisational support in the relationship between leadership styles and turnover intention, indicating that supportive management practices can substantially improve nurse engagement. Mozaffari et al. (2023) found significant correlations between workplace violence, emotional exhaustion, and heightened turnover intentions among nurses, highlighting the necessity of a supportive work environment to enhance retention.

In conclusion, promoting supportive supervisor-employee relationships and proactively addressing presenteeism are critical strategies for decreasing nurses' intentions to exit the profession. The implementation of positive leadership practices and the enhancement of organisational support structures can contribute to the development of a more resilient and stable nursing workforce within Malaysia's healthcare system. Enhancing job satisfaction and decreasing turnover will benefit nurses and improve patient care and health outcomes.

Perceived Human Resource Management (PHRM)

A significant factor influencing nurses' attitudes, behaviours, and decisions to remain in healthcare organisations is perceived human resource management (PHRM). Lee (2017) asserts that nurses' motivation, job satisfaction, and organisational commitment can be significantly improved when they view HRM practices as equitable, supportive, and aligned with their needs. The essential elements of effective PHRM encompass continuous training and development opportunities, equitable and competitive compensation structures, job security, efficient performance evaluation systems, manageable workloads, and clear pathways for career advancement or job expansion.

Studies demonstrate that nurses who have favourable views of HRM practices experience greater organisational support, thereby decreasing their intention to leave (Vujić et al., 2018). Proper training improves both competence and confidence, whereas job security reduces concerns regarding unemployment. Equitable remuneration, acknowledgement, and impartial performance evaluations promote a sense of fairness and affiliation within the organisation. Moreover, effectively managed workloads and avenues for professional development foster a supportive environment that encourages nurses to maintain their commitment. Zafar (2023) indicates that the implementation of advanced HRM strategies, particularly through the integration of emerging technologies and AI, can enhance perceptions of organisational support when executed effectively. The effectiveness of these innovations in promoting nurse retention is still inadequately examined, particularly in the context of Malaysian healthcare. Considering the substantial effect of equitable and supportive HRM practices on employee retention, it is essential to examine how these procedures affect nurse behaviours, including presenteeism and turnover. This investigation is vital for formulating targeted policies aimed at enhancing retention rates and mitigating staffing shortages.

In conclusion, favourable perceptions of fairness and support, grounded in equitable and supportive HRM practices, are essential for mitigating nurses' turnover intentions. Addressing this research gap through targeted studies in Malaysia is crucial for formulating effective policies, enhancing the nursing workforce, and improving healthcare outcomes.

Leader-Member Exchange (LMX)

The intention of nurses to leave their positions is significantly affected by leader-member exchange (LMX), an essential relational factor in healthcare organisations. High-quality leader-member exchange (LMX) relationships, defined by mutual support, open communication, trust, and recognition, contribute to nurses feeling valued, supported, and included. Positive relationships correlate with heightened engagement and job satisfaction, thereby decreasing the probability of nurses considering departure from the organisation (Mozaffari et al., 2023; Faraz et al., 2023). In contrast, low-quality leader-member exchange relationships may lead to feelings of neglect and alienation, thereby increasing the intention to leave. Recent studies indicate that robust leader-employee relationships enhance nurses' perceptions of organisational support, which is crucial for retention. Cardiff et al. (2023) emphasise that effective communication and supportive leadership at the frontline improve job satisfaction and retention (Wang et al., 2024). Gagnon et al. (2024) highlight that transformational leadership at various organisational levels enhances employee well-being and engagement, which in turn diminishes turnover intentions (Shan et al., 2022). A

systematic review conducted by Galanis et al. (2024) emphasises the significance of perceived organisational support, which is bolstered by high-quality leader-member exchange (LMX) and has a substantial effect on nurses' retention intentions.

In conclusion, fostering robust leader-member exchange relationships is crucial for sustaining nurse engagement and well-being, representing a strategic method for enhancing retention and stabilising the workforce in healthcare environments.

Interconnections Among Variables

The intentions of nurses to leave their positions are significantly affected by a complex framework that includes the interplay of presenteeism, perceived human resource management practices, and leadership styles. This research primarily examines organisational factors, including HRM practices and leadership styles, that influence employee retention and decrease turnover intentions. Addressing presenteeism and enhancing support via systemic policies and relational support are essential for sustaining a resilient nursing workforce (Alilyyani et al., 2022; Ning et al., 2023).

Recent studies, such as those by Xiong et al. (2025) and Zhang et al. (2024), emphasise the positive impact of proactive organisational strategies and stable work environments on nurse retention. Supportive leadership enhances organisational support, mitigating the negative impacts of job insecurity, as highlighted by Hwang et al. (2022). Additionally, strong leader-nurse relationships and perceived human resource management practices have been demonstrated to enhance engagement and reduce turnover intentions (Gagnon et al., 2024).

The interrelation of presenteeism, HRM practices, and leadership philosophies highlights the necessity for systemic and relational interventions. Formulating comprehensive strategies that emphasise nurse well-being, organisational support, and effective leadership is essential for enhancing retention and fortifying healthcare systems, particularly in Malaysia.

Theoretical Frameworks

This study examines the relationships between presenteeism, employee turnover intention (ETI), perceived HRM practices (PHRM), and the moderating influence of Leader-Member Exchange (LMX) using Signalling Theory and Social Exchange Theory (SET).

According to the signalling theory, leadership actions and organisational procedures convey to staff members information about the organization's expectations, resources, and support (Gelens et al., 2015). In this regard, positive signals that the organisation appreciates the professional development and well-being of its nurses are sent by supporting HRM practices. Nurses' job satisfaction and organisational commitment tend to rise when they believe these signals to be fair and supportive. This can therefore result in lower presenteeism and lower intents to leave (Flatau-Harrison et al., 2022). Negative or insufficient signals, on the other hand, might encourage sentiments of neglect and undervaluation, which can undermine motivation and raise the possibility that nurses will presenteeism or consider quitting their jobs (Guest et al., 2020).

According to social exchange theory (SET), interactions at work are characterised by reciprocal exchanges that impact employee attitudes and behaviours. A sense of organisational support and loyalty is fostered when nurses perceive high-quality relationships with their supervisors, which are characterised by trust, support, and recognition (Huang et al., 2021). Positive signals from HRM practices are amplified by high-quality LMX connections, which foster a positive work environment that lowers presenteeism and, in turn, lowers turnover intention. Low-quality LMX connections, on the other hand, might erode these signals, intensifying disengagement and raising the likelihood of leaving. Table 1.3 supports this conceptual model by summarising and contrasting the ways in which each theory influences the constructs and their functions within the framework. While SET highlights the significance of relationship quality (LMX) in bolstering these signals and affecting employee behaviours and attitudes, Signalling Theory describes how HRM practices work as organisational signals. The significance of relationship interactions and organisational signals in influencing nurses' perspectives and decisions to stay or leave is highlighted by this dual-theoretical approach used together.

In summary, the combination of Signalling Theory and SET emphasises how important organisational signals and reciprocal interactions are provided by good HR procedures and strong leader-employee connections, which in turn affect nurses' retention and behaviour.

Table 1.3
Theoretical Framework: Contrasting Signalling Theory and Social Exchange Theory in Shaping Nurse Outcomes

Theory	Construct/Concept	Explanation/Role
Signalling Theory	Perceived HRM (PHRM)	HRM practices send signals regarding organizational support; positive signals enhance commitment and reduce negative behaviours like presenteeism and turnover intentions.
	Presenteeism	When signals indicate support, employees are less likely to attend work while unwell; poor signals can increase presenteeism.
	Turnover Intention (ETI)	Supportive signals foster organizational commitment, thereby decreasing turnover intentions.
Social Exchange Theory (SET)	Leader-Member Exchange (LMX)	High-quality LMX reflects reciprocal support based on trust, which strengthens perceptions of organizational support. It buffers against negative behaviours and reduces turnover intentions.
	Presenteeism & ETI	Supportive, high-quality LMX relationships mitigate the negative effects of poor HRM signals, reducing presenteeism and turnover through trust and commitment.

Proposed Model

Based on these theories, the proposed model posits the following:

1. **Direct Influence of PHRM on ETI:** Positive perception of HRM practices directly influence employees' intentions to leave. Effective HRM is associated with greater job satisfaction and commitment, leading to lower turnover intentions.
2. **Mediating Role of Presenteeism:** Presenteeism mediates the relationship between PHRM and ETI, whereby positive perception of HRM practices may reduce presenteeism, thereby reducing turnover intentions.
3. **Moderating Role of LMX:** LMX moderates the relationship between PHRM and presenteeism. High-quality LMX relationships are expected to strengthen the negative effect of PHRM on presenteeism, amplifying the supportive signals from the organization and further reducing presenteeism levels.

The integration of Signalling Theory and Social Exchange Theory provides a solid theoretical framework for exploring how PHRM practices and leadership styles interact to influence turnover intentions among employees. The proposed model emphasizes the roles of presenteeism and LMX, highlighting the intricate dynamics at play in organizational contexts. Understanding these relationships is essential for developing effective strategies to enhance employee retention and support organizational resilience. Figure 2.0 presents a clear conceptual framework for comprehending the impact of PHRM on ETI. PHRM directly influences ETI, with presenteeism acting as a mediation factor. Substandard HR practices may elevate presenteeism, thus increasing turnover intentions. The paradigm also emphasises the moderating influence of LMX; high-quality LMX connections amplify the adverse effect of PHRM on presenteeism, thereby diminishing ETI further. This conceptual model highlights the significance of supportive HR practices and relational dynamics in promoting nurse retention and organisational stability.

Conceptual Framework

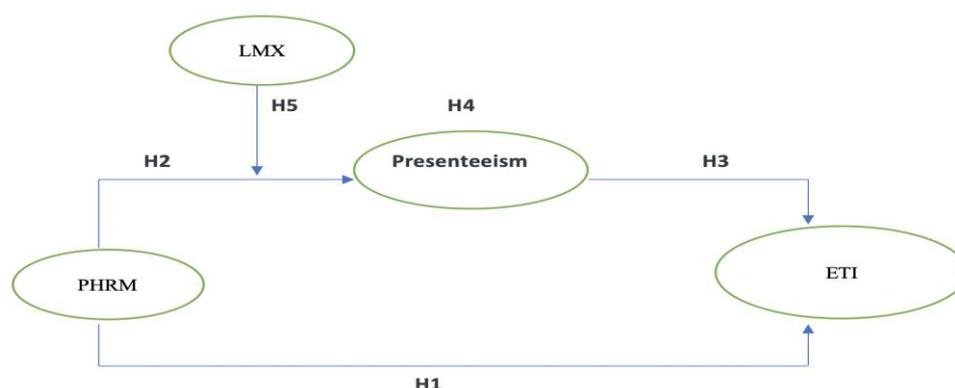


Figure 1.2 The Proposed Conceptual Framework

PHRM – Perceived Human Resource Management, LMX – Leader-Member Exchange, ETI – Employee Turnover Intentions

Theoretical Application and Alignment in the Framework

The application of Signalling Theory within this context elucidates how PHRM conveys organisational support, thereby affecting nurses' behaviours, particularly their propensity for presenteeism. Effective HR support can mitigate presenteeism and subsequently decrease

turnover intentions. SET offers a critical framework for analysing the effects of high-quality LMX relationships on the relationship between presenteeism and turnover intention. High-quality LMX relationships promote reciprocal trust, support, and mutual obligation, which may mitigate the adverse effects of presenteeism.

Nurses who perceive strong relational support from their leaders are more inclined to view presenteeism as a manageable or temporary concern, fostering a sense of commitment and support rather than feelings of alienation. SET posits that high LMX moderates the relationship between presenteeism and ETI, reducing the probability that presenteeism will result in heightened turnover intentions. This relational reciprocity reduces the negative effects of presenteeism on nurses' retention decisions, highlighting the significance of relational quality in nursing staff retention.

Research Questions

Several research questions have been formulated to explore the hypothesized relationships among perceived HRM, presenteeism, LMX and turnover intentions among nurses within the Malaysian healthcare sector. The primary questions outlined below is to guide this investigation:

RQ 1: What is the significant effect of PHRM practices on nurses' turnover intentions?

RQ 2: Does presenteeism mediate the relationship between PHRM and nurses' turnover intentions?

RQ 3: Does LMX moderate the relationship between PHRM and presenteeism?

RQ 4: Does LMX moderate the relationship between presenteeism and nurses' intentions to leave their positions?

Research Objectives

With the mediating roles of presenteeism and the moderating role of LMX, the aim of this research is to investigate the influence of PHRM on ETI. The following are the objectives of this research:

RO 1: To examine the significant effect of PHRM practices on ETI.

RO 2: To examine the mediating role of presenteeism in the relationship between PHRM and ETI.

RO 3: To examine the moderating role of LMX in the relationship between PHRM and presenteeism.

RO 4: To examine the moderating role of LMX in the relationship between presenteeism and ETI.

Hypotheses Development

Based on the theoretical principles of Signalling Theory and Social Exchange Theory, the subsequent hypotheses are put out to empirically investigate the links within the conceptual framework:

H1: PHRM is negatively associated with nurses' turnover intentions.

H2: PHRM is negatively associated with presenteeism.

H3: Presenteeism is positively associated with ETI.

H4: Presenteeism mediates the negative relationship between PHRM and ETI

H5: LMX moderates the negative relationship between PHRM and presenteeism.

Significance of the Study

This conceptual work is significant as it enhances scholarly understanding of the cumulative impact of perceived human resource management practices, leadership relationships, and presenteeism on nurses' turnover intentions, specifically within the Malaysian healthcare setting. This study integrates core theories, specifically Signalling Theory and Social Exchange Theory, to provide a complete framework elucidating the intricate relationships among organisational signals, relational dynamics, health behaviours, and retention results. This comprehensive viewpoint fills current research voids and establishes a foundation for future empirical verification.

This conceptual model functions as a beneficial framework for healthcare stakeholders, such as administrators, HR experts, and lawmakers. It underscores the need of organisational support and robust leader-follower interactions in mitigating presenteeism and nurse attrition. The framework proposes that specific interventions such as enhancing HRM policies and cultivating stronger leader-nurse relationships that may alleviate burnout and improve staff stability. This is essential for guaranteeing the sustainability of healthcare delivery systems, particularly in environments experiencing manpower shortages and heightened healthcare needs. This conceptual analysis seeks to guide future research and organisational measures for developing healthier, more resilient nursing settings.

Implication for Future Research

Being a conceptual and theoretical study, the primary aim is to integrate theories, empirical data, and existing literature to develop a comprehensive framework that clarifies the relationship between presenteeism, Leader-Member Exchange (LMX), employee turnover intention (ETI), and perceived human resource management (PHRM) in the Malaysian healthcare setting. This study offers a solid framework for further empirical verification.

Through survey-based data collecting from nurses working in Malaysian healthcare facilities, this paradigm will be empirically tested. Quantitative studies, including surveys and regression analyses, will be designed and implemented in future research to investigate the hypotheses and suggested links resulting from this framework. Model refinement, causal connection establishment, and evaluating the strength of these associations in practical contexts will all be aided by empirical validation.

Data Collection

Future empirical validation is expected for this conceptual investigation. Nurses from both the public and commercial sectors working in various hospitals in Malaysia will get standardised questionnaires as part of the data gathering procedure. Table 1.3, which is included in the appendix, provides a summary of the pertinent constructs and associated assessment items. A thorough grasp of the interactions between the variables in the Malaysian healthcare setting will be made possible by the data gathered from this approach, which will enable empirical testing of the framework.

Expected Contribution

This study is set to provide significant insights that will enhance both scholarly discourse and the effectiveness of healthcare management practices. This approach enhances comprehension by merging Signalling Theory and Social Exchange Theory in the realm of nurse retention, emphasising the interplay of organisational support, relational dynamics, and presenteeism in shaping turnover intentions. This work addresses current research deficiencies by introducing a thorough, empirically verifiable framework tailored to the Malaysian healthcare environment, which has been largely overlooked in existing literature.

The conceptual model provides essential insights for healthcare administrators, HR practitioners, and policymakers focused on enhancing nurse retention strategies. The framework highlights the importance of perceived HRM practices, relational quality through LMX, and presenteeism, guiding the creation of focused interventions such as enhancing leadership relationships and improving HR practices, that may help decrease nurses' turnover intentions. The study seeks to provide insights that will guide the development of evidence-based policies aimed at creating healthier and more supportive work environments. This, in turn, is expected to improve workforce stability, enhance the quality of care, and strengthen the overall resilience of Malaysia's healthcare system.

Conclusion

This study introduces a conceptual framework that emphasises the intricate relationships among organisational support, leadership, employee behaviours, and turnover intentions within the nursing sector in Malaysia. The forecasts of a significant nursing shortage, highlighted by global standards, stress the immediate need to tackle workforce capacity challenges. The framework brings together essential organisational and relational elements specifically, perceived HR practices, the quality of leader-member exchanges, and behaviours like presenteeism that affect nurses' choices to stay in or exit their positions. This work highlights the significance of strategic organisational interventions, effective leadership, and supportive workplace environments in promoting nurse retention and enhancing the resilience of healthcare systems through a detailed examination of these interactions. This initial conceptual model establishes a basis for future empirical studies and offers important insights for healthcare policymakers and practitioners focused on creating targeted strategies to address the looming workforce crisis and enhance healthcare outcomes. Ultimately, tackling these interconnected elements is crucial for developing a sustainable and efficient healthcare system capable of meeting future needs.

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