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The Impact of Perceived Threat of Pandemic Upon the Employee Retention in The Public and Private Hospitals

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Abstract: The study was conducted to evaluate the impact of perceived threat of COVID-19 upon the retention of doctors of twin cities" hospitals of Pakistan. Two moderator's compensation and training and development were assessed as moderating the relationship between perceived threat of COVID-19 and employee retention. The model is tested on healthcare sector of Pakistan and the data was collected by the doctors of twin cities of Pakistan. A sample of 208 doctors was collected using random sampling technique. Sem-PLS software was used to analyze the statistics. Perceived Threat of COVID-19 have a positive significant impact on employee's retention whereas compensation is negatively and significantly moderating the relationship between perceived threat of COVID-19 and employee retention. Training and development are insignificantly moderating the relationship between perceived threat of COVID-19 and employee retention. Training and development are insignificantly moderating the relationship between perceived threat of COVID-19 and employee retention. Between the both variables, such that weakening the relationship. Training and development were found to be ineffective as a moderator in the relation of perceived threat of COVID-19 and employee retention.

Keywords: employee retention,

INTRODUCTION

The world is facing a pandemic situation. Healthcare sector is quite crucial and critical in regards to this pandemic situation of COVID-19. Doctors and all other healthcare workers are the frontline warriors in this pandemic. With the spread of this virus employee retention in healthcare sector have become a difficult task as healthcare workers especially doctors are afraid of risking their lives. During intense wellbeing emergencies, medical care administrations are put under overabundance tension, making working life significantly more unpleasant than ordinary (Tam et al., 2004) leaving hospitals in more noteworthy trouble to hold and retain organizational members. In a pandemic, the quantity of patients requiring treatment increments fundamentally, setting strain on medical care assets and on work force is the same. Furthermore, specialists see a more serious danger to self-attributable to their openness to the patients who are most inadequately – including further stressing factor hospitals in holding them (Shiao et al., 2007, Chen and Li, 2010). Exacerbating this pressure is the lack of personal protective equipment (PPE) that can emerge during a pandemic. The apparent danger of disease is justified: a meta-investigation of the word related danger from the 2009 pig influenza pandemic (flu A (H1N1)) reports that the chances of medical services staff getting the infection were double those of correlation groups. This elevated danger for staff and attendants may be because of their more prominent openness to the respiratory discharges of patients.

A further stressor is the expanded danger of contamination for the groups of medical care experts on the front line. Data from the 2009 pig influenza pandemic shows that 20% of staff and attendants with manifestations announced indications in at any rate one of their family members. One path for bleeding edge specialists to relieve disease danger to their families is through social separating. Be that as it may, although the defensive advantages of social contact and backing now and again of stress are sufficiently not to retain medical care staff at their positions.

In Pakistan, the first case of COVID-19 was declared by the Ministry of Health, that is the community authority of Pakistan on 26th of February 2020, in Karachi, and at the same time one other case in Islamabad was confirmed by Pakistan Federal Ministry of Health (Ali, 2020). Within next 15 days, the number of persons

detected as COVID positive reached to 20 among the 471 persons tested for it in the Province of Sindh. As Pakistan has close trade and travelling relation with the two neighboring countries China and Iran and it has a large border sharing with the two countries, Pakistan was in a great danger of facing the extreme versions of the pandemic. When the virus reached Iran with severe effects a lot of Pakistani travelers returned back to Pakistan from there creating an alarming situation at the borders of Pakistan (Waris et al., 2020). The situation demanded a complete lockdown but considering the conditions of a great number of powerless families Pakistan soon has to ease the lockdown but still the situation has caused a lot of money loss to a large number of unprivileged poor families in Pakistan. Hence the Federal government has to ease the lockdown in the beginning of the month of May keeping the situation of spread of virus that was well under projections. This decision in the time of the beginning of month of Ramadan was taken so that people can easily live their lives in this Holy month. Whereas, People ignored the precautions and have huge gatherings during Eid festivity and hence caused a large spread of virus in the country.

This paper investigates how a particularly pandemic in an exceptionally populated nation like Pakistan is probably going to impact doctor's retention at hospitals and how compensation and training and development balance the relation. Several authors previously studied employee retention in particular to healthcare sector (Izzo and Withers, 2002, Gering and Conner, 2002, Wegner, 2011, Sow et al., 2016) but this study is the first one to study employee retention in healthcare sector under the impact of pandemic of COVID-19.

Businesses for the sake of achieving organizational goals practice retaining employees who are the key employees and are the more productive ones (Frank et al., 2004). Employee retention is an important aspect for almost every sector (current) as it helps reduce sunk cost (the cost already spent on that employee), the recruiting cost for hiring a new employee instead and saves the time and effort for introducing a new person to organizational culture. But if an employee gets separated from the organization, the organization may incur loss in terms of costs mentioned above or the loss of experts in particular to service sector and lastly the disruption in the regular work activities resulting in damaging organization (Brandt et al., 2016, Karsan, 2007, Ton and Huckman, 2008). In particular to healthcare sector in an era of pandemic the patients (customers) may also suffer. Employee behavior is more important in the service sector than in manufacturing sector as it can have a great impact on customers directly (Saeed et al., 2013). So, is this article studying employee retention in healthcare sector under pandemic situation. As employee turnover especially the doctors who are frontline workers can put a great and negative impact on patients.

2.LITERATURE REVIEW

2.1 Perceived Threat of COVID-19 and Employee Retention

Coronavirus has affected millions of people in the whole globe and a lot more are having threats to their lives by it (World Health Organization, 2020). Many countries are in the second or third phase of this pandemic suffering through great losses of lives of their citizens. In such a state of world pandemic healthcare workers are the frontline warriors. As such workers including doctors and nurses are the ones treating COVID patients. This not only had threatened their lives with interaction only but with an increase in cases has resulted in lack of protective equipment's due which a lot of healthcare workers lost their lives (Wang et al., 2020). Doctors and nurses have to work long hours in order to deal with a huge number of patients (Lucchini et al., 2020) especially in Pakistan where cases are increasing by every passing day speedily.

Menon and Padhy (2020) stated in their article that a number of healthcare workers have lost their lives in COVID pandemic due to lack of protective equipment specially in developing nations. Employee retention is a process in which organizations want to retain their key employees as they are an asset to the organization (PeopleKeep Team; 2014). For hospitals, doctors are they key employees in pandemic of COVID-19 which they want to retain. But due to an increase in workload (Lucchini et al., 2020), life threat and lack of protective equipment (Wang et al., 2020) have led to doctor's turnover by refusing to retain. In such hectic routines' in Covid 19 doctors are unable to find work meaningfulness (Kayani et al., 2019) instead work as machines with extended pressure. Doctors in these hospitals are preferring to save themselves and leave the organizations. In such a situation, hospitals are unable to hold back and retain their doctors.

According to Hash (2012) employee's low satisfaction and commitment towards the organization is one of the cause of retention. According to him organizations must learn the factors which causes low satisfaction and overcome those to retain them. The perceived threat of COVID-19 is one such factor that causes overload of work and danger to life leading to low satisfaction and commitment to the work and organization. This leaves organizations in a critical situation where retention is difficult. That leads to the first hypothesis H_1 : Perceived Threat of COVID-19 has a significant negative Impact on Employee Retention.

2.2 Moderating effect of Compensation

Several previous authors have pointed towards numerous ways to retain employees within an organization. A few practices included job redesign, compensation, training & development, work conditions, and balance of the work-life (Allen et al., 2003, Ghosh et al., 2013, Pfeffer, 1994). Employee retention has become the core area of

attention (Fegley, 2006) for scholars and experts, especially in this pandemic era in the healthcare sector. Imbalance in the employees' demand and supply creates a need to retain employees (Guchait and Cho, 2010). March and Simon (1958) theory of organizational equilibrium stated that employees possess a balanced look for better compensation and a better contribution of their work in the organization. In the pandemic era, a shortage of healthcare workers has created a gap in the supply and demand of workers. It has driven organizations to work even harder to look for ways to retain employees. Employee retention is as well a core measure of organizational power or strength. In this regard, many authors considered employee engagement a critical aspect to retain employees as employee engagement leads to workers' passionate learners (Budhwar and Bhatnagar, 2007), contributing to the organization. Further, Kundu and Lata (2017) illustrated in their article that work environment supportiveness could enhance employee retention within an organization. This supportiveness can be rewards and incentives for an employee by the organization.

Right when a new virus with ability to spread as pandemic appears, nonpharmaceutical intercessions (NPIs) exercises that employees and organizations can take help to moderate the spread of respiratory disease sicknesses, consistently, are the most expeditiously available lightening frameworks to help in moderating transmission of the disease in organizations, especially before a pandemic inoculation ends up being by and large open (Qualls et al., 2017). Confirmation to choose the best approaches for making sure about individuals during a pandemic is confined. A couple of examinations (Glass et al., 2006, Hatchett et al., 2007) suggest that early utilization of various NPI measures, for instance, social isolating, school terminations, and separation of crippled individuals, may be practical in diminishing the transmission of the contamination. During a pandemic, a ton of support from the medical care area is needed to manage the quickly expanding patients remembering the prudent steps. In such a case a significant number of the medical care staff particularly the key specialists may delay or repulse from taking an interest in the reason because of pandemics' dangerous elements. In such a case, compensating doctors and paramedic staff could help hold them on their positions. Through insurances and gear the lives of these doctors and other paramedic staff can be made easier as they have been disturbed most by the pandemic.

Employees awarded with fewer rewards or incentives are most likely to be less satisfied, dedicated, and productive and are likely to leave the organizations (Khalid and Nawab, 2018). Employees don't usually retain with low compensation. Khalid and Nawab (2018) studied the moderating impact of compensation between employee participation and retention. They articulated that compensation enhances the relation such that it makes the relationship stronger. Kyndt et al. (2009b) and Irshad and Afridi (2007) stated that a conducive environment is an essential component of employee retention. The pandemic of COVID-19 has created a threatening environment leading to less employee satisfaction. However, Darma and Supriyanto (2017) stated that when employees are provided with financial incentives like rewards, bonuses, increased salary, etc., they improve employee satisfaction and performance. As such workers including doctors and nurses are the ones treating COVID patients. This not only had threatened their lives with interaction only but with an increase in cases has resulted in lack of protective equipment's due which a lot of healthcare workers lost their lives (Wang et al., 2020). In such a case providing doctors and paramedic staff training and development can lead them to better handle patients without exhaustion leading to job satisfaction. This job satisfaction ultimately leads to employee retention (Biason, 2019). It drives us to the second hypothesis

H₂: Compensation moderates the relationship between Perceived Threat of COVID-19 and Employee Retention such that it weakens the relationship.

2.3 Moderating effect of Training and Development

As said earlier, many factors can contribute to employee retention, out of which training and development are the ones (Allen et al., 2003, Ghosh et al., 2013, Pfeffer, 1994). Employee retention has become the core area of attention (Fegley, 2006) for scholars and experts, especially in this era of the healthcare sector's pandemic. Imbalance in the employees' demand and supply creates a need to retain employees (Guchait and Cho, 2010). March and Simon (1958) theory of organizational equilibrium stated that employees possess a balanced look for better compensation and a better contribution of their work in the organization. In the pandemic era, a shortage of healthcare workers has created a gap in the supply and demand of workers. It has driven organizations to work even harder to look for ways to retain employees. Employee retention is as well a core measure of organizational power or strength. In this regard, many authors considered employee engagement an essential aspect to retain employees as employee engagement leads to workers' passionate learners (Budhwar and Bhatnagar, 2007), hence contributing towards the organization. Further, Kundu and Lata (2017) illustrated in their article that work environment supportiveness could help to enhance employee retention within an organization.

In their article, Abba (2018) found that training and development has a significant positive relationship with employee retention. They tested their model on Metropolis Banks of Bauchi. In their research study, Martin and Gollan (2012) found that training and development enhance employees' job satisfaction and job engagement,

which supports their intention to stay with that particular organization. It is the case, so with firms significantly changing (Martin and Gollan, 2012). As doctors in hospitals under the COVID-19 pandemic face a critical situation that requires training and development for these frontline workers. Similarly, Fletcher et al. (2018) found in their article that perceived training and development and intent to stay with the organization are positively associated. Bibi et al. (2018) found a positive association between training and development and employee retention. Another significant capacity of HRM rehearses is training and development. Training and development allude to the level of preparing got by workers to create their abilities from the firm (Delery and Doty, 1996). As indicated by Schuler and MacMillan (1984) training and development is a human asset the executives' practice that assists firms with acquiring a serious edge. By and large, it assists with expanding the workers' degrees of responsibility and devotion, making them stay for more with the firm, consequently it diminishes turnover and upgrades maintenance (Samuel and Chipunza, 2009). As per Forgacs (2009) and Paré and Tremblay (2007), training and development is one of the crucial parts of HRM rehearses that impact workers' degrees of occupation fulfillment, which thusly, may influence their choice about remaining with the firm. Essentially, the social trade hypothesis (Blau, 1964), likewise upholds this idea. Prior several researches have shown a significant positive association between the employee training and development and employee retention (Chang, 1999, Martin, 2003, Winterton, 2004, Lee and Bruvold, 2003, Ahmad et al., 2017). It leads to the third hypothesis

 H_3 : Training and Development moderates the relationship between Perceived Threat of COVID-19 and Employee Retention such that it weakens the relationship.

3.METHODOLOGY

3.1 Sample and Procedure

The hypothesized model is tested in the healthcare sector of Pakistan. The sample population was the doctor of private and public hospitals of twin cities of Pakistan. A total of 208 sample size was selected. Both the descriptive and statistical analyses were conducted on the hypothesized model. Software that was used to test the model was Sem-PLS. Sem-PLS is the best software with respects to its user responsive interface and its extraordinary systematic and graphic ability (Davari and Rezazadeh, 2013). The sample data was collected quantitatively. Studying quantitatively is a useful tool in research studies as it provides comprehensive and complete data that enhances debates/arguments and evokes flexibility (Global Web Index). Doctors from different public and private sectors of twin cities were asked to fill the questionnaires. As doctors are the frontline workers in this pandemic of COVID-19 (Iyengar et al., 2020). They were asked to mark the perceived threat of COVID-19 regarding their retention with compensation and training and development as moderators. Current research is a single filed study. The response rate is 70%. The data gathered is cross-sectional. A five-point likert scale was developed to evaluate the hypothetical model. The scale ranged from 1= Strongly Diasgree to 5= Strongly Agree with Nutrelity at its central point 3 and was utilized to offer respondents an even and well-adjusted way to reply to the questionnaires (Joshi et al., 2015).

Demographics details of sample were also measured in terms of their gender, age, income status, qualification and experience. Most of the sample had age between 20-29 (47.9%), income between Rs 41,000- Rs 50,000 (35.8%), education upto Bachelors (42.3%) and experience between 1-5 years (33.8%). Female nurses formed the majority of sample population.

3.2 Measures

All the concepts utilized in the research to evaluate variables are already developed constructs in English language. The selected population of the current study is bilingual and comprehends the questionnaire completely.

Perceived Threat of COVID-19

The Perceived Threat of COVID-19 is assessed on 13-item scale established by Irshad et al. (2020) with reliability α =0.91. The sample items are "I have difficulty keeping the threat of Coronavirus out of my mind" and "I worry that Coronavirus will only get worse as time passes".

Employee Retention

The employee retention is assessed on 11-item scale established by Kyndt et al. (2009a) with reliability α =0.91. The sample items are "Within this company my work gives me satisfaction" and "If I could start over again, I would choose to work for another company".

Compensation

The compensation is assessed on 10-item scale established by Masood (2010) with reliability α =0.81. The sample items are "In our organization, salary and other benefits are comparable to the market" and "Our organization offers both financial and non-financial rewards without discrimination".

Training and Development

The training and development are assessed on 10-item scale established by Masood (2010) with reliability α =0.81. The sample items are "T&D has helped reduce employee turnover in our organization" and "Our organization conducts extensive (T&D) programs for Employees".

4.RESULTS

This research has used PLS-Sem programming with the end goal of exploration and analysis. This research method is made out of two stages. First is the measurement model, which is utilized to assess the legitimacy and dependability of the builds' factor loadings. The second step is the structural model. In it, the relationship of figures is assessed by coefficients, p-value, and t-value.

4.1 Measurement Model

In the measurement model, Cronbach alpha and composite reliability factors are used to assess the constructs' reliability. If the Cronbach alpha is more significant than 0.70 and composite reliability is also above 0.70 then the construct is reliable. Rho-A must be between Cronbach alpha and composite reliability for a reliable construct. Validity has two types convergent and discriminant. The convergent validity value is evaluated in regards to Average Variance Extracted (AVE) and Factor Loadings. For a construct to be valid must have AVE values > 0.50 and Factor loading values > 0.70. Discriminant validity declares a construct to be valid when square roots are higher than the correlation.

	Cronbach's	rho_A	Composite	Average Variance	
	Alpha		Reliability	Extracted (AVE)	
С	0.878	0.958	0.91	0.67	
ER	0.767	0.777	0.895	0.81	
PTC	0.921	0.941	0.937	0.682	
TD	0.893	1.02	0.913	0.641	

The above-mentioned table indicates all constructs to be valid and reliable. Validity was adjusted after adjusting items with factor loadings less than 0.7. Employee Retention (ER), the independent variable, has reliability greater than 0.7 and is declared to be a reliable construct. Perceived Threat of COVID-19 (PTC), the dependent variable is a reliable construct with reliability greater than 0.7. The two moderators Compensation (C) and Training & Development (TD) are also reliable constructs with reliability greater than 0.7.

Employee Retention (ER), the independent variable, has validity greater than 0.5 and is declared to be a valid construct. Perceived Threat of COVID-19 (PTC), the dependent variable is a valid construct with validity greater than 0.5. The two moderators Compensation (C) and Training & Development (TD) are also valid constructs with validity greater than 0.5.

4.2 Structural Model

The structural model relationships significance is evaluated on basis of path coefficients p value and t value. If the $\beta > 0.2$, p value < 0.05 and t value >1.96 then the relationship is declared significant among the constructs.

	Original Sample (O)	Sample Mean (M)	Standard Deviation (STDEV)	T Statistics	P Values
Moderating Effect C -> ER	-0.32	-0.319	0.087	3.691	0
Moderating Effect TD -> ER	0.027	0.013	0.175	0.155	0.877
PTC -> ER	0.347	0.352	0.085	4.069	0

The above-mentioned table elaborates the results of the hypothesized model. Impact of Perceived Threat of COVID-19 (PTC) was found to have positive and significant impact on Employee Retention (ER) with p value less than 0.05 and t value greater than 1.97. It accepts partially the first hypothesis. Moderating effect of Compensation was found to be negatively significant such that it weakens the relationship between Perceived Treat of COVID-19 (PTC) and Employee Retention (ER). It approves our second hypothesis. However, training and development (TD) was found to be insignificant by not moderating the relationship between Perceived Treat of COVID-19 (PTC) and Employee Retention (ER). It rejects our third hypothesis.

DISCUSSUION

Pandemic of COVID is a crucial situation for all. In such a case doctors are they key frontline workers. Due to their job, they have significant role in lowering, controlling and treating the overall pandemic cases. In such situation doctors might consider it to be unethical to leave their jobs despite of the threat of this disease. A similar study of employee retention was done by Kim et al. (2020) on nursing sector who is itself a frontline job in pandemic. They stated in their article that employees varied as per their demographics when they defined their intentions to remain with the organization in the threat of COVID-19. This supports our results that employee's perception of threat to the pandemic can vary to person to person as per their concept and thinking about the threat. Senior level doctors might not consider it as a threat rather consider it as a tough time of their job. Kyndt et al. (2009a) and Irshad (2000) stated that a good working environment is compulsory to retain and satisfy an employee in such a threatening situation

Salary is up till now the foremost cause of employee dissatisfaction amongst U.S. workers, cited by 47 percent of respondents in a recent survey. Other principal reasons of dissatisfaction comprise of workload (24 percent), lack of opportunities for advancement (21 percent) and the employee's manager or supervisor (21 percent) (SHRM Online staff; March 4, 2011). Compensation had always been considered a tool in enhancing employee retention at organization by many previous authors (Anis et al., 2011, Khalid and Nawab, 2018). Organizations can cope with problemed situations like threat of COVID-19 with compensation tools. As per the March and Simon's (1958) theory of organizational equilibrium, employees seek to balance this stressful situation. This balancing requires compensation to retain satisfy them and boost their productivity. A good compensation may increase employees' morale and reduces employees' conflicts and absenteeism when encountering a dissatisfied working environment (Tara Duggan). As in COVID-19 pandemic doctors are facing an unsatisfactory work environment but a possible increase in compensation may retain them on their jobs, raising their overall satisfaction level.

Angela Wilson in her book 'Performance Management' stated that traditional training can only solve basic problems including lack of skill or knowledge to perform a task. This traditional training might not resolve employee's dissatisfaction factors resulting in ineffectiveness of training program. Harnois and Gabriel (2000) mentioned in their report that training programs are often work and performance oriented and are not much concerned about an employee's mental health. Such trainings might be ineffective in pandemic of COVID-19 as employees are under increased stress levels with mental and emotional exhaustion. Training and Development requires certain conditions when it comes to deal with COVID-19. Jukic et al. (2020) in their article articulated that in COVID-19 training is not much successful practice as in pandemic inappropriate training conditions may hinder employee development at work. Further there are many uncontrollable factors related to COVID-19 (Zhou et al., 2020, Jing et al., 2020) beyond human control which can't be controlled through training or development. These factors seem to be making training ineffective in reducing perceived threat of COVID-19. This situation leads to training as an ineffective variable of moderating the perceived impact of COVID-19 on employee retention.

IMPLICATIONS

The consequences of this study have given a bunch of both hypothetical and practical implications identified with numerous employee maintenances issues. Firstly, this study adds on to the literature of employee retention and the impact of COVID-19 upon employees. Further this study contributes to the literature of compensation and training and development. Right off the bat, the mental status of employees needs more examination and investigation inside developing business sectors in era of COVID-19. Supervisors should think often about the mental issues that their workers face and care about improving mental levels in COVID-19 scenario. Secondly, most of firms thought often about the yearly assessment records and evaluation reports for their employees, as these exhibition markers depended on the utilization of substantial components that identified with work execution, yet overlooked others. Firms must look for ways that could help and address the psychological difficulties when facing threat of COVID-19. Thirdly, compensation markers and training and development markers were taken as significant and affected employee retention in the current research which can help future researchers to identify which factors contribute to their significant impact and which not. Fourthly, extra examination is required to assess why employees didn't had turnover intentions despite of COVID-19 threat. Fifthly, more of the studies should examine factors that possibly moderate threat of COVID-19 impact. Considering the degree of difficulties in playing out certain undertakings and how doctors accepted every day assignments that were viewed as difficulties Finally, tutoring every day work undertakings and expanding development in these errands is another point that should be investigated and checked by directors to build worker compensation plans for the purpose of retention.

LIMITATIONS AND FUTURE RESEARCH

This study was conducted in healthcare sector of Pakistan on doctors. Future researchers can look for other professions and sectors for research. Further, future researchers can go for nurses or other paramedic staff

directly dealing with COVID-19 patients. Other countries like India, China etc. facing huge waves of pandemic can test a similar model in their country. Secondly, the data for this study was collected in the first wave in Pakistan. The results might variate if tested in the second wave of pandemic COVID-19. This is a cross-sectional study among different hospitals of Twin cities of Pakistan. Forthcoming researchers can test the same model in other cities or all major cities of Pakistan where results could be ore generalizable. This is a single filed. Upcoming researchers can conduct multi-filed study. Moreover, the current study is measured from employee end only, Future researchers can evaluate these factors from organizational point of view as well. Researchers can also study more of the independent variables with the employee retention like different supervision styles. Many other factors may also get effected by perceived threat of COVID-19 within an organization like employees' psychological well-being, leadership styles etc. Future researchers can also look for more tools moderating the relationship of perceived threat of COVID-19 and employee retention such as health and safety measures, recognition, management etc.

CONCLUSION

Pandemic of COVID is a crucial situation for all. As in COVID-19 pandemic doctors are facing an unsatisfactory work environment but a possible increase in compensation may retain them on their jobs, raising their overall satisfaction level. However, doctors were found to be less or not intended to leave their hospitals in threat of COVID-19. The factors contributing might be their ethical responsibilities of being a doctor or their financing reasons. Compensation was found to moderate the relation between the both variables, such that weakening the relationship. As doctors were found to be more retained within the hospitals if provided with better compensation plans. Compensation might include rewards, health benefits, employee wellness benefits or reduced working hours for overcoming stress. Training and development were found to be ineffective as a moderator in the relation of perceived threat of COVID-19 and employee retention. The reasons might be the typical pattern of trainings that might not address the employees' needs or the training conditions or negligence of psychological factor in training. This research has some theoretical as well as practical implications with few limitations that can be addressed by future researchers.

REFERENCES

- 1. ABBA, M. T. 2018. Effects of training and development on employee retention in Bauchi State Metropolis Banks. Operational Research, 4, 24-39.
- 2. AHMAD, A., BIBI, P. & MAJID, A. H. A. 2017. The impact of training & development and transformational leadership over organizational commitment among academic staff in public tertiary institutions: The buffering role of coworker support. Journal of Economic & Management Perspectives, 11, 417-432.
- 3. ALI, I. 2020. The covid-19 pandemic: Making sense of rumor and fear: Op-ed. Medical anthropology, 39, 376-379.
- 4. ALLEN, D. G., SHORE, L. M. & GRIFFETH, R. W. 2003. The role of perceived organizational support and supportive human resource practices in the turnover process. Journal of management, 29, 99-118.
- 5. ANIS, A., NASIR, A. & SAFWAN, N. 2011. Employee retention relationship to training and development: A compensation perspective. African journal of business management, 5, 2679-2685.
- 6. BIASON, R. S. 2019. The Effect of Job Satisfaction to Employee Retention. Retrieved on 1st October.
- BIBI, P., AHMAD, A. & MAJID, A. H. A. 2018. The impact of training and development and supervisor support on employees retention in academic institutions: The moderating role of work environment. Gadjah Mada International Journal of Business, 20, 113-131.
- 8. BLAU, P. M. 1964. Social exchange theory. Retrieved September, 3, 62.
- 9. BRANDT, W. A., BIELITZ, C. J. & GEORGI, A. 2016. The impact of staff turnover and staff density on treatment quality in a psychiatric clinic. Frontiers in psychology, 7, 457.
- 10. BUDHWAR, P. S. & BHATNAGAR, J. 2007. Talent management strategy of employee engagement in Indian ITES employees: key to retention. Employee relations.
- 11. CHANG, E. 1999. Career commitment as a complex moderator of organizational commitment and turnover intention. Human relations, 52, 1257-1278.
- 12. CHEN, I.-C. & LI, H.-H. 2010. Measuring patient safety culture in Taiwan using the Hospital Survey on Patient Safety Culture (HSOPSC). BMC health services research, 10, 1-10.
- 13. DARMA, P. S. & SUPRIYANTO, A. S. 2017. The effect of compensation on satisfaction and employee performance. Management and Economics Journal (MEC-J), 1.
- 14. DAVARI, A. & REZAZADEH, A. 2013. Structural equation modeling with PLS. Tehran: Jahad University, 215, 224.
- 15. DELERY, J. E. & DOTY, D. H. 1996. Modes of theorizing in strategic human resource management: Tests of universalistic, contingency, and configurational performance predictions. Academy of management Journal, 39, 802-835.

- 16. FEGLEY, S. 2006. 2006 talent management: survey report, Society for Human Resource Management.
- 17. FLETCHER, L., ALFES, K. & ROBINSON, D. 2018. The relationship between perceived training and development and employee retention: the mediating role of work attitudes. The International Journal of Human Resource Management, 29, 2701-2728.
- 18. FORGACS, L. 2009. Recruitment and retention across continents. Journal of Training and development, 63, 40-44.
- 19. FRANK, F. D., FINNEGAN, R. P. & TAYLOR, C. R. 2004. The race for talent: Retaining and engaging workers in the 21st century. Human resource planning, 27.
- 20. GERING, J. & CONNER, J. 2002. A strategic approach to employee retention.(Business). Healthcare Financial Management, 56, 40-45.
- 21. GHOSH, R., REIO JR, T. G. & BANG, H. 2013. Reducing turnover intent: Supervisor and co-worker incivility and socialization-related learning. Human Resource Development International, 16, 169-185.
- 22. GLASS, R. J., GLASS, L. M., BEYELER, W. E. & MIN, H. J. 2006. Targeted social distancing designs for pandemic influenza. Emerging infectious diseases, 12, 1671.
- 23. GUCHAIT, P. & CHO, S. 2010. The impact of human resource management practices on intention to leave of employees in the service industry in India: the mediating role of organizational commitment. The International Journal of Human Resource Management, 21, 1228-1247.
- 24. HARNOIS, G. & GABRIEL, P. 2000. Mental health and work: Impact, issues and good practices.
- 25. HASH, S. 2012. Getting a handle on agent turnover. Contact Center Pipeline.
- HATCHETT, R. J., MECHER, C. E. & LIPSITCH, M. 2007. Public health interventions and epidemic intensity during the 1918 influenza pandemic. Proceedings of the National Academy of Sciences, 104, 7582-7587.
- 27. IRSHAD, M. & AFRIDI, F. 2007. Factors affecting employees retention: Evidence from literature. Abasyn Journal of Social Sciences, 4, 307-339.
- IRSHAD, M., KHATTAK, S. A., HASSAN, M. M., MAJEED, M. & BASHIR, S. 2020. How perceived threat of Covid-19 causes turnover intention among Pakistani nurses: A moderation and mediation analysis. International journal of mental health nursing.
- IYENGAR, K. P., ISH, P., UPADHYAYA, G. K., MALHOTRA, N., VAISHYA, R. & JAIN, V. K. 2020. COVID-19 and mortality in doctors. Diabetes & Metabolic Syndrome: Clinical Research & Reviews, 14, 1743-1746.
- 30. IZZO, J. B. & WITHERS, P. 2002. Winning employee retention strategies for today's healthcare organizations. Healthcare Financial Management, 56, 52-58.
- 31. JING, Z.-C., ZHU, H.-D., YAN, X.-W., CHAI, W.-Z. & ZHANG, S. 2020. Recommendations from the Peking Union Medical College Hospital for the management of acute myocardial infarction during the COVID-19 outbreak. European heart journal.
- 32. JOSHI, A., KALE, S., CHANDEL, S. & PAL, D. K. 2015. Likert scale: Explored and explained. Current Journal of Applied Science and Technology, 396-403.
- JUKIC, I., CALLEJA-GONZÁLEZ, J., COS, F., CUZZOLIN, F., OLMO, J., TERRADOS, N., NJARADI, N., SASSI, R., REQUENA, B. & MILANOVIC, L. 2020. Strategies and solutions for team sports athletes in isolation due to COVID-19. Multidisciplinary Digital Publishing Institute.
- 34. KARSAN, R. 2007. Calculating the cost of turnover. Employment Relations Today, 34, 33-36.
- 35. KAYANI, M. B., ZAFAR, A., AKSAR, M. & HASSAN, S. 2019. IMPACTS OF DESPOTIC LEADERSHIP AND DARK PERSONALITY TRIAD ON FOLLOWER'S SENSE OF MEANINGFUL WORK: MODERATING INFLUENCE OF ORGANIZATIONAL JUSTICE.
- 36. KHALID, K. & NAWAB, S. 2018. Employee participation and employee retention in view of compensation. SAGE Open, 8, 2158244018810067.
- 37. KIM, Y.-J., LEE, S.-Y. & CHO, J.-H. 2020. A study on the job retention intention of nurses based on social support in the COVID-19 situation. Sustainability, 12, 7276.
- 38. KUNDU, S. C. & LATA, K. 2017. Effects of supportive work environment on employee retention. International Journal of Organizational Analysis.
- 39. KYNDT, E., DOCHY, F., MICHIELSEN, M. & MOEYAERT, B. 2009a. Employee retention: Organisational and personal perspectives. Vocations and Learning, 2, 195-215.
- 40. KYNDT, E., DOCHY, F. & NIJS, H. 2009b. Learning conditions for non-formal and informal workplace learning. Journal of Workplace Learning.
- 41. LEE, C. H. & BRUVOLD, N. T. 2003. Creating value for employees: investment in employee development. The International Journal of Human Resource Management, 14, 981-1000.
- 42. LUCCHINI, A., GIANI, M., ELLI, S., VILLA, S., RONA, R. & FOTI, G. 2020. Nursing Activities Score is increased in COVID-19 patients. Intensive & critical care nursing.
- 43. MARCH, J. S. & SIMON, H. A. 1958. HA (1958) Organizations. New York.

- 44. MARTIN, C. 2003. Explaining labour turnover: Empirical evidence from UK establishments. Labour, 17, 391-412.
- 45. MARTIN, G. & GOLLAN, P. J. 2012. Corporate governance and strategic human resources management in the UK financial services sector: the case of the RBS. The International Journal of Human Resource Management, 23, 3295-3314.
- MASOOD, T. 2010. Impact of human resource management (HRM) practices on organizational performance: a mediating role of employee performance. Mohammad Ali Jinnah University, Department of Management Sciences, Islamabad.
- 47. MENON, V. & PADHY, S. K. 2020. Mental health among COVID-19 survivors: Are we overlooking the biological links? Asian journal of psychiatry.
- 48. PARÉ, G. & TREMBLAY, M. 2007. The influence of high-involvement human resources practices, procedural justice, organizational commitment, and citizenship behaviors on information technology professionals' turnover intentions. Group & Organization Management, 32, 326-357.
- 49. PFEFFER, J. 1994. Competitive advantage through people: Unleashing the power of the work force.
- QUALLS, N., LEVITT, A., KANADE, N., WRIGHT-JEGEDE, N., DOPSON, S., BIGGERSTAFF, M., REED, C., UZICANIN, A., GROUP, C. C. M. G. W. & GROUP, C. C. M. G. W. 2017. Community mitigation guidelines to prevent pandemic influenza—United States, 2017. MMWR Recommendations and Reports, 66, 1.
- SAEED, R., NAYYAB, H. H., LODHI, R. N., BAQIR, R., REHMAN, M. A. & MUSSAWAR, S. 2013. Impact of retention factors on organizational commitment in general education division of Pakistan. Middle-East Journal of Scientific Research, 17, 539-545.
- 52. SAMUEL, M. O. & CHIPUNZA, C. 2009. Employee retention and turnover: Using motivational variables as a panacea. African journal of business management, 3, 410-415.
- 53. SCHULER, R. S. & MACMILLAN, I. C. 1984. Gaining competitive advantage through human resource management practices. Human resource management, 23, 241-255.
- 54. SHIAO, J. S.-C., KOH, D., LO, L.-H., LIM, M.-K. & GUO, Y. L. 2007. Factors predicting nurses' consideration of leaving their job during the SARS outbreak. Nursing Ethics, 14, 5-17.
- 55. SOW, M., NTAMON, A. & OSUOHA, R. 2016. Relationship between transformational leadership and employee retention among healthcare professionals in the United States. Business and Economic Research, 6, 235-254.
- TAM, C. W., PANG, E. P., LAM, L. C. & CHIU, H. F. 2004. Severe acute respiratory syndrome (SARS) in Hong Kong in 2003: stress and psychological impact among frontline healthcare workers. Psychological medicine, 34, 1197.
- 57. TON, Z. & HUCKMAN, R. S. 2008. Managing the impact of employee turnover on performance: The role of process conformance. Organization Science, 19, 56-68.
- 58. WANG, B., LI, R., LU, Z. & HUANG, Y. 2020. Does comorbidity increase the risk of patients with COVID-19: evidence from meta-analysis. Aging (Albany NY), 12, 6049.
- 59. WARIS, A., ALI, M., KHAN, A. U., ALI, A., BANGASH, A. K. & BASET, A. 2020. COVID-19 Incidence in Pakistan: Gender Disparity. Iranian Journal of Psychiatry and Behavioral Sciences, 14.
- 60. WEGNER, P. M. 2011. The relationship between employee engagement and employee retention in an acute healthcare hospital. Walden University.
- 61. WINTERTON, J. 2004. A conceptual model of labour turnover and retention. Human Resource Development International, 7, 371-390.
- 62. ZHOU, Y., CHEN, Z., WU, X., TIAN, Z., CHENG, L. & YE, L. 2020. The Outbreak Evaluation of COVID-19 in Wuhan District of China. arXiv preprint arXiv:2002.09640.